
**2009
Membership
Directory**

American Academy of Facial Plastic and Reconstructive Surgery
and the
Educational and Research Foundation for the
American Academy of Facial Plastic and Reconstructive Surgery

Additional copies of the directory are available to AAFPRS members at \$30.00 each and to non-member surgeons at \$75.00. The charge to all others is \$300.00.

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Table of Contents

| | |
|--|-----------|
| President's Report | 4 |
| Immediate Past President's Report | 7 |
| American Academy of Facial Plastic and Reconstructive Surgery | |
| Board of Directors | 9 |
| Past Presidents | 9 |
| Committees | 10 |
| Official Delegates and Representatives | 12 |
| Committee Charges | 13 |
| Bylaws | 14 |
| Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery | |
| Foundation Opportunities | 23 |
| Board of Directors | 24 |
| Committees | 24 |
| Committee Charges | 26 |
| Fellowship Program | 27 |
| Grants and Awards | 28 |
| Bylaws | 29 |
| American Board of Facial Plastic and Reconstructive Surgery (ABFPRS) | 32 |
| International Federation of Facial Plastic Surgery Societies (IFFPSS) | 32 |
| Staff | 33 |
| AAFPRS Membership | |
| Alphabetical Listing | 36 |
| Resident Members | 106 |
| Geographical Listing | 118 |

The 2009 Membership Directory distinguishes AAFPRS programs, products, and services from that of the AAFPRS Foundation. The AAFPRS Foundation section is printed on gray paper.

President's Report

It is with a great honor, pride, privilege, and a sense of responsibility that I accept this gavel. The Academy is a valuable organization with a rich past and remains a vital ally for today's facial plastic surgeons.

Over my 24 years with the Academy, I look back at some of the past presidents I have had the pleasure to work with Richard Goode, MD; Robert L. Simons, MD; E. Gaylon McCollough, MD; J. Regan Thomas, MD; G. Richard Holt, MD; and others as well, more recently Peter A. Hilger, MD, and Vito C. Quatela, MD. I have witnessed firsthand how faithfully Vito has worked on our behalf, spearheading our long range strategic planning and working closely with leaders of other organizations to help promote our viability.

I owe a special thanks to Dr. McCollough. During my fellowship, I learned not just surgery, but how to conduct myself as a professional and hold firm to one's values. I would not be here today without what I have learned from my father, a retired family practice physician. Once when he was being honored, he said: "We warm ourselves by the fires others have set and we walk across the bridges others have built." So as we move into the future, let's not forget those who helped us reach this place. The old adage, "May you live in interesting times," has indeed applied to my years in the Academy. Allow me to highlight some of them:

- I have witnessed the development of the ABFPRS, in 1987, just a 97-pound fantasy, and then watched it grow into our 900-pound gorilla cousin. About 20 years ago, forward thinking leaders created the Board, and it was a privilege to work with people like Peter A. Adamson, MD, and Edwin A. Cortez, MD, to get it off the ground.
- I have seen the financial horn of plenty overflow; I have seen days where I was uncertain if the Academy would survive.
- I have witnessed both the Academy and the Board paying off their permanent office headquarters in the D.C. area.
- I have attended and learned from consummate scholars and surgeons, and traveled with friends to countries as part of FACE TO FACE. From my days as a resident at the University of Tennessee, with my chair John "Mac" Hodges, MD, he continues to be an inspiration. Mac has participated in so many foreign FACE TO FACE surgical trips that he barely needs to show his passport.

Now, as we enter into the last of 2008, survey the landscape and ponder our future as an organization representing facial plastic surgeons, we are faced with challenges.

First, who are we? We are an organization with some significant heterogeneity. Most of us are otolaryngologists, part of the AAO-HNS, but after that many have traveled vastly different roads. Some of us focus exclusively on cosmetic procedures, while others use their talents primarily in reconstructive surgery. Some of us are neonates, others in the twilight of their practice. How do we educate such a diverse group? How do we best relate to each other? How do we best serve such a disparate group? I believe that every disparate group has common threads, which act to bind it together; we must strengthen those threads.

Our next challenge asks this question of members: Why should I be a member and how much of a member should I become?

I know some look at the Academy and ask, "What do I get for my money?" The Academy offers its members things like education, legal and public relations services, publications, and DVDs. If one views the Academy as some sort of vending machine, then you can tell yourself that you can purchase each of these things a la carte. Sure you can go elsewhere to hear lectures, pay your own publicist, and hire your own attorney when things get rough locally. But clearly, the whole is stronger than its parts. And what cannot be purchased are camaraderie and the satisfaction that comes with working for success with like-minded colleagues.

Our third challenge today is the worldwide economy. What has been happening here affects everyone. Many of us report that business is down and overhead is up. I am particularly sensitive to the young surgeon in practice. With a small patient base, competing with many others including non-physicians, and sometimes seeking alternative ways of making a living, this is not an easy time.

Welcome to the new world. The world where once plastic surgery was primarily performed with a scalpel, now it is with a needle. Where once the surgeon general was considered the authority on medical issues, now it is Oprah and the Internet. Where once aesthetic medical services were performed by physicians, now they are often performed by non-physicians. Where once the consumer had trust and faith in physicians, well...is our profession in danger of morphing into a group of self-promoting hucksters?

These are significant challenges, and we must devise ways to intelligently and wisely deal with them. As we work to remain the advocate for our patients and work with like-minded ethically centered colleagues, we seek new opportunities to work cooperatively with others of similar values, including our old competitors.

Realistically, as history confirms, there will be those who wish to thwart our progress or act as an impediment as we move forward. When necessary, we will defend our specialty with vigor and strength and fight to uphold the core mission of our organization,

I am asking the Board of Directors, committee chairs and committee members, and every member to try to do their part, carry their load, and make the next few years some of the best possible.

Allow me to share my vision for the future. (And by the way, if any of the topics or missions that I am about to speak of happen to strike a chord in you, please make a note of it, tell us, and we will do our best to take advantage of your talents and your passion to serve.) Let's look at key issues.

New world disorder

This is my name for the present chaos that exists in the marketplace of aesthetic medical and surgical services. It seems that almost anyone, whether or not they have a solid medical

background, can promote themselves as "experts" in aesthetic treatments. Consumers are misled and confused; some are practicing medicine without a license, "medi spas" often have very little "medi," truth in advertising appears to be an oxymoron, interpretation of state laws is poorly understood, and patients are at risk. I envision a revised healthier new world with actual order.

We have formed a Patient Advocacy Committee under the skillful direction of Mary Lynn Moran, MD. We will attempt to examine the current landscape, help our members better understand state law so as to reduce their own exposure, and explore ways to educate the public and legislative bodies as we keep the safety of the patients first. We hope to enhance our efforts by partnering with other core aesthetic organizations who also value patient safety, respect for current laws pertaining to scope of practice, and ethical advertising, for example.

Remember that we continue to work with the Physicians Coalition on Injectable Safety with Ira D. Papel, MD, and Mary Lynn Moran, MD, as our liaisons. Check out their Web site: www.injectiblesafety.com.

Public and regulatory affairs

Vice president for public and regulatory affairs Craig S. Murakami, MD, has passed the torch to Corey S. Maas, MD. He will help oversee our PR efforts, quarterbacked by Behrman Communications. We continue to promote our core message, "Trust your face to a facial plastic surgeon," and the new and striking print ads reflect this. Other new initiatives will soon emerge that represent the interests of our specialty and members.

Education

I look at our current educational venues with vice president of education Jonathan M. Sykes, MD, overseeing them as mainly excellent. The Chicago Fall Meeting chaired by Anthony P. Sclafani, MD, and Dr. Thomas had very high attendance and an exceptional variety of venues. Can we raise the bar for next year's Fall Meeting? That is our goal. Here is what is in store. The last scheduled Academy course for 2008 will be the Leslie Bernstein, MD, DDS, seminal rhinoplasty course in November. The following are scheduled for 2009:

- Winter Symposium (Telluride, Colo.) in January headed by Samuel P. Most, MD; Dr. Sykes; Edwin F. Williams, III, MD
- Advances in Rhinoplasty (Seattle) in June, chaired by Edward H. Farrior, MD; Stephen S. Park, MD; and Wayne F. Larrabee, Jr., MD
- Fall Meeting (San Diego) in September chaired by Fred F. Fedok, MD; Robert M. Kellman, MD; and Paul J. Carniol, MD.

These are the guys you want to talk to about meeting content, and to offer your services.

I also see great value in continuing to partner with other educational venues, especially those of high educational content. This will help build bridges with those in other specialties, including some who have not yet decided to participate with our meetings.

For example, the Multi-specialty Foundation Symposium which was held in Las Vegas in June 2008, masterminded by S.

Randolph Waldman, MD, not only helped build bridges with a large variety of talented physicians from all over the world, but also allowed us the opportunity to produce a DVD series on practice management and development. With the help of video producer Chuck Cox, this excellent six-part DVD series is now available to our members. The Academy staffed a booth, sold products, and shared with physicians from all four core aesthetic specialties benefits about partnering with our organization.

Fellowships

We have 44 fellowships and this year we had over 60 applications. While residents are realizing the value and high quality of our fellowships, clearly some cannot match. How to best deal with future demands remains a challenge. Ideas such as an informal visiting observership (not fellowship) have been suggested; your leadership appreciates hearing from its members and fellows.

Corporate alliances

The Technology and Industry Liaison, spearheaded by Dr. Hilger, seeks to form enhanced relationships and communication with leaders of the key companies with whom our members work. A special Sunday morning joint conference in Chicago was successful and future meetings are planned.

Another company we are working with is Medical Justice. Its founder, Jeff Segal, MD, and the Academy are working together to structure an enhanced program that aims to discourage inappropriate Web-based disparagement of Academy members by anonymous disgruntled "patients."

Ethics

As physician surgeons, we must strive to uphold the ethical principles upon which medicine was founded. We must not forget that our primary responsibility is to those people who entrust their faces and health in our hands. Don't forget whom we serve. Even in uncertain economic times, the business of medicine must be secondary to the profession of medicine or our egos. For example:

- When a physician speaks on a medical product and is on the payroll of the company that manufactures or promotes that product, how much disclosure should be forthcoming—his salary, value of stock options, or just that he or she is a "consultant"? How credible is the information if the speaker is very financially beholden to that company?
- Companies must maintain ethics and common sense as well. Have we seen companies try to influence the content of a scientific presentation or stifle criticism of their product at one of our own meetings?
- How do we best teach our young members to "just say no" to a patient who is not really that suitable for an elective surgery?
- Can one really serve as a "medical director" of a "MediSpa" or other beauty entity when not on-site of a business?
- What exactly is the "corporate practice of medicine" and why is this dangerous?

Member issues

I asked my friend William E. Silver, MD, to chair a task force on the future to give us an independent think tank with an arm's-length view of the way the Academy "does business" so to speak. One of his findings so far is that we have a large percentage of members who are ABFPRS diplomates who are eligible for upgrading to "fellow" status but do not. Why not? This should be clearly to their and our advantage to do so.

Member benefits

The member/fellow issue dovetails into the arena of vice president for membership, Dr. Farris. He is working with committees such as the Socioeconomic Committee chaired by Mark Glasgold, MD, and in January will present their recommendations for enhanced member benefits. This may involve issues such as medical liability insurance, and group purchasing.

The Academy has existing current member benefits. Aside from the obvious, don't forget our enhanced interactive Web site, our increasing library of DVDs, and our Facial Plastic Times newsletter ably directed by medical editor David Reiter, MD, DMD, and staff Rita Chua Magness. Look for additional content this next year.

Practice management

Our efforts in practice management services for our members, while helpful, have not been powerful. I envision more efforts in this field to help our members increase their odds of success. The current economic climate has been particularly challenging. We are exploring additional venues for future endeavors.

Finances

In view of world economics and woeful equity investments, not only individuals but also organizations take a hit. Our financial strength comes not only from our investments but also our ongoing revenue that is fed by dues and course revenue. We have an able investment committee, and treasurer, in H. Devon Graham, MD. The recent assessment will help bolster our ongoing legal fund, as well as public relations. We, too, are exploring innovative ways to increase our financial stability.

Legal challenges

We have had them, do have them, and will have more. There will be assaults that we must respond to with strength. Guided by our intrepid attorney Tom Rhodes, we will continue to navigate the uncertain legal waters of the day.

FACE TO FACE

We can be proud of all our FACE TO FACE efforts, both international and domestic violence. We are exploring other possibilities that could involve wounded veterans, especially the ones who have served and suffered in Afghanistan and Iraq. More about this will soon follow.

Senior fellows

It seems to me that our culture, a youth worshipping one, sometimes unwisely pays less attention to our seniors. I hope this Academy does not do this. Many of our older fellows are the giants upon whose shoulders we now see more clearly and farther... and they still have much to offer. Howard W. Smith, MD, DMD, is my consummate senior hero who keeps getting better with age. Men such as Louie L. Patseavouras, MD; Leslie Bernstein, MD, DDS; and many others, I wish I could equitably name. Soon I expect formation of a new entity, tentatively called the Cato Council (after the ancient Roman warrior, orator, and statesman, Cato the Elder).

Academy staff

Note that Steve Duffy and his full time central office staff are 8 strong. Compared with other sister organizations where the staff may be as much as seven times that large, we need to thank them for their ongoing efforts, and encourage them as this president asks even more of them in the coming months. I believe strongly that this loyal cadre is well able to handle new challenges of the new times.

International presence

We have international alliances, including the International Federation of Facial Plastic Surgery Societies (IFFPSS), and members in numerous other countries. We encourage their increased participation in every possible way. Whereas we know the world is round, we also see it becoming flatter with inexorable integration of services and community. How we best partner with that change in the world of facial plastic surgery will be one of our challenges. More to come.

In February, the Board will fly in for the annual long-range, strategic planning meeting. For what should we plan? As we discuss our future, we want to hear from you, the members.

Finally, I will leave you with this thought. Some of us, when looking at the Academy ask, "What's in it for me?" Instead, I challenge each of you to ask, "What's in it from me?"



Donn R. Chatham, MD

President 2008-2009

American Academy of Facial Plastic and Reconstructive Surgery and the

Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery

Immediate Past President's Report

The involvement of the membership in an organization is the key to its success. As I end this year and report to you our progress, I marvel at the degree of commitment that our membership has and how we accomplish so much as a result. It truly has been an honor to serve this membership as president, this year. I thank you for this opportunity—an experience I will cherish forever.

I am grateful for a wonderful Board of Directors that was prepared and ready at any moment to convene and be productive. The productivity was facilitated and executed by a dedicated staff that worked tirelessly toward deadlines. Their upbeat demeanor and long term commitment was available to me on a 24/7 basis. The stability of this group has to be credited to the professional management of our executive vice president, Stephen C. Duffy. His professionalism is only surpassed by his understanding and passion for the issues and advancement of facial plastic surgery. I felt fortunate to have this committed team always available to me.

In tumultuous economic times, our Academy has fared well this year. Under the dutiful watch of our treasurer, H. Devon Graham, MD, our Academy finances have remained stable and have outperformed industry standards. In my continued vision toward financial independence of our Academy, we have set the stage with Ann Holton, our director of development, to focus on membership long-term giving and with industry support, to begin the infancy of a capital campaign that will enable us to "face the future."

We have had a great year for educational venues, starting with the winter ski meeting in January, directed by Edwin F. Williams III, MD and Jill Foster, MD. This provided a wonderful exchange of interdisciplinary ideas that we shared with our dermatologist and oculoplastic colleagues in a relaxed environment in Vail, Colorado. In April, San Francisco hosted the very successful, Rejuvenation of the Aging Face conference expertly directed by Tom D. Wang, MD and Ross A. Clemons, MD. This comprehensive meeting was peppered with a diversity of interdisciplinary speakers presenting candid discussions on the cutting edge of facial rejuvenation. We should all be grateful for the meticulous effort put forth in the execution of this meeting. With anxious anticipation, I report that the Fall Meeting is on track to be an exceptional educational endeavor. As of this writing, we have exceeded all standards of the Academy's meeting attendance and fund-raising history. The Fall Meeting's financial and educational success is hugely attributable to the meticulous attention to detail and follow through of its course directors J. Regan Thomas, MD, and Anthony P. Sclafani, MD. Please be sure to attend the Welcome Reception, which was so graciously underwritten by sanofi-aventis. The newly renovated Palmer House Hotel and warm city of Chicago provide us the venue. I encourage all to participate in the extracurricular activities, especially the Young Physicians Cruise Fundraiser orchestrated by Mark Hamilton, MD, and Terry L. Donat, MD. This should be a wonderful way to spend an evening with the backdrop of the beautiful Chicago skyline and harbor. We are most gracious to PCA Skin for underwriting this event. The educational programs feature

these excellent speakers: G. Richard Holt, MD, MSE, MPH, MABE, for the Gene Tardy Scholar lectureship with his talk on Mentoring and Role-Modeling in Facial Plastic Surgery Education; Charles D. Schewe, PhD, speaking on generational marketing for our John Conley lectureship; and finally, Farish Jenkins, Jr. PhD, speaking on the evolution of anatomy from fish to tetrapods for the Jack Anderson lectureship. I encourage you to visit one of the six intensive workshops: High Speed Facelift Workshop and Lab, Media Training Workshop, Nasal Valve Workshop and Lab, Laser and Light Technology Workshop, Minimally Invasive Workshop, and an Office Accreditation Workshop. Be sure to join Roxana Cobo, MD, and Gilbert Nolst Trenite, MD, to participate in the festivities honoring the 10th anniversary of the founding of the International Federation of Facial Plastic Surgical Societies (IFFPSS).

