

Newsletter Date
January 2009

Society of Medical Consultants to the Armed Forces

www.smcaf.org

SMCAF 2009 BUSINESS MEETINGS

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*The Society of Medical Consultants to the Armed Forces
2009 meeting dates are as follows:*

*The SMCAF spring council meeting will be held at the Uniformed Services
University of the Health Sciences (USUHS) on Friday April 24, 2009.*

Council Members will be notified separately by letter.

*This year's annual meeting is being held during the AMSUS Convention
November 15-20, 2009 in St. Lois, MO. The United States Army will be the
host for this year's meeting. Details will be published as soon as they become
available.*

Mark your calendars and start making plans.

2008-2009 Council

President: A. Mason Ahearn, M.D.

Vice President: Thomas G. Peters, M.D.

Secretary Treasurer: Michael S. Clarke, M.D.

Councilors

Fred A. Cecere, M.D.

Thomas G. Peters, M.D.

David M. Lichtman, M.D.

George P. Taylor, Jr., M.D.

Enrique Mendez, Jr., M.D. Honorary Councilor

James A. Zimble, M.D. Honorary Councilor

Michael J. Scotti, Jr., M.D. Past President (deceased)

Peter F. Hoffman, M.D. (acting for Dr. Scotti)

Harold M. Koenig, M.D. Past President

Committee Chairmen

John R. Pierce, M.D.

A. Herbert Alexander, M.D.

Edmund G. Howe, MD.

Peter F. Hoffman, M.D.

Joel C. Labow, M.D.

Kenneth G. Swan, M.D.

George K. Anderson, M.D.

A. Mason Ahearn, M.D.

AMA Representative

Mary Catherine Nace, M.D.

Delegate

Archives & Medical History

Electronic Media & Communications

Ethical Issues in Military Medicine

Legislative & Legal

Medical Education

Membership

Professional Services

Recruitment & Retention

From The President

We had a fine Annual Meeting in October! The papers were great, and, as always, we enjoyed fine fellowship with our attending members. Several people asked about obtaining slides of the presentations. Happily, I can inform you that with one or two exceptions (due to security classification) Margo has a DVD with all PPT slides. Anyone who wishes them may contact her at smcaf@usuhs.mil. Also, all presenters shown on the DVD have given permission for you to use any of the slides for non-commercial educational purposes.

Lots of great things are happening on our website: www.smcaf.org !! We've added to our history section a summary of SMCAF accomplishments during the new decade. Thanks to Drs. Rusty Sloan and Harold Koenig for that narrative! We've also added a section on "Members in the News". Anyone wishing to include a media release for posting in this section, please just send it to Margo at smcaf@usuhs.mil. Finally, we've added an "Annual Meeting Highlights" photo section, for you poor devils who were unfortunate enough not to be with us...! Dr. Herb Alexander, our 2008 Seal Award Winner, is really shaping up our site! We're going to add two more sections: "Recent Member Articles" and "Committee Activities". We are in the process of reviewing copyright details for such listings. If you wish them posted, send your recent articles to Herb at herb_alexander@msn.com and hit the site soon to review Committee Activities.

Dr. Randy Howe has been very active on our Committee on Ethical Issues in Military Medicine. He has met with Dr. Lonnie Bristow, Past President AMA and Past Chairman, Board of Regents, USUHS. Dr. Bristow has proposed a method by which medical personnel in the field might feel more comfortable in reporting "activities which they may ethically question", rather than through the normal chain-of-command. He proposes a new circuit, medics reporting to the military clergy, and then a joint report to the command. He has suggested SMCAF do a White Paper on this subject, and this idea will be presented to SMCAF Council in April.

In October, Drs. Anderson and Peters and I met with MG Carla Hawley- Bowland, CG, NARMC and WRAMC and Chief US Army Medical Corps as well as her Chiefs of Consultants and of GME. This meeting was at the request of LTG Eric Schoomaker, Army SG. We discussed the roles of consultants in general and of SMCAF consultants in particular. By their kind invitation, we plan to attend the Army Annual Consultants Meeting in June. We are also happy to report that Dr. Hawley-Bowland is a new member of SMCAF! It's always great when senior active duty members rejoin SMCAF as Active members. I am happy to report that Dr. Peach Taylor has been elected to the SMCAF Council this year, and that Dr. Mike Cowan has converted his SMCAF membership to Active. Both are on AMSUS' Board of Managers and will be of great help to us in that arena! Welcome to both Peach and Mike!

