

SOUTHERN MEDICAL ASSOCIATION 96TH YEARBOOK



Alabama



Arkansas



District of
Columbia



Florida



Georgia



Kentucky



Louisiana



Maryland



Mississippi



Missouri



North Carolina



SOUTHERN MEDICAL ASSOCIATION

Anticipating Your Needs.....
.....Exceeding Your Expectations

96th ANNUAL SCIENTIFIC ASSEMBLY

November 14-16, 2002
Washington, DC



Oklahoma



South Carolina



Tennessee



Texas



Virginia



West Virginia



2001-2002 YEARBOOK

SOUTHERN MEDICAL ASSOCIATION

Name

Address

City

State

Zip

Telephone

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2001-2002 OFFICERS

SOUTHERN MEDICAL ASSOCIATION

SOUTHERN MEDICAL ASSOCIATION

Officers

President	Jean Edwards Holt, San Antonio, Texas
President-Elect	Michael G. Mackey, Jonesboro, Arkansas
Chief Executive Officer	Jim Leverett, Birmingham, Alabama

Council Members

	Term Expires
James C. Waites	Laurel, Mississippi 2002
Robert L. Baldwin	Birmingham, Alabama 2004
W. John Giller, Jr.	El Dorado, Arkansas 2006
Richard P. DeRosa	Washington, D.C. 2002
Clifford W. Lober	Kissimmee, Florida 2002
Bashir A. Chaudhary	Augusta, Georgia 2006
Nancy C. Swikert	Florence, Kentucky 2004
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Albert J. Campbell, Jr.	Sedalia, Missouri 2003
David F. Martin	Winston-Salem, North Carolina 2003
Charles A. Farmer, Jr.	Tulsa, Oklahoma 2002
Donald R. Johnson II	Mt. Pleasant, South Carolina 2002
William Browder	Johnson City, Tennessee 2003
Veronica K. Piziak	Temple, Texas 2006
T. Rudolph Howell	Richmond, Virginia 2002
W. Alva Deardorff	Charleston, West Virginia 2004

Executive Committee of the Council

President	Jean Edwards Holt
President-Elect	Michael G. Mackey
Immediate Past-President	James C. Waites
President-Elect Designate	

PRESIDENT



Jean Edwards Holt, M.D., M.H.A.

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E-MAIL: j1947holt@aol.com

BIRTHDATE: September 18, 1947

BIRTHPLACE: Lamar, Missouri

SPOUSE: G. Richard Holt, M.D.

EDUCATION:

B.A. degree, University of Missouri-Columbia, 1968

M.D. degree, University of Missouri-Columbia, 1972

M.H.A. degree, Trinity University, 1999

SPECIALTY: Ophthalmology

JOINED SOUTHERN MEDICAL ASSOCIATION: 1979

OFFICES HELD IN SMA:

Secretary-Elect, Section on Ophthalmology, 1986-1987

Secretary, Section on Ophthalmology, 1988-1990

Vice-Chairman, Section on Ophthalmology, 1990-1991

Chairman, Section on Ophthalmology, 1991-1992

Associate Councilor from Texas, 1992-1994

Councilor from Texas, 1994-2000

Member of the Executive Committee of the Council, 1997-2003

President-Elect, 2000-2001

President, 2001-2002

PRESIDENT-ELECT



Michael G. Mackey, M.D.

HOME ADDRESS:

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BIRTHDATE: January 28, 1948

BIRTHPLACE: Hot Springs, Arkansas

SPOUSE: Cathy

EDUCATION:

B.A. degree, Hendrix College, 1969

M.D. degree, University of Arkansas School of Medicine, 1973

SPECIALTY: Nephrology

JOINED SOUTHERN MEDICAL ASSOCIATION: 1985

OFFICES HELD IN SMA:

Associate Councilor from Arkansas, 1990-1994

Councilor from Arkansas, 1994-2001

Member of the Executive Committee of the Council, 1997-2004

President-Elect, 2001-2002

PAST-PRESIDENT



James C. Waites, M.D.

HOME ADDRESS:

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BIRTHDATE: March 11, 1934

BIRTHPLACE: Centerville, Mississippi

SPOUSE: Jo

EDUCATION:

B.S. degree, University of Southern Mississippi, 1954

M.D. degree, University of Mississippi Medical School, 1958

SPECIALTY: Family Practice

JOINED SOUTHERN MEDICAL ASSOCIATION: 1962

OFFICES HELD IN SMA:

Associate Councilor from Mississippi, 1986-1993

Councilor from Mississippi, 1993-1999

Member of the Executive Committee of the Council, 1995-2002

Vice-Chairman of the Council, 1996-1998

Chairman of the Council, 1998-1999

President-Elect, 1999-2000

President, 2000-2001

Immediate Past-President, 2001-2002

EXECUTIVE VICE- PRESIDENT/CEO



Jim Leverett

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BIRTHPLACE: LaFayette, Alabama

SPOUSE: Trish

EDUCATION:

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M.B.A. degree, Samford University

JOINED SOUTHERN MEDICAL ASSOCIATION: March 2000

OFFICES HELD IN SMA:

Executive Vice-President/CEO, 2000-

Managing Editor, *Southern Medical Journal*, 2000-

EDITOR-SOUTHERN MEDICAL JOURNAL



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BIRTHPLACE: Alexandria, Egypt

SPOUSE: Eleanor

EDUCATION:

University of Alexandria, Egypt, M.D., 1968
University of London, England, MRSC, LRCP, 1973
Royal College of Physicians, London, 1974

SPECIALTY: Internal Medicine/Geriatric Medicine

JOINED SOUTHERN MEDICAL ASSOCIATION: 1987

OFFICES HELD IN SMA:

Associate Councilor from Tennessee, 1989-1992
Councilor from Tennessee, 1992-1999
Member of the Executive Committee of the Council, 1994-1996
Vice-Chairman of the Council, 1995-1996
Chairman of the Council, 1996-1998
President-Elect, 1998-1999
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Editor, Southern Medical Journal, 2000-

COUNCILOR

ALABAMA



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BIRTHDATE: November 3, 1943

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SPOUSE: Pat

EDUCATION:

BS degree, University of Alabama, 1964
MD degree, University of Alabama School of Medicine, 1968

SPECIALTY: Otolaryngology/Neurotology

JOINED SOUTHERN MEDICAL ASSOCIATION: 1974

OFFICES HELD IN SMA:

Secretary-Elect, Section on Otolaryngology, 1976-1977
Secretary, Section on Otolaryngology, 1977-1980
Chairman-Elect, Section on Otolaryngology, 1980-1981
Chairman, Section on Otolaryngology, 1981-1982
Associate Councilor from Alabama, 1983-1987
Councilor from Alabama, 1987-1992
Member, Executive Committee of the Council, 1987-1988
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Bean, Jessie (Mrs. Stuart), Auxiliary Councilors for Health Education and Research and
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Boulware, Dennis (Rheumatology)
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Culpepper, R. Michael (Internal Medicine)
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Dunn, Ebba (Mrs. Julius), Auxiliary Bylaws Committee Member
Eichold, Samuel (Internal Medicine)
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Judge, D. Joseph (Pediatrics)
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Smith, Jr., J. Graham (Dermatology)
Teplick, Steven (Radiology)
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Thomas, William O. (Member, Journal Editorial Board)
Tucker, J. Allan, (Family Practice)
Turner, Jr., Malcolm E., Member, Journal Editorial Board
Wadibia, E. Chuma (Member, Journal Editorial Board)
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JOINED SOUTHERN MEDICAL ASSOCIATION: 1978

OFFICES HELD IN SMA:

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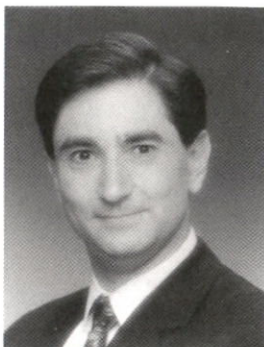
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Huskins, John (Family Practice)
Jacks, David C. (Urology)
Jansen, G. Thomas (Dermatology)
Klapper, Margaret S. (Internal Medicine)
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Mabry, Ruth (Mrs. Charles), Auxiliary Councilor for Doctors' Day
Mackey, Cathy (Mrs. Michael G.), Auxiliary Membership Committee Member
Mackey, Michael G. (Nephrology)
Pappas, Gwen (Mrs. Deno), Auxiliary Councilor for Medical Heritage and Long Range
Planning Committee Member
Price, Lawrence (Family Practice)
Redman, Anna T. (Family Practice)
Redman, John E. (Urology)
Rodgers, Rita (Mrs. Charles), Auxiliary Councilor for Health Education
Wilson, Alan K. (Surgeon)
Wynne, George F. (Family Practice)

COUNCILOR

DISTRICT OF COLUMBIA



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BIRTHPLACE: Orange, New Jersey

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EDUCATION:

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M.D. degree, Georgetown University Medical School, 1972

SPECIALTY: General Surgery/Laparoscopic Surgery

JOINED SOUTHERN MEDICAL ASSOCIATION: 1985

OFFICES HELD IN SMA:

Associate Councilor from the District of Columbia, 1989-1992

Councilor from the District of Columbia, 1992-2002

Member of the Executive Committee of the Council, 1997-2001

ASSOCIATE COUNCILORS

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SPECIALTY: Obstetrics & Gynecology

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DISTRICT OF COLUMBIA LEADERSHIP

DeRosa, Donna (Mrs. Richard P.), Auxiliary President-Elect

DeRosa, Richard P. (General Surgery/Laparoscopic Surgery)

DeVore, Paul A. (Geriatrics)

Emma, Robert (Psychiatry)

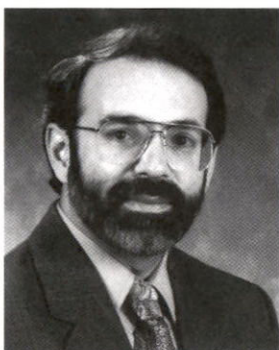
Gold, Ellen (Mrs. Michael), Auxiliary Councilor for Doctors' Day

Hill, Jr., Charles F. (Obstetrics & Gynecology)

Letterman, Gordon S. (Plastic & Reconstructive Surgery)

Reiter, Mark (Obstetrics & Gynecology)

COUNCILOR FLORIDA



Clifford W. Lober, M.D.

HOME ADDRESS:

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BIRTHDATE: August 25, 1951

BIRTHPLACE: New York, New York

SPOUSE: Randee

EDUCATION: M.D. degree, Duke University School of Medicine, 1974

SPECIALTY: Dermatology

JOINED SOUTHERN MEDICAL ASSOCIATION: 1985

OFFICES HELD IN SMA:

Vice-Chairman, Section on Dermatology, 1985-1986

Secretary-Elect, Section on Dermatology, 1986-1987

Secretary, Section on Dermatology, 1987-1990

Chairman-Elect, Section on Dermatology, 1990-1991

Chairman, Section on Dermatology, 1991-1992

Associate Councilor from Florida, 1991-1995

Councilor from Florida, 1995-2002

Member, Executive Committee of the Council, 1998-2001

ASSOCIATE COUNCILORS

FLORIDA

JEFFERSON D. MORGAN, M.D.

Ameripath/American Laboratory Association
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SPECIALTY: Pathology

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FLORIDA LEADERSHIP

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Nominating Committee Member
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Ferguson, Emmett B. (Occupational Medicine)
Gallagher, Joseph (Colon & Rectal Surgery)
Giesen, Jr., Andrew F. (Radiology)
Hill, Washington C. (Obstetrics & Gynecology)
Hutton, Marge (Mrs. Patrick), Auxiliary Councilor for Medical Heritage
Jankauskas, Saulius (Plastic & Reconstructive Surgery)
Kagan, Liz (Mrs. John), Auxiliary Bylaws Committee Member
Kurzner, Howard (Orthopaedic)
Lober, Clifford W. (Dermatology)
MacLeod, Sandra (Emergency Medicine)
Marcus, Rochelle (Mrs. David), Auxiliary Councilor for Health Education
Morgan, Jefferson D. (Pathology)
Murrah, Jr., Robert L. (Orthopaedic)
Peaden, Jr., Durell (Emergency Medicine)
Pell, Donald M. (Emergency Medicine)
Pell, Paula Oliver (Emergency Medicine)
Perniciaro, Charles V. (Dermatology)
Rosabal, Orestes G. (Orthopaedic & Trauma Surgery)
Seeger, James M. (Surgery)
Wheeler, Steve D. (Neurology & Psychiatry)
Winchester, Carol (Mrs. Gary), Auxiliary Councilor for Doctors' Day

COUNCILOR

GEORGIA



Bashir A. Chaudhary, M.D., FCCP, FACP, FAASM

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BIRTHDATE: October 11, 1946

BIRTHPLACE: Shimla, Punjab

SPOUSE: Tesneem Kauser Chaudhary, M.D.