One of my goals was to work closely and strengthen our bond with our international colleagues by offering them formalized, observational preceptorships. Most of our fellowship directors have responded and graciously agreed to host one to three-month international observational preceptorships for our international colleagues. Hosting international observers has been routine for preceptors like Ted A. Cook, MD; Wayne F. Larrabee, Jr., MD; Peter A. Adamson, MD; myself, and many others. This will be a formalized process with the application and screening at the IFFPSS and the recognition coming jointly from them and the AAFPRS. I look forward to collaborating with our international leadership in completing the execution of this goal.

The *Trust Your Face to a Facial Plastic Surgeon* campaign will be launched at the Fall Meeting as a result of joint efforts of our Board of Directors, Rita Chua Magness, and our PR firm, Behrman Communications. This advocacy goal is an attempt to avoid being in a mode that is reactive and defensive about our outstanding qualifications as the primary providers of facial plastic surgery. This proactive campaign consists of advertorials, posters, print ad kits, and a public relations effort, which includes surveys, press releases, MAT releases, and video news releases. The success of this effort is predicated on our memberships' ability to use these materials at the grassroots level. Please avail yourself to the materials, proudly display them, use our print ad kits, and include our slogan in everything that you do. It is only in this way that expertise and trust will become synonymous with the exceptional capabilities of our members.

This year has seen a renewed alliance with the AAO-HNS. Its president, James Denny, MD, has formed a council of otolaryngology subspecialties that promises to represent the needs of subspecialty organizations better than was accomplished in the primary grassroots organization of the Board of Governors. This Council will provide a more appropriate forum for improvements in discussions concerning meeting venues, meeting agendas, educational content, and any other needs of our specialty.

This year will mark our third annual meeting for the Technology Industry Liaison Council (TILC) started by Peter A. Hilger, MD; Ira D. Papel, MD; and Steven J. Pearlman, MD. Our

hope is to continue to foster strong ties with industry that result in a mutually beneficial relationship. This liaison should benefit our members through better educational venues and access to clinical trials and direct involvement with the latest innovations that industry has to offer. The TILC has expanded every year and offers industry and the Academy an opportunity to exchange ideas, needs, and wants. To name just a few of our participants, this year we have Allergan, BioForm, Lumenis, Mentor, PCA Skin, Reliant Technologies/Fraxel, Rhytec, sanofi-aventis, and Stiefel Laboratories.

Vigilance as a mantra has been a hallmark of this year. The Academy's reputation in its role as the premier providers of facial plastic and reconstructive surgery must be preserved and protected. Our strong educational backbone has served us well in maintaining us at the forefront of our specialty. At all costs, we must protect our name, our specialty, and therefore our future. Under the watchful eye of Mr. Duffy, Craig S. Murakami, MD, vice president for public and socioeconomic affairs, and Tom Rhodes, Esq., our dedicated attorney, we have monitored events that either lend confusion to our name, what we do, or are injurious to our reputation.

As I express gratitude to all those who have supported me this year, I must remember my family and my wife, Laura, who is completely supportive of endless hours, time away from home, conference calls, and my state of constant distraction—which may or may not be related to my commitment to the Academy. I am most grateful for the generous educational grants from the sponsors, which help ensure success of this year's annual meeting. I have the deepest gratitude for our extraordinary membership for allowing me the honor and privilege to serve as president this year. Thank you, once again, for the opportunity.



Vito C. Quatela, MD
President 2007-2008
American Academy of Facial Plastic and
Reconstructive Surgery
and the
Educational and Research Foundation for the
American Academy of Facial Plastic and
Reconstructive Surgery



The AAFPRS

ITS HISTORY

The American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) was founded in 1964 and represents more than 3,000 facial plastic and reconstructive surgeons throughout the world. The AAFPRS is a National Medical Specialty Society of the American Medical Association (AMA). The AAFPRS holds an official seat in the AMA House of Delegates and on the American College of Surgeons board of governors.

ITS MEMBERS

The majority of AAFPRS members and fellows are certified by the American Board of Otolaryngology-Head and Neck Surgery, which includes examination in facial plastic and reconstructive surgery procedures, and the American Board of Facial Plastic and Reconstructive Surgery. Other AAFPRS members are surgeons certified in ophthalmology, plastic surgery, and dermatology.

ITS PURPOSE

The AAFPRS was founded in 1964 as an autonomous professional society representing the specialty of facial plastic surgery. The mission of the AAFPRS is:

- To promote the highest quality facial plastic surgery through education, dissemination of professional information, and the establishment of professional standards;
- To achieve understanding and recognition of the specialty of facial plastic surgery by the medical profession, hospitals, and other medical care entities, legislative and regulatory bodies, and the public at large;
- To define facial plastic surgery as a specialty that requires intensive training and competence, embodies high ethical standards, artistic ideals, commitment to humanitarian service, and a desire to enhance the quality of human life;
- To serve as the public's information source on facial plastic surgery; and
- To assist members in the practice of facial plastic and reconstructive surgery, guiding them in the delivery of high quality, cost-effective medicine and surgery.

With over 3,000 members, the Academy is the world's largest international association of facial plastic surgeons and the only organization dedicated solely to the advancement of facial plastic and reconstructive surgery.

AAFPRS Leadership and Committees 2008-2009

EXECUTIVE COMMITTEE

The year indicates the expiration of term as a board member.

Donn R. Chatham, MD, President (2010)
 Vito C. Quatela, MD, Immediate Past President (2009)
 Daniel E. Rousso, MD, President-elect (2011)
 Robert M. Kellman, MD, Secretary (2009)
 H. Devon Graham, MD, Treasurer (2010)
 Edward H. Farrior, MD, Group VP for Membership and Society Relations (2010)
 Corey S. Maas, MD, Group VP for Public and Regulatory Affairs (2011)
 Jonathan M. Sykes, MD, Group VP for Education (2009)*+
 Mary Lynn Moran, MD, Group VP for Research, Awards and Development (2009)*+
 Stephen S. Park, MD, Secretary-elect (2013)+
 John L. Frodel, MD, Group VP for Education- elect (2012)*+
 Minas Constantinides, MD, Group VP for Research, Awards and Development (2012)*+
 Stephen C. Duffy, Executive Vice President*+

* Ex-officio member of the Executive Committee

+ Non-voting member

BOARD OF DIRECTORS

The Board also includes all those listed under the Executive Committee.

Fred G. Fedok, MD, Director-at-Large (2010)
 Corey C. Moore, MD, Canadian Regional Director (2011)
 Edwin F. Williams, MD, Eastern Regional Director (2010)
 Harrison C. Putman, III, MD, Midwestern Regional Director (2011)
 Eugene L. Alford, MD, Southern Regional Director (2011)
 Tom D. Wang, MD, Western Regional Director (2010)
 David W. Kim, MD, Young Physician Representative (2012)

PAST PRESIDENTS

Vito C. Quatela, MD 2007
 Peter A. Hilger, MD 2006
 Ira D. Papel, MD 2005
 Steven J. Pearlman, MD 2004
 Keith A. LaFerriere, MD 2003
 Dean M. Toriumi, MD 2002
 Shan R. Baker, MD 2001
 Russell W.H. Kridel, MD 2000
 Devinder S. Mangat, MD 1999
 Stephen W. Perkins, MD 1998
 G. Richard Holt, MD 1997
 Peter A. Adamson, MD 1996
 Wayne F. Larrabee, Jr., MD 1995
 Roger L. Crumley, MD 1994
 H. George Brennan, MD 1993
 J. Regan Thomas, MD 1992
 Fred J. Stucker, MD 1991
 Norman J. Pastorek, MD 1990
 Ted A. Cook, MD 1989
 Frank M. Kamer, MD 1988
 John R. Hilger, MD 1987
 E. Gaylon McCollough, MD 1986
 Robert L. Simons, MD 1985
 Richard L. Goode, MD 1984
 Howard W. Smith, MD, DMD 1983
 M. Eugene Tardy, Jr., MD 1982
 Charles J. Krause, MD 1981
 Sidney S. Feuerstein, MD 1980
 *Jerome A. Hilger, MD 1979
 *George A. Sisson, MD 1978
 Leslie Bernstein, MD, DDS 1977
 *Richard C. Webster, MD 1976
 *Carl N. Patterson, MD 1975
 *Trent W. Smith, MD 1974
 G. Jan Beekhuis, MD 1973
 Walter E. Berman, MD 1972
 *Jack R. Anderson, MD 1971
 *William K. Wright, MD 1970
 *Ira Tresley, MD 1969
 *Morey L. Parkes, MD 1968
 Richard T. Farrior, MD 1967
 *John J. Conley, MD 1966
 *John T. Dickinson, MD 1965
 *Irving B. Goldman, MD 1964
 *Deceased

2008-2009 ACADEMY COMMITTEES

The year indicates expiration of term as committee members or chairs. Staff liaisons are noted after each committee roster.

AUDIT COMMITTEE

Keith A. LaFerriere, MD, Chair, 2009
Paul J. Carniol, MD, 2010
H. Devon Graham, MD, Ex-officio
(Treasurer), 2010
Richard D. Gentile, MD, 2011
Lisa Sarrge, staff liaison

CREDENTIALS COMMITTEE

Edward H. Farrior, MD, Chair, 2010
Mark Hamilton, MD, 2009
R. James Koch, MD, 2011
Minas Constantinides, MD, 2012
Kris Conrad, MD, 2013
Maria Atkins, staff liaison

EMERGING TRENDS AND TECHNOLOGIES COMMITTEE

Harry Mittelman, MD, Chair, 2011
Mark Hamilton, MD, Senior Advisor
Ben Bassichis, MD, 2009
Paul J. Carniol, MD, Senior Advisor
John R. Dmytryshyn, MD, 2009
Wayne P. Foster, MD, 2009
Roger E. Horioglu, MD, 2009
Sam M. Lam, MD, 2009
Harrison C. Putman, III, MD, 2009
Anil R. Shah, MD, 2009
Thomas L. Tzikas, MD, 2009
Richard Castellano, MD, 2010
Jen Y. Chow, MD, 2010
Alex S. Donath, MD, 2010
Robert A. Glasgold, MD, 2010
Paulino E. Goco, MD, 2010
Mark R. Murphy, MD, 2010
Bradford S. Patt, MD, 2010
Gregory W. Pippin, MD, 2010
Adam D. Schaffner, MD, 2010
Oleh S. Slupchynski, MD, 2010
Michael E. Villano, MD, 2010
Catherine P. Winslow, MD, 2010
Anurag Agarwal, MD, 2011
Rami K. Batniji, MD, 2011
Mark M. Beaty, MD, 2011
Elbert T. Cheng, MD, 2011
Payam Daneshrad, MD, 2011
Albert J. Fox, MD, 2011
Yael Halaas, MD, 2011
Grant S. Hamilton, MD, 2011
Todd C. Hobgood, MD, 2011
David J. Holcomb, MD, 2011
Andrew J. Jacono, MD, 2011
Phillip D. Knott, MD, 2011
Deirdre S. Leake, MD, 2011
Ritvik P. Mehta, MD, 2011
Maureen A. Muecke, MD, 2011

Sam Rizk, MD, 2011
David A. Sherris, MD, 2011
Jacob D. Steiger, MD, 2011
Rita Chua Magness, staff liaison

ENDOWMENT INVESTMENT COMMITTEE

Harrison C. Putman, III, MD, Chair, 2009
H. Devon Graham, MD, Ex-officio
(Treasurer), 2010
Karl J. Eisbach, MD, 2009
Richard D. Gentile, MD, 2010
Jonathan M. Sykes, MD, 2010
Harry Mittelman, MD, 2011
John W. Pate, Jr., MD, 2011
Lisa Sarrge, staff liaison

ETHICS COMMITTEE

Vito C. Quatela, MD, Chair, 2009
Peter A. Adamson, MD, 2009
Mark M. Beaty, MD, 2009
Mark Hamilton, MD, 2009
Keith A. LaFerriere, MD, 2009
Steven J. Pearlman, MD, 2009
Lee E. Smith, MD, 2009
Edward H. Farrior, MD, 2010
Edwin F. Williams, III, MD, 2010
Eugene L. Alford, MD, 2011
Jonathan M. Sykes, MD, 2011
Stephen C. Duffy, staff liaison

MEMBERSHIP/RESIDENCY RELATIONS COMMITTEE

Craig Cupp, MD, Chair 2009
Mimi S. Kokoska, MD, Senior Advisor
Eugene L. Alford, MD, Senior Advisor
Jaimie DeRosa, MD, 2009
Lisa M. Earnest, MD, 2009
Stephen A. Goldstein, MD, 2009
John Y. Kim, MD, 2009
William Numa, MD, 2009
Michelle R. Yagoda, MD, 2009
Philip A. Young, MD, 2009
Matthew B. Zavod, MD, 2009
Mark R. Clymer, MD, 2010
Fred G. Fedok, MD, 2010
Matthew A. Kienstra, MD, 2010
Maureen A. Muecke, MD, 2010
Jeff H. Spiegel, MD, 2010
David W. Stepnick, MD, 2010
Scott K. Thompson, MD, 2010
Ivan Wayne, MD, 2010
Andy A. Winkler, MD, 2010
Haresh Yalamanchili, MD, 2010
Robert J. Chiu, MD, 2011
Grant S. Hamilton, MD, 2011

Jill L. Hessler, MD, 2011
Jeffrey J. Joseph, MD, 2011
Grigoriy Mashkevich, MD, 2011
Maria Atkins, staff liaison

MULTIMEDIA COMMITTEE

Stuart H. Bentkover, MD,
Administrative Chair, 2011

MULTIMEDIA COMMITTEE

(SUBCOMMITTEE: ELECTRONIC MEDIA)

Sam M. Lam, MD Chair, 2010
Jon Mendelsohn, MD, Senior Advisor
Wayne P. Foster, MD, 2009
Sam P. Most, MD, 2009
Anil R. Shah, MD, 2009
Vishal Banthia, MD, 2010
Jen Y. Chow, MD, 2010
Alex S. Donath, MD, 2010
James A. Heinrich, MD, 2010
Shervin Naderi, MD, 2010
Michael E. Villano, MD, 2010
Mark M. Beaty, MD, 2011
Louis M. DeJoseph, MD, 2011
Grant S. Hamilton, MD, 2011
Allison M. Holzapfel, MD, 2011
Jason D. Meier, MD, 2011
Saswata Roy, MD, 2011
Rita Chua Magness, staff liaison

MULTIMEDIA COMMITTEE

(SUBCOMMITTEE: EDITORIAL REVIEW)

Corey S. Maas, MD, Chair, 2011
Craig Cupp, MD, 2009
Terry L. Donat, MD, 2009
Steven R. Mobley, MD, 2009
Vito C. Quatela, MD, 2009
David Reiter, MD, DMD, MBA, 2010
Daniel E. Rousso, MD, 2009
Jonathan M. Sykes, MD, 2009
Rita Chua Magness, staff liaison

MULTIMEDIA COMMITTEE

(SUBCOMMITTEE: PUBLICATIONS)

Terry L. Donat, MD, Chair, 2009
Jim E. Gilmore, MD, Senior Advisor
Sherard A. Tatum, III, MD, Senior Advisor
Richard D. Gentile, MD, Senior Advisor
J. Filipe Garcia, MD, 2009
J. Randall Jordon, MD, 2009
Andrew S. Frankel, MD, 2010
Carlo P. Honrado, MD, 2010
Sam M. Lam, MD, 2010
Ivan Wayne, MD, 2010
Robert A. Glasgold, MD, 2011
Rita Chua Magness, staff liaison

MULTIMEDIA COMMITTEE
(SUBCOMMITTEE: WORLD WIDE WEB)

Andrew C. Campbell, MD, Chair, 2009
Philip J. Miller, MD, Senior Advisor
Sam M. Lam, MD, 2009
Sam P. Most, MD, 2009
Mark M. Murphy, MD, 2009
Jen Y. Chow, MD, 2010
Deirdre S. Leake, MD, 2010
David Reiter, MD, DMD, MBA, 2010
Steven M. Denenberg, MD, 2011
Payam Daneshrad, MD, 2011
James R. Jordan, MD, 2011
Jason D. Meier, MD, 2011
Kevin Robertson, MD, 2011
Rita Chua Magness, staff liaison