The Allgood Memorial Project is moving along. USUHS has officially accepted the memorial for placement on its campus. To get a concept materialized, in November Dr. Dale Smith and I met in San Antonio with the sculptor who had just completed the desk-top bronze to be the annual Allgood Award piece presented by SOMOS, as Brian was an Army orthopaedist. His name is Doug Roper. Doug has kindly done some conceptual work for us *gratis*, and a sketch is included in this Newsletter. It will serve to get us started. Also included is the quotation by John Stuart Mill, which we wish the USUHS students to ponder as they reflect on this Memorial. The project will top 50K. So far, we have institutional gifts of 10K total from SMCAF and SOMOS. Now, we need to begin individual pledging. Of course, we hope our major funding to be corporate, and we are working with Bryce Redington at Jackson Foundation on this endeavor! SOMOS will get started with its foundation arm, True Research. SMCAF members, please start pledging and contributing!!!!

The major portion of my message concerns the work we have done on a proposed SMCAF/AMSUS partnership, not merger. That is carried as a separate insert.

A. Mason Ahearn, MD, President amahearn2@yahoo.com

REPORT ON SMCAF/AMSUS PARTNERSHIP

Background details are found in previous Newsletters and in the Minutes Section of this one.

“The Dance Study Group” was converted to a Standing Ad-hoc Committee in October. Subject to Council Approval in April, I have named Dr. Tom Peters as its Chairman. Council approved Dr. Peters on Oct 26. In November, AMSUS kindly hosted me in San Antonio for its Annual Meeting. At their Board of Managers Meeting, I presented the SMCAF proposal that our two organizations work toward a merger, with the provisions outlined in previous publications. Then I presented the proposal that SMCAF merge its Annual Meeting with AMSUS’ on a trial basis in autumn 2009 in St. Louis. The idea is that SMCAF organize and lead the Physician Section Portion of the AMSUS Meeting. This day-long session, usually on Wednesdays, would be essentially the SMCAF professional meeting. Drs. Tom Peters and Dave Lichtman have kindly offered to coordinate the program this year. We are looking at our Council Meeting on Tuesday afternoon. It’s possible that we could sandwich in a cocktail hour after that with members and spouses. The International Dinner is on Tuesday evening, and we can’t conflict with that. Then on Wednesday, we are thinking about hosting a “SMCAF Luncheon” with perhaps a “big ticket” speaker, as our meeting expenses will be miniscule this year. We would invite SMCAF spouses to this luncheon. This luncheon would be open to all AMSUS physicians, and it would be a great way to increase our exposure as the senior invitational physician tier of AMSUS. While we would all attend the AMSUS Awards Banquet Wednesday evening, we might wish to present our own Seal Award at our luncheon. The AMSUS awards are all published in advance, and we like our Seal Award to be a surprise. SMCAF members would have the opportunities to interact with a much larger professional mix, to attend other venues, to visit a very meaningful exhibit panorama, and to feature our Society. Frequently AMSUS selects central US cities, making travel easier for our mid-western and west-coast members. AMSUS hotel rates are negotiated to the prevailing per-diem rate, certainly less than we pay in Bethesda. The St. Louis meeting is November 15 -20. **PLEASE MARK YOUR CALENDARS AND SUPPORT US IN THIS HISTORIC ENDEAVOR!** We are looking into an abbreviated Tuesday through Thursday registration fee for members who cannot make the whole meeting. The AMSUS Board was uniformly receptive to an ultimate partnership and was particularly interested in SMCAF management of the AMSUS Physician Section meeting. We concluded that SMCAF will work with the Physician Section Committee this year, under the sponsorship of the Army SG. The kick-off meeting here is in Washington, Jan 23. I cannot attend, but Dr. George Anderson is going to represent SMCAF. We have just recruited to SMCAF the AMSUS 2009 Physician Section Director, Dr. Elspeth C. (Cam) Ritchie. Cam will be working with us all on the Wednesday program. Welcome, Cam! **PAPERS ANYONE???**

In December, Council authorized Margo Cabrero to begin negotiations with AMSUS about transferring her employment and the SMCAF membership data base. Margo and Jose met with Dr. Anderson and the AMSUS staff December 18 and began planning for that transfer. Margo will remain a SMCAF employee through 2009. We know that there are still a lot of details to hammer out. Your Ad-hoc Committee plans to meet April 23 and to present a written report to the Council at its Spring Meeting the following day. This pivotal Council meeting will be at USUHS all day April 24. Anyone who wishes, **PLEASE ATTEND!** Everyone is welcome.

In summary, I feel that this is a move we have to make. Change is ever with us, and only the adaptable survive. When I became your President, I had served for two years as your Treasurer and had watched our balance decline - now to absolute zero without our NMVA windfall, which is rapidly shrinking. While my face may be on this transition, the concept of a SMCAF/AMSUS partnership long pre-dates me. As I became President-elect, several Council members mentioned it to me as a possible course of action, and Dr. Koenig asked me to start a study group to consider it. We know that any move out of Bethesda will inconvenience many of our loyal attendees, who come from home by auto to our functions and who enjoy the local nature of SMCAF activities. We fear that some of our elderly DC area members will choose not to travel and will elect to support SMCAF from afar, and we shall sorely miss them! Maybe we can enlarge our April Spring Council Meeting in Bethesda to include some fellowship with them. My message to each member is simple. The “dance” is over. We have reached the Rubicon, but we’re still just dipping our toes in the water. I view the Spring Council Meeting as the river crossing. NOW is the time for any of you to furnish input. At this point, ALL input is constructive. Ad-hoc Committee member’s e-mail’s are below, as is my home address. Let us know your feelings, pro or con, and, please, give us any suggestions as to direction for our Society. While we can’t see too far down the road we’re choosing, we can see the dead-end sign on the road we’re rejecting. It reads, “SMCAF Bankrupt in 5 Years.” Please help us, then support us on the road we’re traveling!