EDUCATION:

M.B.B.S. degree, King Edward Medical College, Lahore, Pakistan, 1970

SPECIALTY: Sleep Medicine

JOINED SOUTHERN MEDICAL ASSOCIATION: 1976

OFFICES HELD IN SMA:

Secretary, Section on Chest Diseases, 1982-1985, 1988-1991

Vice Chairman, Section on Chest Diseases, 1997-2000

Chairman, Section on Chest Diseases, 2000-present

Associate Councilor from Georgia, 1995-2001

Councilor from Georgia, 2001-2006

ASSOCIATE COUNCILORS

GEORGIA

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GEORGIA LEADERSHIP

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Brant, Nancy (Mrs. Jeffrey), Auxiliary Councilor for Medical Heritage
Brooks, Deborah (Mrs. William), Auxiliary Health Education Judges Committee
Burson, Jr., E. Napier (Gastroenterology)
Chambers, Russell C. (Internal Medicine)
Chaudhary, Bashir A. (Sleep Medicine)
Collins, William C. (Orthopaedic)
Cox, Frederick (Pediatrics)
Daus, Susan (Mrs. Kevin M.), Auxiliary Doctors' Day Judges Chair and Nominations Committee
Drake, Kelly T. (Oncology)
DuPre, John (Internal Medicine)
Farrow, Royal (Roy) T. (Pediatrics)
Fine, Pat (Mrs. Robert M.), Auxiliary Medical Heritage Judges Committee
Fleming, Lamar L. (Orthopaedic Surgery)
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Jones, Bobby W. (Internal Medicine)
Joyner, Douglas R. (Surgery)
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Lovell, Wood W. (Orthopaedic Surgery)
Moore, Jr., William W. (Neurosurgery)
Rahimi, Ali R. (Internal Medicine)
Smith III, George L. (Family Practice)
Smith, Kay (Mrs. Larry), Auxiliary Councilor for Doctors' Day
Tanner, Terrell B. (Family Practice, Medical Management)
Teeslink, C. Rex (Radiology)
Tidwell, Miriam (Mrs. T. Jackson), Auxiliary Councilor for Health Education
Tippins, Barbara (Mrs. William C.), Auxiliary Bylaws Chair
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COUNCILOR KENTUCKY



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JOINED SOUTHERN MEDICAL ASSOCIATION: 1990

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Associate Councilor from Kentucky, 1990-1996

Councilor from Kentucky, 1996-2004

Member of the Executive Committee of the Council, 1999-2001

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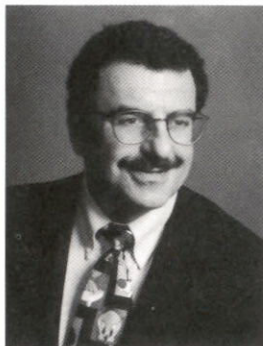
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KENTUCKY LEADERSHIP

Bunnell, Nancy (Mrs. Thomas), Auxiliary Membership Committee
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Burki, Nausherwan K. (Pulmonary Diseases)
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Davé, Uday (Otolaryngology and Head and Neck Surgery)
Davis, Gregory J. (Pathology)
Davis, Mimi (Mrs. Brett), Auxiliary Councilor for Doctors' Day
Frost, Sandi (Mrs. Chris), Auxiliary Councilor for Health Education
King, Karen (Mrs. Malcolm), Auxiliary Councilor for Medical Heritage
McWhorter, Roberta (Mrs. Bennett), Auxiliary Medical Heritage Judges Chair
Overstreet, Robert G. (Internal Medicine)
Parson, B.J. (Orthopaedic Surgery)
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Polk, Jr., Hiram C. (Surgery)
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JOINED SOUTHERN MEDICAL ASSOCIATION: 1976

OFFICES HELD IN SMA:

Secretary Section of Ophthalmology, 1991-1994, 1991-2001

Vice-Chairman, Section of Ophthalmology, 1994-1995

Chairman, Section of Ophthalmology, 1995-1996

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Taylor, Charles E. (Internal Medicine)

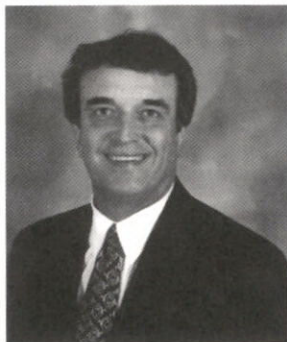
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Conant, James F. (Family Practice)
Conant, Marsha (Mrs. James), Auxiliary Councilor for Health Education
Dorton, Robert K. (Internal Medicine)
Dyer, Eileen (Mrs. Gary), Auxiliary Historian
Dyer, Gary A. (Dermatology)
Ekern, H. Peter (Family Practice)
Flaker, Greg C. (Cardiovascular Diseases)
Griggs, James Y. (Surgery)
H'Doubler, Joan (Mrs. Charles), Auxiliary Long Range Committee Chair
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Martin, Clarence (General Surgeon)
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Neal, Jr., Durwood E. (Urology)
Perkins, Marge (Mrs. David), Research and Education Endowment Fund Committee
Perry, Michael C. (Oncology)
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Sparkman, Thomas C. (Family Practice)
Stephenson, Jr., Hugh E. (Thoracic Surgery)
Underwood, Marilyn (Mrs. Johnson), Auxiliary Councilor for Medical Heritage
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Councilor from North Carolina, 1996-2003

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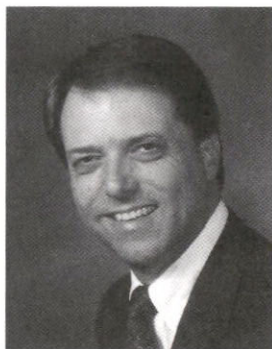
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Goldner, J. Leonard (Orthopaedic)
Hayes, Imogene (Mrs. Hugh), Auxiliary Councilor for Doctors' Day
Hertzberg, Barbara S. (Radiology)
Hurt, Peggy (Mrs. Joe), Auxiliary Councilor for Medical Heritage
Koman, L. Andrew (Orthopaedic)
Kragel, Peter J. (Pathology)
Lachiewicz, Paul F. (Orthopaedic Surgery)
Liles, George W. (Surgery)
Martin, David F. (Orthopaedic & Trauma Surgery)
McCollum, Donald E. (Orthopaedic)
Nitka, James (Ortho & Trauma Surgery)
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Scanlan, Virginia (Mrs. James), Auxiliary Councilor for Health Education
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JOINED SOUTHERN MEDICAL ASSOCIATION: 1987

OFFICES HELD IN SMA:

Chairman, Section on Emergency Medicine, 1990-1991

Secretary-Elect, Section on Emergency Medicine, 1991-1992

Secretary, Section on Emergency Medicine, 1992-1993

Associate Councilor from Oklahoma, 1990-1993

Councilor from Oklahoma, 1993-2002

Member of the Executive Committee of the Council, 1995-1996, 1997-2001

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Jett, Barbara (Mrs. Mason), Auxiliary Health Education Judges Chair

Mask, Karen (Mrs. Dennis), Auxiliary Councilor for Doctors' Day

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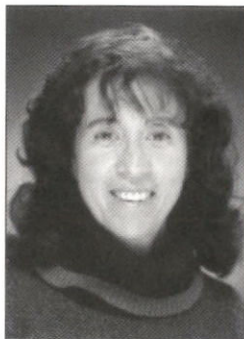
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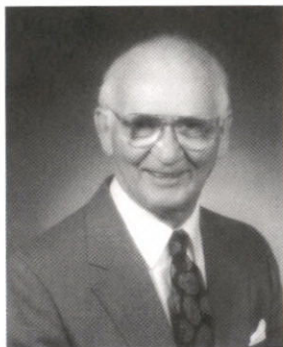
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(Continued on next page)

Committee Structure

I. PRESIDENTIAL COMMITTEE ON SPECIAL AWARDS
(Members Unpublished)

II. PRESIDENTIAL COMMITTEE ON SELECTIONS

Michael G. Mackey, M.D., Chairman

Braxter P. Irby, Jr., M.D.

Robert W. Klink, M.D.

Clifford W. Lober, M.D.

Nancy C. Swikert, M.D.

Living Past Presidents

	Years Served
Guy T. Vise, Sr.	1966-1967
J. Leonard Goldner	1969-1970
George J. Carroll	1973-1974
G. Thomas Jansen	1976-1977
Andrew F. Giesen, Jr.	1977-1978
Thomas B. Dameron, Jr.	1978-1979
G. Baker Hubbard, Sr.	1979-1980
J. Ralph Meier	1980-1981
M. Pinson Neal, Jr.	1982-1983
Richard D. Richards	1983-1984
John B. Lynch	1984-1985
Guy T. Vise, Jr.	1985-1986
William W. Moore, Jr.	1986-1987
J. Lee Dockery	1987-1988
Roger L. Mell	1988-1989
Larry C. Smith	1989-1990
Jim C. Barnett	1990-1991
John F. Redman	1991-1992
Thomas C. Rowland, Jr.	1992-1993
Angus M. McBryde, Jr.	1993-1994
Louis A. Cancellaro	1994-1995
J. Edward Hill	1995-1996
Terrell B. Tanner	1996-1997
J. Lorin Mason, Jr.	1997-1998
Hugh E. Stephenson, Jr.	1998-1999
Ronald C. Hamdy	1999-2000
James C. Waites	2000-2001

Living Past Councilors

Years Served

ALABAMA

D. Joseph Judge	1972-1977
Margaret S. Klapper	1977-1982
Joaquin S. Aldrete	1982-1987
Robert L. Baldwin	1987-1992
J. Max Austin, Jr.	1992-1996
Ernest G. Moore, Jr.	1996-1999

ARKANSAS

George F. Wynne	1964-1969
G. Thomas Jansen	1969-1974
David L. Barclay	1974-1979
John F. Redman	1984-1989
David C. Jacks	1989-1994
Michael G. Mackey	1994-2001

DISTRICT OF COLUMBIA

George P. Blundell	1964-1969
W. Reams Perkins	1974-1979
Gordon S. Letterman	1984-1989

FLORIDA

Andrew F. Giesen, Jr.	1970-1975
J. Lee Dockery	1980-1985
Howard Kurzner	1985-1990
Orestes G. Rosabal	1990-1995

GEORGIA

Wood W. Lovell	1969-1974
C. Rex Teeslink	1974-1981
William W. Moore, Jr.	1981-1984
E. Napier Burson, Jr.	1984-1989
Terrell B. Tanner	1989-1994
George L. Smith III	1994-2001

KENTUCKY

Hiram C. Polk, Jr.	1972-1977
Robert G. Overstreet	1977-1982
Charles C. Smith, Jr.	1982-1987
Kenneth R. Crabtree	1987-1992

LOUISIANA

J. Ralph Meier	1973-1978
Paul B. Lansing	1984-1993
J. Patrick O'Leary	1993-2000

(Continued on next page)

Living Past Councilors

Years Served

MARYLAND

George H. Yeager	1966-1971
Robert T. Singleton	1971-1976
Richard D. Richards	1976-1981
William J. R. Dunseath	1981-1986
John F. Strahan	1986-1991
Albert H. Dudley III	1991-1996

MISSISSIPPI

Guy T. Vise, Sr.	1958-1963
Raymond F. Grenfell	1968-1973
Guy T. Vise, Jr.	1978-1983
Jim C. Barnett	1983-1988
J. Edward Hill	1988-1993
James C. Waites	1993-1999

MISSOURI

James Y. Griggs	1971-1976
Robert K. Dorton	1976-1978
Roger L. Mell	1978-1986
Harry S. Jonas, Jr.	1986-1987
Hugh E. Stephenson, Jr.	1987-1996

NORTH CAROLINA

J. Leonard Goldner	1961-1966
Thomas B. Dameron, Jr.	1971-1976
George W. Liles	1976-1981
Donald E. McCollum	1981-1986
Angus M. McBryde, Jr.	1986-1991
Thomas L. Pope, Jr.	1991-1996

OKLAHOMA

James E. White	1973-1978
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SOUTH CAROLINA

Warren Y. Adkins, Jr.	1980-1985
Thomas C. Rowland, Jr.	1985-1990
J. Lorin Mason, Jr.	1990-1995

TENNESSEE

Benjamin F. Byrd, Jr.	1962-1967
G. Baker Hubbard, Sr.	1972-1977
John B. Lynch	1977-1982
J. Patrick O'Leary	1982-1984
Louis A. Cancellaro	1984-1992
Ronald C. Hamdy	1992-1998

(Continued on next page)

Living Past Councilors

	Years Served
TEXAS	
Phillip W. Voltz, Jr.	1970-1975
John A. Webb	1980-1985
Joseph T. Painter	1985-1990
Charles B. McCall	1990-1994
Jean Edwards Holt	1994-2000
Theodore Rosen	2000-2001
VIRGINIA	
George J. Carroll	1965-1970
Jerome E. Adamson	1970-1973
M. Pinson Neal, Jr.	1973-1980
John A. Board	1985-1990
Robert W. Klink	1990-1994
WEST VIRGINIA	
Nime K. Joseph	1967-1972
M. Bruce Martin	1972-1977
Larry C. Smith	1982-1987
Jack R. Traylor, Jr.	1987-1992
Mehmet V. Kalaycioglu	1992-1999

2001-2002 Section Officers

ALLERGY & IMMUNOLOGY

Chairman

D. Lynn Dickens, M.D.

Secretary

Harini Hosain, M.D.

CARDIOLOGY

Chairman

Martin A. Alpert, M.D.

Secretary

James V. Talano, M.D.

Secretary-elect

Dwight D. Stapleton, M.D.

CHEST DISEASES

Chairman

Bashir A. Chaudhary, M.D.

Vice-Chairman

John DuPre, M.D.

Secretary

Nausherwan K. Burki, M.D.

COLON & RECTAL SURGERY

Secretary

Joseph Gallagher, M.D.

DERMATOLOGY

Chairman

Marilyn C. Ray, M.D.

Chairman-Elect

Charles V. Perniciaro, M.D.

Chairman-Emeritus

Philip R. Cohen, M.D.

Secretary

Erin E. Boh, M.D.

EMERGENCY MEDICINE

Chairman

William W. Bradford, M.D., FACEP

Secretary

Frederick B. Carlton, Jr., M.D.

FAMILY PRACTICE

Chairman

Kevin E. Burroughs, M.D.

Secretary

Thomas C. Sparkman, M.D.

GERIATRIC MEDICINE

Chairman

Robert M. Kruger, M.D.

Secretary

James J. Bernick, M.D.

GYNECOLOGY & OBSTETRICS

Chairman

Howard A. Shaw, M.D.

Secretary

Peter G. Rothschild, M.D.

MEDICAL MANAGEMENT & ADMINISTRATION

Chairman

Paula Oliver Pell, M.D.

Secretary

Gail V. Anderson, Jr., M.D.

Secretary-Elect

Sandra MacLeod, M.D., M.P.H.

MEDICINE

Chairman

Shakaib Rehman, M.D.

Secretary

Arthur P. Wolinsky, M.D.

Secretary-Elect

Ali R. Rahimi, M.D.

NEUROSURGERY

Chairman

W. Michael Vise, M.D.

Secretary

Byron N. Bailey, M.D.

(Continued on next page)

2001-2002 Section Officers

OCCUPATIONAL & ENVIRONMENTAL MEDICINE

Chairman

Emmett B. Ferguson, M.D.