NOMINATING COMMITTEE

Vito C. Quatela, MD, Chair, 2009
Keith A. LaFerriere, MD, 2009
Craig S. Murakami, MD, 2009
Stephen W. Perkins, MD, 2009
Edward H. Farrior, MD, 2010
Peter A. Hilger, MD, 2010
Ira D. Papel, MD, 2010
Tom D. Wang, MD, 2010
Edwin F. Williams, III, MD, 2010
Eugene L. Alford, MD, 2011
Corey C. Moore, MD, 2011
Harrison C. Putman, III, MD, 2011
Stephen C. Duffy, staff liaison

(AD HOC) COMMITTEE ON PATIENT
ADVOCACY

Mary Lynn Moran, MD, Chair, 2009
Mark M. Beaty, MD, 2009
Michael J. Brenner, MD, 2009
Mark J. Glasgold, MD, 2009
Neil A. Gordon, MD, 2009
Corey S. Maas, MD, 2009
Russell W.H. Kridel, MD, 2009
Keith A. LaFerriere, MD, 2009
Adam D. Schaffner, MD, 2009
James R. Shire, MD, 2009
Edwin F. Williams, III, MD, 2009
Stephen C. Duffy, staff liaison

PATIENT SAFETY, QI, AND
ACCREDITATION COMMITTEE

Neil A. Gordon, MD, Chair, 2009
Gerald G. Edds, MD, Senior Advisor
Michael Armstrong, Jr., MD, 2009
William H. Beeson, MD, 2009
Peter J. Cheski, MD, 2009
Steven H. Dayan, MD, 2009
Richard D. Gentile, MD, 2009
Seth M. Goldberg, MD, 2009
Amir Moradi, MD, 2009

Mary Lynn Moran, MD, 2009
Louie L. Patseavouras, MD, 2009
Stephen S. Smith, MD, 2010
Scott Thompson, MD, 2010
Todd C. Hobgood, MD, 2011
Stephen C. Duffy, staff liaison

PUBLIC INFORMATION COMMITTEE

Mark M. Beaty, MD, Chair, 2009
Ronald J. Caniglia, MD, Senior Advisor
Michael Armstrong, Jr., MD, 2009
Patrick J. Byrne, MD, 2009
Peter A. Costantino, MD, 2009
Neil A. Gordon, MD, 2009
Jenifer L. Henderson, MD, 2009
Paul S. Nassif, MD, 2009
Howard D. Stupak, MD, 2009
Kyle S. Choe, MD, 2010
Mark R. Clymer, MD, 2010
Deirdre S. Leake, MD, 2010
Gregory W. Pippin, MD, 2010
Paul A. Sabini, MD, 2010
B. Todd Schaeffer, MD, 2010
Oleh S. Slupchynski, MD, 2010
Geoffrey W. Tobias, MD, 2010
Anurag Agarwal, MD, 2011
Richard V. Balikian, MD, 2011
Rami K. Batniji, MD, 2011
Andrew Burchard, MD, 2011
Payam Daneshrad, MD, 2011
Louis M. DeJoseph, MD, 2011
Jeffrey J. Joseph, MD, 2011
Zain U. Kadri, MD, 2011
Lee A. Klausner, MD, 2011
James C. Marotta, MD, 2011
Krishna G. Patel, MD, 2011
Saswata Roy, MD, 2011
Michelle R. Yagoda, MD, 2011
George C. Yang, MD, 2011
Rita Chua Magness, staff liaison

REGULATORY AND SOCIOECONOMIC
AFFAIRS COMMITTEE

Mark J. Glasgold, MD, 2009
Ross A. Clemons, MD, 2006
David Reiter, MD, DMD, MBA, Senior
Advisor
Tom D. Wang, MD, Ex-Officio
(Western Region) 2010
Edwin F. Williams, III, MD,
Ex-Officio (Eastern Region) 2010
Eugene L. Alford, MD, Ex-Officio
(Southern Region), 2011
Harrison C. Putman, III, MD,
Ex-Officio (Midwest ern Region), 2011
David Naiberg, MD, Ex-Officio
(Canadian Region), 2011
Roger A. Allcroft, MD, 2009

Oneida A. Arosarena, MD, 2009
Babak Azizzadeh, MD, 2009
Michael J. Brenner, MD, 2009
Edward D. Buckingham, MD, 2009
Neil A. Gordon, MD, 2009
Grant S. Hamilton, MD, 2009
P. David Hunter, MD, 2009
Howard Stupak, MD, 2009
Mark A. Clymer, MD, 2010
Robert A. Glasgold, MD, 2010
Mike Setzen, MD, 2010
Stephen S. Smith, MD, 2010
Jeffrey H. Spiegel, MD, 2010
Ivan Wayne, MD, 2010
Benjamin W. Cilento, MD, 2011
Seth M. Goldberg, MD, 2011
Jill L. Hessler, MD, 2011
Todd C. Hobgood, MD, 2011
Keith A. Marcus, MD, 2011
Chris B. Mawn, MD, 2011
Amir Moradi, MD, 2011
Jacob D. Steiger, MD, 2011
Stephen C. Duffy, staff liaison

STRATEGIC PLANNING COMMITTEE

Peter A. Adamson, MD, Chair, 2011
Donn R. Chatham, MD, 2010
Vito C. Quatela, MD, 2009
Daniel E. Rousso, MD, 2011
Stephen C. Duffy, staff liaison

YOUNG PHYSICIANS
COMMITTEE

Mark Hamilton, MD Chair, 2009
Paul S. Nassif, MD, Senior Advisor
David A. Sherris, MD, Senior Advisor
David W. Kim, MD, Ex-officio
(Young Physician Rep.) 2011
Khalid Ansari, MD, 2009
Benjamin Bassichis, MD, 2009
Kofi O. Boahene, MD, 2009
Lisa Earnest, MD, 2009
Matthew A. Kienstra, MD, 2009
Jefferson K. Kilpatrick, MD, 2009
Benjamin C. Marcus, MD, 2009
Matthew D. Mingrone, MD, 2009
Steven R. Mobley, MD, 2009
Eric J. Moore, MD, 2009
Jeff S. Moyer, MD, 2009
Mark R.. Murphy, MD, 2009
Thomas C. Norton, MD, 2009
Matthew B. Zavod, MD, 2009
Mark S. Zimble, MD, 2009
Anurag Agarwal, MD, 2010
Anthony E. Brissett, MD, 2010
Randolph B. Capone, MD, 2010
Jen Y. Chow, MD, 2010
Jaimie DeRosa, MD, 2010

Alex S. Donath, MD, 2010
 Brian W. Downs, MD, 2010
 Neil A. Gordon, MD, 2010
 Carlo P. Honrado, MD, 2010
 Matthew Karen, MD, 2010
 Theresa A. Hadlock, MD, 2010
 Deirdre S. Leake, MD, 2010
 Paul L. Leong, MD, 2010
 Alex J. Marban, MD, 2010
 Scott Thompson, MD, 2010
 Catherine P. Winslow, MD, 2010
 Andrew A. Winkler, MD, 2010
 Haresh Yalamanchili, MD, 2010
 Richard V. Balikian, MD, 2011
 Andrew Burchard, MD, 2011
 Robert J. Chiu, MD, 2011
 Payam Daneshrad, MD, 2011
 Louis M. De Joseph, MD, 2011
 Jason B. Diamond, MD, 2011
 Albert J. Fox, MD, 2011
 Philip Garcia, MD, 2011
 Roberto E. Garcia, MD, 2011
 Stephen A. Goldstein, MD, 2011
 Yael Halaas, MD, 2011
 Grant S. Hamilton, MD, 2011
 Jill L. Hessler, MD, 2011
 Todd C. Hobgood, MD, 2011
 Allison M. Holzapfel, MD, 2011
 Anna P. Hsu, MD, 2011
 Andrew J. Jacono, MD, 2011
 Lee A. Klausner, MD, 2011
 Keith A. Marcus, MD, 2011
 Alexander Markarian, MD, 2011
 Stacie D. McClane, MD, 2011
 Ritvik P. Mehta, MD, 2011
 Jason D. Meier, MD, 2011
 Krishna G. Patel, MD, 2011
 Mark F. Rounds, MD, 2011
 D. David Saadat, MD, 2011
 Michael R. Shohet, MD, 2011
 Steve Smith, MD, 2011
 Ifeolumipo O. Sofola, MD, 2011
 Travis T. Tollefson, MD, 2011
 Deborah Watson, MD, 2011
 Stephen C. Duffy, staff liaison

WOMEN IN FACIAL PLASTIC SURGERY

Theda C. Kontis, MD, Chair, 2010
 Deborah Watson, MD, Senior Advisor
 Donna J. Millay, MD, Senior Advisor
 Oneida A. Arosarena, MD, 2009
 Amita A. Bagal, MD, 2009
 Sydney Butts, MD, 2009
 Maria S. Chand, MD, 2009
 Jaimie DeRosa, MD, 2009
 Lisa M. Earnest, MD, 2009
 Theresa A. Hadlock, MD, 2010
 Deirdre S. Leake, MD, 2010
 Catherine P. Winslow, MD, 2010
 Jill L. Hessler, MD, 2011
 Yael Halaas, MD, 2011
 Allison M. Holzapfel, MD, 2011
 Lee A. Klausner, MD, 2011
 Stacie D. McClane, MD, 2011
 Krishna G. Patel, MD, 2011
 Kristina Thomas, staff liaison

AAFPRS 2008-2009 Official Delegates and Representatives

Accreditation Association for
 Ambulatory Health Care (AAAHC)
 Richard D. Gentile, MD

American Academy of Otolaryngology-
 Head and Neck Surgery (AAO-HNS)
 Corey S. Maas, MD, Governor
 Mark Glasgold, MD, Legislative
 Representative to Board of Governors
 Mark Beaty, MD, Public Relations
 Representative to Board of Governors

American Board of Otolaryngology
 (ABOto)
 Peter A. Hilger, MD, Liaison

American College of Surgeons (ACS)
 Fred J. Stucker, MD, Governor

American Medical Association (AMA)
 Russell W.H. Kridel, MD, Delegate
 Gregory H. Branham, MD, Alternate
 Delegate
 Randolph B. Capone, MD, Delegate to
 Young Physicians Section
 Scott Chaiet, MD, Delegate, Resident/
 Fellow Section
 Wayne F. Larrabee, Jr., MD, Editor,
Archives of Facial Plastic Surgery
 David Reiter, MD, DMD, Physician
 Consortium on Performance
 Improvement Representative
 Edward H. Farrior, MD, CPT-4 Advisory
 Committee Representative
 John "Mac" Hodges, MD, FACE TO FACE:
 The National Domestic Violence Project

AAFPRS Committee Charges 2008-2009

The charges for each committee are those provided in the Bylaws or established as standing charges by virtue of past actions of the Academy Board of Directors.

AUDIT COMMITTEE

Reviews the audited statements of the Academy and performs inquiries and reviews as it deems appropriate to ensure itself of the proper use of Academy funds.

CREDENTIALS COMMITTEE

Verifies the qualifications of applicants to become fellows, members, and international members and conducts investigations, personal interviews, or inquiries it deems necessary.

EMERGING TRENDS & TECHNOLOGIES COMMITTEE

Reviews and disseminates information on innovations in treatment, surgical procedures, implants and other devices; recommends policies relating to surgical techniques and devices in the interest of providing the best possible care for patients.

ETHICS COMMITTEE

Responsible for complaint and grievance review regarding moral and ethical issues. All complaints or requests for disciplinary action shall be made in writing and addressed to the executive vice president of the Academy. The committee shall consist of the immediate past president as chair, as well as three other past presidents, two AAFPRS board members and two other fellows appointed by the president, chairs of committees governing credentials, public information and young physicians.

MEMBERSHIP/RESIDENCY RELATIONS COMMITTEE

Reviews new members and retention statistics and makes recommendations to the Academy Board of Directors regarding membership goals; reviews membership promotions program, including international membership; and makes suggestions to staff and Board of Directors as appropriate.

Maintains continuing communication with residency training directors and facial plastic contacts; encourages teaching of facial plastic surgery in residency programs; recommends to the Foundation Board of Directors videotapes that should be offered to residency programs at a discount; and promotes Academy membership and benefits to residents.

MULTIMEDIA COMMITTEE

Electronic Media Subcommittee. Makes recommendations to the Academy Board of Directors regarding future topics for the John Dickinson Memorial Library, and videotapes that should be withdrawn; identifies and helps solicit commercial support for the development of videotapes; may make recommendations to the Academy Board of Directors concerning the development of audiovisual materials for instructional or marketing purposes; reviews the use of the Learning Center and may make recommendations regarding its staffing, equipment, refurbishing, and funding. Recommendations are forwarded from the Academy Board to the Foundation Board.

Editorial Review Subcommittee. Reviews and approves storylines and timelines in advance for both *Facial Plastic Times* and *Facial Plastic Surgery Today*; reviews copy for *Facial Plastic Surgery Today* to ensure content accuracy.

Publications Subcommittee. Reviews and suggests updating of patient brochures, as well as new titles; recommends editorial policy for *Facial Plastic Times* and *Facial Plastic Surgery Today*; oversees direction of Academy's pages in the

Archives of Otolaryngology-Head and Neck Surgery; and oversees publication of other printed communications as directed by Academy Board of Directors.

Worldwide Web Subcommittee. Reviews all matters related to the structure and content of the AAFPRS Web site. Recommends to the Board of Directors policies to govern this communications and public information medium.

NOMINATING COMMITTEE

Nominates two persons each year for each position vacant on the Nominating Committee. It must nominate at least two candidates for all other vacant positions.

PAST PRESIDENTS COUNCIL

Functions as an advisory body to the Academy President, may be asked to advise the Academy's Ethics Committee, and collects materials for Academy archives.

PATIENT SAFETY, QUALITY IMPROVEMENT AND ACCREDITATION COMMITTEE

Promotes and disseminates information on patient safety and quality improvement practices within the specialty of facial plastic and reconstructive surgery; creates and coordinates patient safety activities and programs; provides guidance to Academy representative to the AAAHC Board and makes recommendations to the AAFPRS Board in regard to policies and programs concerning ambulatory health care.

PUBLIC INFORMATION COMMITTEE

Develops overall strategy for public information programs, including FPSIS, for approval by Academy Board of Directors; recommends programs and budget for public information activities to Board of Directors; and establishes a reciprocal liaison with AAO-HNS Public Information Committee.

REGULATORY AND SOCIOECONOMIC AFFAIRS COMMITTEE

Monitors medical-related activities of federal and state legislatures and state boards of medicine, and socioeconomic developments at all levels that affect facial plastic surgeons and, as appropriate, recommends action(s) to the Academy Board of Directors; recommends presentations and topics to program chairmen and to publications committee; maintains liaison with appropriate AAO-HNS committee(s) as well as with committees of other organizations; works to build stronger alliances with other specialty groups in support of mutual goals; makes recommendations to the appropriate education committee regarding inter-specialty programs; and provides guidelines and suggests policies for issues related to all aspects of a facial plastic surgery practice.

WOMEN IN FACIAL PLASTIC SURGERY

Provides support to female members; recruits and encourages women to pursue careers in facial plastic surgery; and encourages participation by our female members in research, education, and leadership roles in the AAFPRS and the medical community.

YOUNG PHYSICIANS COMMITTEE

Provides a vehicle to formulate and present to the Board matters of concern to young physicians; serves as mentors to their peers and helps increase the visibility of those issues; and enhances the educational experience for young facial plastic and reconstructive surgeons as it relates to their training and expertise.

BYLAWS

of the American Academy of Facial Plastic and Reconstructive Surgery

Article I NAME

The name of the Academy shall be the American Academy of Facial Plastic and Reconstructive Surgery.

Article II OBJECTIVES AND PURPOSES

The objectives and purposes of the Academy shall be as stated in the Articles of Incorporation.

Article III MEMBERSHIP PROCEDURES

Section 1. Nature of Membership

Membership in the Academy is a privilege which shall be extended only to professionally competent, licensed physicians with MD or DO degrees who continually meet the qualifications, standards and requirements for membership established by the Academy and as contained in the Articles of Incorporation, Bylaws, fellowship pledge, rules and regulations, and policies adopted by the membership or the board of directors. Only those individuals who can document to the satisfaction of the Academy their background, training, experience, reputation, character, ethics, and health will be granted Academy membership. No individual shall, as a matter of right, be entitled to membership solely on the basis of board certification, admission to any other professional organization or society, years of service, or hospital clinical privileges. No persons shall be elected or remain members of the Academy without adequately demonstrating that they are of good reputation and standing within their community and of high ethical character and professional repute.

Section 2. Categories of Membership

There shall be ten categories of membership in the Academy, namely, Fellows, Members, Resident Members, Associate Members, International Members, Emeritus Members, Honorary Members, Retired Members, Inactive, and Presidential Members.

Section 3. Application

Applications for membership shall be submitted on forms provided by the Academy and shall designate the category for which application is made. All applications for membership shall be supported by sponsors as stated by criteria adopted by the board of directors.