Respectfully submitted,

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Minutes: Annual Meeting, SMCAF, Oct 24-26, 2008

Council Meeting Oct 24

Annual Autumn Council Meeting of the Society of Medical Consultants to the Armed Forces October 24, 2008
Board of Regents Room
Uniformed Services University of the Health Sciences

After a continental breakfast, the meeting was opened with a welcoming by SMCAF President, Dr. A. Mason Ahearn. Service briefings followed.

A report from the office of the Navy Surgeon General was given by RADM Karen Flaherty. RADM Flaherty discussed the status of posttraumatic stress disorder in the Navy. She discussed the use of civilian forces for navy tasking, and she discussed the status of residency training in the Navy. She said that she was guardedly optimistic about the present status of the Navy. The Navy in general had a good year since the last SMCAF update October, 2007. The Navy's goal had been easily met except for the dental service. The HPSP (Health Professions Scholarship Program) had met its goal for Navy physicians and paramedical positions. In the last two years, direct accession to Navy medicine was up. Also there was an 80% promotion rate from the 04 to the 05 level in Navy medicine. Gains in personnel have been well ahead of losses. The Navy, however, still has positions available in preventive medicine, dermatology, undersea medicine, diagnostic radiology, family practice, and general surgery. The Navy is using to a great extent, physician assistants and nurse practitioners. General dentists were also an area of need in the Navy. She mentioned that 30% of the physicians in the Navy are general medical officers. The Navy Residency Training Programs are fully accredited, and the board certification rate of those graduating from Navy training programs is very

high. Health of deployed sailors is a major concern of the Navy. She noted traumatic brain injury (TBI) is being diagnosed more frequently. The Navy had received major funding from the US Congress for study and treatment of TBI. Post Deployment Health Access (PDHA) is another important concern to the Navy. She said that 2%-3% of sailors following deployment were being referred for mental health care, and about 9% overall were being referred for some type of medical care post deployment. There is a shortage of social workers in the Navy. She mentioned that there is an increased incidence of alcohol-related problems among the wives of deployed sailors.

The next briefer was Dr. Joseph E. Kelley, Deputy Assistant Secretary of Defense for Clinical and Program Policy, from the Office of the Assistant Secretary of Defense for Health Affairs. Dr. Kelley pointed out that the survival rates in our recent military conflicts has been quite high and that wounded soldiers have a much better chance of surviving than in previous wars. He mentioned that improved body armor was partially responsible. However; better training of combat soldiers and combat medics was also a major cause. He also mentioned that quick transfer to a major medical center was associated with higher survival. Dr. Kelley dispersed a copy of a strategic medical plan. He mentioned that overall, the medical budget for the Armed services including retirees was \$42 billion and that this represented care to about 9.2 million patients. He said the government finances approximately 65 hospitals and 412 clinics and that there are over 130,000 employees in network. He says a good deal of the care is provided through Tri Care. The military medical services are responsible for over 2000 research publications yearly and finance a great deal of ongoing medical research. He said the overall goal is for a fit fighting force with accessibility to modern health care. Secretary Kelley mentioned that satisfaction surveys completed by patients being treated in the military services was high, and that satisfaction among the

providers, doctors and paramedical personnel, was high also. He did mention that there had been a slight increase in suicides in service personnel especially in the Army. Budget projections were for an increase of approximately 12% by the year 2025. He said a great deal of this was due to Tri Care, which is requiring increasing funding. He touched on the fact that the Bethesda National Naval Medical Center would be changing its name to the Walter Reed National Military Medical Center and that it would be a major Tri service medical center. He mentioned that the ASD-HA has a need for civilian consultants to act as advisors and second opinion givers in individual situations. He asked if SMCAF could provide these consultants. He especially noted that forensic medicine and neurology were areas of need.

The next speaker was Maj. Gen. C. Bruce Green, Deputy Surgeon General of the Air Force. Dr. Green mentioned that physician assistants and nurse practitioners were being used as physician extenders in the Air Force. He felt that the Air Force was approximately 30 medical doctors short of a full complement. He said there were vacancies for primary care physicians and civilian sector primary care physicians were being utilized to fill the vacancies. He mentioned that the Air Force had lost two hospitals. There are now 16 Air Force hospitals. Some construction is underway. Keesler Hospital on the Gulf Coast is being rebuilt after extensive damage from Hurricane Katrina. The patient population of the Gulf Coast has been slow to return to this hospital. Travis Hospital has developed advanced therapy services especially occupational therapy and advanced surgical procedures. Wright Patterson Hospital has grown in the number of patients being served. He mentioned that the Air Force Hospitals are partnering with community academic centers for the residency training.