Vice-Chairman

Timothy Scott Prince, M.D.

Secretary

Mohammed I. Ranavaya, M.D., MS

ONCOLOGY

Secretary

Bernard F. Schneider, M.D., Ph.D.

OPHTHALMOLOGY

Chairman

Alan Schaeffer, M.D.

Secretary

George S. Ellis, Jr., M.D.

ORTHOPAEDIC & TRAUMA SURGERY

Chairman

James H. Armstrong, Jr., M.D.

OTOLARYNGOLOGY— HEAD & NECK SURGERY

Chairman

Paul Friedlander, M.D.

Secretary

Sylvester G. Ramirez, M.D.

PATHOLOGY

Chairman

Peter J. Kragel, M.D.

Secretary

Judy A. C. King, M.D., Ph.D.

PLASTIC & RECONSTRUCTIVE SURGERY

Secretary

Saulius Jankaskas, M.D.

PSYCHIATRY & NEUROLOGY

Chairman

Steve D. Wheeler, M.D.

Secretary

Richard Haaser, M.D.

RADIOLOGY

Chairman

Dennis Kay, M.D.

Secretary

Dan DeVun, M.D.

RHEUMATOLOGY

Chairman

Christopher Morris, M.D.

Secretary

Leonard H. Serebro, M.D.

SURGERY

Chairman

Steven C. Stain, M.D.

Secretary

Mark Wilson, M.D.

UROLOGY

Secretary

T. Ernesto Figueroa, M.D.

Affiliated Societies

Southern Orthopaedic Association (SOA founded 1983)

<i>President</i>	Riyaz Jinnah, M.D.
<i>President-Elect</i>	Champ L. Baker, Jr., M.D.
<i>Secretary/Vice President</i>	James H. Armstrong, M.D.
<i>Treasurer</i>	Robert M. Peroutka, M.D.
<i>Immediate Past President</i>	Robert S. Adelaar, M.D.
<i>Board of Trustees</i>	Joseph C. DeFiore, Jr., M.D. Lamar L. Fleming, M.D. Paul F. Lachiewicz, M.D. John McGraw, M.D. Robert L. Murrah, Jr., M.D. James A. Nunley, M.D. William C. Collins, M.D. - Historian
<i>2002 Annual Meeting</i>	April 2-7, Florence, Italy

Affiliated Societies

Southern Association for Oncology *(founded 1987)*

<i>President</i>	Howard A. Burris III, M.D.
<i>President-Elect</i>	C. Ronald Kersh, M.D.
<i>Secretary</i>	Michael C. Perry, M.D.
<i>Immediate Past President</i>	Kelly T. Drake, M.D.
<i>Board Of Trustees</i>	Frederic T. Billings III, M.D. Eli Glatstein, M.D. Robert C. Hermann, M.D. Hyman B. Muss, M.D. Bernie F. Schneider, M.D., Ph.D.
<i>2002 Annual Meeting</i>	July 18-20, Destin, Florida

AUXILIARY PRESIDENT



Mrs. Thomas C. (Carol) Sparkman

HOME ADDRESS:

2 Starwood Court, Cape Girardeau, MO 63701
TELEPHONE: (573) 335-8750; FAX: (573) 339-7824
E-MAIL: tcscas@midwest.net (w) tcscas@clas.net (h)

BIRTHPLACE: Cape Girardeau, MO

SPOUSE: Thomas C. Sparkman, M.D.

EDUCATION: Associate of Arts in Nursing - 1967 from Southeast Missouri State University
Bachelor of Science in Nursing - 1980 from Southeast Missouri State University, Cape Girardeau, MO

JOINED SOUTHERN MEDICAL ASSOCIATION AUXILIARY: 1965

BECAME ACTIVE MEMBER: 1986

OFFICES HELD IN SMA AUXILIARY:

Vice-Councilor, 1991-1992
Councilor, 1992-1993
Councilor, Doctors' Day, 1993-1994
Vice-President, Membership, 1996-1997
Vice-President, Health Education, 1997-1998
Vice-President, Doctors' Day, 1998-1999
Vice-President, Medical Heritage, 1999-2000
President-Elect, 2000-2001
President, 2001-2002

COMMITTEE APPOINTMENTS:

Judge, Doctors' Day, 1986-1987
Doctors' Day Judges Chair, 1993-1994
Historian, 1995-1996
Long Range Planning Committee, 1997-1998

AUXILIARY PRESIDENT-ELECT



Mrs. Richard P. (Donna) DeRosa

HOME ADDRESS:

3823 North Randolph Court, Chain Bridge Terrace, Arlington, VA 22207

TELEPHONE: (703) 558-0544; FAX: (703) 558-0541

E-MAIL: dawnade@aol.com

BIRTHPLACE: Worcester, Massachusetts

SPOUSE: Richard P. DeRosa, M.D.

EDUCATION: St. Vincent School of Nursing
Assumption College, 1971

JOINED SOUTHERN MEDICAL ASSOCIATION AUXILIARY: 1988

BECAME ACTIVE MEMBER: 1988

OFFICES HELD IN SMA AUXILIARY:

Vice-Councilor, 1987, 1988, 1989, 1991

Councilor, 1991-1992, 1992-1993

Councilor, Health Education, 1993-1994

Vice President, Doctors' Day, 1994-1995

Secretary, 1998-1999

President-Elect, 2001-2002

COMMITTEE APPOINTMENTS:

Breast Cancer Awareness Committee, 1991-1992

Doctors' Day Postal Plate Chair, 1993-1994

Memorial Chair, 1996-1997

Chair, Bylaws Committee, 1997-1998

Membership Committee, 1999-2000

Chair, Society of 1924 Committee, 2000-2001

Auxiliary Officers

<i>President:</i>	CAROL SPARKMAN (Thomas) , 2 Starwood Ct., Cape Girardeau, MO 63701, Telephone (573) 334-6826 (w), (573) 335-8760 (h), Fax (573) 339-7824 E-mail: tcscas@midwest.net (w) tcscas@clas.net (h)
<i>President Elect:</i>	DONNA DEROSA (Richard) , 3823 North Randolph Ct., Chain Bridge Terrace, Arlington, VA 22207, Telephone (703) 558-0544, Fax (703) 558-0541, E-mail: dawnade@aol.com
<i>Vice President/ Doctors' Day:</i>	NANCY LINDSTROM (Eric) , 809 Cherry Ln., Laurel, MS 39440, Telephone (601) 649-4805, Fax (601) 649-5151, E-mail: nlindstrom@c-gate.net
<i>Vice President/ Health Education:</i>	SANDY CURRIE (Hugh) , 327 Lake Ridge Rd., Canyon, TX 79015, Telephone (806) 622-8373, Fax (806) 622-8374, E-mail: scurrie@netjava.com
<i>Vice President/ Medical Heritage:</i>	CAROLE THOMAS (Lamar) , 3573 Rockhill Rd., Birmingham, AL 35223, Telephone (205) 967-6954, E-mail: ettarich@aol.com
<i>Vice President/ Membership:</i>	NICKI BAZACO (George) , Windham Farm, 14727 Mountain Rd., Hillsboro, VA 20132, Telephone (540) 668-6464, Fax (540) 668-9052, E-mail: gbazaco@hotmail.com
<i>Secretary:</i>	CHARLENE GUARISCO (Michael) , 4831 Woodlake Dr., Baton Rouge, LA 70817, Telephone (225) 756-2923, Fax (225) 755-6204, E-mail: cdguarisco@aol.com
<i>Immediate Past President:</i>	BETTY HAISTEN (M. Wyatt) , 3590 Brentwood Dr., Beaumont, TX 77706, Telephone (409) 892-0429, Fax (409) 892-3743, E-mail: bettywyatt@aol.com
<i>Parliamentarian:</i>	MARTHA BRUNER (C.B.) , 3700 Autumn Dr., Ft. Worth, TX 76109, Telephone (817) 924-4989, Fax (817) 924-1023, E-mail: bruner3@earthlink.net

Auxiliary Councilors for Doctors' Day

		<i>Term Expires</i>
<i>Alabama:</i>	RUTH LICHTENFELD (Norman)	2003
<i>Arkansas:</i>	RUTH MABRY (Charles)	2003
<i>District of Columbia:</i>	ELLEN GOLD (Michael)	2003
<i>Florida:</i>	CAROL WINCHESTER (Gary)	2003
<i>Georgia:</i>	KAY SMITH (Larry)	2003
<i>Kentucky:</i>	MIMI DAVIS (Brett)	2002
<i>Louisiana:</i>	ELEANOR MOFFETT (John)	2003
<i>Maryland:</i>	MYRNA GOODMAN (Stuart)	2002
<i>Mississippi:</i>	MARY HELEN SCHAEFFER (Philip)	2002
<i>Missouri:</i>	EILEEN CHALK (David)	2002
<i>North Carolina:</i>	IMOGENE HAYES (Hugh)	2003
<i>Oklahoma:</i>	KAREN MASK (Dennis)	2002
<i>South Carolina:</i>	ALEXIS ALIA (Richard T.)	2003
<i>Tennessee:</i>	BARBARA TRAUTMAN (Robert J., Jr.)	2003
<i>Texas:</i>	ELSIE PEREZ (Fred)	2002
<i>Virginia:</i>	EILEEN THOMASON (Phillip R.)	2002
<i>West Virginia:</i>	KATHY FORTUNATO (Michael)	2002

Auxiliary Councilors for Health Education

Term Expires

<i>Alabama:</i>	JESSIE BEAN (Stuart)	2003
<i>Arkansas:</i>	RITA RODGERS (Charles)	2003
<i>Florida:</i>	ROCHELLE MARCUS (David)	2003
<i>Georgia:</i>	MIRIAM TIDWELL (T. Jackson)	2003
<i>Kentucky:</i>	SANDI FROST (Chris)	2002
<i>Louisiana:</i>	EMMA BORDERS (Robert)	2003
<i>Maryland:</i>	VICKIE CASIBANG, MD (Vincent)	2002
<i>Mississippi:</i>	LIZABETH BRUMLEY (Michael)	2003
<i>Missouri:</i>	MARSHA CONANT (James)	2002
<i>North Carolina:</i>	VIRGINIA SCANLAN (James)	2003
<i>Oklahoma:</i>	MAUREEN BYNUM (Chester)	2003
<i>South Carolina:</i>	EMILY HILL (Kenneth)	2003
<i>Tennessee:</i>	MARCIA YOUNG (J. Howard)	2003
<i>Texas:</i>	DIXIE LOUIS (Edward)	2002
<i>Virginia:</i>	HEIDI GUERRERO (Victor)	2003
<i>West Virginia:</i>	BETTY KUPPUSAMI (Muthusami)	2003

Auxiliary Councilors for Medical Heritage

		Term Expires
Alabama:	NELL WILLIAMS (Samuel)	2003
Arkansas:	GWEN PAPPAS (Deno)	2002
Florida:	MARGE HUTTON (Patrick)	2003
Georgia:	NANCY BRANT (Jeffrey)	2003
Kentucky:	KAREN KING (Malcolm)	2003
Louisiana:	CARRIE CASTROGIOVANNI (Jack)	2003
Maryland:	GEORGIA LIZAS (Peter C.)	2002
Mississippi:	MELISSA IRBY (Braxter P., Jr.)	2003
Missouri:	MARILYN UNDERWOOD (Johnson, IV)	2003
North Carolina:	PEGGY HURT (Joe)	2003
Oklahoma:	MARY ANN COUCH (E. P.)	2003
South Carolina:	STEPHANIE EVANS (John)	2003
Tennessee:	JOANN CRABTREE (John D.)	2002
Texas:	BARBARA HAUSER (Harris M.)	2003
Virginia:	SHIRLEY BUCHANAN (Robert J.)	2002
West Virginia:	AMY RICARD (Jose)	2002

Out of Region Councilors

Term Expires

EASTERN	CHRISTINE KLINE (John), New Jersey	2002
WESTERN	DEE TALMAGE (Lance), Ohio	2002

Standing Committees

ARCHIVES CHAIR	WINYSS SHEPARD (Richard)	Alabama
BYLAWS CHAIR	BARBARA TIPPINS (William C.)	Georgia
COMMITTEE MEMBERS	EBBA DUNN (Julius E., Jr.)	Alabama
	LIZ KAGAN (John)	Florida
	GWEN PARSON (B.J.)	Kentucky
CONVENTION CHAIR	MARY ANN NIRSCHL (Robert)	Virginia
CO-CHAIR	KAY REARDON (William)	Virginia
DOCTORS' DAY CHAIR VICE PRESIDENT	NANCY LINDSTROM (Eric)	Mississippi
ACCESS CHAIR	GAIL DELANEY (Gary)	South Carolina
JUDGES CHAIR	SUSAN DAUS (Kevin M.)	Georgia
JUDGES COMMITTEE	JANIE ALTMAYER (Robert)	West Virginia
	TEENA ANDERSON (Rodney Dean)	Texas
	AROONA DAVÉ (Uday)	Kentucky
	NANCY HINES (Leonard)	Tennessee
FINANCE CHAIR	DONNA GOSNEY (Michael)	Alabama
COMMITTEE MEMBERS	DONNA DEROSA (Richard P.)	DC
	CAROL SPARKMAN (Thomas)	Missouri
HEALTH EDUCATION CHAIR VICE PRESIDENT	SANDY CURRIE (Hugh)	Texas
ACCESS CHAIR	AMAL SHAMIEH (Fayez)	Louisiana
JUDGES CHAIR	BARBARA JETT (Mason)	Oklahoma

