

This is the second newsletter of the organization formally known as the American College of Aerospace Medicine, but the first for the newly named American Society of Aerospace Medicine Specialists (ASAMS). YES, IT'S OFFICIAL! The membership has overwhelmingly voted to adopt the name "American Society of Aerospace Medicine Specialists." Hence forth we shall be known as ASAMS.

But wait! That's not all! On Wednesday, December 2, 1998, the Aerospace Medical Association's (AsMA) Council, unanimously approved ASAMS as a constituent organization of AsMA. As a result of that action, ASAMS now has a seat on AsMA's Council and a position on the AsMA nominating committee. Each of these positions ensures that the voice of aerospace medicine will be heard a little louder and be a bit more effective than it has been in the past.

ASAMS was first envisioned in June of 1997. It became a reality in May of 1998 and was formally recognized as a constituent organization in December of 1998. I believe that is a remarkable achievement and every member should be proud of that accomplishment. Now it is up to the membership to prove the organization's worth to the specialty.

What's next? What's happened since last May? What's in the future? We've got an organization now what do we do with it?

### What's Next?

ASAMS has some internal work to do between now and the membership meeting to be held in Detroit in conjunction with AsMA's Annual Scientific Meeting, May 16-20, 1999.

Foremost of our priorities is to ratify our Constitution and By-Laws to reflect our new name. Members with voting rights will find a copy of the C and BL attached to this newsletter. Please review it and then mark your approval or disapproval on the attached postcard and return it prior to 15 Apr 99. If you disapprove please indicate why and annotate any recommended changes or additions. Ratification will take a

three quarter's majority of voting members to accept. If we don't get that we'll have to deal with it at the meeting in Detroit. My recommendation to the membership is that you ratify the current constitution and by-laws and then turn it over to the C&BL committee for fine tuning.

Another issue that needs to be dealt with is the issue of founding members, founding associate members, and founding student/resident members. Initially it was proposed that anyone who joined prior to the May 98 organizational meeting in Seattle would be considered a "Founder" of the organization. However, many people joined the organization after the May meeting, but before the December 98 AsMA Council meeting. These "late" joiners contributed to the size of our membership roster which played a significant role in our being accepted by AsMA as a constituent organization. I am therefore recommending to the membership committee that these individuals be granted "founder" status as well. I've asked the membership committee to have a recommendation along these lines available for a vote at the May membership meeting in Detroit.

At the May meeting we will also be electing new officers. As president I have put together a nominating committee to place before you a slate of officers. We will hold a vote on these individuals at the May meeting. There will also be the opportunity for candidates to be submitted from the floor at the May meeting.

Officers to be elected at the May meeting:  
 Vice President (president elect)  
 Secretary (two year term)  
 Board of Governors (one for a three year term)  
 Board of Governors (one for a two year term)  
 Board of Governors (one for a one year term)

Officers leaving office in May 99  
 President: Col. Mike Mork  
 Secretary: Lt. Col. Tom Burke

Officers remaining in office until May 00:  
 President (elect): Dr. Al Parinet  
 Treasurer: Lt. Col. Chris Benjamin

Other items that need to be considered to get ASAMS on track are: we need to develop an organizational graphic to serve as an Icon for ASAMS. How can we sell a T-shirt if we don't have a graphic to put on it. Anyone with artistic talents is encouraged to submit design proposals at the meeting in Detroit.

Dr. Al Parmet, the incoming ASAMS president, is in the process of designing a web page for ASAMS. If you have any suggestions for items that ought to be included on our web page please bring them to Dr. Parmet's attention. (Al's e-mail address is: [ajparmet@cysource.com](mailto:ajparmet@cysource.com)). I know I'd like to be able to join or renew our membership via the web page and be able to access our membership lists there as well.

Finally, we really need to develop a membership certificate so we can boost to the world that we belong to this excellent organization. I believe we should develop two certificates: a Founder's certificate, for those of us who made this organization possible, and a membership certificate for those who will carry this organization forward. I will have some samples of certificates for the membership to consider adopting at the May meeting.

### What's Happened Since May?

Although ASAMS is in it's infancy as an organization it's not been idle since being recognized as a constituent organization of AsMA. ASAMS members have been making a noticeable impact on the specialty of aerospace medicine.

The original group of aerospace medicine program directors that started the ball rolling that eventually became ASAMS have successfully developed competencies for aerospace medicine residents. These competencies have been accepted for publication in *Aviation, Space and Environmental Medicine* (ASEM) and should be in the May or June 99 issue. One of the exciting aspects about this development is that the preventive medicine Residency Review Committee of the American Council for Graduate Medical Education has adopted these competencies as the standard by which aerospace medicine residencies will be judged. This is a tremendous example of aerospace medicine finally taking it's future into it's own hands. The entire specialty owes a debt of gratitude to the authors of the competencies and the exceptional

degree of cooperation exhibited by the four residency programs. Hats off to: Col. Tom Yasuhara, USAFSAM, Dr. Robin Dodge, Wright State Univ., Capt. Fitz Jenkins, NAMI, and Dr. Richard Jennings, UTMB.

ASAMS' Aerospace Medicine Practice - Standards and Competency Committee has been working with AsMA's Education Committee to begin development of aerospace medicine practice guidelines. These practice guidelines will be submitted to ASEM for publication as they are developed. Col. Dan Van Syoc and Dr. Warren Silberman are heading up this project for ASAMS.

