



Progress NEWSLETTER

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Ed Ellis, III, DDS, MS

President's Message

Dear AACMFS Fellows, Colleagues and Friends:

In the spur of a moment, the present becomes the past. And so it has for The American Academy of Craniomaxillofacial Surgery. Our organization is now five years old and to some of us, it seems like only yesterday we were making plans for the genesis of the Academy that has taken form.

Our group is small enough to be collegial, large enough to be scientific, and dedicated enough to discuss some of the problems facing us all—problems that have the potential to shape the future of our specialty and the care for our patients.

So who are we? Who do we want to be? Our goal was to attract like-minded surgeons who are practicing major oral and maxillofacial surgical procedures. The thought is that we share common interests and face common problems. Within this milieu are the intellectual resources to solve some of our common problems and further our interests.

I believe we have largely fulfilled part of those goals. We have an amazing cadre of capable, largely academic surgeons who are performing full scope and/or expanded scope surgical procedures. We have specialists in oncology and reconstruction, cleft/craniofacial, orthognathic, cosmetic, TMD and trauma. We share our knowledge at our annual meeting through scientific presentations and discussions.

What we have not done, however, is solve any of our common problems. We face many—reimbursement, access to care, turf battles, licensure, to name a few. One of the major issues that we discussed at the AACMFS meeting last year in Pittsburgh and which has the ability to significantly impact individuals training in dual degree OMS programs is the ever-changing requirement for state licensure. Sixteen states now require 2 PGY years for medical licensure, and two states require 3 PGY years (see left). Most OMS training programs provide only 1 PGY year so it may prove difficult for individuals training in those programs to obtain medical licenses in states that require more than 1 PGY year. Given that each state has their own licensure requirements it is not going to be easy to find a workable solution that canvasses all 50 states.

Is the AACMFS the group that should be championing our cause on state licensure? While we have some very capable individuals who are close to and knowledgeable on this topic, I believe this is a topic that is best addressed by our parent organization, the AAOMS. This topic is larger than the AACMFS and potentially affects all OMSs with both DDS and MD degrees. I have reached out to Dr. Thomas Indresano, President Elect of AAOMS to inquire about what the AAOMS may or may not have done about state licensure. I am happy to report that this is definitely on their radar. He related that the Committee on Education and Training (CET) has been monitoring this issue for the past five years. In 2013 and 2017 they surveyed OMSs who completed an ac-

Alaska (2)
Connecticut (2)
Illinois (2)
Kentucky (2)
Massachusetts (2)
Maine (3)
Michigan (2)
Montana (2)
Nevada (3)
New Hampshire (2)
New Jersey (2)
New Mexico (2)
Pennsylvania (2)
Rhode Island (2)
Utah (2)
Washington (2)
Wisconsin (2)
Wyoming (2)

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2018 American Academy of Craniomaxillofacial Surgeons Annual Meeting Highlights

The AACMFS Annual Meeting held in Portland, Oregon, May 4-5, 2018 was a great success. This meeting seems to grow and improve each year. We had 105 surgeons register, plus sales and guests for over 140 people in total. The Scientific Session included 39 abstracts in the five sections: Pediatrics, Craniofacial and Orthognathic Surgery; Craniomaxillofacial Trauma Surgery; Head and Neck Oncology; Craniomaxillofacial Reconstructive Surgery and Education, Training and Research. The feedback from attendees rating the meeting indicated they learned new ideas and information they could incorporate into their practice, information provided enhanced current knowledge and will be used to improve patient care and that the content was relevant to their practice. The abstract scores were outstanding. Again, the format of presenting abstracts for this meeting was reinforced.



Cynthia Morris,
PhD, MPH



John Bradley,
MDiv, DHL

Keynote Addresses were presented by Drs. Morris and Bradley. Dr. Morris presentation was titled, "Handicapping Racehorses: Traditional and Non-traditional Ways to Select Medical Program Applicants." The focus of her presentation was on

how to select applicants that best fit your fellowship program. She provided examples of Computer-based Assessment for Sampling Personal Characteristics (CASPer), Situational Judgment Tests (SJTs) and Multiple-Mini Interview (MMI) tools that were useful in the selection process.

Dr. Bradley presented, "Lessons Learned from over 40 Years of Assessing Candidates." He described techniques from his background to assess innate talents and behaviors which are helpful in the selection process and assisting candidates to be successful.