Standing Committees

JUDGES COMMITTEE	DEBORAH BROOKS (William) DOLORES CHANDRA (Channappa) ANNELLE TANNER (Martin) JO WAITES (James)	Georgia Tennessee Louisiana Mississippi
LONG RANGE PLANNING CHAIR	JOAN H'DOUBLER (Charles)	Missouri
LONG RANGE PLANNING COMMITTEE	AROONA DAVÉ (Uday) DONNA DEROSA (Richard) BETTY HAISTEN (M. Wyatt) SUSAN PADDACK (Gary) GWEN PAPPAS (Deno) CAROL SPARKMAN (Thomas)	Kentucky District of Columbia Texas Oklahoma Arkansas Missouri
MEDICAL HERITAGE CHAIR VICE PRESIDENT	CAROLE THOMAS (Lamar)	Alabama
ACCESS CHAIR	BETTY HESTER (William)	South Carolina
JUDGES CHAIR	ROBERTA MCWHORTER (Bennett)	Kentucky
JUDGES COMMITTEE	MARTHA CLIPPINGER (David) PAT FINE (Robert) PACITA SALON (Iligino)	Mississippi Georgia West Virginia
MEMBERSHIP CHAIR VICE PRESIDENT	NICKI BAZACO (George)	Virginia
COMMITTEE MEMBERS	ANN BALLARD (Richard) CHING BARRETTO (Alberto) BARBARA BLANTON (Terrell) NANCY BUNNELL (Thomas) KATHY CARMICHAEL (Ben) SHERI FARMER (Charles) CHERYL HOWELL (Rudolph) JEANNY KALAYCIOGLU (Mehmet) CHRISTINE KLINE (John) CATHY MACKEY (Michael) EILEENE MCRAE (John) BETTY MOLZ (Edward) PEGGY PEROUTKA (Robert) ANN SIVA (Sivalingam) DEE TALMAGE (Lance) GAYLE VILMER (Stephen)	Texas Florida Tennessee Kentucky Mississippi Oklahoma Virginia West Virginia & Louisiana Eastern Region & South Carolina Arkansas Mississippi & Alabama Maryland Maryland North Carolina Western Region & Georgia Missouri

Standing Committees

MEMORIAL CHAIR	PEGGY CRAWFORD (Dewitt)	Mississippi
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NOMINATING COMMITTEE CHAIR	BETTY HAISTEN (Wyatt)	Texas
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COMMITTEE MEMBERS	CHING BARRETTO (Alberto)	Florida
	JESSIE BEAN (Stuart)	Alabama
	KATHY CARMICHAEL (Ben)	Mississippi
	SUSAN DAUS (Kevin)	Georgia

Alternate	KAY SMITH (Larry)	Georgia
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Alternate	AROONA DAVÉ (Uday)	Kentucky
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BYLAWS: "The two candidates placing sixth and seventh in the number of votes received will serve as alternates."

SOUTHERN CONNECTION

EDITOR	SHIRLEY MEIERE (Cheney)	South Carolina
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ASSISTANT EDITOR	VIRGINIA BROWN (Dor. W., Jr.)	Texas
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SPECIAL COMMITTEES

HISTORIAN/CHAIR	EILEEN DYER (Gary)	Missouri
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READING COMMITTEE PRESIDENT	CAROL SPARKMAN (Thomas)	Missouri
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PRESIDENT ELECT	DONNA DEROSA (Richard)	DC
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PARLIAMENTARIAN	MARTHA BRUNER (C.B.)	Texas
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SMA RESEARCH AND EDUCATION ENDOWMENT FUND COMMITTEE

CHAIR	NANCY SWIKERT, MD (Donald)	Kentucky
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COMMITTEE MEMBERS

JOYCE BAHRAINI (Nasser H.)	Maryland	SANCY MCCOOL (E. Edward)	Louisiana
JESSIE BEAN (Stuart K.)	Alabama	NELL MIDDLETON (William)	Mississippi
LINDA ELLIOTT (Terry)	West Virginia	BETTY MOLZ (Edward)	Maryland
DONNA GOSNEY (Michael)	Alabama	MARGE PERKINS (David)	Missouri
		MERRELL ROGERS (Lee H.)	Mississippi

Management Staff



Executive Vice-President/CEO: **Jim Leverett**

Primary Responsibilities: Implementing the policies and direction of the Council; Executing and Administering Association Programs; Managing the Day to Day Operation of the Association; Employment and Direction of all Staff personnel; Represents the Association to the Public and other Associations; Treasurer of Association; Managing Editor of the *Southern Medical Journal* and other publications; President of SMA Services, Inc.



Director of Association Services: **Cynthia L. Lichtefeld**

Primary Responsibilities: Developing and implementing programs on Membership Recruitment and Retention; Meeting and Education Planning for Affiliated Society Meetings; Research and Education Endowment Fund; Auxiliary; Affiliated Societies and SMA Mailing Service and Copy Center.



Chief Financial Officer: **William Dunn**

Primary Responsibilities: Managing Financial Resources of the Association and Affiliates; Accounting Department; Information Systems Department; Grants, Loans and Scholarship Programs; Management of the Facilities; Coordination of Annual Meeting Registration.



Director of Education: **John W. Gillespie, Jr.**

Primary Responsibilities: Planning, developing, implementing and evaluating educational programs and services, including the Annual Scientific Assembly; meeting planning services; SMA Travel Services; editorial services for the *Southern Medical Journal* and the *Journal of the Southern Orthopaedic Association*.

Management Staff



Director of Fringe Benefit Programs: **Luke Hartsfield**
Primary Responsibilities: Management, Marketing, Administration, Product Development and Financial Accountability for the Association's Insurance, Retirement, IRA and Investment and Financial Services Programs.



Vice President for Marketing: **Ed Waldron**
Primary Responsibilities: Directing the Marketing Plan for all SMA products, programs, and services.
Director Practice Performance Products and Services: Design Print and SMA's Website Management



Director of Information Services: **Gary Mullins**
Primary Responsibilities: Determines SMA's current and projected long-term system needs to accomplish the organization's business objectives. Develops, implements, and administers the overall technology policies, goals and structure for Southern Medical Association. Manages the technology resources of the association; intranet/network facilities, Internet initiatives, multimedia initiatives, and various related technology initiatives.



MINUTES FROM MEETINGS

95TH ANNUAL SCIENTIFIC ASSEMBLY
SOUTHERN MEDICAL ASSOCIATION
NASHVILLE, TENNESSEE

Includes all Meetings held between
January 2001 and November 2001



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Proceedings of the Council

- Hilton Atlanta Airport Hotel •
- Atlanta, Georgia •
- Saturday, January 20, 2001 •
- 10:00 a.m. - 4:00 p.m. •

CALL TO ORDER

The Council of the Southern Medical Association met at the Hilton Atlanta Airport Hotel, Atlanta, Georgia, on Saturday, January 20, 2001, at 10:00 a.m. The meeting was called to order by the President, James C. Waites, M.D.

ROLL CALL

Members of the Council present were James C. Waites, M.D., President, Laurel, Mississippi; Jean Edwards Holt, M.D., M.H.A., President-Elect, San Antonio, Texas; Robert L. Baldwin, M.D., Birmingham, Alabama; George L. Smith III, M.D., Covington, Georgia; Nancy C. Swikert, M.D., Florence, Kentucky; George S. Ellis, Jr., M.D., New Orleans, Louisiana; Robert M. Peroutka, M.D., Baltimore, Maryland; Braxter P. Irby, Jr., M.D., Brookhaven, Mississippi; Albert J. Campbell, Jr., M.D., Sedalia, Missouri; Charles A. Farmer, Jr., M.D., Tulsa, Oklahoma; Donald R. Johnson II, M.D., Mt. Pleasant, South Carolina; William Browder, M.D., Johnson City, Tennessee; Theodore Rosen, M.D., Houston, Texas; and W. Alva Deardorff, M.D., Charleston, West Virginia.

Members of the Council not present were Hugh E. Stephenson, Jr., M.D., Columbia, Missouri; Richard P. DeRosa, M.D., Washington, D.C.; Clifford W. Lober, M.D., Kissimmee, Florida; David F. Martin, M.D., Winston-Salem, North Carolina; Michael G. Mackey, M.D., Jonesboro, Arkansas; and T. Rudolph Howell, M.D., Richmond, Virginia.

Staff present from Birmingham, Alabama, were Mr. Jim Leverett, Executive Vice-President/CEO; Mrs.

Cynthia Lichtefeld, Director of Association Services; Mr. Bill Dunn, Chief Financial Officer; Mr. Luke Hartsfield, Director of Fringe Benefit Programs; Mr. Ed Waldron, Vice President for Marketing and Director of Practice Management Services; Mr. John Gillespie, Assistant Director of Education; and Mrs. Judy Fields, Administrative Assistant.

Dr. Waites asked Dr. Smith to give an invocation and ask for guidance over the meeting.

Dr. Holt introduced Dr. Theodore Rosen as the new Councilor from Texas.

APPROVAL OF MINUTES

Prior to the meeting, copies of the Minutes of the October 31-November 1, 2000, meeting of the Council were distributed for review.

ACTION: It was moved by Dr. Smith and seconded by Dr. Irby to approve the Minutes taken during the October 31-November 1, 2000, meeting of the Council. The motion carried unanimously.

REPORT OF THE PRESIDENT

James C. Waites, M.D.

Dr. Waites reported that it has been a very busy year. He stated that SMA is still working with the IRS. He stated that SMA continues to have problems but hopefully, the Council will be able to solve some of the problems facing the organization.

FINANCIAL REPORT

William Dunn

Prior to the meeting, copies of the

Financial Statement for November were distributed for review. Mr. Bill Dunn gave an overview of the financial statement.

Mr. Dunn reported that the Administrative/Budget Committee tries to meet monthly by conference call to review the financial statement for the previous month. He stated that a summary report, as well as the minutes, would be sent to the Council on a monthly basis after the Administrative/Budget Committee has met.

Mr. Dunn reported that the auditors have left the SMA office but we still have final schedules to complete for submission. He stated that the audit is progressing well and we hope they will be finished soon.

Mr. Dunn also reported that SMA's attorney, Mr. Rusty Irby, has been talking with the IRS and they have requested additional information from SMA. He stated that Mr. Irby indicated that the IRS agent, Ms. Donna Pitman, has not asked any questions at this time concerning the "Intermediate Sanctions Document".

Mr. Leverett stated that the 1997 tax return for SMA and SMA Services remains under audit by the IRS. He reported that after we resolve 1997 issues, the process most likely will move to the 1998, 1999, and 2000 returns.

Mr. Dunn presented the following resolutions to be adopted by the Council of the Southern Medical Association:

RECOMMENDATION: "BE IT RESOLVED, That the Council of Southern Medical Association hereby approves and adopts an Amendment to the Southern Medical Association Flexible Benefit Plan Adoption Agreement effective January 1, 2001, which deletes the Eye Care benefit and revises the Medical Expense benefit to allow for \$350 of reimbursement for each employee, a copy of said amendment to be retained in the offices of the Corporation;

BE IT FURTHER RESOLVED, That the appropriate officers of the Corporation be, and they hereby are, authorized and directed to execute said Amendment on behalf of Corporation as Employer."

ACTION: It was moved by Dr. Baldwin and seconded that the Council of the Southern Medical Association hereby approves and adopts an Amendment to the Southern Medical Association Flexible Benefit Plan Adoption Agreement effective January 1, 2001, which deletes the Eye Care benefit and revises the Medical Expense benefit to allow for \$350 of reimbursement for each employee, a copy of said amendment to be retained in the offices of the Corporation;

BE IT FURTHER RESOLVED, That the appropriate officers of the Corporation be, and they hereby are, authorized and directed to execute said Amendment on behalf of Corporation as Employer." The motion carried unanimously.

REPORT OF THE EXECUTIVE VICE-PRESIDENT

Mr. Jim Leverett

Mr. Leverett gave an outline of the financial results of the 2000 Annual Meeting as well as a summary of trends relating to the 2000 meeting and previous annual meetings. He stated that the Annual Meeting budgeted a loss of \$919,067 or the Orlando meeting; however, we were able to cut more than \$200,000 from our expenses to bring our loss down to approximately \$700,000. He reported that SMA cannot continue to sustain that kind of loss.

He stated that the financial picture is better than was anticipated. He stated we were able to reduce the expenses from the Dallas meeting and further reduce the expenses through careful allocation for the Orlando meeting.

Mr. Leverett stated that we continue

to get positive comments regarding our educational programs from members that completed exit surveys.

Mr. Leverett reported that we are in the process of looking into ways that we can reposition SMA related to external audiences for additional revenue to the organization. He stated that although SMA has good CME programs, good products and services, and a good service level in our organization, participation in its programs are not increasing.

Mr. Leverett stated that we are also looking into ways to better package our products to vendors that want exposure in our organization. He stated that we have been working on ways to enhance what we are providing, however, we need to package it differently. He stated that we have arrived at four selling points to offer the vendor community:

1. Continuing Education - Resort Based
2. Web-Site
3. *Monthly Journal*
4. Major meeting at the end of the year

Mr. Leverett stated that we are working on ways to carry this message to our vendors. He stated that SMA plans to present an opportunity for vendors to partner with us in a resort based continuing education program as a sponsor or exhibitor and carry that exposure to its next activity. He also stated that we would offer a package to cover all four areas or customize the package to better service the needs of the vendor. The price for the package will vary according to the package the individual vendor selects.

Mr. Leverett reported that SMA has reaccreditation scheduled in June and the staff has been working on the reaccreditation application, which will be completed and submitted to ACCME by the end of March.

Mr. Leverett reported that he has

taken over the responsibilities as interim Director of Education as SMA recruits a new director.

REPORT OF THE DIRECTORS

Dr. Waites called on each Director to briefly report on his or her department activities.

Mrs. Lichtefeld reported that a request has been made by Glenn Barton, M.D., Immediate Past President of the Eastern Orthopaedic Association, for Southern Medical Association to submit a proposal to manage the Eastern Orthopaedic Association.

ACTION: A motion was made by Dr. Baldwin and seconded by Dr. Rosen for Southern Medical Association to proceed with a proposal appropriate with SMA's needs and in its best interest with the Eastern Orthopaedic Association. The motion carried unanimously.

Dr. Baldwin requested that the issue of the Insurance Program with the AMA be put on the Agenda for the Summer Council Meeting in July.

EXECUTIVE SESSION

The staff was requested to leave the meeting after which the Council went into a closed executive session.