Minutes: Annual Meeting, SMCAF, Oct 24-26, 2008 Continued

Partnerships with adjacent academic medical centers have proved a positive move for the Air Force. The Air Force residents are doing quite well on their boards. He reported that the Residency Review Committee had been very supportive to the Air Force and their training programs. Since general surgeons are depleted in the Air Force, major retention bonuses are being given to general surgeons. There is a nurse shortage in the Air Force Medical Corps also. Maj. Gen. Green mentioned that Wilford Hall had not been completely closed and continues to be an outpatient center for soldiers and civilians. There is some possibility that Keesler Hospital would be converted to a civilian hospital in 2011.

The next briefer was MG Carla G. Hawley-Bowland. MG Hawley-Bowland is the CG, North Atlantic Regional Medical Command, and Walter Reed Army Medical Center. She too, stressed that the care of wounded soldiers was improving and that survival rates have increased. She mentioned that the Veteran's Administration is assuming much of the responsibility for disability evaluations, and that both MEB (Medical Evaluation Boards) and DEB (Disability Evaluation Boards) have been established. She said that the Army had developed a comprehensive social wellness program and it includes guidelines for the diagnosis and treatment of posttraumatic stress disorder and traumatic brain injury. She also mentioned that posttraumatic stress is quite prevalent, but that it does not necessarily become a disorder except in few cases. She mentioned that return to duty of injured soldiers is high, over 43%. She said others who required discharge from the service are being hired back as civilian contractors to the Army. She presented the example of a soldier who had been able to return to duty wearing an above knee prosthesis. She said that the medical

strengths in the army are creeping up and retention is improved, now at approximately 57%. There is a shortage of primary care, internal medicine, pediatrics, and family practice. She said that efforts were being made to decrease the 12-month deployments for physicians. The Army's deployment target is 5 to 6 months, the exact time the Navy has long considered to be optimal for sea tours. She discussed the use of older physicians who returned to the service and were given two-year commitments. The Army post graduate residency programs had a 95% passage rate for board certification.

The next presenter was Dr. Charles Rice, President of The Uniformed Services University of the Health Sciences.. Dr. Rice mentioned that applications and quality of applicants were increasing greatly for the medical school. He mentioned that a new Dean of Nursing had been recently hired from Michigan. He said that the medical school was initiating a doctorate of nursing program and several other Ph.D. programs. 48% of the incoming medical school class had prior military service and therefore, their age was older than the average for medical students. There are four classes, consisting of 175 students each. Very few students drop out of the USU Medical School. A comprehensive dental training program has been transferred from Wilford Hall to the USU campus. He said that occasionally, there were transfers from other medical schools to the USU. He mentioned that the school had received about \$70 million for the study of posttraumatic stress disorder and traumatic brain injury, and that the school was working closely with the National Institute of Health, which is adjacent to the school. He mentioned that a new PET scanner had been purchased by the university, and state of the art technology was being used for training of the medical students. He presented some of the research that had come from the school, describing one study which suggested that the use of Hibiclens did not necessarily decrease the incidence of MRSA infections. Dr. Rice mentioned that the National Defense Authorization Act under Secretary Gates gave greater authority to the school. He mentioned that

Dr. Ronald R. Blank had been elected Chairman, Board of Regents, USUHS, and that solicitation for further board candidates was taking place. He asked SMCAF to contribute any candidates for consideration. He mentioned that in many medical schools across the country, salary caps were coming into existence and that he had been given salary cap authority at the USU. He mentioned that greater than 70% of the graduates of the USU Medical School were still on active duty.

At the conclusion of the service briefings, Dr. Ahearn convened the regular Council business meeting.

Minutes of the previous meeting were approved and accepted.

Mr. Bryce Redington gave the Jackson Foundation Report. The Jackson Foundation exists for the advancement of military medicine. The SMCAF account with the Jackson Foundation has a balance of approximately \$3236.00. Mr. Redington also commented on the Brian D. Allgood Memorial Fund and noted that it presently has \$10,350.00. He mentioned that five vendors were supporting this year's meeting for a total of \$5000.00. to defray costs. He mentioned that the food cost and the general expenses for the meeting had increased this year.

COL "Cathy" Nace, the AMA delegate from the SMCAF reported on the AMA. She said the main topic of concern for the SMCAF was the discussion of torture of prisoners in Guantanamo and in other detention camps. There was discussion on the anti-military group in the AMA and on the value of pro-military members in attendance at these meetings. She described recent discussions on length of deployment for servicemen.