ASAMS has also spoken out on behalf of the specialty. In Feb 99 your president took on the American Medical Association (AMA) and it's Fellowship and Residency Electronic Interactive Data Access (FREIDA) web site.

FREIDA is the premier source of residency and fellowship information for medical students and residents in the U.S. FREIDA provides them with the most extensive listing of ACGME-accredited residency programs available anywhere on the internet. The AMA's intent is that medical students and residents will use FREIDA to select their residency/fellowship programs. FREIDA's web site address is: <http://www.ama-assn.org/cgi-bin/freida/freida.cgi>

The problem is that the AMA has elected not to list aerospace medicine on the main menu of FREIDA specialties/subspecialties. Aerospace medicine has been effectively hidden under the category preventive medicine. The result is that a medical student interested in aerospace medicine can only find aerospace programs if they know in advance that they are listed under preventive medicine. It is doubtful that many medical students are aware of that relationship.

The AMA lists 21 subspecialties of pediatrics on the FREIDA main menu under separate headings. It list three separate headings for geriatric medicine, three for hand surgery, and three for sports medicine, but it doesn't list aerospace medicine. The number of programs or number of residents/fellows enrolled in a specialty doesn't seem to be a criteria for making FREIDA's main page because FREIDA lists specialties/subspecialties that have neither programs nor residents.

The failure to list aerospace medicine was pointed out to the AMA and FREIDA last year by the Aerospace Medical Association. AsMA was assured that this deficiency would be corrected when FREIDA was updated this February. FREIDA has been updated, but the only correction made for aerospace medicine was to list it in parenthesis as AER MED next to preventive medicine. This is unacceptable.

In addition to lodging a formal complaint to the AMA and it's education division, I also enlisted the aid of AsMA, the American College of Occupational and Environmental Medicine, the American Board of Preventive Medicine, the Preventive Medicine Residency Review Committee of the ACGME, and all four of the aerospace medicine residency programs. At the very least the AMA is going to be aware that aerospace medicine specialists will not tolerate being ignored by our clinical brethren.

ASAMS also complained loudly to the AsMA leadership for neglecting to include aerospace medicine as one of the areas of expertise AsMA was searching for in it's membership survey of Feb 99. It was incredible to me that the AEROSPACE MEDICAL Association didn't think aerospace medicine was important enough to include it as an area of expertise. If ever anything pointed to the need for an aerospace medicine specialty group within AsMA this survey was it! I encourage each of you to add-in aerospace medicine to your membership survey form prior to returning it to AsMA.

ASAMS will also be represented at the next Preventive Medicine Forum meeting. The next meeting of the Forum is scheduled for July 99 in San Antonio.

#### What's in the Future?

#### Or What's on the Agenda for the May Meeting?

High on the list of priorities for our new organization is the need to establish itself and ensure it's continued success. Up to this point it has pretty much sustained itself through the generosity of a few of it's members (Thanks Dr. Stan Mohler). If it is to grow and exercise any leverage in the world of political medicine it will have to become self-supporting. Along these lines the dues structure will have to be addressed at the next annual meeting.

If ASAMS is to be effective in communicating as the voice of the specialty of aerospace medicine then it must be able to rapidly access it's member's views and opinions. E-mail and the Internet offer the best avenues to accomplish rapid communications, but determining the best process will need to be determined by the membership.

The membership will also need to determine who within ASAMS should represent it on the AsMA Council and AsMA's nominating committee.

Finally, this newsletter has been essentially a one man show. It's time for the organization to accept responsibility for the newsletter development and distribution. That will fall to the Society's Newsletter committee to coordinate.

#### President's Final Word

The drivers that motivated the establishment of the American College of Aerospace Medicine and it's subsequent development into the American Society of Aerospace Medicine Specialists remain viable and worthwhile:

- 1) Establishment of standards for the specialty of ASM.
- 2) Promotion of the interests of physicians who specialize in ASM.
- 3) Promoting and preserving the highest professional standards of care among ASM practitioners.
- 4) Striving to interest young physicians and potential employers in the specialty of ASM.

The events of the past year have highlighted the need to have a unified voice for the specialty of ASM and have further served as proof that AsMA desperately required the help of an internal specialty group like ASAMS. AsMA needed an ASM specialty group to provide direction and leadership in the science, policy, and practice of the specialty of ASM. It now has that organization.

#### AsMA's Business Meeting

I urge every ASAMS member to attend and vote at AsMA's Business meeting on Tuesday, 18 March 1999 in Detroit. At the Business lunch, AsMA will be voting on several changes to it's

constitution and by-laws. I believe the proposed changes will greatly enhance AsMA's ability to represent the field of aerospace medicine and be more responsive to its members needs and desires. Please attend the business meeting and express the voice of aerospace medicine in your votes.

### Next Membership Meeting

The next ASAMS membership meeting will be held in conjunction with the Annual Scientific Meeting of AsMA in Detroit, MI. It will begin at 0730 hours on Thursday, 20 May 99, in a room yet to be determined. Notification will be made of the place as soon as it is available. See you there.

Disclaimer: the opinions, interpretations, conclusions, and recommendations are those of the Officers of the American Society of Aerospace Medicine Specialists and are not necessarily endorsed by the DoD, U.S. Army, Navy, or Air Force.