President, Dr. Dierks presides over the meeting.

Saturday afternoon the Annual Business meeting was conducted by the president, Dr. Dierks. He called the meeting to order and invited Andrea Boidman, executive director of the OsteoScience Foundation to present a report from the Foundation. She reviewed with the Members the clinical observership program, available research grants in OMS and education activities

sponsored by the Foundation. There was discussion regarding grant recipient's whose program director is a Fellow of



the AACMFS submitting abstracts for presentation at the AACMFS Annual Meeting.

The president's report included information on the need to reevaluate dual degree programs. He reported that in 2018 there were 10 programs with unmatched slots.

In his report on the State of the AACMFS, Dr. Dierks updated the members on the transition plan for management to PAMI-Hank Holderfield and his group. He announced that future dues collections would be online which should be easier for all members renewing.

The members were updated on the opportunity for the AACMFS to present at the EACMFS Meeting in Munich, Germany, September 20, 2018. KLS-Martin provided a \$10,000 to offset speaker expenses. Dr. Dierks will moderate and Drs. Bell, Viet and Ward will be presenting.

Dr. Kim reviewed the Profit and Loss and Balance Sheet finances with the members. He mentioned that with transition to PAMI the management expenses would be increasing. At present cash flow is strong. Projected revenue and expenses for 2017-2018 are in line with estimates projected. Membership dues were \$54,950. Operations expenses were approximately \$12,000 to date.

Dr. Dierks presented the nominees for succession and election to Trustee. Dr. Rui Fernandes ascended to Secretary. Dr. Jasjit Dillon was nominated by the BOD and approved by the members for the Trustee position.

New Fellows, Post Graduate Members, Associate Members and Honorary Members were presented and approved by the AACMFS Fellows.

Social activities included the reception on Friday evening in the Departure Lounge.

The formal Black-Tie Dinner as was the Oregon Historical Society on Saturday evening.





Thank you Sponsors of our 2018 Annual Meeting!



Fellow Nominations: Submit Your Candidates Today!

It is again time to start working on new Fellows and Post Graduate Members to be inducted into the AACMFS next May. We encourage each current Fellow to submit the names of two individuals you want to sponsor for membership. The process is easy and takes only a few minutes. Sponsorship, Qualifications and Categories of membership are outlined below.

Sponsorship. Each candidate for membership must be sponsored by a current Active Fellow. A Fellow may sponsor for membership two (2) new candidates per calendar year; this right will not be affected by sponsorship of holdover candidates.

Categories and Qualifications of Membership.

Each candidate for membership must show recognized contributions in the field of craniomaxillofacial surgery as a prerequisite to membership as demonstrated by academic, clinical and research accomplishments, leadership, and contributions to craniomaxillofacial surgery. Further, each Member shall be designated as an Active Fellow, an Emeritus Fellow, an Associate Fellow, an Honorary Fellow, or a Distinguished Fellow.

Active Fellows. Candidates for Active Fellowship must be certified by the American Board of Oral and Maxillofacial Surgery or by the Canadian equivalent. Active Fellows shall have engaged in the practice of oral and maxillofacial surgery for two years following residency training and must be Board Certified. A substantial component of this practice shall have been major hospital-based craniomaxillofacial surgery as interpreted by the Membership Committee. The Candidate will electronically submit a case log of all cases operated as a primary/responsible surgeon, within the 12 months preceding consideration of their application in an Excel document in the format of the case log requirement of the American College of Surgeons. The Candidate's CV, application and case log should document significant activity that must include:

- a. Performance of major craniomaxillofacial surgery during the preceding 12 months;
- b. Participation in clinical and/or basic research, particularly in projects funded following peer review;
- c. Publication of the results of innovative thought, data gathering research projects, and thorough reviews of controversial issues in peer-reviewed scientific media;
- d. Presentation at scientific meetings and/or continuing education courses at the local, regional, or national level.
- e. Active involvement in the education and training of residents and fellows in Craniomaxillofacial surgery.

Emeritus Fellows. If an Active Fellow retires from the clinical practice of craniomaxillofacial surgery, he or she then will become an Emeritus Fellow. Emeritus Fellows do not pay dues and are not eligible to hold office but are eligible to vote.