Minutes: Annual Meeting, SMCAF, Oct 24-26, 2008 Continued

Lt. Col. Patrick Monahan reported on the upcoming Annual Meeting, and he noted that seven-and-a-half hours of CME credit would be awarded. He announced that the banquet speaker would be Captain Ronald Sollock, MC, USN discussing medical care of detainees at Guantanamo Bay.

Dr. Ahearn discussed the correct membership status SMCAF members, who serve full time in top management positions in, DOD, VA and USUHS. It was determined that these few top-level members would remain in Associate SMCAF status until they retired. He announced that he had written about 159 personal letters to Active SMCAF members, who have not paid their dues for over two years. He also discussed the question of consultant volunteers to the ASD-HA raised by Dr. Kelly in his briefing. It was decided that members would be queried for volunteers, and that applications would be turned over to SMCAF Committee on Professional Service for review.. Dr. Ahearn discussed the extension of the terms of offices to two years, so that a president's term would be two years, a president-elect would serve for two years, and the past presidents would serve for a total four years. The councilors voted in favor of these changes, and these changes will be brought before the entire membership as By-laws changes.. It was felt that SMCAF should have as one of its major projects, the promotion of the HPSP Programs, and it was mentioned that participation in the HPSP Programs was spontaneously improving due to the economy.

The "AMSUS Dance Study Group" reported on progress regarding a future partnership with AMSUS. Council established this Study Group as an Ad Hoc Committee, authorized Dr Ahearn to appoint a Committee Chairman, subject to Council Approval, and directed the Committee to continue preparations for a proposal on an ultimate partnership with AMSUS. Admission of VA Physicians to SMCAF was discussed. (That is, if we can devise a Society acronym other than

"SMCUS") Dr. Fred Cecere and others spoke in favor of a partnership with AMSUS. George Anderson, M.D. spoke as an AMSUS representative and an SMCAF member on the mutual benefits of partnership, not a merger, with AMSUS. It was decided by approval that SMCAF would pay Ms. Margo Cabrero's salary for calendar 2009, as we move closer to partnership with AMSUS.

Dr. Fred Sanford gave the TMC report. He discussed the need for increases in fees for Tri Care, the cost of living allowance increases, the GI bill, and guard and reserve issues.

Dr. Joel Labow presented the Medical Education Sub-committee report. He discussed personnel changes in the Graduate Medical Education Committee, on which he serves.

Dr. Kenneth G. Swan presented the membership report. Twenty-five new members were accepted for admission. Five members were Active and 20 were Associate. This included Candidate Group members. It was noted that free membership to the society is open to HPSP and Federal students.

Dr. Ahearn presented the Nominating Committee slate. Lt. Gen. (Ret.) Peach Taylor, previous SG USAF was nominated to the council seat vacated by Dr. Larry Laughlin. His nomination was passed unanimously. The proposed By-laws changes rendered unnecessary additional officer nominations. Dr. Ahearn reported that Drs. Alexander, Swan, and Ahearn had kindly agreed to extend their terms as Committee Chairs of Electronic Media, Membership, and Recruiting respectively.

Dr. A. Herbert Alexander gave the Electronic Media and Communications Committee report. He discussed the SMCAF website, its popularity and frequent use. He mentioned that a great deal of information can be downloaded from the website, and that the website's use is increasing. The website now lists the officers of the society since 1946.

Dr. Ahearn discussed activities of the Recruitment/Retention Committee. Further efforts will be directed in this endeavor after the meeting.

Dr. Randy Howe submitted a written report for The Ethics in Military Medicine Committee as he was unable to attend. Dr. Howe reported that the Ethics Consultants to the three services were now firmly established as Dr. Tom Jefferson – Army, Dr. William Dunn –Navy, and Dr. Ed Gabriel – Air Force. Randy will be meeting regularly with this group. Drs. Howe, Laraby, Kosaraju, and Casscells are preparing a paper for publication entitled, "Guantanamo: Ethics, Interrogation and Forced Feeding." Finally, Dr. Howe has been in communication with Dr. Lonnie Bristow, Past President AMA and Past Chairman, Board of Regents, USUHS, about a proposal by Dr. Bristow that a "means by which service persons might be able to go to clergy persons in the military initially, if they wish to, so that ,together, they could..." (paraphrased) report "any and all activities they may ethically question" In other words, Dr. Bristow is suggesting a system by which the normal chain-of-command system of reporting might be amended. Dr. Howe has suggested that SMCAF might wish to study this area and produce a White Paper on this idea. Dr. John Pearce submitted a written report for The Archives and History Committee. This year John is embarking on a monumental project.

He is endeavoring to secure full-sized digital images of all SMCAF officers, back to our founding.

Dr. Alexander Sloan proposed Dr. Harold Koenig, Past President of SMCAF, for Emeritus status. This proposal was approved unanimously.