REPORT OF THE 2001 ANNUAL MEETING PLANNING COMMITTEE

Dr. Browder, Dr. Holt, Mr. Leverett

Mr. Leverett reported that we are working in an effort to find ways to go forward with the Nashville Annual Meeting. He stated that the staff looked at suggestions that were made and came up with an option to redesign the meeting to achieve better participation, greater revenue and fewer expenses. Mr. Leverett stated in working with Dr. Holt and Dr. Browder, suggestions were made to increase the general ses-

sions and decrease other activities but maintain connections with the Sections and Section Secretaries.

Dr. Holt reported how important it is for the Annual Meeting to be changed because it is not making money for the organization, is not very creative, and at times not serving its purpose. She stated that we have been having good attendance in the larger symposiums; however, there are a few meetings that have small attendance. She stated that with the audiovisual charges, SMA cannot afford to support small meetings. She also stated that SMA realizes the sensitivity of the sections and are aware that one of its strengths is the multi-disciplinary aspect of the sections. She stated that the staff has been working on reinventing the annual meeting. She stated that it is time to reemphasize our strengths, which is a large multi-specialty group meeting, which will not only attract attendance, but attract corporate donors and maintain the identity and knowledge of the sections. She stated we are trying to merge these two elements together.

A document was passed out to the Council with a proposed room layout for the annual meeting sessions including paper presentations. Dr. Browder reported that the objective is to use five (5) major presentation rooms to be utilized by the Joint Sections and includes paper presentations. He stated that the sections have been broken into five (5) teams (for the purpose of the annual meeting only). He stated that a section secretary has been designated as the leader of each team and the leader of the section was selected by the highest number of abstracts submitted at the Orlando meeting. The teams were configured based on commonality as well as the number of abstracts they submitted last year so no team would be overloaded with abstracts.

Dr. Browder stated that the section teams would have time available on Friday afternoon and Saturday for their

abstract presentations as well as any section meetings. He stated that this calculated to about six and one half hours of time. He also stated that the team leader would need to form a consensus with the section secretaries on his/her team to decide which abstracts would be presented orally and which would be presented as posters. He also stated that the team leaders and section secretaries will still be responsible for planning the joint meeting sessions as has been done in the past but using a five (5) room format.

Mr. Leverett reported that with this format, there would not be any competition with abstracts that are being presented. He stated that we hope that this will focus on more participation in the resident's papers, as nothing is scheduled on Friday afternoon that will be competing with abstract presentations.

Mr. Leverett stated that we feel by following the five room layout presented, changing the educational format, and increasing the registration fee from \$195 to \$250, if we have 820 fully paid registrants at \$250, and 180 residents paying half that fee, we could generate approximately \$72,000 additional revenue over and above what we had in Orlando from registration fees.

He also stated that with the change in the educational format going to larger group sessions, we should be able to get an additional \$70,000 from sponsor funding for the meeting.

Mr. Leverett stated that we are working to get the cost of the annual meeting down significantly from where it was in the past. He stated that with the changes that have been presented, SMA will be able to sell the meeting to the funding community and get better financial support. He also stated that we feel it is a meeting that will be more appealing to our membership.

ACTION: A motion was made by Dr. Baldwin and seconded by Dr. Ellis that the Council accept the principle of the new format regarding the new room layout for the Annual Meeting and

take under advisement to arrange for all the Section Secretaries to communicate in some way at the same time. The Council also approved an increase in the registration fee from \$195 to \$250. The motion carried unanimously.

ACTION: A motion was made by Dr. Ellis and seconded by Dr. Holt that the Southern Medical Association not charge the residents a registration fee to the Annual Meeting. The motion carried unanimously.

ACTION: A motion was made by Dr. Holt and seconded by Dr. Johnson that the Southern Medical Association not give resident awards at the Annual Meeting. The motion was approved.

ACTION: A motion was made and seconded that Southern Medical Association give the Southern Orthopaedic Association a financial commitment in the amount of \$25,000 per year for three years for a total of \$75,000 to be used to fulfill a commitment originally made for SMA to help offset a debt owed by SOA. To respond to SMA's commitment to SOA, SMA will provide a credit to SOA in the amount of approximately \$2,000 a month for three years to be applied to SOA's management fee. The motion carried unanimously.

ACTION: A motion was made by Dr. Johnson and seconded by Dr. Browder that we change the timeframe of the President-Elect process to be

completed by July 1st. The motion carried unanimously.

Dr. Peroutka presented the following recommendation to the Council for consideration:

RECOMMENDATION: That the Southern Orthopaedic Association invite the Eastern Orthopaedic Association to hold their 2004 Annual Meeting (Scientific Session Only) in conjunction with the SMA Annual Meeting and the SOA Fall Meeting in New Orleans.

ACTION: A motion was made by Dr. Browder and seconded by Dr. Baldwin that the Southern Orthopaedic Association invite the Eastern Orthopaedic Association to hold their 2004 Annual Meeting (Scientific Session Only) in conjunction with the SMA Annual Meeting and the SOA Fall Meeting in New Orleans. The motion carried unanimously.

Dr. Waites reported that the Summer Meeting of the Council has been scheduled to take place at the Kingsmill Resort, Williamsburg, Virginia, on July 26-29, 2001.

ADJOURNMENT

There being no further business to come before the Council, Dr. Waites adjourned the meeting at approximately 4:00 p.m.

Proceedings of the Council

- Kingsmill Resort •
- Williamsburg, Virginia •
- Friday-Saturday, July 27-28, 2001 •
- 8:00 a.m. - 1:00 p.m. •

CALL TO ORDER

The Council of the Southern Medical Association met at the Kingsmill Resort, Williamsburg, Virginia, on July 27-28, 2001. The meeting was called to order at 8:10 a.m. by the President, James C. Waites, M.D.

ROLL CALL

Members of the Council present were James C. Waites, M.D., President, Laurel, Mississippi; Jean Edwards Holt, M.D., M.H.A., President-Elect, San Antonio, Texas; Hugh E. Stephenson, Jr., M.D., Immediate Past-President, Columbia, Missouri (Friday Only); Robert L. Baldwin, M.D., Birmingham, Alabama; Michael G. Mackey, M.D., Jonesboro, Arkansas; Richard P. DeRosa, M.D., Washington, D.C.; George L. Smith III, M.D., Covington, Georgia; Nancy C. Swikert, M.D., Florence, Kentucky; George S. Ellis, Jr., M.D., New Orleans, Louisiana; Robert M. Peroutka, M.D., Baltimore, Maryland; Braxter P. Irby, Jr., M.D., Brookhaven, Mississippi (Saturday Only); Albert J. Campbell, Jr., M.D., Sedalia, Missouri; Charles A. Farmer, Jr., M.D., Tulsa, Oklahoma; Donald R. Johnson II, M.D., Mt. Pleasant, South Carolina; T. Rudolph Howell, M.D., Richmond, Virginia; and W. Alva Deardorff, M.D., Charleston, West Virginia.

Members of the Council not present were Clifford W. Lober, M.D., Kissimmee, Florida; David F. Martin, M.D., Winston-Salem, North Carolina; William Browder, M.D., Johnson City, Tennessee; and Theodore Rosen, M.D., Houston, Texas.

Also in attendance were Ronald C. Hamdy, M.D., Editor, *Southern Medical Journal*, Johnson City, Tennessee; Mrs. Betty Haisten, SMAA President, Beaumont, Texas; and Mrs. Carol Sparkman, SMAA President-Elect, Cape Girardeau, Missouri.

Staff present from Birmingham, Alabama, were Mr. Jim Leverett, Executive Vice-President/CEO; Mrs. Cynthia Lichtefeld, Director of Association Services; Mr. Bill Dunn, Chief Financial Officer; Mr. John Gillespie, Director of Education; Mr. Luke Hartsfield, Director of Fringe Benefit Programs; Mr. Ed Waldron, Vice President for Marketing and Director of Practice Management Services; and Mrs. Judy Fields, Administrative Assistant.

Dr. Waites asked Dr. Baldwin to give an invocation and ask for guidance over the next two days.

APPROVAL OF MINUTES

Prior to the meeting, copies of the Minutes taken during the January 20, 2001, meeting of the Council were distributed for review.

ACTION: It was moved by Dr. Swikert and seconded by Dr. Baldwin to approve the Minutes taken during the January 20, 2001, meeting of the Council. The motion carried unanimously.

REPORT OF THE PRESIDENT

James C. Waites, M.D.

Dr. Waites reported that SMA is

still working with the IRS. He stated that it has been a busy year for him. Dr. Waites stated that he feels this is a very significant meeting for SMA with important issues to cover.

Dr. Waites recognized Dr. Michael Mackey as the recently elected 2001-2002 President-Elect Designate.

REPORT OF THE AUXILIARY PRESIDENT

Mrs. Betty Haisten

Mrs. Haisten reported that the profit from the sale of the *Southern Connection Cookbook* of \$5,485.39 and from Doctors' Day merchandise of \$2,497.24 brought in enough money to pay for the Doctors' Day, Health Education, and part of the Medical Heritage allotments that are sent to each state.

Mrs. Haisten stated that she and Mrs. Carol Sparkman visited eleven member states this spring and will visit three more in the fall. She stated that they stayed well within the budget guidelines for these trips.

Mrs. Haisten stated that one cost cutting measure that has been implemented this year is to fax and e-mail whenever possible to help reduce mailing expenses.

Mrs. Haisten stated that in an effort to support the SMA Research and Education Endowment Fund the Auxiliary is sponsoring a raffle for a 4 night Carnival cruise plus airfare to either the Bahamas or the Caribbean. She stated that the trip is being donated by Meridian Enterprises. She stated that the cost for a raffle ticket for this cruise is \$75.00.

Mrs. Haisten stated that the Auxiliary will hold a silent auction prior to the Saturday evening Dinner Dance at the Annual Meeting in November.

She stated that monies received from this event will be donated to the Research and Education Endowment Fund.

Mrs. Haisten stated that it has been a pleasure for her to work with the Council this year. She stated that having the opportunity to represent SMA and the SMAA has been an honor and she thanked everyone for the opportunity to be at the meeting.

Mrs. Haisten then introduced the SMAA President-Elect, Mrs. Carol Sparkman.

ANNUAL REPORTS OF THE STATE COUNCILORS

Dr. Waites invited each Councilor to comment on any state activity that was not in his or her state report.

REPORT OF THE EXECUTIVE VICE-PRESIDENT Mr. Jim Leverett

Mr. Leverett reported that SMA has experienced a positive change in its bottom line during fiscal year 2000-2001, primarily due to expense reduction and control.

Mr. Leverett indicated that SMA had a one-day ACCME Accreditation Review. He stated it went well and the results will be available sometime in November.

Mr. Leverett reported that SMA has completed major revisions in the format and content of the Annual Scientific Assembly. He stated this format was designed to improve attendance and further reduce expenses.

Mr. Leverett also reported that the *Southern Medical Journal* has had major revisions. He stated that Dr. Ronald Hamdy has done a tremendous job in revising the *Journal*.

Mr. Leverett reported that SMA

has introduced a quarterly newsletter, *ChartNotes*, to our members.

He also reported that a revision has been made to the SMA website and a separate linked site for SMA Services has been created to remove for-profit products and services from the .org site.

Mr. Leverett reported that SMA has completed a study with the Marsh Company of its Insurance and Retirement programs. As a result, a test program funded by Seabury, a Marsh subsidiary, is being developed to evaluate a new segmented marketing approach for membership recruitment and if successful, for education programs and products/services.

He also reported that we have completed the transfer of the LTD/Life program from Cigna to Standard with improved benefits for LTD and Life plus a three-year rate guarantee. He stated that SMA has also completed requirements for offering Long Term Care products through GE Capital.

Mr. Leverett reported that SMA had completed the dissolution of GoDoc.com while retaining registration on eleven Go.Com's and also completed dissolution of the Southern Association of Primary Care.

Mr. Leverett reported that we are initiating programs to encourage member participation in replenishing the Research and Education Endowment Fund.

Mr. Leverett reported that a letter from the IRS had been received requesting additional information from SMA.

REPORT OF THE EDITOR

Ronald C. Hamdy, M.D.

Dr. Hamdy reported that the *Journal* has gone to a new format. He

stated that he hopes to be able to maintain this format. Dr. Hamdy stated that the continuation of the Special CME Feature Section will depend on the feedback he receives from readers.

Dr. Hamdy reported that his goal is to try and make the *SMJ* indispensable for practicing physicians whether they are specialist or primary care physicians and that they will keep the *Journal* readily available. He stated that he hopes the *Journal* will help increase membership and also increase our ability to attract advertisement.

Dr. Hamdy stated that as interest in the *Journal* increases, he hopes the *Journal* will only be available to members of SMA. He stated that as it is now, anyone is able to access the entire *Journal* on the SMA website.

Dr. Hamdy stated that the Table of Contents has been expanded to include a brief description of most articles.

Dr. Hamdy stated that while he was developing the *SMJ*, his goal was to meet the needs of SMA's members as well as practicing physicians anywhere in the world.

Dr. Hamdy stated that he needs volunteers to review, write, and edit articles as well as review books.

Dr. Hamdy requested the Council's permission to have a free hand to add and remove members of the Editorial Board.

ACTION: A motion was made by Dr. DeRosa and seconded by Dr. Swikert to permit Dr. Hamdy to add or remove members of the Editorial Board for one year with final reporting to the Council. The motion carried unanimously.

REPORT OF THE COORDINATING COMMITTEE ON EDUCATION

**Mr. John Gillespie and
Jean Edwards Holt, M.D., M.H.A.**

Dr. Holt introduced Mr. John Gillespie as the new Director of Education.

Mr. Gillespie reported that SMA has tried to establish very clear levels of priorities for the Department of Education that will allow SMA to move forward in a positive and responsible synergistic direction. He stated that some of the quality improvements would be through marketing. He stated this includes not only the design but also the timing and targeted audiences that are selected. He stated that SMA wants each of its marketing pieces to have membership impact as well as a membership message and to work with SMA Services whenever it is appropriate so that we are able to extend the reach of its message.

Mr. Gillespie stated that the Education Department has established goals and will be very aggressive in looking for external funding.

Dr. Holt reported that this year's Annual Meeting is going to be a test. She asked everyone to have a positive attitude about the meeting. She stated that a selected group of physicians came to Birmingham and completely revamped the Annual Meeting and left the meeting feeling very positive. She stated that a tremendous amount of work has been done to put the meeting together.