Associate Fellows. Associate Fellows will be Board certified surgeons in allied medical/surgical specialties such as Otorhinolaryngology, Plastic and Reconstructive Surgery, General Surgery, Neurosurgery, etc., and non U. S. or Canadian Oral and Maxillofacial Surgeons who otherwise meet the criteria for Fellowship. Associate Fellows may also be doctorate level individuals in other non-medical/surgical specialties such as speech pathology, or researchers with significant commitment/dedication to craniomaxillofacial surgery. Associate Fellows must pay dues but are not eligible to vote or hold office.

Honorary Fellows. Honorary Fellows will be those craniomaxillofacial surgeons or others who have had notable careers and who are otherwise ineligible for fellowship but who are elected to Membership by majority vote of the Active Fellows. Honorary Members do not pay dues and are not eligible to vote or hold office.

Distinguished Fellows. The Executive Committee may recommend to the Board of the Academy, Fellows for election to Distinguished Fellowship in the Academy. Fellows recommended for election to Distinguished Fellowship in the Academy shall have rendered distinguished service to the specialty and to the Academy. Election is by unanimous vote of the Fellows present at the annual meeting. Distinguished Fellows of the Academy do not pay dues, and are not eligible to vote or hold office.

Post Graduate Member. The applicant must be an Oral and Maxillofacial Surgeon who has completed residency training but who does not yet meet the requirements for Active Fellows. The applicant must be recommended by an Active Fellow sponsor. A substantial component of the applicant's practice shall be major hospital-based craniomaxillofacial surgery as interpreted by the Membership Committee.

Postgraduate membership shall be for a maximum of 5 years after board certification.

Post graduate membership is not required to become an Active Fellow nor does it guarantee nor imply entrance into active fellowship.

The postgraduate member pays Academy dues and may attend meetings but is not eligible to vote or hold office.

Process. Submit a letter of nomination to Melissa Connor at the principal office of the AACMFS. Send to mconnor@pami.org. Be sure to include the name and address of the nominee plus their email address. She will send the appropriate application to the nominee and copy you on the correspondence.

2018 Membership Report

The AACMFS now has a total of 186 members. There are 167 Fellows, 6 Post Graduate Members, 1 Associate Member, 7 Emeritus Fellows, 5 Honorary Fellows and 1 Distinguished Fellow. This year there were 18 applications for Fellow and 6 Post Graduate Members. The AACMFS continues to grow and we ask that you submit nominees as outlined in the by-laws.

2018 Fellows

Salim Afshar
Karl Cuddy
Renie Daniel
Donita Dyalram
Martin Hoard
Pamela Hughes
Baber Khatib
Hisham Marwan
Andrew Meram
Dieu Pham
Jason Portnof
Salam Salman
Brett Shirley
Barrett Tolley
Julian Wilson
Melvyn Yeoh
Yedeh Ying
George Zakhary

Awards for Abstract Presentations at Annual Meeting

Policy: Abstract awards will be considered for any section with five or more abstracts presented at the annual meeting. Multiple sections with less than five abstracts may be combined by the organizing committee for consideration of an abstract award. Abstracts will be judged independently by the assigned moderator(s), section chair, and associated President, President Elect, Treasurer or Secretary using a summary score with a scale 1-5 with 1 high. Scores will be collected and tallied by the executive secretary and averaged. The lowest average will be the winner with ties being decided by the president. All decisions via average or the president will be final.

Abstract awardees will be announced at the final social gathering. In addition to a certificate, abstract awardees will be given a \$500 cash award from the AACMFS upon evidence of peer reviewed publication noting the presentation and awarded abstract at the AACMFS annual meeting.

2018 Award Winners:

Pediatrics, Craniofacial and Orthognathic Surgery

“A Pilot Study of Outcomes of Temporomandibular Joint Procedures in Surgical Patients with Fibromyalgia”

Karen Carver, DDS, MPH

Education, Training and Research

“The Effect of OMS Curriculum Design on USMLE Step 1 Performance”

Adam P. Fagin, DMD, MD

Craniomaxillofacial Reconstructive Surgery

“CTA Perforator Localization for Virtual Surgical Planning of Osteocutaneous Fibular Free Flaps in Head and Neck Reconstruction”

Kyle S. Ettinger, MD, DDS

Head and Neck Oncology

“Depth of Invasion-Is Frozen Section Accurate?”