Minutes: Annual Meeting, SMCAF, Oct 24-26, 2008 Continued

Dr. Michael S. Clarke presented the Treasurer's Report. Our 2007-2008 annual revenues approximated \$90,000.00, and our same period expenditures approximated \$102,000.00. Discussion proceeded regarding the need to put SMCAF into a position of financial stability, in order for the Society to continue to exist. This discussion brought the Council back again to the partnership with AMSUS.

A moment of silence was observed for our departed members this year:

Michael E. DeBakey, M.D.
 Turner Camp, M.D.
 Erwin F. Hirsch, M.D.
 Einer W. Johnson, Jr., M.D.
 William Jordan, M.D.
 Donald C. Kent, M.D.
 Thaddeus Leoniak, M.D.
 Robert J. Lull, M.D.
 Charles L. Neill, M.D.
 Richard D. Schultz, M.D.

There being no further business, Dr. Ahearn adjourned the Council meeting at about noon.

Respectfully submitted,

Michael S. Clarke, M.D., F.A.C.S.



Minutes, Annual Business Meeting The Society of Medical Consultants to the Armed Forces October 25, 2008 Sanford Auditorium, USUHS

The Meeting was convened on time by SMCAF President, Dr. A. Mason Ahearn. A quorum was present, and it was determined that the body was authorized to conduct SMCAF business.

The minutes of the last Society business meeting were approved and accepted. Dr. Ahearn gave a brief presentation of recent Society activities. He discussed meetings with the Army Consultants, a request by Dr. S. Ward Casscells, ASD-HA, to obtain from SMCAF a list of consultants willing to be on call to him "issue by issue", and updates to and improvements in our Society website.

Dr. Ahearn announced that the Brian Allgood Memorial Project is proceeding. The Society of Military Orthopaedic Surgeons (SOMOS) has matched our contribution of \$5000.00 to the Jackson Foundation, and private donations are beginning. He stressed again that this memorial will be to ALL physicians, who have given their lives in our nation's battles for freedom, not just to Dr. Allgood, and he encouraged the membership to consider giving one year's SMCAF dues to Jackson for this project!

Dr. Ahearn yielded the gavel to Dr. Thomas Peters, President-elect. Dr. Peters presented the proposed SMCAF By-laws change: To alter Article IV Sections 1 and 2 to extend the terms of President and President-elect to two years and the term of Past President to four years. These changes were approved by acclamation.

Dr. Ahearn gave a brief summary of deliberations by "The AMSUS Study Group", which had been converted by Council to an AD HOC Committee yesterday in their meeting. The Committee continues to plan for eventual partnership, not merger, with AMSUS. We would retain our name, our invitational status, our senior consultant level identity. We would gain recognition in *Military Medicine*, exposure to the future leaders of Military Medicine, and opportunity to re-establish Society relevancy in today's Military Medical community. Most of all, we could gain the financial capability to survive as a society. The exact status of Mrs. Margo Cabrero will need careful negotiation, but, we intend for her to be retained in her present level of duty with SMCAF. We would not be financially responsible for an annual meeting attended by fewer than 50 active dues-paying members. AMSUS would also receive benefits. SMCAF members would assist and contribute to the AMSUS Physician Section at their Annual Meeting. We would represent the senior tier to which the young physicians in AMSUS could aspire. We have the ability to assume ADVOCACY, which AMSUS spokespersons CANNOT assume. We can broaden greatly the Active Military's outreach to civilian academic medical institutions. Dr. Ahearn concluded by announcing that SMCAF Council was proposing, subject to approval of the AMSUS Board of Managers that both groups meet jointly in St. Louis at the AMSUS Annual Meeting Nov 15-20 2009 in St. Louis, MO, in lieu of The SMCAF 2009 Annual Meeting at USUHS. This met with general approval of the membership. Dr. Ahearn presented the recommendations of the Nominating Committee, which had been approved by the Council yesterday. Dr. George Peach Taylor was proposed to fill the Council seat vacated today by Dr. Larry Laughlin. Because of the by-laws changes just approved, no nominations for other officers were proposed. The Committee recommended continuing Dr. Swan as Chairman, Membership Committee, Dr. Alexander as Chairman, Electronics and Media Committee, and Dr. Ahearn as Chairman, Recruiting/Retention Committee, as these doctors have agreed to continued service. The recommendations of the Nominating Committee were approved unanimously by the membership.

Minutes: Annual Meeting, SMCAF, Oct 24-26, 2008 Continued

Society Treasurer, Dr. Michael Clarke, presented the Financial Report. SMCAF had revenues during 2007-2008 of approximately \$90,000.00 and expenditures of approximately \$102,000.00. We have approximately \$65,000.00 left in the reserve money market fund, and will need to take \$10,000.00 from it to fund early 2009. The financial direction of the Society appeared obvious to the membership.