Section 4. Procedure for Consideration

Applications for resident members and emeritus members shall require the approval of the secretary only. Resident members may be automatically advanced to members upon proof of certification by an appropriate examining board. Applications for fellows, members, and international members who have not previously been resident members shall be forwarded to the credentials committee, which shall investigate the qualifications and eligibility. Such investigation may include an interview with the candidate by one or more members of the credentials committee, or a designee. The credentials committee, upon completing its deliberations and investigations, shall make a recommendation to the board of directors concerning the candidate's qualification for membership.

Section 5. Board Action

The board of directors shall act upon all recommendations by the credentials committee. An affirmative vote of two-thirds of the directors present at a meeting shall be required for approval for membership in the Academy. In the event of an adverse recommendation by the credentials committee or an adverse action by the board of directors, in recognition of the fact that membership in the Academy is honorary in nature and no candidate shall be entitled to question the decision by way of a hearing or otherwise.

Section 6. Fellowship Pledge

All candidates for membership must sign the fellowship pledge as set out in Article XVIII of these bylaws before their election to membership is complete.

Section 7. Suspension of Requirements

The board of directors shall, in its sole discretion, have authority to suspend any or all of the general or specific requirements for membership.

Article IV SPECIFIC REQUIREMENTS FOR EACH CATEGORY OF MEMBERSHIP

Section 1. Fellows

(a) Fellows shall be diplomats of (1) a recognized American examining board of medical specialists in a specialty applicable to the head and neck area or its equivalent; (2) fellows of the American College of Surgeons or fellows of the Royal College of Surgeons (C), or diplomates of the American Board of Facial Plastic and Reconstructive Surgery (ABFPRS); and (3) citizens or residents of the United States or Canada.

(b) Fellows must have training and experience in facial plastic and reconstructive surgery and shall have been actively engaged in such practice for a period of three years prior to application to be eligible for this membership status.

(c) Candidates to become fellows who do not hold an ABFPRS certificate must submit a detailed report of thirty-five major facial plastic and reconstructive surgical procedures performed within a 12-month period in accordance with the criteria for such procedures established by the board of directors. In addition, candidates shall submit a listing and brief description of every surgical procedure performed in the same 12-month period prior to application.

(d) Fellows shall enjoy all the privileges, rights, duties, and obligations of fellowship in the Academy.

Section 2. Members

(a) Members shall be diplomates of a recognized American examining board of medical specialists in a specialty applicable to the head and neck area or its equivalent, have the requisite training and experience in facial plastic and reconstructive surgery as determined by the board of directors, and be citizens or residents of the United States or Canada.

(b) Members, after a period of three years, are encouraged to seek to upgrade to fellow membership status by applying for promotion to fellow membership status and submitting evidence that they are qualified for promotion.

(c) Candidates for membership must submit a list of every surgical procedure performed within the twelve-month period prior to application.

(d) Members shall enjoy all the privileges, rights, duties, and obligations of membership, except the right to hold an elective office, chair a committee, or serve as a member of an elected committee. A member may, however, serve as the young physician representative to the board of directors.

Section 3. Resident Members

(a) Resident members shall be physicians who are in residency training and who are interested in facial plastic surgery. They may retain their membership for up to two years after completion of residency training with the expectation that during this time they will become board-certified by a recognized American examining board of medical specialties in a specialty applicable to the head and neck area or its equivalent.

(b) Resident members will be automatically advanced to members upon proof of certification by an appropriate examining board.

(c) Resident membership may be terminated four years after completion of residency training or proof of certification by an appropriate examining board has been submitted in accordance with these bylaws. An exception may be granted by the board of directors in extenuating circumstances, such as military service. Any termination will be without entitlement to question the decision by way of hearing or otherwise.

(d) Resident members shall enjoy all the privileges, rights, duties, and obligations of membership except the right to vote at membership meetings or hold an elective office, chair a committee or serve as a member of an elected committee. They may, however, serve on committees.

Section 4. Associate Members

(a) Associate members shall be physicians who have completed residency and who are interested in facial plastic surgery. They may retain their membership for up to four years after completion of residency training with the expectation that during this time they will become board-certified by a recognized American examining board of medical specialties in a specialty applicable to the head and neck area or its equivalent and upgrade to member status.

(b) Associate members will be automatically advanced to members upon proof of certification by an appropriate examining board and paying an application fee to the Academy. The amount of the fee is determined by the board of directors.

(c) Associate membership may be terminated four years after completion of residency training if proof of certification by an appropriate examining board has not been submitted in accordance with these bylaws. An exception may be granted by the board of directors in extenuating circumstances, such as military service. Any termination will be without entitlement to question the decision by way of hearing or otherwise.

(d) Associate members shall enjoy all the privileges, rights, duties and obligation of membership except the right to vote at membership meetings or hold an elective office, chair a committee or serve as a member of an elected committee. They may, however, serve on committees.

Section 5. International Members

(a) International members shall be physicians who are not citizens or residents of the United States or Canada but who meet all the other requirements for membership.

(b) International members shall enjoy all the privileges of membership in the Academy, except the right to vote at membership meetings, hold an elective office, chair a committee or serve as a member of an elected committee. They may, however, serve on committees.

Section 6. Emeritus Members

(a) Fellows, members, and international members in good standing, who by reason of physical infirmity or retirement from practice after the age of 70, perform no surgery, or those age 65 who have been dues-paying members for 25 years, may be granted emeritus membership status by the secretary upon written request. A fellow who thereby attains emeritus status shall become an emeritus fellow. A member who attains emeritus status shall become an emeritus member. An international member who attains emeritus status shall become an emeritus international member.

(b) Emeritus fellows and emeritus members shall enjoy all the membership privileges of members in the Academy but shall not be required to pay dues or assessments. Emeritus international members shall enjoy all the privileges of international members but shall not be required to pay dues or assessments.

Section 7. Honorary Members

(a) Honorary members shall be persons of outstanding achievement who have been approved by the board of directors.

(b) Honorary members shall enjoy all the rights and privileges of membership except the right to vote at membership meetings, hold an elective office, or serve on a committee. They shall not pay dues, registration fees, social fees, or any other assessments.

Section 8. Presidential Members

(a) Emeritus members who have shown distinguished service to the Academy may be specifically honored by the board of directors through nomination by the president and approval of the board of directors.

(b) Presidential members shall enjoy all the membership privileges of members in the Academy, but shall not be required to pay dues or assessments.

Section 9. Retired Members

A member, fellow, or international member who has retired from active practice and is not eligible for emeritus membership may become a retired member or fellow upon request to the board of directors and approval of that request by a majority vote of the board of directors. Retired members or fellows shall enjoy all of the privileges and responsibilities of members. Retired members or fellows shall pay a nominal fee as determined from time to time by the board of directors.

Section 10. Inactive Members

A member, fellow, or international member who is no longer engaged in the active practice of medicine by reason other than retirement may become "inactive" upon request to the board of directors and approval of that request by majority vote of the board of directors. Reinstatement as a member shall be at the

discretion of the board of directors upon submission of an application or other information and the payment of such fees and assessments as the board of directors may determine to be equitable. Inactive member status shall be subject to annual review. Inactive members are exempt from paying dues but shall pay a nominal fee as determined from time to time by the board of directors. Inactive members shall forfeit membership privileges to vote, hold committee membership, serve as a committee chair, or hold elected office.

Section 11. Criteria for Continued Membership

The Board of Directors shall adopt criteria for eligibility for continued membership for each category of membership from time to time; such criteria may include, but are not limited to, evidence of continued medical education. Failure to comply with such criteria as adopted shall result in termination of membership. As a condition of continued membership, a Fellow or Member who regularly performs surgery utilizing anesthesia of Level 2 or higher in an ambulatory surgery facility or office-based surgery facility must assure that the facility is accredited by an accrediting organization approved by the Academy's Board of Directors.

Section 12. Board of Directors' Authority Regarding Membership Privileges

Notwithstanding anything else in these bylaws, the board of directors may limit the use of the Academy's trademarks and service marks (whether or not registered) and participation in certain Academy activities to a specified category or categories of membership.

Article V

CONFIDENTIALITY OF ACTION

The entire contents of any application for membership in the Academy for whatever category, shall be privileged and confidential and shall not be subject to publication or public dissemination whether voluntary, involuntary, or by operation of law. Said application shall be forwarded only to appropriate individuals in the Academy, including the credentials committee and the board of directors for consideration. Any investigation or inquiries made or responses received by these individuals shall likewise be privileged and confidential. Candidates shall at no time be permitted to review or copy the contents of their application files. Publications to the members of the Academy of a list of candidates for membership and of a list of newly elected members or of current members shall not be considered to be a disclosure of the contents of the application file.

Article VI

DISCIPLINE

Section 1. Forms of Disciplinary Action

All disciplinary actions shall be taken by the board of directors. The board may censure, reprimand, suspend, expel, or otherwise discipline members. So that the board will have information about disciplinary actions affecting members, every member must notify the board in writing of any disciplinary action brought against that member by the member's state medical board or licensing board and, on request, provide a copy of the documents filed in that action.

Section 2. Automatic Expulsions

Loss of unlimited medical license or board certification shall result in automatic expulsion from Academy membership. The following may result in automatic expulsion from Academy membership:

- (a) Failure to attend one regional or semi-annual scientific meeting of the Academy or an Academy-sponsored course during a three-year period without good cause as determined by the board of directors.
- (b) Failure to pay dues.

Section 3. Grounds for Disciplinary Action

A member may be disciplined for any of the following reasons:

- (a) Failure to comply with the requirements contained in the Articles of Incorporation, Bylaws, fellowship pledge, or the rules, regulations, and policies of the Academy as adopted by the membership of the board of directors.
- (b) Continued failure to comply with the applicable requirements for membership.
- (c) Any professional or personal conduct which adversely reflects on the Academy.
- (d) Failure to provide the information regarding disciplinary proceedings required by Article VI, Section 1 of these by laws.
- (e) Failure to assure accreditation required by these by laws.

Section 4. Complaints and Procedures

All complaints or requests for disciplinary action shall be made in writing and addressed to the executive vice president of the Academy.

The Ethics Committee shall meet to consider the matter. If it determines that the alleged offense would potentially warrant suspension or expulsion from Academy membership, it shall schedule a meeting with the member in question. The member in question shall be notified at least thirty days in advance of the date, place, and time of the meeting as well as the nature of the complaint. The member may appear before the Ethics Committee to discuss the concerns. The purpose of the meeting shall be to provide an intra-professional forum for the resolution of the concerns specified. An adversarial proceeding is not contemplated and the involvement of legal counsel is discouraged so as not to impede the intra-professional nature of the meeting. However, should the member wish to have an attorney present, the member shall notify the Ethics Committee in advance. The role of legal counsel shall be limited to advising a client, and no formal participation shall be permitted. The Academy may, in such case, also request that its attorney be present. The Ethics Committee shall submit written recommendations to the board of directors. If the recommendations are for suspension or expulsion, written notice shall be sent to the affected member not less than thirty days prior to the scheduled date of the meeting of the board of directors at which the matter is to be considered, informing the individual that a written submittal to the board of directors may be made. A copy of the recommendation of the Ethics Committee shall be included in such written notice. The member in question may submit any written materials the member wishes up until ten days before meeting.

Disciplinary action of a member of the Academy shall require the affirmative vote of not less than two-thirds of the directors voting at a meeting. Notice of the final decision shall be sent to the affected member.

Section 5. Status During Proceedings

The status of a member involved in disciplinary proceedings shall remain unaltered during such proceedings, except in the case of automatic terminations.

Article VII

RESIGNATION

Section 1. Written Notice

Any member may resign by filing a written resignation with the Academy. Resignation does not relieve that member of the obligation for charges accrued and unpaid.

Section 2. Return of Membership Certificate

Upon resignation or removal from membership by action of the board of directors, the Academy membership certificate shall be returned to the Academy immediately.

Article VIII

BOARD OF DIRECTORS

Section 1. General Powers

The board of directors shall be the overall policymaking body for the Academy and shall have overall responsibility for the programs and business of the Academy.

Section 2. Composition and Term

(a) The board of directors shall be composed of the officers of the Academy, the immediate past president, the regional directors, and the young physician representative, and an at-large director.

(b) All directors shall serve with vote except the secretary-elect, treasurer-elect, vice-presidents-elect, and executive vice president, who shall serve as non-voting, ex-officio members of the board.

(c) Directors shall serve terms concurrent with their terms of office except for regional directors, who shall serve staggered three-year terms. The young physician representative and regional directors are not eligible for election to consecutive terms.

(d) The young physician representative will serve one, three-year term. For purposes of this section, the young physician representative is defined consistent with section 7.52 of the Constitution and Bylaws of the American Medical Association.

(e) Regional Directors

Five regional directors shall reside in and represent each of the following geographic areas:

Eastern

| | | |
|----------------------|---------------|--------------|
| Connecticut | Maryland | New York |
| Delaware | Massachusetts | Pennsylvania |
| District of Columbia | New Hampshire | Rhode Island |
| Maine | New Jersey | Vermont |

Midwestern

| | | |
|----------|-----------|--------------|
| Illinois | Michigan | North Dakota |
| Indiana | Minnesota | Ohio |
| Iowa | Missouri | South Dakota |
| Kansas | Nebraska | Wisconsin |

Southern

| | | |
|-----------|----------------|----------------|
| Alabama | Mississippi | Tennessee |
| Arkansas | North Carolina | Texas |
| Florida | Oklahoma | Virginia |
| Georgia | Puerto Rico | Virgin Islands |
| Kentucky | South Carolina | West Virginia |
| Louisiana | | |

Western

| | | |
|------------|------------|------------|
| Alaska | Idaho | Oregon |
| Arizona | Montana | Utah |
| California | Nevada | Washington |
| Colorado | New Mexico | Wyoming |
| Hawaii | | |

Canadian

All Provinces

They shall serve staggered three-year terms and shall not be eligible to succeed themselves in office for one additional term. They shall be elected to office by their respective regional members as stated in Article XI, Section 2.

(f) The immediate past president, regional directors, young physician representative, and at large director may only serve one term in their respective offices.

Section 3. Vacancies

A vacancy on the board of directors because of death, resignation, refusal to act, removal or disqualification, or otherwise, shall be filled as follows:

(a) If the director had served by virtue of an elective office, and if a successor in office has been elected, then the successor in office shall fulfill the term as director.

(b) If the director had served by virtue of being the immediate past president, then no one shall be elected or appointed to fulfill his term as director. In this instance, the number of directors shall be reduced by such vacancy for purposes of determining a quorum.

(c) If the director held an office for which no successor has been elected, or of the director had been a regional director or the Young Physician Representative, then a successor director shall be elected in accordance with these bylaws.

(d) If a vacancy in office is temporarily filled under these bylaws, the office filling that vacancy shall also act as a director, if the holder of that office is a director under these bylaws.

(e) If there is an unfilled vacancy on the Board of Directors, the number of directors shall be reduced by such vacancy for purposes of determining a quorum.

Section 4. Regular Meetings

Three regular meetings of the board of directors shall be held, one in conjunction with the annual meeting of the Academy. The board of directors may provide by resolution the time and place to hold additional regular meetings of the board without other notice than such resolution.

Section 5. Special Meetings

Special meetings of the board of directors may be called by the president or by a majority of the directors. The person or persons authorized to call special meetings of the board may fix the time and place to hold any special meetings of the board called by them.

Section 6. Notice

Notice of any regular, special or telephone meeting of the board of directors shall be sent to each director not less than fifteen days before such meeting. Notice may be waived in writing by a director either before or after a meeting. Neither the business to be transacted at nor the purpose of any regular or special meeting of the board need be specified in the notice or waiver of notice of such meeting.

Section 7. Quorum and Manner of Acting

A majority of the board of directors shall constitute a quorum. A majority of the quorum at any meeting of the board shall constitute action by the board unless otherwise provided by law or by these bylaws.

Section 8. Informal Action by Directors

Any action required or permitted to be taken at a meeting of the board of directors may be taken without a meeting if a consent in writing, setting forth the action to be taken, is signed by all directors entitled to vote.

Section 9. Telephone Meetings

Meetings may be conducted by telephone provided that all directors participating in such telephone meeting may communicate with each other. A majority of directors shall constitute a quorum for telephone meetings, and the act of the majority of the quorum shall constitute action by the board.

Section 10. Compensation

Directors shall not receive compensation for their services, but by any action of the board of directors, expenses may be allowed for attendance at meetings of the board or for official representation of the Academy.

Section 11. Executive Committee

The executive committee of the board shall consist of the president, immediate past president, president-elect, secretary, treasurer, group vice president for membership and society relations, and group vice president for public and regulatory affairs. The secretary-elect, vice president-elect for regulatory and public affairs, vice president-elect for membership and society relations, group vice president for education, group vice president for research, development, and awards, and executive vice president shall serve as ex-officio members without votes and without being counted to determine a quorum. The executive committee shall act for the board between meetings. Four members of the executive committee shall constitute a quorum. All actions taken by the executive committee must be reported to the board at the next duly convened meeting of the board.

Section 12. Indemnification

The corporation shall indemnify any and all of its present and former directors, officers, employees, agents, committee members, or any person who may have served at its request or by election as a director or officer of another corporation or association in accordance with policies adopted from time to time by the board of directors.