Justine Moe, MD, DDS

2019 Annual Meeting of the American Academy of Craniomaxillofacial Surgeons

May 9-10, 2019 Omni La Mansion del Rio Hotel, San Antonio, Texas

CALL FOR ABSTRACTS-DUE FEBRUARY 1, 2019

Oral Abstracts for presentation at the AACMFS Annual Meeting will be the focal point of the Scientific Session and must be submitted to julie@aamcfs.org by February 1, 2019 to be reviewed and accepted.

A 500-word limit for abstracts that includes:

- Concise title of the clinical study or research [abstract]
- List of all authors with academic/professional credentials
- Academic and/or Clinical Institution name which supported/participated in the study
- Presenter name & credentials*
- Headings as relevant:
 - Purpose
 - Materials and Methods
 - Results and Conclusions

Abstracts may focus on basic/scientific, translational or clinical in nature, including case reports which would likely

elicit robust discussion. Each abstract presentation will be no more than 5 minutes in length followed by an allotted time for discussion. Upon acceptance, authors will be notified of final presentation and discussion times.

Abstracts will be considered for the following sections:

1. Pediatrics, Craniofacial and Orthognathic Surgery
2. Head and Neck Oncology
3. Craniomaxillofacial Trauma Surgery
4. Craniomaxillofacial Reconstructive Surgery
5. Education, Training and Research

*Abstracts may be presented by one of your institution's fellows; however a 'Fellow/Member of the AACMFS' must be one of the authors.

Please consider the opportunity of sharing your work with your colleagues.

Mark your calendar for the 2019 AACMFS Annual Meeting

The 2019 meeting will be held on
Thursday, May 9 and Friday, May 10 at the
Omni La Mansion del Rio Hotel in San Antonio, Texas.

Please note this is a Thursday -Friday meeting which is a
slight change from previous meetings.

Keynote Speakers

Kenneth Hargreaves, DDS, PhD
Analgesics for Surgical Patients



David Jimenez, MD
Minimally-Invasive Pediatric
Craniofacial Surgery



Save the Date!



2019
American Academy of
CranioMaxillofacial Surgeons

Annual Meeting

May 9–10, 2019 • San Antonio, Texas

SCIENTIFIC SESSION
Thursday and Friday, May 9–10

BUSINESS MEETING
Friday, May 10



HOTEL:
Omni La Mansion del Rio
San Antonio, Texas



President continued

credited integrated MD/OMS residency within the 5 years of the date surveyed. The results of the survey assisted the CET in understanding the issues for dual degree OMSs in obtaining a medical license. After surveying recent graduates it was determined this was not a nationwide problem for dual degree OMSs, but rather isolated incidents in some states. They certainly believe that more data is needed and will resurvey again in 2019.

A point that was brought up in the AACMFS discussion of this topic last year in Pittsburgh was the seeking of recognition from the ACGME of OMS training equivalency with medical-ly-based surgical rotations. In 2013, the AAOMS sent a letter to the ACGME requesting recognition of equivalency for our clinical training but they received no official response. I spoke with Paul Tiwana, the Chair of CET about this and asked him to reconsider making another attempt at getting the ACGME to recognize OMS surgical training as equivalent. He said he would bring this up one again at a CET meeting.

My own thoughts on this issue are that with the ability of our members to now join the American College of Surgeons and with the desire for all state medical licensing agencies to have all MDs under their wing (for political and financial reasons), the states will likely accept our dual degree members more readily in the future. However, I think it important to constantly let our leadership in the AAOMS know how important this topic is to many of our trainees. I have invited Dr. Indresa-

no or his representative from the AAOMS to join us next year for our annual meeting. I think it is valuable and important for the AAOMS leadership to hear our discussions on topics that affect us all.

Coming off our recent annual meeting in Portland, it makes me realize how special this organization is. Most of us look forward to this meeting as our favorite educational gathering of the year. The collective capable individuals who attend provide much opportunity for learning. One can learn so much discussing cases one-on-one with surgeons who are expert in their field. Please plan to attend next years' meeting in San Antonio which will be held on May 9 -10.

By-laws Update

The current and most up-to-date version of the AACMFS By-laws have been posted on the AACMFS website. We encourage all members to familiarize yourself with them as they impact your continued membership in the AACMFS. You will note that all active fellows and post graduate members must pay dues. The dues payment will be online for the first time this year. Members who do not pay dues are dropped from the membership. Also, you will note that members must attend at least one annual meeting every three years. Click here to review the by-laws: <http://www.aacmfs.org/about/leadership/>