Dr. Ahearn deferred the moment of silence for departed members until the closing ceremony of our Annual Meeting tomorrow. Our departed members are:

Michael E. DeBakey, M.D.	Donald C. Kent, M.D.
Turner Camp, M.D.	Thaddeus Leoniak, M.D.
Erwin F. Hirsch, M.D.	Robert J. Lull, M.D.
Einer W. Johnson, Jr., M.D.	Charles L. Neill, M.D.
William Jordan, M.D.	Richard D. Schultz, M.D.

There being no further business, Dr. Ahearn adjourned the business meeting at approximately 1700h.

Respectfully submitted,

Michael S. Clarke, MD FACS, Secretary

Minutes: SMCAF Council Meeting October 26, 2008 Private Dining Room, USUHS Campus

Members Present:

Dr. Ahearn	Dr. Swan
Dr. Cecere	Dr. Sloan
Dr. Anderson	Dr. Sanford
Mrs. Cabrero	

The meeting convened immediately after the Final Gavel, 63rd Annual Meeting. The attendance was small, and the format was informal.

We began the meeting with a discussion of the Annual Meeting Program just concluded. We discussed how the symposia and presentations, and we felt that we had successfully melded new material with established principles. The SMCAF mission has clearly included the passing of medical and surgical lessons learned from those who served in past combat engagements to those who did not have the advantage of first-hand experience. The practices and policies developed in World War II, Korea, and Vietnam were explained to the military medical leaders serving since those wars. Sustaining that SMCAF mission now depends on attracting the attention of those serving in OIF and OEF so that they can pass on the lessons they are learning. Experience in the current military medical environment is different than in past wars, the emerging doctrine is new, and the results have been impressive. SMCAF should look ahead to sustaining its mission by building its membership and refreshing the technical content of its message. We must do this by recruiting the young physicians who are pushing the envelope right now. We are happy to have recruited each of the speakers at the 63rd Annual Meeting. But SMCAF needs to keep in mind, always, that time-honored concepts of battlefield surgery and casualty management should be preserved in memory for use in periods of national disaster and in situations where complex technical support is not available or is overrun by patient volume.

Drs. Ahearn and Anderson reported on the findings of the Ad Hoc AMSUS Study Committee Meeting held on Friday afternoon, October 24, 2008. Drs. Swan and Cecere questioned Dr. Anderson in detail about the current physician make-up of AMSUS and organization of physician section at AMSUS Annual Meeting. Ad Hoc Reps Ahearn and Anderson discussed advantages of partnership: recognition in and representation on *Military Medicine*, the more favorable financial climate, chance to infuse SMCAF with new members, chances for SMCAF to become more relevant in Military Medical Community.

Discussion then turned to the recommendation of the Ad Hoc Committee that SMCAF merge its 2009 Annual Meeting with AMSUS' in St Louis 15-20 November, 2009. Pros and Cons were discussed. It was realized that we would lose attendance of some SMCAF factions local to the Bethesda area – USUHS students, senior members residing in Washington, members from neighboring states for which SMCAF attendance represents a short drive, etc. It was felt that favorable exposure of SMCAF as the senior invitational tier in the Military Medical physician community would ultimately offset these attendance losses and that many of the current student attendees do not pay their way (luncheon, banquet, etc) at our Annual Meeting.

Minutes: SMCAF Council Meeting October 26, 2008 continued

"Dr. Anderson mentioned that the rates for a portion of the available hotel rooms at AMSUS meeting sites are always locked to federal per diem allowances, which should be less than those at the Bethesda Hyatt. In the case of the St. Louis Annual Meeting this fall all of the hotel rooms in the AMSUS block are to be provided at the federal per diem rate." This would help offset increased member travel costs to attend AMSUS. The Ad Hoc Committee is studying a "SMCAF / AMSUS Mini-Meeting Package". While encouraging full AMSUS Meeting attendance, we might offer a Tuesday afternoon through Thursday morning "mini-meeting package", in which members arrive Tuesday, attend functions Tuesday afternoon, perhaps a SMCAF social function Tuesday evening, participate in professional sessions Wednesday, sessions which include a SMCAF Luncheon (open to all physician AMSUS registrants), attend the Annual Awards Banquet Wednesday evening, then travel home Thursday.

Dr. Cecere announced that, after considerable careful thought, and while he had initial doubts, he had come to the conclusion that SMCAF should enter into the proposed eventual partnership with AMSUS.

Dr. Ahearn announced that he has appointed Dr. Thomas Peters as Chairman, SMCAF Ad Hoc Committee on AMSUS Partnership. This appointment met with Council approval

Council discussed Dr. Ahearn's considerable personal expenses in conducting SMCAF business during his first presidential year. These included six trips involving fifteen business weekdays away from his two-man Orthopaedic surgical practice. It was decided that SMCAF would fund travel expenses and hotel room-only expenses for Dr. Ahearn and other SMCAF Officers, when he/they perform SMCAF official business, not to include normal travel to SMCAF Council and Annual Meetings.