Section 13. Removal or Suspension from Office

The board of directors may remove from office any officer or director who is convicted of any criminal offense, who pleads guilty or *nolo contendere* to any criminal offense, or who suffers disciplinary sanctions from any medical or regulatory disciplinary board or organization or who fails to perform the duties of that office. The board of directors may suspend from active service as an officer or director any member who is charged with criminal activity or who is charged with a disciplinary violation.

Article IX

OFFICERS

Section 1. Officers

The officers of the Academy shall be as provided in this article.

Section 2. Qualifications

Only fellows in good standing shall be eligible for election as officers. Past presidents shall not be eligible to hold any office other than regional vice president or at-large member of the board.

Section 3. President

The president shall serve a one-year term and shall not be eligible for re-election. The president shall be the chief spokesperson for the Academy. The president's authority and duties shall include, but not be limited to: presiding at all meetings of the Academy, the board of directors, and the executive committee; appointing committee members and chairmen of committees, with the approval of the board, where permitted by these bylaws; selecting, with approval of the board of directors, individuals to serve as liaisons to appropriate organizations, as needed or desired; serving as an ex-officio member without vote on all committees of the Academy, except the credentials and nominating committees; filling vacancies in office or committees between annual meetings where permitted by these bylaws; acting in the event of an emergency or to correct any violations of these bylaws; and performing all duties incident to this office and such other duties as may be prescribed by the board of directors from time to time.

Section 4. President-Elect

In the absence of the president or in the event of the president's death or inability or refusal to act, the president-elect shall perform the duties of the president and when so acting shall have the powers of and be subject to all the restrictions upon the president. The president-elect shall succeed to the office of president at the close of the next annual meeting following election as president-elect, or in the event of the death or inability or refusal to act of the president. In the event the president-elect succeeds to the office of the president by reason other than natural succession, the president-elect shall serve for the remaining unfulfilled term of the current president and an additional one-year term of office as president. The president-elect shall be an ex-officio member, without vote, of all committees of the Academy, except the credentials and nominating committees.

Section 5. Executive Vice President

The board of directors shall employ an executive vice president to manage the Academy's programs and business. The executive vice president shall be given the necessary authority and be held responsible for the direction, administration, and coordination of the Academy in all of its activities, subject only to such policy as may be adopted and such orders as may be issued by the board of directors. The executive vice president shall have a continuing term of office until resignation or termination by the board of directors. The executive vice president shall be an ex-officio member, without vote, of all committees of the Academy, except the Credentials Committee.

Section 6. Group Vice President for Education

The group vice president for education shall be responsible for the supervision and direction of all educational activities and shall provide liaison to the AAFPRS Foundation in those fields.

The group vice president for education shall serve a three-year term and may only serve one term in this office.

Section 7. Group Vice President for Public and Regulatory Affairs

The group vice president for public and regulatory affairs shall be responsible for the supervision and direction of the Academy's public and regulatory affairs and shall coordinate the activities related to multimedia, regulatory and socioeconomic affairs, marketing, public information and relations.

The group vice president for public and regulatory affairs shall serve a three-year term and may only serve one term in this office.

Section 8. Group Vice President for Research, Awards, and Development

The group vice president for research, awards, and development shall be responsible for the supervision and direction of all activities in the areas of research, awards, and development and shall provide liaison to the AAFPRS Foundation in those fields. The group vice president for research, awards, and development shall serve a three-year term and may only serve one term in this office.

Section 9. Group Vice President for Membership and Society Relations

The group vice president for membership and society relations shall be responsible for the supervision of the Academy's membership and public relations and shall coordinate the activities relating to membership and residency relations, societies relations and young physician's section.

The group vice president for membership and society relations shall serve a three-year term and may only serve one term in this office.

Section 10. Treasurer

The treasurer oversees the administration of all funds, securities, and assets of the Academy and shall report regularly to the executive committee, board of directors, and membership on the Academy's financial status. The treasurer shall present an annual budget to the board of directors for its review and adoption. The treasurer shall perform other duties incident to the office as may be prescribed by the board of directors or president. The treasurer shall serve a three-year term and may only serve one term in this office.

Section 11. Treasurer-Elect

At the annual meeting preceding the expiration of the term of office of the current treasurer, a treasurer-elect shall be elected to serve for a one-year term of office. The treasurer-elect shall succeed to the office of treasurer upon the expiration of the incumbent treasurer's term of office, or upon the treasurer's death, resignation, or removal. The treasurer-elect, in the absence of the treasurer or in the event of the treasurer's inability or refusal to act, shall perform the duties of and be subject to all restrictions upon the treasurer. The treasurer-elect shall serve as

an ex-officio member of the board of directors without vote and executive committee without vote.

Section 12. Secretary

The secretary ensures that accurate minutes are kept of all meetings of the Academy, board of directors, and executive committee; ensures that all notices are duly given in accordance with the provisions of these bylaws or as required by law; oversees the keeping of a register of the address of each member; and directs the publication and mailing of the list of nominees for officers, directors, and committees prepared by the nominating committee.

The secretary shall perform all duties incident to the office and such other duties as from time to time may be assigned by the president or the board of directors. Upon the death of both the president and the president-elect, the secretary shall assume the office of president for the remainder of the term. The secretary shall serve a four-year term of office and may only serve one term in this office.

Section 13. Secretary-Elect

At the annual meeting preceding the expiration of the term of office of the current secretary, a secretary-elect shall be elected to serve for a one-year term of office. The secretary-elect shall succeed to the office of secretary upon the expiration of the incumbent secretary's term of office, or upon the secretary's death, resignation, or removal. The secretary-elect, in the absence of the secretary or in the event of the secretary's inability or refusal to act, shall perform the duties and be subject to all restrictions upon the secretary. The secretary-elect shall serve as an ex-officio member of the board of directors and executive committee without vote.

Section 14. Vice-Presidents-Elect

At the annual meeting preceding the expiration of the terms of office of the group vice presidents, vice-presidents-elect shall be elected to serve for a one-year term of office, one designated for each of those group vice presidencies. Each vice-president-elect shall succeed to the respective office of group vice president upon the expiration of that group vice president's term of office, or upon that group vice president's death, resignation, or removal. The vice president-elect, in the absence of the group vice president or in the event of the group vice president's inability or refusal to act, shall perform the duties and be subject to all restrictions upon the group vice president. The vice presidents-elect shall serve as ex-officio members of the board of directors and executive committee without vote.

Section 15. Vacancies

A vacancy in any office, except that of president-elect, secretary-elect, treasurer-elect, vice president-elect, or immediate past president because of death, resignation, refusal to act, removal or disqualification, or otherwise, may be filled by appointment by the president until the next annual meeting, unless otherwise provided by these bylaws. At the next annual meeting, the Nominating Committee will present nominees to fill any such vacancies for consideration in accordance with these bylaws. A vacancy in the office of president-elect shall be filled in accordance with these bylaws.

Section 16. Timely Performance of Duties

All officers shall discharge their duties in a timely fashion.

Article X

ELECTED COMMITTEES

Section 1. Classification

The credentials committee, audit committee, and nominating committee members shall be elected by the membership.

Section 2. Nominating Committee

The Nominating Committee shall consist of 12 fellows, five of whom shall be the regional directors, six of whom shall be elected, and the 12th being the immediate past president of the Academy, who shall serve as committee chairman. Elected Nominating Committee members shall serve two-year staggered terms with three members elected each year. Nominating committee members may serve two terms, but those terms may not be consecutive. If a regional director has previously been elected for the Nominating Committee for the two term limit, such regional director may nevertheless serve on the Nominating Committee. The immediate past president's service on the committee as chair ex-officio may not count against the two-term limit.

Section 3. Credentials Committee

The credentials committee shall consist of six members, including five elected members representing each of the regions, who have been fellows in the Academy for at least three years. Members shall serve staggered five-year terms. In addition, the chairman of the credentials committee shall be designated by the board of directors and may serve for three terms of two years each. The chairman must have served three years on the committee to qualify as chairman. The credentials committee shall be responsible for verifying the qualifications of applicants to become fellows, members, and international members, and shall conduct whatever investigations, personal interviews, or inquiries it deems necessary. Each member of the credentials committee shall treat all applications and information obtained during any interview or inquiry as privileged and confidential and shall not make any public disclosure or publication of said information except to the board of directors as heretofore provided.

Section 4. Audit Committee

The audit committee shall consist of five members, three of whom must be elected, and the treasurer and executive vice president shall serve ex-officio without vote. Elected members shall serve three-year staggered terms with one member elected each year. The function of the audit committee shall be to review the audited statements of the Academy and perform inquiries and reviews as it deems appropriate to ensure itself of proper use of Academy funds. The audit committee shall report annually to the board.

Section 5. Vacancies

If a member of either of these committees is unable to fulfill his term of office for any reason, the president shall appoint a successor to serve until the next annual meeting.

Article XI

ELECTIONS

Section 1. Nominations

(a) Nominations for office can be made only by the nominating committee, or by petition.

(b) The Nominating Committee shall prepare a slate of nominees for the various offices, committees, and directorships, and any vacancies. The slate shall contain at least two names for each vacancy except—by two-thirds vote of the Nominating Committee—the slate may include one candidate for president-elect. The Nominating Committee will propose at least two eligible candidates each year for the positions on the nominating committee to be vacated that year. Their report will be mailed to voting members by May 1 of the year of the annual meeting.

(c) Additional nominations for the various offices may be made with prior written consent of the nominees by one or more written petitions of ten voting members in good standing received by the secretary by June 1 prior to the annual meeting. By August 1 notice of additional nominees will be mailed to the members.

Section 2. Voting

(a) Elections of officers, directors, and elected committee members shall be held by ballot of those members present and eligible to vote and by those members eligible to vote who have cast mail ballots in accordance with the procedure described in these bylaws. The candidate with the most votes will fill the office or place. If more than two candidates for election to the nominating committee each receive majority votes, the places shall be filled by the two receiving the largest number of votes.

(b) Regional directors shall be elected by members of their respective regions.

(c) Credentials committee members representing their respective regions shall be voted on by the total membership.

Section 3. Commencement of Term

The term of office or services for those elected at an annual meeting shall commence at the close of said meeting.

Article XII

STANDING COMMITTEES

Section 1. Past Presidents Council

The past presidents council shall consist of all past presidents of the Academy and shall be chaired by the immediate past president.

Section 2. Ethics Committee

The Ethics committee shall be responsible for complaint and grievance review regarding moral and ethical issues. The committee shall consist of the immediate past president as chair, as well as three other past presidents, two AAFPRS board members and two other fellows appointed by the president, chairs of committees governing credentials, public information and young physicians and shall receive advice as needed from legal counsel.

Section 3. Duties

The duties and responsibilities of committees relating to the areas of governance of membership, residency relations, international young physicians section, socioeconomic affairs, multimedia, marketing and public information and relations shall be

structured and defined by the board of directors if not specified in these bylaws. Unless otherwise specified by the board of directors, actions by committees are in the nature of advice to the board of directors and do not represent the policies of the Academy unless and until adopted.

Section 4. Appointment

The group vice presidents for education and public and regulatory affairs shall make recommendations to the president-elect for members and chairs of committees under their jurisdiction. The chairs shall have served at least one full year on their respective committees and shall be fellows of the Academy. The president-elect shall submit a list of proposed candidates for committee members and committee chairs for those terms about to expire at the fall meeting of the board for its approval.

Section 5. Terms

All committee members, unless otherwise specified herein, may serve two three-year staggered terms. In addition, committee chairs may serve an additional three-year term. Terms of committee chairs will be staggered.

Section 6. Ad Hoc Committees

Ad hoc committees may be created by the board of directors for a one-year period, unless otherwise specified. The president, with concurrence of the board, shall appoint the members and designate the chairs of such committees. An ad hoc bylaws committee shall be appointed by the president, with approval of the board, at least every four years to conduct an overall review of the bylaws.

Section 7. Composition

The size of each standing or ad hoc committee, unless otherwise specified herein, and the duties of each committee shall be determined by the board of directors. At each regular meeting of the board of directors, the chair of each standing committee shall deliver the committee's report.

Section 8. Removal of Committee Members

The board of directors may remove any appointed committee members for any reason at the discretion of the board of directors. Elected committee members, officers, and directors may be removed under Article VIII, Section 13 of these bylaws.

Article XIII

MEETINGS OF THE MEMBERSHIP

Section 1. Annual Meeting

The annual meeting of the Academy shall occur at such time and place as designated by the board of directors. Notice of the annual meeting shall be sent to all members at least thirty days in advance. The president shall appoint a qualified parliamentarian, who need not be a member of the Academy, to advise him at the meeting.

Section 2. Quorum and Voting

A quorum shall consist of those members present and eligible to vote at any regular or special meeting of the Academy, but in no event shall a quorum consist of less than 40 members. Except as otherwise provided in these bylaws, a majority of votes of a

quorum shall constitute action of the membership.

Section 3. Special Meetings

Special meetings of the members may be called by the president of the Academy, by resolution of the board of directors, or by written petitions signed by at least five percent of those members eligible to vote at such meetings. The petitions of the members shall be submitted to the executive vice president. The president shall fix a date for said special meeting, which shall be not less than forty-five days nor more than ninety days from date of receipt of petition by the secretary. The time, place, and location of said meeting shall be fixed by the president of the Academy. Notice of any special meeting shall be sent to all voting members at least fourteen days in advance thereof, informing the members of the date, place, time, and purpose of said meeting.

Section 4. Resolutions

Proposed resolutions must be submitted at least 120 days before the annual business meeting. The president may refer any such proposed resolution to the appropriate reference committee appointed by the president to study the proposals and make recommendations to the membership. Resolutions adopted at the annual meeting shall be referred to the board of directors for appropriate implementation. In circulating the proposals to the membership, brief statements of the rationale proposed for adoption (as presented by their proponents) and the basis for the recommendations shall be included.

Article XIV

VOTING

Section 1. Application

Voting rights at membership and committee meetings, unless otherwise specified by these bylaws, shall be in accordance with this article.

Section 2. Procedure

(a) Voting rights at membership and committee meetings, unless otherwise specified by these bylaws, shall be exercised by the member in person. No proxy voting is allowed. Cumulative voting, to place all votes for a particular candidate or a particular issue, is specifically prohibited. Whenever, within these bylaws, a member of a committee is specified to be ex-officio, it is specifically understood that said ex-officio member shall not have the right to vote unless otherwise specified by these bylaws. Only committee members duly elected or appointed shall be eligible to vote at committee meetings.

(b) The following procedure will govern voting by mail:

- (i) Voting by mail is only allowed for elections under these bylaws and for amendments to these bylaws or to the Articles of Incorporation.
- (ii) Mail votes must be received by the Academy office by the date prescribed by the secretary. In no event, however, shall a mail vote be required to be submitted in less than 2 weeks from the date for casting the vote is sent to the member from the Academy office.

Article XV**FEES AND DUES****Section 1. Application Fees**

Application fees for members shall be determined from time to time by the board of directors.

Section 2. Annual Dues

Annual dues in such amounts as determined by the board of directors shall be paid by January of each year for the various classifications of members, unless otherwise provided by these bylaws. If annual dues are still unpaid by April 1 of any year, the delinquent member's name will be presented for appropriate action. Members whose dues remain unpaid will be dropped from membership no later than the fall meeting of the board of directors.

Section 3. Exemption from Dues

Exemption from dues may be made by the board of directors.

Section 4. Registration Fees

Registration and social fees shall be as determined by the board of directors.

Article XVI**FISCAL YEAR**

The fiscal year of the Academy shall be the calendar year.

Article XVII**RULES OF ORDER**

In the absence of any provision in these bylaws, all meetings of the Academy, the board of directors, and duly appointed or elected committees shall be governed by the latest edition of *Robert's Rules of Order, Newly Revised*.

Article XVIII**FELLOWSHIP PLEDGE**

Each member of the Academy must adhere to and uphold the fellowship pledge, as stated below.

I agree to abide by the Articles of Incorporation and Bylaws of the Academy and by such rules and regulations as may be enacted from time to time, and to advance and extend the ideals and principles of the Academy.

I pledge to pursue the practice of surgery with scientific honesty and to place the welfare of my patients above all else, to advance constantly in knowledge, and to render willing help and teaching to my colleagues in medicine and seek their counsel when in doubt as to my own judgment.

I agree to abide by the guidelines on advertising which are adopted by the Academy in order to promote legitimate and ethical advertising of physicians' services and to avoid the occasion of unprofessional conduct through false or misleading advertising.

I declare that I will not practice the division of fees, either directly or indirectly, and that I will make my fees commensurate with the services rendered.

Finally, I declare that on revocation or resignation of membership, I shall return my membership certificate to the Academy.