Dr. Holt stated that SMA is looking at its regional CME meetings very critically. She stated that she feels that the cruise CME is a hot topic in medical organizations today. She stated that we have completed two, and feels that this is a niche that can be utilized

to attract young physicians and their families.

Dr. Holt reported that SMA is completely redoing its certificate program. She stated that SMA has some outstanding and unique offerings for our membership. She stated that our educational offerings can continue to be a flagship for our organization.

Mr. Leverett expressed his appreciation to Dr. Holt for the years she has served the Education Committee.

REPORT OF COORDINATING COMMITTEE ON MEMBERSHIP

Mrs. Cynthia L. Lichtefeld

Mrs. Lichtefeld stated that the official report of the Coordinating Committee on Membership was included in the notebook distributed prior to the meeting. She indicated that Dr. Irby would attend the Council meeting on Saturday and would present his comments at that time. As an update to the report, Mrs. Lichtefeld reported that SMA's total membership is 40,241. This includes 14,938 dues paying members, 537 students, 1,299 residents, 18,732 complimentary members, 1,293 Emeritus members, 2,566 inactive retired members, and 816 residency directors. She further explained that the 14,938 dues paying members include 12,891 full dues paying physicians members.

Mrs. Lichtefeld reported that every year since 1997 SMA has developed a membership recruitment strategy and this strategy included a direct mail campaign, an interim program and the President's Leadership Program. The direct mail program developed since 1997 has included over 100,000 non-member physicians each year. She stated that we have continued to refine that program to reduce cost.

Mrs. Lichtefeld reported that in June 2001, SMA began a new multi-year dues structure program. She stated that current members, as well as new members, have the opportunity to choose a dues payment plan that will provide a \$15 savings on a two year plan and \$25 on a three year plan.

Mrs. Lichtefeld reported that SMA has received a good response to its new quarterly publication, *ChartNotes*. Members have received two issues to date and the third issue will be mailed in September.

Mrs. Lichtefeld reported that the SOA meeting was held July 19-21, 2001, with an attendance of 113 physicians. Mrs. Lichtefeld stated that SAO's meeting is scheduled to be held August 2-4, 2001, with a total of 79 members registered for this meeting.

Mrs. Lichtefeld reported that SMA is going to be working on a membership recruitment program with Seabury and Smith Consultants.

**REPORT OF
COORDINATING COMMITTEE
ON INSURANCE and
PHYSICIANS' RETIREMENT
Mr. Luke Hartsfield**

Mr. Hartsfield reported that a new underwriter (The Standard Insurance Company) was selected for the Life, Accidental Death and Dismemberment (AD&D), and Long-Term Disability (LTD) products. Implementation of this transfer occurred on January 1, 2001. He stated that the annualized premiums for both the SMA participants and participants from the American College of Radiology (ACR) was in excess of \$7.1 million in annualized premiums.

Mr. Hartsfield reported that with careful management, new products

and modified products can be introduced in programs at the cutting edge of the industry.

Mr. Hartsfield reported that the SMA sponsored Retirement Program faced some difficult challenges this past year. He stated that although the retirement program did not undergo a detailed analysis similar to that of the insurance program, Marsh USA took a cursory look at the operation. He reported that Marsh USA advised that the Retirement Program staff was operating efficiently in the administration of the IRA, Pension and 401(k) programs.

Mr. Hartsfield reported that we have successfully worked with The Prudential to add Institutional (no load) mutual funds to our IRA contract. He stated this will enhance the IRA by providing the participant the opportunity to select from a list of approximately 25 very attractive mutual funds.

**REPORT OF THE
COORDINATING COMMITTEE
ON PRACTICE MANAGEMENT
George L. Smith III, M.D. and
Mr. Ed Waldron**

Dr. Smith reported that the Coordinating Committee on Practice Management Services held a conference call in February. He reported that there was a consensus of opinion that the 95th Annual Scientific Assembly should show an increase in emphasis on the issues of Practice Management.

Mr. Waldron reported that Practice Management Services has changed its program drastically in the last two years. He stated Practice Management Service is pursuing the following five goals: (1) to keep physician members from having to avail themselves of expensive consulting services; (2)

develop a comprehensive knowledge management service (which is both clinical and administrative); (3) upgrade our personnel to marry our information technology and the Internet; (4) move more technological programs into the educational venue; and (5) developing a business office management program for the Internet which will provide practice performance applications. This program should be available in the next 90 days.

REPORT OF THE BUDGET

Hugh E. Stephenson, Jr., M.D.

Dr. Stephenson stated that the Coordinating Committee on Administration/Budget Committee has been meeting every month for the past two years to review the monthly financial results. Dr. Stephenson stated that the Committee met by conference call on July 23, 2001, to review and discuss the 2001-2002 Budget with Mr. Leverett and Mr. Dunn.

Prior to the meeting, copies of the Budget were distributed for review. Dr. Stephenson called on Mr. Jim Leverett and Mr. Bill Dunn who presented an overview of the Budget for 2001-2002 and facilitated the Council's discussion on the Budget assumptions.

ACTION: It was moved by Dr. Baldwin and seconded by Dr. Ellis that the Budget for 2001-2002 be approved. The motion carried unanimously.

ACTION: A motion was made by Dr. Holt and seconded by Dr. Mackey that we take \$40,000 from Operating Expenses to pay for grants and scholarships that have already been committed for the year ending June 20, 2001. The motion carried unanimously.

ACTION: A motion was made by Dr. Holt and seconded to put \$40,000 into the Research and Education Endowment Fund to cover grants and scholarships this year. This money will be repaid from interest earned as well as monies raised from contributions. The motion was approved with two opposing.

Dr. Holt stated that the mission of the Auxiliary this year is to raise funds for the Research and Education Endowment Fund.

Dr. Howell challenged all members of the Council to become members of the Society of 1906. Dr. Holt challenged the present members of the Society of 1906 to consider reactivating their donations on a yearly basis. Dr. Baldwin seconded this challenge.

Dr. Farmer requested that when scholarships are made available to the deans of medical schools, SMA should have conditions that medical schools should follow to be eligible for its scholarships.

REPORT OF ADVISORY COMMITTEE ON CONSTITUTION & BYLAWS Michael G. Mackey, M.D.

Dr. Mackey presented recommended Bylaws changes for approval by the Council from the Advisory Committee on Constitution and Bylaws. Discussion ensued regarding the following Bylaws changes:

ARTICLE I. MEMBERSHIP

Section 1. Classification

There shall be the following classes of members.

C. Interim Members

An Interim Member shall be a physician who is otherwise eligible for membership in the Association and who has been invited by the Association to become an Interim Member.

Interim Members shall ~~not be required to pay dues~~, have a dues structure as determined by the Council, and shall have such rights and privilege of membership as may be determined by the Council.

The term of membership of Interim Members shall be ~~limited to one year~~, determined by the Council.

Interim Members shall not be eligible to vote or hold office.

G. Medical Practice Services Members

Membership is available to any medical practice where at least one physician of the practice is an Active Member of ~~SMA the Association~~. Non-physician staff employed by the medical practice services member are eligible to participate in the programs and services offered through the medical practice membership. Non-physician staffs are eligible by virtue of the fact that the medical practice pays the dues established for this membership category by the Council.

H. Corporate Members

Corporate membership may be available to any medical practice where all physicians are individual members of ~~SMA the Association~~ and non-physician staff are eligible to participate in the programs and services offered through the medical practice membership. Corporate members pay dues as established by the Council. Physician and non-physician members in the Corporate Program are eligible for spe-

cial rates on products as defined by ~~SMA~~ the Association.

I. Institutional Members. The Association may have Institutional Members composed of Physicians who are members of medical associations which have entered into affiliation agreements with the Association for educational programs and other programs of the Association; provided, the privileges and dues of such members shall be as specified in the affiliation agreements but they shall not be greater than the privileges or dues of dues paying Associate Members.

Section 3. Termination of Membership

Any member who is subject to a license revocation or suspension by a state board of medical examiners or comparable licensing agency shall automatically forfeit ~~his~~ his/her membership in ~~this~~ the Association.

ARTICLE III. OFFICERS

Section 2. Appointed Officers

The appointed officers of the Association shall consist of the ~~Trustees and an~~ Executive Vice-President (CEO), who will also serve as the Treasurer of the Association.

Section 3. Qualifications

To be eligible for the office of President-Elect of the Association such person shall be a member in good standing of the Association and a current Councilor with at least two years experience **in his/her present term** as Councilor.

To be eligible for the office of Councilor, such person shall be a member in good standing of the Association and either currently be a Section Officer,

or an Associate Councilor, or have been an Associate Councilor within the last five years, or be a Past Councilor or have served in a leadership role in ~~SMA~~ the Association.

Section 4. Term of Office

~~B. The term of Trustees shall be for a period of six years commencing on the date of their appointment.~~

~~C.B.~~ Each elected or appointed officer shall serve the term designated or until ~~his~~ his/her successor is elected or appointed.

Section 5. Election Process for President-Elect

Eligible Councilors will declare their intent to run for the office of President-Elect by ~~March~~ January 1st each year. They will be required to submit standardized information relating to their accomplishments and involvement in ~~SMA~~ the Association to the ~~Central Office~~ Association's office at that time. This information along with a letter from each candidate stating his or her motivation to become President of the ~~SMA~~ Association will be ~~given to the Council at the Summer Council~~ sent to the Council along with the ballot by January 15. The ballot must be returned to an independent auditor identified by the ~~SMA~~ Association no later than ~~two weeks following the close of the Summer Council meeting~~ February 1. The ballots will be counted within five (5) working days after due date in the presence of the independent auditor, either the President, President-Elect, Immediate Past President, or Councilor representative appointed by the President and the Association's representative(s).

A final ballot will be mailed to the Council by ~~September~~ February 15 on which the names of the two candidates will be listed along with the standardized information provided to the Council. ~~at the Summer Meeting.~~ The Council will select which of the two candidates will become President-Elect. That ballot must be returned to the independent auditor by ~~September 30~~ March 1 in order to be counted. The President will be responsible for breaking any tie. ~~The ballots will be counted within five (5) working days after due date in the presence of the independent auditor, either the President, President-Elect, Immediate Past President, or Councilor representative appointed by the President, and the Association's representative(s).~~

Section 6. Election Process for Councilor

Councilors will be elected by mail ballot by all eligible active members within the state. The process will begin with the outgoing Councilor nominating four individuals who have agreed to serve as Councilor, prioritizing them from first through fourth. Nominees for Councilor must meet the qualifications outlined in Section 3. of this Article. Should a Councilor feel ~~he~~ he/she does not have four eligible candidates, a letter of explanation for a lesser number will be accepted. The Selections Committee will choose two names from those sought, received or considered by the Committee to be placed upon a ballot to be distributed to all eligible voting members in the state along with a brief written synopsis of each candidate's accomplishments, personal data and statement of why that individual would like to serve as Councilor.

The election will be managed through the ~~central office~~, **Association office**, which will maintain election results and supporting ballots for a period of six months. The winner will be that candidate who receives the simple majority of ballots cast and received by the election deadline. The President shall cast a vote only in the unlikely event of a tie vote between the candidates. The election winners will be announced approximately 60 days prior to the Annual Meeting in order that the Councilors-elect can make travel plans to be present for the meeting at which they will assume office.

Section 8. Duties of Officers

A. President

3. The President shall be the Chairman of the Council and of the Executive Committee of the Council, but shall not be eligible to vote for the election of a President-Elect except to cast a vote in the event of a tie. ~~He~~ **He/She** shall preside at all meetings of the Council and of the Executive Committee.
4. The President shall consult with the Committee on Scientific Activities in the formulation of the program for the **Annual Scientific Assembly**.

B. President-Elect

1. The President-Elect shall assist the President in the discharge of ~~his~~ **his/her** duties and in the absence of the President shall assume such duties.
7. The President-Elect shall serve as a liaison to the ~~Southern Medical Association's~~ **Auxiliary**.

~~D. Trustees~~

~~1. Composition~~

~~The Board of Trustees shall consist of the six most recent Past Presidents of the Association. A person shall automatically be appointed to the Board of Trustees as of the last day of that person's term of office as President.~~

2. Duties of the Board of Trustees

- ~~a. It shall be the duty and responsibility of the Board of Trustees to render advisory and consultative advice to the officers of the Association.~~
- ~~b. At the request of the Council, the Board of Trustees shall serve as the Auditing Committee. In so acting, it will be charged with the responsibility of reviewing the financial audits of the Association and they shall submit an annual audit report to the Executive Vice President, President-Elect and the President. When acting as the Auditing Committee they shall convene before or at the Annual Meeting of the Association for such purpose. The Auditing Committee shall act by the majority vote of the Trustees present.~~
- ~~c. The Board of Trustees shall serve as the History Committee of the Association.~~
- ~~d. The Board of Trustees shall have other duties as may be designated by either the Council or the President of the Association.~~

~~E.D. Councilors~~

7. Duties of Councilors

- b. Each Councilor will represent the Association to the members in ~~his~~ **his/her** state or district

and seek to encourage membership in and participation in the activities of the Association by physicians in ~~his~~ his/her state.

- d. Each Councilor shall perform such other duties as may be designated by ~~his~~ his/her position.

ARTICLE IV. ASSOCIATE COUNCILOR

A. Duties

Associate Councilors shall be charged with the duty and responsibility to stimulate interest in all activities of the Association with particular emphasis on membership, and to assist their respective Councilor in any way. In the absence of the Councilor, ~~he~~ he/she may appoint one of the Associate Councilors to act in ~~his~~ his/her stead as a member of the Council.