Council decided to hold the Annual Spring Council Meeting on Friday April 24, 2009 at the Board of Regents Room, USUHS, Bethesda, MD.

Respectfully submitted for Dr. Clarke,

A. Mason Ahearn, MD FACS

WELCOME TO THE FOLLOWING NEW SMCAF MEMBERS

Active Member

David V. Cossman, M.D.
James V. Gainer, Jr., M.D.
William R. Gilliland, M.D.
Jay A. Johannigman, M.D.
George P. Taylor, M.D.

Associate Member

William P. Adelman, M.D.
Herman J. Barthel, D.O.
Jeremy W. Cannon, M.D.
Paul J. Cutting, M.D.
Charles B. Green, M.D.
Carla G. Hawley-Bowland, M.D.
Ismail Jatoui, M.D., Ph.D.
John F. Kragh, Jr., M.D.
Ronald L. Sollock, M.D.
Daniel J. Valaik, M.D.

Candidate Member

Sgt. Alex Alvarez
1LT Karl Coutinho
2d Lt Janet Cruz
2LT John Daula
2LT Victoria Mahar
2d Lt Matthew Minor
1LT Neeraj Patel
Sgt Snehal H. Patel
2d Lt Phillip Strawbridge

We have lost contact:

Do you know where these members are?

If you know where any of the following members are please have them contact the Executive Director to update their information.

Michael	A.	Ashburn, M.D.
O'Neill		Barrett, JR., M.D.
Scott	D.	Bennion, M.D.
Gary	B.	Broadnax, M.D.
Osvaldo		Bustos, M.D.
Marcel	E.	Conrad, M.D.
G. Lee		Cross, III, M.D.
George	E.	Cruft, M.D.
Robert	B.	Daroff, M.D.
John	M.	Dorsey, M.D.
Jerry	M.	Earll, M.D.
Norig		Ellison, M.D.
Harold	A.	Fenster, M.D.
James	R.	Fowler, M.D.
William	A.	Gardner, Jr., M.D.
Thomas	D.	Gensler, M.D.
Isaac		Goodrich, M.D.
Robert	P.	Green, Jr., M.D.
David	C.	Green, M.D.
Richard	W.	Harbison, M.D.
Steven	T.	Hayne, M.D.
Allen	E.	Inglis, M.D.
Darrell	A.	Jaques, M.D.
David	P.	Jaques, M.D.
E. James		Kohl, M.D.
Garth	G.	Lee, M.D.
LaSalle	D.	Leffall, Jr., M.D.
James	J.	Leonard, M.D.
Craig	H.	Llewellyn, M.D.
Frank	P.	Lynch, III, M.D.

Earl	W.	Mabry, II, M.D.
Bruce	A.	Mallin, M.D.
Edward	H.	Malters, M.D.
Wallace	W.	Marsh, M.D.
G. Robert		Mason, M.D.
Gerald	O.	McDonald, M.D.
Henry	A.	Meayer, JR., M.D.
Paul	R.	Meyer, M.D.
James	O	Morse, M.D.
Andrew	D.	Muse, M.D.
Robert	E.	Neimes, M.D.
Robert	C.	Nuss, M.D.
Stephen	E.	Pohl, M.D.
Morris		Pulliam, M.D.
Leonard	M.	Randolph, Jr., MD
William	F.	Renner, M.D.
Pedro	N.	Rivera, M.D.
Lee	F.	Rogers, M.D.
Robert	E.	Shope, M.D.
Robert	I.	Simon, M.D.
W.Douglas		Skelton, M.D.
Harry	L.	Smith, M.D.
Edward	D.	Sugarman, M.D.
Michael	J.	Torma, M.D.
Marina	N.	Vernalis, M.D.
Felipe	E.	Vizarrondo, M.D.
Winston	H.	Weese, M.D.
Stephan	N.	Xenakis, M.D.
James	G.	Zimmerly, M.D.

DUES NOTICE

ACTIVE MEMBERS

If you received a dues notice included in your newsletter, you are, according to SMCAF records an "Active Member". Active Members are physicians who served on active duty in one of the branches of the Uniformed Services of the United States and who have served as Medical Consultants to a component of the Uniformed Services.

Physicians in the reserve components who are consultants are also qualified for Active Membership.

All active members are required to pay dues in the amount of \$100 on a yearly basis.

If you have any questions in regard to your membership status, contact the Executive Director at smcaf@usuhs.mil

MEMBERSHIP E-MAIL ADDRESSES

SMCAF Is compiling a list of our members e-mail address with the idea of possibly adding the current newsletter to its web site as well as past issues. This will relieve the cost of printing and mailing the newsletter as well as increasing the use of its web site.



SMCAF

C/O 5 Southern Way
Fredericksburg, VA
22406

E-MAIL: smcaf@usuhs.mil

We're on the Web!
See us at:
www.smcaf.org

IS YOUR MEMBERSHIP INFORMATION CORRECT?

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