Article XIX**AMENDMENTS TO THE BYLAWS OR TO THE ARTICLES OF INCORPORATION**

Proposed amendments to these bylaws or to the Articles of Incorporation of the Academy must be submitted in writing from at least three fellows or members to the executive vice president not less than 120 days prior to the next annual meeting. The president shall refer the proposed amendments to the Board of Directors or the executive committee for review and recommendation to the membership. A copy of the proposed amendments and recommendations, together with a brief statement of the rationales for the proposed amendments (as presented by their proponents) and recommendations and a mail ballot, shall be sent to each member at least 45 days preceding the annual meeting at which the proposed amendments will be voted on. At the annual meeting, the proposed amendments shall be submitted for a vote. Mail ballots will be counted along with votes at the annual meeting. Amendments to these bylaws or to the Articles of Incorporation of the Academy may be adopted by an affirmative vote of two-thirds of those members eligible to vote and voting in person or by mail.

Adopted, October 19, 1985

Amended, September 13, 1986

Amended, September 24, 1988

Amended, September 22, 1989

Amended, October 1, 1993

Amended, September 24, 1994

Amended, September 16, 1995

Amended, September 27, 1996

Amended, September 5, 1997

Amended, September 11, 1998

Amended, September 24, 1999

Amended, September 22, 2000

Amended, September 7, 2001

Amended, September 20, 2002

Amended, September 19, 2003

Amended, September 20, 2004

Amended, September 23, 2005

Amended, September 20, 2007

Amended, September 19, 2008



The AAFPRS Foundation

In 1974, the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS Foundation) was created to address the medical and scientific issues and challenges which confront facial plastic surgeons. The AAFPRS Foundation established a proactive research program and educational resources for leaders in facial plastic surgery. Through courses, workshops, and other scientific presentations, as well as a highly respected fellowship training program, the AAFPRS Foundation has consistently provided quality educational programs for the dissemination of knowledge and information among facial plastic surgeons.

In the early 1990s, FACE TO FACE humanitarian programs were established so that AAFPRS members could use their skills and share their talent in helping the less fortunate individuals here and abroad.

FACE TO FACE: International brings AAFPRS members to third world countries where they treat children with facial birth defects and anomalies. FACE TO FACE: The National Domestic Violence Project allows AAFPRS members to perform surgery on survivors of domestic abuse here in the United States, who have received injuries to their faces.

The AAFPRS Foundation has developed creative ways to get members to participate in fundraising activities to support all AAFPRS Foundation programs including the humanitarian programs.

Top Ten List from the Development Office ...

- ☛ Is your name on the FACE TO FACE surgeon participant list?
- ☛ Would you like to go on a FACE TO FACE trip to China, Russia, Vietnam, or Africa?
- ☛ Would you like to donate a car to FACE TO FACE?
- ☛ Do you know the history behind the Founders Club?
- ☛ Who are your corporate friends? Wouldn't they love to make a donation to a worthy cause?
- ☛ Have you transferred any stocks lately to the AAFPRS Foundation?
- ☛ Would you like to chair the next Young Physician's Event?
- ☛ Have you told your patients about the AAFPRS Foundation? You would be surprised how willing they are to donate to your cause!
- ☛ Would you like to host a FACE TO FACE event in your hometown?
- ☛ Are you an 1887 member?

Visit our FACE TO FACE Web site at:
www.facetofacesurgery.org.

To offer your talents, services, and enthusiasm, please contact Ann Holton Jenne, Director of Development at aholton@aafprs.org or at (703) 299-9291 ext. 229.

AAFPRS Meetings and Courses 2009

JANUARY 15-19

Winter Symposium on the Latest Advances in Facial Plastic Surgery

Co-chairs: Edwin F. Williams, III, MD; Jonathan M. Sykes, MD; and Sam P. most, MD
 Telluride, CO

JUNE 11-15

Advances in Rhinoplasty

Co-chairs: Wayne F. Larrabee, Jr., MD; Edward H. Farris, MD; and Stephen S. Park, MD
 Seattle, WA

OCTOBER 1-3

FALL MEETING

Co-chairs: Robert M. Kellman, MD; Paul J. Carniol, MD; and Fred G. Fedok, MD
 San Diego, CA



AAFPRS Foundation Leadership and Committees 2008-2009

FOUNDATION BOARD

The year indicates the expiration of term as a board member.

The year indicates the expiration of term as a board member.

Donn R. Chatham, MD, President (2010)

Vito C. Quatela, MD, Immediate Past President (2009)

Daniel E. Rousso, MD, President-elect (2011)

Robert M. Kellman, MD, Secretary (2009)

H. Devon Graham, MD, Treasurer (2010)

Edward H. Farrior, MD, Group VP for Membership and Society Relations (2010)*+

Corey S. Maas, MD, Group VP for Public and Regulatory Affairs (2011)*+

Jonathan M. Sykes, MD, Group VP for Education (2009)

Mary Lynn Moran, MD, Group VP for Research, Awards and Development (2009)

Stephen S. Park, MD, Secretary-elect (2013)+

John L. Frodel, MD, Group VP for Education- elect (2012)+

Minas Constantinides, MD, Group VP for Research, Awards and Development (2012)+

Stephen C. Duffy, Executive Vice President*

* Ex-officio member

+ Non-voting member

2008-2009 FOUNDATION COMMITTEES

The year indicates expiration of term as committee members or chairs. Staff liaisons are noted after each committee roster.

AWARDS COMMITTEE

Patrick J. Byrne, MD, Chair, 2011

Charles S. Giffin, MD, Senior Advisor

J. David Kriet, MD, Senior Advisor

Benjamin Bassichis, MD, 2010

Roxana Cobo, MD, 2010

Timothy Doerr, MD, 2010

Brian W. Downs, MD, 2010

Andrew S. Frankel, MD, 2010

Albert S. Jen, MD, 2010

Matthew A. Kienstra, MD, 2010

Corey C. Moore, MD, 2010

Jeffrey H. Spiegel, MD, 2010

Ivan Wayne, MD, 2010

Stacie D. McClane, MD, 2011

Travis T. Tollefson, MD, 2011

John S. Rhee, MD, 2011

Michelle Busey, staff liaison

CME COMMITTEE

Anthony P. Sclafani, MD, Chair, 2011

Theda C. Kontis, MD, Vice Chair, 2011

Michael J. Sullivan, MD, Senior Advisor

Robert M. Kellman, MD, Co-Chair Fall Program, 2009

Paul J. Carniol, MD, Co-Chair Fall Program, 2009

Fred G. Fedok, MD, Co-Chair Fall Program, 2009

Andrew C. Campbell, MD, Ex-officio (WWW Committee) 2009

Terry L. Donat, MD, Ex-officio (Publications Committee) 2009

Manoj T. Abraham, MD, 2009

Paul J. Carniol, MD, 2009

John R. Dmytrysyn, MD, 2009

John L. Frodel, Jr., MD, 2009

Stephen A. Goldstein, MD, 2009

Andrew J. Jacono, MD, 2009

Grant S. Hamilton, MD, 2009

Jennifer L. Henderson, MD, 2009

Sam P. Most, MD, 2009

Steven J. Pearlman, MD, 2009

Patrick J. Byrne, MD, 2010

Scott K. Chiang, MD, 2010

Kyle S. Choe, MD, 2010

Timothy Doerr, MD, 2010

Brian W. Downs, MD, 2010

Fred G. Fedok, MD, 2010

Tessa A. Hadlock, MD, 2010

Corey S. Maas, MD, 2010

Paul S. Nassif, MD, 2010

Bradford S. Patt, MD, 2010

Paul A. Sabini, MD, 2010

Adam D. Schaffner, MD, 2010

David W. Stepnick, MD, 2010

Geoffrey W. Tobias, MD, 2010

Edwin F. Williams, III, MD, 2010

Rami K. Batniji, MD, 2011

Daniel G. Becker, MD, 2011

Randolph B. Capone, MD, 2011

Anna P. Hsu, MD, 2011

Alexander Markarian, MD, 2011

Sunny S. Park, MD, 2011

Gregory J. Renner, MD, 2011

Caryl Herrington, staff liaison

ENDOWMENT INVESTMENT COMMITTEE

Harrison C. Putman, III, MD, Chair, 2009

H. Devon Graham, MD, Ex-officio (Treasurer), 2010

Karl J. Eisbach, MD, 2009

Richard D. Gentile, MD, 2010

Jonathan M. Sykes, MD, 2010

Harry Mittelman, MD, 2011

John W. Pate, Jr., MD, 2011

Lisa Sarrge, staff liaison

EXHIBIT ADVISORY COMMITTEE

Edwin F. Williams, III, MD, Chair, 2009

William H. Truswell, MD, Senior Advisor

Beth Stern, RN, Ex-officio (OFPSA)

Todd Lane, Byron Medical

Todd Petrucciani, Anthony Products

Joel Pickering, Lifecell

Jeff Surginor, United Imaging

Jeffrey S. Chien, MD, 2009

Jeptha N. Cole, MD, 2009

Charles W. Shih, MD, 2009

Maurice M. Khosh, MD, 2010

Sam M. Lam, MD, 2010

Corey S. Maas, MD, 2010

Greg W. Pippin, MD, 2010

Oleh S. Slupchynski, MD, 2010

Geoffrey W. Tobias, MD, 2010

Rami K. Batniji, MD, 2011

Andrew P. Battiata, MD, 2011

Ollie Edwards, staff liaison

FACE TO FACE COMMITTEE

Andrew J. Jacono, MD Chair, 2010

Minas Constantinides, MD, Senior Advisor

Mary Lynn Moran, MD, Senior Advisor

John M. Hodges, MD, Senior Advisor

Manoj T. Abraham, MD, 2009

Oneida Arosarena, MD, 2009

Rami K. Batniji, MD, 2009

Sydney Butts, MD, 2009

Edward T. Chang, MD, 2009

John L. Frodel, Jr., MD, 2009

Allison M. Holzapfel, MD, 2009

Theresa Jarmuz, MD, 2009

Stephanie A. Joe, MD, 2010

James E. Kallman, MD, 2009

Matthew A. Kienstra, MD, 2009

Amir Moradi, MD, 2009

George T. Moynihan, MD, 2009

Paul S. Nassif, MD, 2009

Scott A. Scharer, MD, 2009

Carlos A. Pedrosa, MD, 2010

Dana S. Smith, MD, 2009

Howard Stupak, MD, 2009

Scott Thompson, MD, 2010

Michael E. Villano, MD, 2010

Anurag Agarwal, MD, 2011

Richard V. Balikian, MD, 2011

Kofi O. Boahene, MD, 2011

Payam Daneshrad, MD, 2011

Timothy Doerr, MD, 2011

Albert J. Fox, MD, 2011

Yael Halaas, MD, 2011

Todd C. Hobgood, MD, 2011

John F. Hoffmann, MD, 2011

Anna P. Hsu, MD, 2011

Amir M. Karam, MD, 2011

Alexander Markarian, MD, 2011

Grigoriy Mashkevich, MD, 2011

Stacie D. McClane, MD, 2011

Sunny S. Park, MD, 2011

Krishna G. Patel, MD, 2011

Shep G. Pryor, MD, 2011

Harrison C. Putman, III, MD, 2011
 Sam Rizk, MD, 2011
 Kevin Robertson, MD, 2011
 Mark F. Rounds, MD, 2011
 Andrew D. Schaffner, MD, 2011
 Ife O. Sofola, MD, 2011
 Travis T. Tollefson, MD, 2011
 Philip A. Young, MD, 2011
 Michelle R. Yagoda, MD, 2011
 Ann K. Holton, staff liaison

FELLOWSHIP COMMITTEE

Minas Constantinides, MD Chair, 2013
 Stephen S. Park, MD, Senior Advisor
 Richard E. Davis, MD, Senior Advisor
 Stephen W. Perkins, MD, Ex-officio
 (Fellowship Review) 2010
 John S. Rhee, MD, Ex-officio
 (Fellowship Research Review) 2009
 Grant S. Hamilton, MD, Ex-officio
 (Fellowship Curriculum) 2011
 Eugene L. Alford, MD, 2009
 Shan R. Baker, MD, 2009
 Michael Fritz, MD, 2009
 John L. Frodel, Jr., MD, 2009
 Mark J. Glasgold, MD, 2009
 Stephen A. Goldstein, MD, 2009
 Theda C. Kontis, MD, 2009
 Benjamin C. Marcus, MD, 2009
 Donna J. Millay, MD, 2009
 Eric J. Moore, MD, 2009
 Ira D. Papel, MD, 2009
 Daniel E. Rousso, MD, 2009
 David A. Sherris, MD, 2009
 Tom D. Wang, MD, 2009
 Jen Y. Chow, MD, 2010
 David Greene, MD, 2010
 Matthew Karen, MD, 2010
 Matthew A. Kienstra, MD, 2010
 Paul L. Leong, MD, 2010
 Steven R. Mobley, MD, 2010
 Paul A. Sabini, MD, 2010
 Haresh Yalamanchili, MD, 2010
 James C. Marotta, MD, 2011
 Gregory J. Renner, MD, 2011
 Travis T. Tollefson, MD, 2011
 Fatima EL-Sanders, staff liaison

FELLOWSHIP COMMITTEE (SUBCOMMITTEE: FELLOWSHIP CURRICULUM)

Grant S. Hamilton, MD Chair, 2011
 Theda C. Kontis, MD, Senior Advisor
 David W. Kim, MD, Senior Advisor
 Kofi O. Boahene, MD, 2009
 Anthony E. Brissett, MD, 2009
 Patrick J. Byrne, MD, 2009
 Krista L. Olson, MD, 2009
 Travis T. Tollefson, MD, 2009
 Samson Lee, MD, 2009
 Carla C. Graham, MD, 2010
 Randolph Capone, MD, 2010
 Minas Constantinides, MD, 2010
 Myra N. Danish, MD, 2010
 Jaimie DeRosa, MD, 2010

Yadranko Ducic, MD, 2010
 Fred G. Fedok, MD, 2010
 Jennifer L. Henderson, MD, 2010
 John F. Hoffmann, MD, 2010
 J. David Holcomb, MD, 2010
 Timothy Lian, MD, 2010
 David V. Martini, MD, 2010
 Ife O. Sofola, MD, 2010
 Deborah Watson, MD, 2010
 Mark K. Wax, MD, 2010
 Elizabeth Whitaker, MD, 2010
 Andrew A. Winkler, MD, 2010
 Catherine P. Winslow, MD, 2010
 Harrison C. Putman, III, MD, 2011
 Jacob D. Steiger, MD, 2011
 Fatima EL-Sanders, staff liaison

FELLOWSHIP COMMITTEE (SUBCOMMITTEE: FELLOWSHIP RESEARCH REVIEW)

John S. Rhee, MD, Chair, 2009
 Kevin C. Lunde, MD, Senior Advisor
 Stephen S. Park, MD, Senior Advisor
 David B. Hom, MD, 2009
 Anthony E. Brissett, MD, 2010
 Timothy Doerr, MD, 2010
 Paul L. Leong, MD, 2010
 Jeffrey H. Spiegel, MD, 2010
 Oren Friedman, MD, 2011
 J. David Kriet, MD, 2011
 Arnold S. Lee, MD, 2011
 Benjamin C. Marcus, MD, 2011
 Deborah Watson, MD, 2011
 Fatima EL-Sanders, staff liaison

FELLOWSHIP REVIEW COMMITTEE

Stephen W. Perkins, MD, Chair, 2010
 Ted A. Cook, MD, Senior Advisor
 Minas Constantinides, MD, Ex-officio,
 (Fellowship Committee) 2010
 Richard E. Davis, MD, 2009
 Edward Farrior, MD, 2009
 Steven J. Pearlman, MD, 2009
 Vito C. Quatela, MD, 2009
 Sherard A. Tatum, III, MD, 2009
 Karl J. Eisbach, MD, 2010
 John L. Frodel, Jr., MD, 2010
 Corey S. Maas, MD, 2010
 Harry Mittelman, MD, 2010
 Craig S. Murakami, MD, 2010
 Stephen S. Park, MD, 2010
 Fatima EL-Sanders, staff liaison

(AD HOC) COMMITTEE ON INDUSTRY RELATIONS (TILC)

Vito C. Quatela, MD, Chair, 2009
 Peter A. Hilger, MD, Senior Advisor, 2009
 Paul J. Carniol, MD, 2009
 Donn R. Chatham, MD, 2009
 Steven H. Dayan, MD, 2009
 Philip J. Miller, MD, 2009
 Ann Holton Jenne and Caryl Herrington,
 staff liaisons

MAINTENANCE OF CERTIFICATION COMMITTEE

G. Richard Holt, MD, Chair, 2009
 John S. Rhee, MD, Vice Chair, 2009
 Daniel G. Becker, MD, 2009
 Ross A. Clevens, MD, 2009
 Daniel G. Danahey, MD, 2009
 David B. Hom, MD, 2009
 David W. Kim, MD, 2009
 Theda C. Kontis, MD, 2009
 Sam M. Lam, MD, 2009
 Philip J. Miller, MD, 2009
 Sam P. Most, MD, 2009
 Ira D. Papel, MD, 2009
 Anthony P. Sclafani, MD, 2009
 Caryl Herrington, staff liaison