ARTICLE V. EXECUTIVE COMMITTEE

Section 1. Composition

The Executive Committee of the Council shall consist of the Immediate Past President, President, ~~and President-Elect~~, and **President-Elect Designate** of the Association, ~~and all Councilors having served as Councilor for three years or longer until the term of their Councilorship ends.~~

ARTICLE VI. COUNCIL APPOINTMENTS

Section 1. Executive Vice-President (CEO) and Treasurer

There shall be an Executive Vice-President (CEO) who shall be responsible for implementing the policies and direction of the Council; execute and administer Association programs; and manage the day-to-day operation of the Association. The Executive

Vice-President (CEO) shall employ and direct all staff personnel, full and part-time, including the assignment of duties of such employees. In this capacity, ~~he~~ he/she shall be generally charged with engaging, promoting, and assigning duties and tasks to all staff personnel, shall seek to expand the membership and participation of the Association and its activities, shall be generally charged to receive and administer funds of the Association, shall represent the Association to the public and to other Associations, and shall perform such other tasks and duties as may be delegated or assigned to ~~him~~ him/her by the Council. ~~He~~ He/She shall act as the Managing Editor of the *Southern Medical Journal* and other publications of the Association.

The offices of the Executive Vice-President (CEO) and Treasurer will be combined and vested in the same person at the discretion of the Council. The Treasurer shall be charged to receive all funds of the organization and deposit the same in a bank or banks located in the domicile of the Association and shall be held accountable for appropriate documentation for all financial transactions of the Association. Such depositories and investments shall be designated by the ~~Southern Medical~~ Association, the Council, and such appropriate advisory groups as approved by the Council. ~~He~~ He/She shall also perform other duties and tasks as assigned by the Council.

Section 2. Editor

- A. The Editor shall have the following areas of responsibilities:

3. Shall review, or cause to be reviewed, any books which in ~~his~~ his/her discretion merit the publication of a review in the

Southern Medical Journal.

5. May employ necessary secretarial assistance with the consent of the ~~Council~~ Executive Vice President (CEO).

ARTICLE VII. COMMITTEES

1. Coordinating Committees

- A. There shall be ~~eight~~ **five** Coordinating Committees to be known as:

1. Coordinating Committee on Education.
2. Coordinating Committee on Membership.
3. Coordinating Committee on Insurance and Physicians' Retirement Program.
4. ~~Coordinating Committee on Physicians' Retirement Program.~~
5. ~~4.~~ Coordinating Committee on Budget/Administration.
6. ~~5.~~ Coordinating Committee on Long-Range Planning.
7. ~~Coordinating Committee on Special Projects and Services.~~
8. ~~Coordinating Committee on Practice Management Services.~~

- B. Chairman.

4. ~~Each Coordinating Committee shall report in writing each year to the Executive Committee its activities and budget.~~

Section 2. Advisory Committees

- A. There ~~shall~~ **may** be ~~five~~ **eight** Advisory Committees known as:

1. Advisory Committee on Scientific Activities.
2. Advisory Committee on Grants, Loans and Scholarships.
3. Advisory Committee on Multi-Media Programs.

4. Advisory Committee on Constitution and Bylaws.
5. Advisory Committee on ~~Young Physicians~~ **New Physicians.**
6. Advisory Committee on Practice Management Services.
7. Advisory Committee on Special Projects and Services.
8. Advisory Committee on Management Compensation.

~~D. Reports of Advisory Committees:~~

~~Each Advisory Committee shall report in writing each year to the designated Coordinating Committee for such Advisory Committee its activities and budget.~~

Section 3. Presidential Committees

- A. There shall be ~~four~~ **two** Presidential Committees known as:

1. Presidential Committee on Special Awards.
2. Presidential Committee on Selections.

- B. There may be two Presidential Committees known as:

1. Presidential Committee on Endowments.
2. Presidential Committee on Affiliated Societies.

Section 5. Duties and Responsibilities of Coordinating, Advisory, and Presidential Committees

A. Coordinating Committee on Education:

Shall coordinate the activities of the Committee on Scientific Activities, the Committee on Multi-Media Programs and such Ad Hoc Committees as shall be annually assigned to it. The Coordinating Committee on Education shall be responsible for supervising all publications related to educa-

tion of the ~~SMA Association~~ acting in both a regulatory and advisory capacity. Suggested changes to any publication must be reviewed and approved by the Editor(s) and Executive Vice-President.

A-1. Advisory Committee on Scientific Activities

7. ~~Shall~~ May serve as an advisory group to the Section Secretaries in developing their Section specialty programs, **when appropriate**, and coordinating and assisting the Secretaries in arranging combined Section meetings.

A-2. Advisory Committee on Multi-Media Programs

It shall be the duty of this committee to review education programs developed for dissemination through electronic mediums and audio/video mediums.

A. Duties shall include:

1. ~~Dial Access.~~ As availability and needs arise, new programs shall be selected and negotiated with authors, editors and sponsors. All existing programs shall be reviewed on a regular basis so that material presented is current. Minor or major changes shall be made as necessary to maintain the newest and best material. The ~~Dial Access Index shall be maintained and updated whenever necessary.~~
2. ~~Video Access.~~ Production facilities, marketing methods and scientific material for videocassette programs shall be reviewed on an annual basis.

~~3. Internet Development Sub-Committee~~

~~By action of the Council, there will be a Sub-Committee on Internet Development whose responsibility will be to oversee the activities and development of SMA's internet web site and which will report through the Advisory Committee on Multi-Media Programs.~~

B. Coordinating Committee on Membership

Shall coordinate the activities of the **Advisory Committee on Young New Physicians** and such Ad Hoc Committees as shall be annually assigned to it.

B-1. Advisory Committee on **Young New Physicians**

It shall be the duty of this committee to review specific program areas and services that would be of interest to **Young New** physicians. The Committee will also generate an annual list of both Educational Programs and Membership Services that would meet the perceived needs of physicians in the under forty age category.

C. Coordinating Committee on Insurance and Physicians' Retirement Program

This Committee shall periodically review the insurance program of the Association and work in liaison with the administrator and/or underwriters to ensure the success of the program, and to see that the interests of participants are adequately protected. This Committee shall also periodically review the **Physicians' Retirement Program** of the Association and work in liaison with the staff of the Association.

~~D. Coordinating Committee on Physicians' Retirement Program~~

~~This Committee shall periodically review the Physicians' Retirement Program of the Association and work in liaison with the SMA staff.~~

D. Coordinating Committee on Budget/Administration

This Committee shall coordinate the activities of the **Advisory Committee on Constitution and Bylaws**, the **Advisory Committee on Grants, Loans and Scholarships**, the **Advisory Committee on Practice Management Services**, the **Advisory Committee on Special Projects and Services**, the **Advisory Committee on Management Compensation** and such Ad Hoc Committees as shall be annually assigned to it. It shall also be the duty of this Committee to meet at least annually to review the staff pension plan(s) and recommend changes that might improve the employee benefits package and to review any personnel problems that may arise during the year relative to the staff. This Committee shall review budgetary information including revenues and expenses, financial projections, major capital expenditures, and key financial indicators. The Committee will also review variances in the Budget and other major program developments from a financial perspective. This Committee shall be responsible for the annual independent audit and reporting audit results to the Council at the appropriate Annual Meeting of the Council. This committee shall consist of the President, President-Elect, and Immediate Past President, who shall chair the committee, and six (6) members at large from the Council appointed by the President. The members at large should serve rotating

terms in a manner that maximizes continuity.

D-1. Advisory Committee on Constitution and Bylaws

It ~~will~~ shall be the duty of this Committee to periodically review the Constitution and Bylaws, to receive suggestions from members of the Association relative to any changes which should be made and to bring the suggested changes before the Coordinating Committee on Budget/Administration for approval and recommendations to the Council.

D-3. Advisory Committee on Special Projects and Services

This Committee shall review such potential projects and services proposed to be conducted by the Association as may from time to time be submitted to the Committee for its study and recommendations or which the Committee may independently select for study.

~~H-D-4.~~ Advisory Committee on Practice Management Services

This Committee shall periodically review the programs, services, and products offered by Reimbursement Services and the Physicians' Purchasing Program and shall make recommendations to enhance participation in these programs.

D-5 Advisory Committee on Management Compensation

This Committee shall be responsible for the development and implementation of an equitable and competitive compensation program for the Association's senior management staff. It shall be responsible for the annual performance evaluation of the Exe-

cutive Vice President (CEO). The Committee shall consist of six members including the President, who shall chair the Committee, President-Elect, Immediate Past President and three members at large appointed by the President each year with rotating terms.

E. Coordinating Committee on Long Range Planning

This Committee shall select the time, location, and agenda of periodic study sessions for the Council. These sessions are to be spent considering past, present, and future problems of the ~~Southern Medical Association~~. Recommendations are to be given to the Executive Committee for approval and presentation to the Council.

~~G. Coordinating Committee on Special Projects and Service~~

~~This Committee shall review such potential projects and services proposed to be conducted by the Association as may from time to time be submitted to the Committee for its study and recommendations or which the Committee may independently select for study.~~

~~H. Coordinating Committee on Practice Management Services~~

~~This Committee shall periodically review the programs, services, and products offered by Reimbursement Services and the Physicians' Purchasing Program and shall make recommendations to enhance participation in these programs.~~

I.F Presidential Committee on Special Awards

A confidential Committee on Special

Awards consisting of five members with the President-Elect as Chairman, shall be appointed by the President to evaluate the contributions of the various candidates for special awards. If suitable candidates are selected by the Committee, it shall submit the names of not more than three such members to the Council for each award. The Council may elect one for each respective award and presentation of the awards will take place at the Second General Session of that Annual Meeting.

J.G. Presidential Committee on Selections

This Committee shall seek, receive, and consider names for all elected officers with the exception of the Section Officers. The members of this Committee shall consist of four Councilors and two members at large who may be, but are not necessarily, Councilors as appointed by the President-Elect who shall chair this Committee. The appointment of this Committee will be on an annual basis, but no person shall be eligible to serve more than two consecutive annual terms.

K.H. Presidential Committee on Endowments

This Committee shall provide direction for the development, visibility and viability of the Research and Education Foundation, a permanent endowment established to ultimately fund ~~SMA's~~ the Association's Grants, Loans, and Scholarships programs, recommend and approve programs, policies and marketing efforts required to generate contributions to the Research and Education Foundation, and recommend and approve methods of giving to the Foundation and ways in which contributors can be recognized

for various levels of giving. Also, volunteer personal time and effort in securing major gifts to the Foundation and set an example, by personal contributions, for the general membership of ~~SMA~~ the Association. The Committee shall support The Society of 1906 and recommend and approve programs to enhance the visibility and growth of the Society.

~~I.~~ Presidential Committee on Affiliated Societies

This Committee shall discuss common goals, objectives and programs among the various affiliated societies and identify ways of effecting stronger working relationships between the ~~Southern Medical Association~~ and the Affiliated Societies. This Committee shall consist of the President of each of the Affiliated Societies and shall be chaired by the President-Elect of the Association.

ARTICLE VIII. ANNUAL MEETING

Section 2. Composition of Annual Meeting

The Annual Meeting shall consist of such sessions to include Business, Scientific, Educational, and such other endeavors as may be designated for consideration. The schedule of activities for the Annual Meeting shall be established by the Council annually and such activities shall be furnished to the membership in advance of the Annual Meeting. The President of the Association shall preside at all general sessions of the Annual Meeting, or in ~~his~~ his/her absence the President-Elect. Such business shall be conducted at the General Session as shall be designated by the Presiding Officer.

Section 3. Scientific Sections of the Annual Meeting

The Scientific Sections of the Association ~~shall~~ may hold such sessions as may be arranged by the Section Secretaries with the approval of the Committee on Scientific Activities. ~~All persons attending must be properly registered before being admitted to the Scientific Session.~~

Section 4. Creation of New Sections and Abolition of Existing Sections.

New Sections may be created by vote of the Council after receiving petition from thirty active members of the Association representing that specialty or sub-specialty and representing twelve of the states or the District of Columbia in the ~~Southern Medical Association~~ territory. Recommendations to abolish a Scientific Section may be made to the Council when that Section's participation, interest, and attendance warrant review over a period of two years. The Council shall consider such recommendations and act with respect to the same.

Section 5. Section Officers

A. Chairman.

2. The Chairman shall be responsible for ~~selecting and inviting the "Chairman's Guest Speaker" and shall cooperate with the Secretary in arranging the Section program for an Annual Meeting.~~ assisting the Secretary in selecting Section abstracts and posters, when appropriate, for the Annual Meeting and coordinating the Section business meeting at the Annual Meeting.

C. Secretary.

1. The Secretary shall be respon-

sible for selecting ~~and inviting~~
~~the "Secretary's Guest~~
~~Speaker" and shall arrange the~~
~~Section program for an~~
~~Annual Meeting in coopera-~~
~~tion with the Chairman.~~
Section abstracts and posters,
when appropriate, for the
Annual Meeting.

4. The Secretary shall consult
with the ~~Executive Vice-~~
~~President (CEO) Association~~
~~Membership Services Depart-~~
~~ment~~ to determine if the
prospective nominees for Sec-
tion Officers are eligible to
hold office prior to their nomi-
nation.
5. The Secretary shall be respon-
sible for collecting papers,
when appropriate, presented
at an Annual Meeting and for-
warding them to the Associa-
tion offices along with the list
of newly elected Section
Officers.
6. The Secretary shall attend the
annual Section Secretaries'
Conference, **when scheduled**,
~~to be held as soon as practical~~
after the Annual Meeting for
the purpose of formulating the
general schedule of scientific
sessions for the Annual Meet-
ing in cooperation with the
Advisory Committee on
Scientific Activities.

D. Secretary-Elect

1. The Secretary-Elect shall make
himself/herself acquainted
with the duties of the Secretary
and attend the Section Secre-
taries' Conference, **when sche-**
duled.

Section 6. Section Officer Require- ments and Terms.

A. All sections are required to have a
Secretary, Chairman and Secretary-
Elect. Sections may elect to have addi-
tional officers such as a Vice-Chair-
man and Chairman-Elect. The ~~term of~~
Secretary and Chairman shall be
elected ~~annually~~ for a term of up to
three (3) years. The term for Secre-
tary-Elect shall be one year. Sections
may elect to vary terms of office with
the approval of the Chairman of the
Committee on Scientific Activities.

ACTION: A motion was made by
Dr. Swikert and seconded by Dr. Ellis
to accept the Bylaws changes as a
whole. The motion carried unani-
mously.