RESEARCH COMMITTEE

Roger A. Allcroft, MD, Chair, 2009
 Mark K. Wax, MD, Senior Advisor
 David B. Hom, MD, Senior Advisor
 Leslie Bernstein, MD, DDS (life member)
 Michael J. Brenner, MD, 2009
 Jaimie DeRosa, MD, 2009
 J. Randall Jordan, MD, 2009
 Monica Tadros, MD, 2009
 Neil Tanna, MD, 2009
 Anthony E. Brissett, MD, 2010
 Tessa A. Hadlock, MD, 2010
 Sam P. Most, MD, 2010
 Jeffrey H. Spiegel, MD, 2010
 Shane A. Zim, MD, 2010
 Amir M. Karam, MD, 2011
 Shep G. Pryor, MD, 2011
 Deborah Watson, MD, 2011
 Kristina Thomas, staff liaison

SPECIALTY SURGERY COMMITTEE

Mark K. Wax, MD, Administrative Chair

SPECIALTY SURGERY COMMITTEE (SUBCOMMITTEE: CLEFT LIP/CLEFT PALATE)

Sherard A. Tatum, III, MD, Chair, 2009
 Karl J. Eisbach, MD, Senior Advisor
 Tom D. Wang, MD, Senior Advisor
 Daniel G. Danahey, MD, 2009
 James E. Kallman, MD, 2009
 Charles W. Shih, MD, 2009
 Randolph B. Capone, MD, 2010
 Oren Friedman, MD, 2010
 Carla C. Graham, MD, 2010
 Shane A. Zim, MD, 2010
 Michael R. Shohet MD, 2011
 Travis T. Tollefson, MD, 2011
 Ann Holton Jenne, staff liaison

SPECIALTY SURGERY COMMITTEE (SUBCOMMITTEE:

CRANIOMAXILLOFACIAL)
 Daniel G. Danahey, MD, Chair, 2009
 Mario J. Imola, MD, Senior Advisor
 Sherard A. Tatum, III, MD, Senior Advisor
 Eugene L. Alford, MD, 2009
 John Kim, MD, 2009
 Dana S. Smith, MD, 2009

Babak Azizzadeh, MD, 2010
Edward T. Chang, MD, 2010
Corey C. Moore, MD, 2010
Shane A. Zim, MD, 2010
Sidney Butts, MD, 2011
Timothy Doerr, MD, 2011
Phillip D. Knott, MD, 2011
Ritvik P. Mehta, MD, 2011
Ann K. Holton, staff liaison

**SPECIALTY SURGERY COMMITTEE
(SUBCOMMITTEE: MICROVASCULAR
AND RECONSTRUCTIVE SURGERY)**
Yadranko Ducic, MD, Chair, 2011
Patrick J. Byrne, MD, Senior Advisor
Mark K. Wax, MD, Senior Advisor
Kal Ansari, MD, 2009
Daphne A. Bascom, MD, 2009
Michael Fritz, MD, 2009
Jason Kim, MD, 2009
Jeffrey Rawnsley, MD, 2010
Kofi O. Boahene, MD, 2011
Brian B. Burkey, MD, 2011
Grigoriy Mashkevich, MD, 2011
Ann Holton Jenne, staff liaison

**SPECIALTY SURGERY COMMITTEE
(SUBCOMMITTEE ON VASCULAR
ANOMALIES)**
Stephen S. Smith, MD Chair, 2011
Marcelo Hochman, MD, Senior Advisor
Wm. Russell Ries, MD, 2009
Mark F. Rounds, MD, 2011
Edwin F. Williams, III, MD, 2011
Ann Holton Jenne, staff liaison

STRATEGIC DEVELOPMENT
H. Devon Graham, MD, Chair, 2009
Harrison C. Putman, III, MD, Sr. Advisor
Devinder S. Mangat, MD, Senior Advisor
Robert L. Simons, MD, Senior Advisor
Peter A. Adamson, MD, 2009
Babak Azizzadeh, MD, 2009
Andrew C. Campbell, MD, 2009
Paul J. Carniol, MD, 2009
Carla C. Graham, MD, 2009
John M. Hodges, MD, 2009
Paul S. Nassif, MD, 2009
William H. Truswell, MD, 2009
Andrew J. Jacono, MD, 2010
Maurice M. Khosh, MD, 2010

David V. Martini, MD, 2010
Paul A. Sabini, MD, 2010
Payam Daneshrad, MD, 2011
Phillip D. Knott, MD, 2011
Harry Mittelman, MD, 2011
Mark F. Rounds, MD, 2011
Ife O. Sofola, MD, 2011
Jacob D. Steiger, MD, 2011
Ann Holton Jenne, staff liaison

**TENTH (10th) INTERNATIONAL
SYMPOSIUM COMMITTEE**
Shan R. Baker, MD, Symposium Chair,
2010
Philip J. Miller, MD, Program Chair, 2010
Fazil Apaydin, MD, 2010
Roxana Cobo, MD, 2010
Ted A. Cook, MD, 2010
Jose Juan Montes, MD, 2010
Pietro Palma, MD, 2010
Carlos A. Pedrosa, MD, 2010
Vito C. Quatela, MD, 2010
Gilbert J. Nolst Trenite, MD, 2010
Caryl Herrington, staff liaison

AAFP RS Foundation Committee Charges 2008-2009

The charges for each committee are those provided in the Bylaws or established as standing charges by virtue of past actions of the Foundation Board.

AWARDS COMMITTEE

Recommends criteria for all awards to the Foundation Board; works with staff to publicize awards; selects award recipients; coordinates with the Fellowship Research Review subcommittee for recommendation of the Roe and Gillies awards; and may make recommendations concerning other new awards to Foundation or Academy Board.

CME COMMITTEE

Reviews the overall CME program; sets CME educational standards; makes recommendations to the Foundation Board for courses to be scheduled; designs and evaluates individual courses to be offered for CME credit each year; assesses educational needs and creates objectives for CME activities; reviews financial statements from courses and the CME program as a whole; recommends policies to the Foundation Board regarding the CME program; sets location and dates of courses; seeks course directors and faculty members as appropriate to the topic and content of individual courses; and reviews member proposals for courses.

ENDOWMENT INVESTMENT COMMITTEE

Handles the investment of endowment funds, which are recommended to the Foundation Board. The six-person committee consists of the treasurer, treasurer-elect, executive vice president, two fellows of the Academy, and a chair appointed by the Foundation Board of directors. The chair and Academy fellows serve a three-year term and may be reappointed. This committee will report to the Foundation Board of directors at least annually.

EXHIBIT ADVISORY COMMITTEE

Reviews and develops appropriate programs and benefits for exhibitors, suppliers, and vendors at meetings and courses; identifies prospective exhibitors; serves to facilitate open lines of communication.

FACE TO FACE COMMITTEE

Develops recommendations and programming which offer the services of AAFP RS members on a pro bono basis; works with the Cleft Lip/Cleft Palate, Craniomaxillofacial and Microvascular committees regarding outreach programs.

FELLOWSHIP COMMITTEE

As a full committee and via recommendations of its two subcommittees (Fellowship Curriculum and Fellowship Research Review), the committee recommends overall policies and

procedures of the Fellowship Program to the Foundation Board of Directors; encourages participation in the fellowship program; and recommends to the Foundation Board of Directors a curriculum for the fellowship program. The Fellowship Research Review Subcommittee reviews all fellowship abstracts and papers and selects the winners for the John Orlando Roe and Sir Harold Delf Gillies Awards. The Fellowship Curriculum Subcommittee reviews and produces up-to-date study materials for the end-fellowship exam.

FELLOWSHIP REVIEW COMMITTEE

As a full committee, it recommends policies and procedures for review of all fellowship programs; recommends directors to the Foundation Board of Directors; reviews the work of all directors; and provides documentation as needed to pursue accreditation for the fellowship program in conjunction with the Fellowship Committee.

FOUNDERS CLUB

Helps support the creation of an international education and training program; helps collect, retain, and display historical memorabilia instructive on the subject of the development of facial plastic surgery; and helps support fund raising for the Foundation and other projects and tasks which are consistent with the Foundation's programs.

Fellowship Program

MAINTENANCE OF CERTIFICATION COMMITTEE

Works with certifying boards to disseminate information to AAFPRS members on MOC requirements; designs and develops MOC materials for courses, distance learning, and other means; coordinates all AAFPRS committees and staff activities relative to MOC; and recommends policies and procedures to the Foundation Board regarding MOC.

RESEARCH COMMITTEE

Recommends to Foundation Board of Directors criteria, encourages entries, and selects winners for the Resident Research, Investigator Development, and the Bernstein Research Grants; oversees all research activities and encourages research in facial plastic surgery at all levels; identifies research topics in facial plastic surgery and makes recommendations to the Foundation or Academy Board of Directors.

SPECIALTY SURGERY COMMITTEE

Cleft Lip/Palate Subcommittee.

Develops recommendations for programming that result in providing cleft lip and palate training; works with the FACE TO FACE committee to identify possible outreach programs.

Craniofacial Subcommittee.

Develops recommendations and programming to provide training in craniofacial anomalies, skull base surgery and other maxillofacial procedures; works with the FACE TO FACE committee to identify potential outreach programs to exchange information and technology and to provide opportunities for surgical experience; develops a working relationship with the Surgical Workshop Studies Committee.

Microvascular and Reconstructive Subcommittee. The charge of this subcommittee is to provide a more formalized forum and outlet for microvascular and major reconstructive head and neck surgery issues within the AAFPRS community and beyond.

Vascular Anomalies Subcommittee.

This committee shares information and provides a scientific forum to discuss the treatment and management of patients with anomalies and vascular birthmarks.

STRATEGIC DEVELOPMENT

This committee works in partnership with the AAFPRS and the AAFPRS Foundation Board. The Board is responsible for ensuring that the organization's mission is carried out, and of necessity, the Strategic Development Committee finds the resources to do so.

The Fellowship Program of the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery is widely respected by the medical community and represents the finest post-graduate program in the world for the training of facial plastic surgeons. Since its beginning in 1969, this program has prepared more than 500 highly specialized experts to be educators and leaders in facial plastic surgery. These individuals and their fellowship directors have performed a tremendous service to the Academy and the specialty through the development and dissemination of new procedures, improvement of patient care, refinement of surgical techniques, and the promotion of confidence in and respect for the specialty.

Fellowship directors are recognized authorities in the teaching and practice of facial plastic surgery. They are private practitioners, academicians, or a combination of both. Applicants are encouraged to choose directors whose practice and teaching best supplement their residency training and future practice plans and teaching interests. Although the clinical experience may vary according to individual director's interest and experience, the fellowship criteria and curriculum, including videotapes, provide a common base for the program. Applicants indicate to which directors they want their applications sent and are encouraged to directly contact the directors who have received their applications. As directors review applications, they contact applicants directly to set interviews.

All programs follow a standard curriculum. Oral and written examinations are administered after the completion of a 12-month fellowship. To be eligible, applicants must have completed a residency in otolaryngology or plastic surgery that is approved by the Accreditation Council for Graduate Medical Education or be board-certified by the American Board of Otolaryngology or the American Board of Plastic Surgery.

Contact the Academy office (703) 299-9291, ext. 228 for more information regarding the following fellowship directors and their programs.

Fellowship Directors

Peter A. Adamson, MD, Toronto, Ontario
 Daniel Alam, MD, Cleveland, OH
 Shan R. Baker, MD, Ann Arbor, MI
 William H. Beeson, MD, Indianapolis, IN
 Patrick J. Byrne, MD, Baltimore, MD
 Mack Cheney, MD, Boston, MA
 Minas Constantinides, MD, New York, NY
 Peter D. Costantino, MD, New York, NY
 Richard E. Davis, MD, Miami Beach, FL
 Karl J. Eischach, MD, Albuquerque, NM
 David A.F. Ellis, MD, Toronto, Ontario
 Edward H. Farrior, MD, Tampa, FL
 Andrew Frankel, MD, Beverly Hills, CA
 Alvin I. Glasgold, MD, Highland Park, NJ
 Michael Godin, MD, Richmond, VA
 Tessa Hadlock, MD, Boston, MA
 Peter A. Hilger, MD, Edina, MN
 Andrew Jacono, MD, Great Neck, NY
 Calvin M. Johnson, Jr., MD, New Orleans, LA
 Sheldon S. Kabaker, MD, Oakland, CA
 Gregory S. Keller, MD, Santa Barbara, CA
 Robert M. Kellman, MD, Syracuse, NY
 Russell W.H. Kridel, MD, Houston, TX
 Keith A. LaFerriere, MD, Springfield, MO
 Wayne F. Larrabee, Jr., MD, Seattle, WA
 William Lawson, MD, DDS, New York, NY
 Corey S. Maas, MD, San Francisco, CA
 Devinder S. Mangat, MD, Cincinnati, OH
 Lawrence J. Marentette, MD, Ann Arbor, MI

E. Gaylon McCollough, MD, Gulf Shores, AL
 Harry Mittelman, MD, Menlo Park, CA
 Sam P. Most, MD, Stanford, CA
 Craig S. Murakami, MD, Seattle, WA
 Ira D. Papel, MD, Baltimore, MD
 Steven J. Pearlman, MD, New York, NY
 Stephen W. Perkins, MD, Indianapolis, IN
 Vito C. Quatela, MD, Rochester, NY
 Gregory J. Renner, MD, Columbia, MO
 Daniel E. Rousso, MD, Birmingham, AL
 William E. Silver, MD, Atlanta, GA
 Robert L. Simons, MD, N. Miami Beach, FL
 Fred J. Stucker, MD, Shreveport, LA
 Jonathan M. Sykes, MD, Sacramento, CA
 Sherard A. Tatum, III, MD, Syracuse, NY
 J. Regan Thomas, MD, Chicago, IL
 Dean M. Toriumi, MD, Chicago, IL
 Tom D. Wang, MD, Portland, OR
 Mark K. Wax, MD, Portland, OR
 Edwin F. Williams, III, MD, Albany, NY
 Brian J. Wong, MD, Irvine, CA

Grants and Awards

Coordinated by the Research Committee of the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery. Since 2002, the AAFPRS Foundation has participated with the AAO-HNS' Centralized Otolaryngology Research Efforts (C.O.R.E.)

To accomplish the objective of educating investigators to prepare competitive grant applications we will be abiding by C.O.R.E.'s standards and application guidelines. Please refer to www.entnet.org for the grants and application form.

The LESLIE BERNSTEIN GRANTS PROGRAM

RESIDENT RESEARCH GRANT

Two resident research grants up to \$5,000 each may be awarded to residents who are AAFPRS members. The purpose of this grant is to stimulate resident research in projects that are well conceived and scientifically valid. Awards will be made prior to July 1 of each year. Residents are encouraged to enter early in their training so that their applications may be revised and resubmitted if not accepted the first time. Residents at any level may apply, even if the research work will be done during their fellowship year. The Resident Research Grant may be integrated with other funding to complete a project.

INVESTIGATOR DEVELOPMENT GRANT

The Investigator Development Grant supports the work of a young faculty member in facial plastic surgery conducting significant clinical or laboratory research and the training of resident surgeons in research. The applicant must be an AAFPRS member. The one-year, \$15,000 grant is awarded in July.

THE BERNSTEIN GRANT

This \$25,000 research grant may be presented annually to any AAFPRS member to undertake research that will advance facial plastic and reconstructive surgery. The award is endowed by a grant from Leslie Bernstein, MD, DDS. The research must be original and grants may be used as seed-money for research projects.

Coordinated by the Awards Committee of the Educational and Research Foundation for the American Academy of Facial Plastic and Reconstructive Surgery

BEN SHUSTER MEMORIAL AWARD

The Ben Shuster Memorial Award is presented for the most outstanding research paper by a resident or fellow in training on any clinical work or research in facial plastic and reconstructive surgery delivered at a national meeting (or its equivalent) between March 1 and the following February 28. Each entrant must be the sole or senior author and an AAFPRS member. Studies prepared during the first year after completion of residency training will be considered, provided research was conducted during the author's residency or fellowship. A certificate and an award of \$1,000 are presented.

For more information concerning guidelines and research and awards requirements, deadlines and application forms please go directly to the Academy's Web site www.AAFPRS.org and click on Awards & Grants under the Physician's section.

All nominations for the Community Service, F. Mark Rafaty Memorial, John Dickinson Teacher, and William K. Wright Awards may be submitted by AAFPRS members to the Awards Committee no later than February 1.

IRA TRESLEY RESEARCH AWARD

The Ira Tresley Research Award recognizes the best original research in facial plastic surgery by an AAFPRS member who has been board certified for at least three years. Papers presented at a national meeting (or its equivalent) between March 1 and the following February 28, are eligible for this award. A certificate and an award of \$1,000 are presented.

JOHN ORLANDO ROE AWARD*

A certificate and an award of \$1,000 will be presented each year to the graduate fellow who submits the best clinical research paper written during fellowship.

SIR HAROLD DELF GILLIES AWARD*

A certificate and an award of \$1,000 will be presented each year to the graduate fellow who submits the best basic science research paper written during fellowship.

*The Roe and Gillies Awards are automatically selected from papers submitted by Academy fellows during their fellowship year.

WILLIAM WRIGHT AWARD

This award may be presented each year to an AAFPRS member who has made outstanding contributions to facial plastic and reconstructive surgery.

COMMUNITY SERVICE AWARD

This award may be presented annually to an AAFPRS member who has distinguished himself/herself by providing and/or making possible free medical service to the poor in his/her community.

F. MARK RAFATY MEMORIAL AWARD

This award may be presented each year to an AAFPRS member who has made outstanding contributions to facial plastic and reconstructive surgery.

JOHN DICKINSON TEACHER OF THE YEAR AWARD

This award honors an AAFPRS fellow member for sharing knowledge about facial plastic and reconstructive surgery with the effective use of audiovisuals in any one year. The Awards Committee seeks nominations from the Electronic Media Subcommittee each year.

RESIDENCY TRAVEL AWARD

Two Residency Travel Awards of \$500 each may be awarded to the most outstanding paper in facial plastic and reconstructive surgery primarily authored by a resident or medical student in training. The paper must be submitted by February 1 for consideration, and to be presented at that year's Fall Meeting.

Coordinated by the International Symposium Committee and the AAFPRS Foundation Board of Directors.

EFRAIN DAVALOS AWARD

The Efrain Davalos Award is an international award which may be presented every four or five years in conjunction with the Foundation's International Symposia. The award recognizes those outside the U.S. and Canada who have made a significant contribution to facial plastic surgery.

BYLAWS

of the Educational and Research Foundation of the American Academy of Facial Plastic and Reconstructive Surgery

Article I

OBJECTIVES AND PURPOSES

The purposes of the Foundation, in addition to the purposes and limitations contained in its Certificate of Incorporation, are exclusively to foster, promote, support, augment, develop, and encourage investigative knowledge and charitable and humanitarian application of facial plastic and reconstructive surgery; to encourage the teaching and education of this medical specialty by developing, publishing, and copyrighting educational materials to promote specialized training for medical personnel in facial plastic and reconstructive surgery; to foster, promote, support, augment, develop and encourage education of non-medical personnel engaged in scientific endeavors relating to the field of facial plastic and reconstructive surgery; exclusively to foster, promote, support, develop; and encourage educational, charitable, humanitarian, and scientific purposes, provided, however, no part of the net earnings of the Foundation shall inure to the benefit of any private shareholder or individual; no substantial part of the activities of the Foundation is carrying on propaganda or otherwise attempting to influence legislation; and the Foundation shall not participate in, or intervene in (including the publishing or distributing of statements) any political campaign on behalf of any candidate for public office. The Foundation shall possess all powers which a corporation organized under the Federal Not-For-Profit Corporation Act of the State of Illinois, as the same from time to time may be amended, shall possess; all powers which are not in conflict with the previously mentioned purposes for which the Foundation is organized, including but not limited to the power to purchase, take, receive, lease as lessee or lessor, take by gift, devise or bequest, or otherwise acquire, own, hold, use, invest in, and otherwise deal in and with any real or personal property or any interest therein situated in or out of the State of Illinois; sell, convey, pledge, mortgage, assign, and otherwise transfer or dispose of all or any part of its property and assets; from time to time to use, distribute, contribute, expend, donate, apply and appropriate all of its property and assets, and all proceeds and avails thereof and income and profit derived therefrom exclusively for charitable or scientific purposes; provided, however, the Foundation shall not engage in any business which would disqualify it from being exempt from taxation under Sections 501(a) or (c)(3) of the Internal Revenue Code of 1954, as amended, or any subsequent law of the United States of America.

Article II

MEMBERSHIP

Section 1. Members

The board of directors may establish membership categories and criteria for membership. For purposes of these bylaws, members of the American Academy of Facial Plastic and Reconstructive Surgery (hereinafter "the Academy") shall also be considered members of the Foundation and shall adhere to all the requirements and categories of membership of the Academy.

Section 2. Resignation

A member may resign at any time by written resignation filed with the secretary of the Foundation, and a member may be

removed for cause by the affirmative vote of a majority of the whole board of directors.

Article III

BOARD OF DIRECTORS

Section 1. General Powers

The corporate powers, property, and affairs of the Foundation shall be exercised, conducted, and controlled by its board of directors. The board of directors shall be the overall policy making body of the Foundation and shall have overall responsibility for the programs and business of the Foundation.

Section 2. Structure

The board of directors shall consist of the following officers of the American Academy of Facial Plastic and Reconstructive Surgery (hereinafter "the Academy"): the president, immediate past president, president-elect, secretary, treasurer, group vice president for education and group vice president for research, awards and development, and one public member appointed by the board. The group vice president for membership and society relations, the group vice president for regulatory and public affairs, and the executive vice president of the Academy shall be members of the Foundation's board of directors without vote.

Section 3. Board Selection and Tenure

The terms of office for directors from the Academy shall be for the duration of their terms as officers in those capacities of the Academy. The public member shall be appointed to a term of one year and may be re-appointed for two additional one-year terms.

Section 4. Regular Meetings

Three regular meetings of the board of directors shall be held each year in conjunction with Academy executive committee meetings. The board of directors may provide by resolution the time and place to hold additional regular meetings of the board without other notice than such resolution.

Section 5. Special Meetings

Special meetings of the board of directors may be called by the president or by a majority of the directors. The person or persons authorized to call special meetings of the board may fix the time and place to hold any special meetings of the board called by them.

Section 6. Notices

Notice of any regular, special, or telephone meeting of the board of directors shall be sent to each director not less than fifteen days before such meeting. Notice may be waived in writing by a director either before or after a meeting. Neither the business to be transacted at nor the purpose of any regular or special meeting of the board need be specified in the notice or waiver of notice of such meeting.

Section 7. Quorum

A majority of the board of directors shall constitute a quorum. A majority of the quorum at any meeting of the board shall consti-

tute action by the board unless otherwise provided by law or by these bylaws.

Section 8. Offices and Place of Meeting

The directors may hold their meetings and have one or more offices and keep the books and records of the Foundation at any office of the Foundation or at such place or places as the board of directors may from time to time determine, either within or without the state of Illinois.

Section 9. Vacancy

Any vacancy occurring in the board of directors shall be filled by the Foundation.

Section 10. Compensation

Directors shall not receive compensation for their services, but by action of the board of directors, reimbursement of expenses may be allowed for attendance at meetings of the board or for official representation of the Foundation.

Section 11. Action Without Meeting

Any action required or permitted to be taken at a meeting of the board of directors may be taken without a meeting if a consent in writing, setting forth the action to be taken, is signed by all directors entitled to vote.

Section 12. Telephone Meetings

Meetings may be conducted by telephone provided that all directors participating in such telephone meetings may communicate with each other. A majority of directors shall constitute a quorum for telephone meetings, and the act of the majority of the quorum shall constitute action by the board.

Section 13. Indemnification

The Foundation shall indemnify any and all of its present and former directors, officers, employees, agents, committee members, or any person who may have served at its request or by election as a director or officer of another corporation or association in accordance with policies adopted from time to time by the board of directors.

Article IV OFFICERS

Section 1. Number and Identification of Officers — Election, Term of Office, and Removal

The officers of the Foundation shall be a president, president-elect, treasurer, secretary, group vice president for education, group vice president for research, awards, and development, executive vice president, and such other officers as the board of directors may from time to time determine. The president, president-elect, secretary, treasurer, group vice president for education, group vice president for research, awards, and development, and executive vice president of the Academy shall serve as president, president-elect, secretary, treasurer, group vice president for education, group vice president for research, awards, and development, and executive vice president of the Foundation by virtue of their offices.

Section 2. President

The president shall be the chief spokesperson for the Foundation. The president shall preside at all meetings of the board of directors when he is present and perform all duties incidental to the office of the president and such other duties as may be prescribed by the board of directors from time to time.

Section 3. President-Elect

The president-elect, in the absence or disability of the president, shall perform the duties and exercise the powers of the president, and shall perform such other duties as the board of directors shall prescribe.

Section 4. Executive Vice President

The Academy's executive vice president manages the Foundation's programs and business. The executive vice president shall be given the necessary authority and be held responsible for the direction, administration, and coordination of the Foundation in all its activities, subject only to such policy as may be adopted and such orders as may be issued by the board of directors.

Section 5. Group Vice President for Education

The vice president for education shall be responsible for the supervision and direction of the Foundation's educational activities and shall coordinate the activities of the following committees:

- (a) CME
- (b) Fellowship
- (c) Fellowship Review
- (d) Specialty Surgery

Section 6. Group Vice President for Research, Awards, and Development

The group vice president for research, awards, and development shall be responsible for the supervision and direction of the Foundation's activities in the areas of research, awards, and development and shall coordinate the activities of the following committees:

- (a) Awards
- (b) Exhibit Advisory
- (c) FACE TO FACE
- (d) Friends of FACE TO FACE
- (e) Research
- (f) Strategic Development

Section 7. Secretary

The secretary ensures that accurate minutes are kept of all board of directors meetings, ensures that all notices are given as required by the Foundation or required by law, and oversees the keeping of a register of the address of each member. The secretary shall perform all duties incidental to the office and such other duties as from time to time may be assigned by the president or board of directors.

Section 8. Treasurer

The treasurer oversees the administration of all funds, securities, and assets of the Foundation and reports regularly to the board of directors on the Foundation's financial status. The treasurer shall present an annual budget to the board of directors for its review and adoption. The treasurer shall perform other duties incidental to the office as may be prescribed by the board of directors or president.

Article V COMMITTEES

The board of directors may create standing or special committees with such powers and duties as the board of directors may determine.

Section 1. Standing Committees

There shall be the following standing committees:

(a) Endowment Investment Committee. The endowment investment committee shall consist of the treasurer, treasurer-elect, the executive vice president, who shall serve ex-officio, an Academy fellow, and a chair appointed by the Foundation board. The chair and Academy fellow serves a three-year term and may be re-appointed. The committee shall report at least annually to the board.

(b) coordinated by the group vice president for education:

- (i) CME
- (ii) Fellowship
- (iii) Fellowship Review
- (iv) Specialty Surgery

(c) coordinated by the group vice president for research, awards, and development:

- (i) Research
- (ii) Awards
- (iii) FACE TO FACE
- (iv) Strategic Development
- (v) Exhibit Advisory
- (vi) Friends of FACE TO FACE

Section 2. Duties

The duties and responsibilities of standing committees shall be defined by the board of directors if not specified in these bylaws. Unless otherwise specified by the board of directors, actions by the committees are in the nature of advice to the board of directors and do not represent the policies of the Foundation unless and until adopted.

Section 3. Appointment

The group vice presidents for education and research, awards, and development shall make recommendations to the president-elect for members and chairs of committees under their jurisdiction. The chairs shall have served at least one full year on their respective committees and shall be fellows of the Academy. The president-elect shall submit a list of proposed candidates for committee members and committee chairs for those terms about to expire at the fall meeting of the board for its approval.

Section 4. Terms

All committee members, unless otherwise specified herein, may serve two, three-year staggered terms. In addition, committee chairmen may serve an additional three-year term. Terms of committee chairs will be staggered. The CME chair serves a two-year term and may be reappointed at the discretion of the Board.

Section 5. Ad Hoc Committees

Ad hoc committees may be created by the board of directors for a one-year period, unless otherwise specified. The president, with concurrence of the board, shall appoint the members and designate the chair of such committees.

Section 6. Composition

The size of each standing or ad hoc committee, unless otherwise specified herein, and duties of each committee shall be determined by the board of directors. At each regular meeting of the board of directors, the chair of each standing committee shall deliver the committee's report.

Article VI ANNUAL REPORT

The Foundation shall prepare an annual report for publication and distribution to the members and other interested persons and organizations.

Article VII SEAL

The board of directors shall provide a corporate seal, which shall be in the form of a circle and shall have inscribed thereon the name of the Foundation in the outer circle and the word "seal" in the inner circle.

Article VIII OFFICES

The Foundation shall have such offices in Illinois or elsewhere as may be determined by the directors from time to time.

Article IX AMENDMENTS

These bylaws may be amended, altered, or repealed, in whole or in part, either

(a) by vote of two-thirds of the members of the board of directors at any regular or special meeting of such board, if written notice of such meeting shall be given as required under the applicable provisions of Article III of these bylaws and if such notice also shall set forth the action proposed with respect to these bylaws, or

(b) by the action taken under the provisions of Section 11 of Article III.

Amended, January 9, 1986

Amended, January 14, 1987

Amended, October 2, 1993

Amended, September 21, 1994

Amended, September 13, 1995

Amended, September 5, 1997

Amended, September 20, 2004



American Board of Facial Plastic and Reconstructive Surgery (ABFPRS)

115C South St. Asaph Street
Alexandria, VA 22314
Phone: (703) 549-3223; Fax: (703) 549-3357
Web site: www.abfprs.org; E-mail: lwirth@abfprs.org

The American Board of Facial Plastic and Reconstructive Surgery (ABFPRS) certifies surgeons exclusively in facial plastic and reconstructive surgery. A surgeon eligible for ABFPRS certification:

- Has completed an approved residency in one of the two surgical specialties that include identifiable training in all aspects of facial plastic surgery (otolaryngology/head-and-neck surgery or plastic surgery);
- Is double boarded, having earned prior certification in one of those specialties through the American Board of Medical Specialties or the Royal College of Physicians and Surgeons in Canada;
- Has successfully completed a two-day examination;
- Has submitted for peer-review an acceptable record of at least two years' clinical experience, including operative reports of a minimum 100 facial plastic surgeries;
- Operates in an accredited facility; and
- Holds proper licensure and subscribes to the ABFPRS Code of Ethics.

The ABFPRS examination also is a component of the AAFPRS Foundation Fellowship Program.

EXECUTIVE COMMITTEE

Shan R. Baker, MD, President
Ira D. Papel, MD, Vice President
Mark V. Connelly, MD, Secretary
Kriston J. Kent, MD, Treasurer
Devinder S. Mangat, MD, Immediate Past President

BOARD OF DIRECTORS

Cynthia M. Gregg, MD
Edward H. Farrior, MD
David B. Hom, MD
Mimi S. Kokoska, MD
Theda C. Kontis, MD
Mary Lynn Moran, MD
Craig S. Murakami, MD
Vito C. Quatela, MD
John S. Rhee, MD
William H. Truswell, MD
Tom D. Wang, MD
Catherine P. Winslow, MD

STAFF

Laurie Wirth, Executive Director
Missy Harp, Finance, Test, and Administration Manager
Janice Knouse, Credential and Administrative Assistant
Elizabeth Price, Medical Test Editor



International Federation of Facial Plastic Surgery Societies

Facial plastic surgery is the surgical specialty, which focuses upon treatment of all defects of the face and neck: congenital, traumatic, neoplasm related, or results of the aging process. The International Federation of Facial Plastic Surgery Societies (IFFPSS) is a group of societies of facial plastic surgeons from various countries around the world. This Federation was formed in 1997 after extensive discussions initiated by the American Academy of Facial Plastic and Reconstructive Surgery. The member societies of the IFFPSS are:

- American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS)
- ASEAN Academy of Facial Plastic and Reconstructive Surgery
- Australasian Academy of Facial Plastic Surgery (AAFPS)
- Brazilian Academy of Facial Plastic Surgery (BAFPS)
- Canadian Academy of Facial Plastic and Reconstructive Surgery (CAFPRS)
- Colombian Society of Facial Plastic Surgery and Rhinology (CSFPSS)
- European Academy of Facial Plastic Surgery (EAFPS)
- Mexican Society of Rhinology and Facial Surgery (MSRFS)
- Taiwan Academy of Facial Plastic and Reconstructive Surgery (TAFPRS)

The activities of the IFFPSS are governed by the Board of Directors, which meets on a semi-annual basis. Each charter member society and full member society is represented by two delegates to the Board of Directors, usually its current president and one other delegate. Associate member society is represented by one delegate to the Board of Directors. The ongoing efforts are coordinated by the Executive Committee of the Board of Directors.

The present members of the Executive Committee are:

| | |
|----------------|---|
| President | Roxana Cobo, MD (CSFPSS) |
| Past President | Gilbert J. Nolst Trenité, MD (EAFPS) |
| Vice President | Wayne F. Larrabee, Jr., MD (AAFPRS) |
| Secretary | Jose Juan Montes B., MD (MSRFS) |
| Treasurer | Pietro Palma, MD (EAFPS) |

Fellowship Examination Dates

All surgeons who participate in the Fellowship Program of the Educational and Research Foundation for the AAFPRS must take an oral and written examination, which is administered by the American Board of Facial Plastic and Reconstructive Surgery. Passing the examination is not only a requirement for completion of a fellowship, but also one requirement for certification by the ABFPRS. For details about the ABFPRS examination and certification programs, visit: www.abfprs.org.

| Fellowship Completion Date | Examination Date | Location |
|----------------------------|------------------|----------------|
| June 2009 | June 27-28, 2009 | Washington, DC |
| June 2010 | June 26-27, 2010 | Washington, DC |
| June 2011 | June 18-19, 2011 | Washington, DC |