***NOTE:** A complete corrected
copy of the Bylaws changes are on file
at the SMA Headquarters and will be
published in the upcoming Yearbook
upon presentation and approval of the
membership at the Annual Meeting in
November.

RECRUITMENT & RETENTION

Jean Edwards Holt, M.D., M.H.A.

Dr. Holt reported that prior to the
meeting a booklet was sent to each
Councilor, which outlined issues of
recruitment and retention for the
SMA. Dr. Holt reported that in this
booklet a document was prepared by
the SMA Membership Services
Department that provided a brief
review of SMA's past, present, and
future relating to recruitment and
retention. She also reported that there
was information included, which
reflects the urgency of identifying an
appropriate motivation/incentive for
the SMA leadership to become more
actively and aggressively involved in
perpetuating the membership of SMA.

Dr. Holt asked for discussion regarding ways the Council can help with recruitment and retention and ways the staff can help with this endeavor.

Dr. Ellis requested that a list of membership benefits with the dollar value versus the membership dues be sent to each Councilor. He stated that he feels this could benefit the Councilor in helping explain the dollar value of belonging to SMA to potential members.

Dr. Howell stated that he feels we need to penetrate the medical schools to recruit medical students in their senior year and the residents thereafter to get young physicians involved in SMA.

Dr. Smith stated that SMA should be aware of the cost to a resident or physician as meetings are being planned. He also stated that he feels that SMA should locate its meetings in places that are cost effective and to offer meetings in areas so all its members can have the opportunity to participate in its educational offerings.

Dr. Farmer suggested that SMA look into marketing the SMA Insurance Plan to the medical universities in an effort to provide insurance to its residents in conjunction with the medical school.

Dr. Farmer also stated that another huge recruiting entity that SMA has never taken advantage of is the involvement of the Chairman and Section Secretaries. He stated that he feels we should bring them into a more cohesive unit rather than just have

them in charge of their section at the Annual Meeting.

Dr. Holt stated that we need to regain the pride in the organization and that SMA needs to develop the best product of some kind to offer its members.

NEW BUSINESS

MOTION: A motion was made by Dr. Smith and seconded by Dr. Swikert to select the current Board of Trustees (Louis A. Cancellaro, M.D., Ph.D.; J. Edward Hill, M.D.; Terrell B. Tanner, M.D.; J. Lorin Mason, Jr., M.D.; and Hugh E. Stephenson, Jr., M.D.) to serve as the Southern Medical Association Services Board. The motion carried unanimously.

MOTION: A motion was made by Dr. Ellis and seconded by Dr. Swikert that a contribution of \$40,000 be made to the Endowment Fund from General Operating Expenses to cover grants and scholarships for this year. The motion did not carry.

MOTION: A motion was made by Dr. Howell and Dr. Swikert that any Councilor that desires to go a SMA CME meeting receive funding from SMA to go as a representative of the Association. The expectation of the Councilor would be to work that meeting as a representative of the Association. The motion carried unanimously.

ADJOURNMENT

There being no further business to come before the Council, Dr. Waites adjourned the meeting at approximately 12:40 p.m.

Proceedings of the Council

• Opryland Hotel •

• Nashville, Tennessee •

• Tuesday, November 6, 2001, 1:00 p.m. - 5:00 p.m. •

• Wednesday, November 7, 2001, 9:00 a.m. - 12:00 noon •

CALL TO ORDER

The Council of the Southern Medical Association met at the Opryland Hotel, Nashville, Tennessee on Tuesday, November 6, 2001, at 1:00 p.m. and on Wednesday, November 7, 2001, at 9:00 a.m. The meeting was called to order by the President, James C. Waites, M.D.

ROLL CALL

Members of the Council present were James C. Waites, M.D., President, Laurel, Mississippi; Jean Edwards Holt, M.D., M.H.A., President-Elect, San Antonio, Texas; Hugh E. Stephenson, Jr., M.D., Immediate Past-President, Columbia, Missouri; Robert L. Baldwin, M.D., Birmingham, Alabama; Michael G. Mackey, M.D., Jonesboro, Arkansas; Richard P. DeRosa, M.D., Washington, D.C.; Clifford W. Lober, M.D., Kissimmee, Florida; George L. Smith III, M.D., Covington, Georgia; Nancy C. Swikert, M.D., Florence, Kentucky; George S. Ellis, Jr., M.D., New Orleans, Louisiana; Robert M. Peroutka, M.D., Baltimore, Maryland; Braxter P. Irby, Jr., M.D., Brookhaven, Mississippi; Albert J. Campbell, Jr., M.D., Sedalia, Missouri; David F. Martin, M.D., Winston-Salem, North Carolina; Charles A. Farmer, Jr., M.D., Tulsa, Oklahoma; Donald R. Johnson II, M.D., Mt. Pleasant, South Carolina; William Browder, M.D., Johnson City, Tennessee; Veronica K. Piziak, M.D., Ph.D., Temple, Texas; T. Rudolph Howell, M.D., Richmond, Virginia; and W. Alva Deardorff, M.D., Charleston, West Virginia.

Also in attendance were Ronald C. Hamdy, M.D., Editor, *Southern Medical*

Journal, Johnson City, Tennessee; Mrs. Betty Haisten, SMAA President, Beaumont, Texas; Mrs. Carol Sparkman, SMAA President-Elect, Cape Girardeau, Missouri; W. John Giller, Jr., M.D., Councilor-Elect for Arkansas, El Dorado, Arkansas; Louis A. Cancelaro, M.D., Ph.D., Chairman, SMA Audit Committee, Johnson City, Tennessee; and Jiyaz Jinnah, M.D., Southern Orthopaedic Association, President, Baltimore, Maryland.

Staff present from Birmingham, Alabama, were Mr. Jim Leverett, Executive Vice-President/CEO; Mrs. Cynthia Lichtefeld, Director of Association Services; Mr. Bill Dunn, Chief Financial Officer; Mr. John Gillespie, Director of Education; Mr. Luke Hartsfield, Director of Fringe Benefit Programs; Mr. Ed Waldron, Vice President for Marketing and Director of Practice Management Services; Mr. Gary Mullins, Director of Information Systems; and Mrs. Judy Fields, Administrative Assistant.

Dr. Waites gave an invocation asking for guidance over the week. He also welcomed everyone to the meeting and recognized the guest at the meeting. He also asked Dr. Holt to introduce SMA's new Councilor from Texas, Dr. Veronica K. Piziak, M.D., Ph.D.

APPROVAL OF MINUTES

Prior to the meeting, copies of the Minutes taken during the July 27-28, 2001, meeting of the Council were distributed for review.

ACTION: It was moved by Dr. Swikert and seconded by Dr. Howell to approve the Minutes taken during the July 27-28, 2001, meeting of the

Council. The motion carried unanimously.

REPORT OF THE AUXILIARY PRESIDENT

Mrs. Betty Haisten

Mrs. Haisten reported that over the past two years she has represented SMA in 14 of its 17 states. She stated that the main purpose of traveling to these states was to tell of our history and to encourage membership in the organization. Mrs. Haisten stated that she also had the opportunity to represent the SMA at two AMAA meetings in Chicago. She stated that the Auxiliary has sold to date 92 raffle tickets for \$6,900 and have 48 entrants for the Silent Auction. She stated that all monies received will benefit the Research and Endowment Fund.

Mrs. Haisten thanked the Council for the opportunity to represent SMA and that it has been a privilege to work with the Council for the past two years.

REPORT OF THE AUXILIARY PRESIDENT-ELECT

Mrs. Carol Sparkman

Mrs. Sparkman thanked the Council and stated that she looks forward to working with the Council.

REPORT OF THE AFFILIATED SOCIETIES

Dr. Riyaz Jinnah, President

Southern Orthopaedic Association

Dr. Jinnah reported that Southern Orthopaedic Association had their 2001 Annual Meeting in Coeur d'Alene, Idaho in July. He stated that the next Annual Meeting will be held in April instead of July in Florence, Italy. He stated that he hopes to have good attendance at that meeting.

Dr. Jinnah stated that the main project for the SOA this year has been the Orthopaedic Care Internet Textbook.

REPORT OF THE PRESIDENT

James C. Waites, M.D.

Dr. Waites reported that Dr. Michael G. Mackey was elected as President-Elect of the Southern Medical Association. He reported that Dr. W. John Giller, Jr. was elected as the new Councilor from Arkansas and Dr. Bashir A. Chaudhary was elected as the new Councilor from Georgia.

Dr. Waites reported that this past year has been very eventful. He stated that the review for accreditation went well and we should hear something back soon.

He stated that a planning committee comprised of Council members, Associate Councilors and Section Officers met in Birmingham to redesign the format of the Annual Meeting. He asked the Council to take the time to evaluate the meeting.

Dr. Waites reported that the newly elected Executive Committee met in Birmingham on October 25, 2001.

Dr. Waites reported that SMA continues to work with the IRS.

Dr. Waites congratulated Dr. Stephenson for his selection as "Outstanding Missourian".

REPORT OF THE EXECUTIVE VICE-PRESIDENT

Mr. Jim Leverett

Mr. Leverett reported that for the last fiscal year SMA finished with a positive bottom line. He stated that we have projected another positive bottom line for the current fiscal year and at present are on target for the first quarter to attain that result.

Mr. Leverett reported that the Continuing Medical Education programs continue to be primarily clinically focused and take several different forms. He reported that in 2001 SMA has seen fairly stable participation in its resort based continuing medical education programs.

Mr. Leverett reported that we have seen a slight increase in participation in the Medbytes program.

He stated that he is very pleased with the change to the new format of the *Southern Medical Journal*. He stated that two indications that our membership is having renewed interest in the SMJ is that we are seeing an increase in the CME that is being submitted for approval through the SMJ, and the SMJ has had a record number of hits on our web site since implementing the new format.

Mr. Leverett reported that plans are to move the SMJ to a "members and subscribers only site" around the first of the year. He stated that plans are to have some material outside the restricted site so individuals can see the table of contents and possible abstracts but access to the total SMJ and all the archives will be moved to a "members and subscribers only site".

Mr. Leverett reported that Jackson-Gaeta (advertising agency) has terminated its working relationship with the Southern Medical Association effective the end of January 2002. He stated that we are in the process of looking for another agency to handle our advertising account. He stated that we hope to have someone begin working with SMA around the first of December and overlap a couple of months with Jackson-Gaeta.

Mr. Leverett reported that the attendance at the Annual Meeting is less than we had hoped it would be. He stated that attendance is about the same as the Orlando meeting. He stated that he expects the numbers to improve with on-site registration.

Mr. Leverett reported that SMA has 12,411 dues paying members at this time. He stated that we are continuing to profile and evaluate our membership.

Mr. Leverett stated that we are working with Seabury on a pilot project to determine where we can better target our efforts in membership recruit-

ment and products and services.

Mr. Leverett reported that a new Board of Directors for SMA Services, Inc. composed of the past six presidents' of SMA was approved by the Council. He stated that they will be meeting during the Annual Meeting to elect a chairman and discuss a number of issues.

Mr. Leverett reported that the insurance program is remaining fairly stable. He stated that we have just introduced a new long-term care product underwritten by General Electric Financial Assurance. He stated that we have introduced a new Resident and New Physician Program underwritten by the Standard Insurance Company. He stated that this life insurance and disability product is being offered to residents and physicians in their first and second year of practice.

Mr. Leverett reported that the Retirement Program is fairly stable.

Mr. Leverett reported that increased emphasis has been given to SMA's Research and Education Endowment Fund. He stated that we are working with the Auxiliary on ways to increase this fund. He also stated that we have introduced the Century of Excellence, which is a fund raising program that benefits the Research and Education Endowment Fund. Mr. Leverett stated that the Auxiliary is sponsoring a Silent Auction on Saturday night with all proceeds benefiting the Research and Education Endowment Fund.

Mr. Leverett reported that we continue to work with the IRS on issues with Southern Medical Association and SMA Services, Inc. He stated that they are working on issues from 1996-forward. He stated that the IRS audited our tax filing for 1996 and disallowed all deductions relating to SMA's activities/programs that were taken by SMA Services. He stated that this was in two categories - 1) sponsorships - where funds were provided to SMA to sponsor social events, educational events, events at the annual

meeting, and some resort meetings during the course of the year, and 2) advertising that was done between SMA Services and SMA.

Mr. Dunn reported that he, Jim Leverett, and Mr. Rusty Irby, SMA's attorney, are meeting by conference call every two weeks with the IRS to get an update on the status of the audit.

Mr. Leverett complimented the Council and the management staff for the work they have done over the past two years.

Dr. Baldwin requested that a summary of the changes made at the Annual Meeting and the results of these changes be put into a report as a matter of written record. Dr. Waites stated that a report could be given at the next Council meeting as an Agenda item.

REPORT OF THE EDITOR

Ronald C. Hamdy, M.D.

Dr. Hamdy reported that since assuming the editor's responsibilities, several changes have been introduced in the format, presentation, and content of the SMJ. He stated regular editorials have been included in the format as well as a series of special featured CME sections. Dr. Hamdy stated that interested clinicians can earn up to two hours CME credit.

Dr. Hamdy also reported that the color of the front cover has been changed and that the front cover contains a more complete table of contents. He stated that the full table of contents inside the *Journal* contains a brief description of each article.

Dr. Hamdy stated that his goal is to make the SMJ an indispensable publication for practicing clinicians (specialists as well as non-specialists), health care professionals, physicians in training, and even medical students.

RECOMMENDATION: Dr. Hamdy recommended to the Council that Dr. Theodore Rosen; Dr. Veronica Piziak; Dr. Mark Slagle; Dr. Louis

Cancellaro; Dr. Dana King; and Dr. Razelle Kurzrock; and Dr. Lucius "Luke" Lampton be added to the Editorial Board of the *Journal* and that Dr. Charles A. Farmer, Jr. be removed from the Editorial Board per his request.

ACTION: A motion was made my Dr. Ellis, Jr., and seconded by Dr. Mackey that Dr. Theodore Rosen; Dr. Veronica Piziak; Dr. Mark Slagle; Dr. Louis Cancellaro; Dr. Dana King; Dr. Razelle Kurzrock; and Dr. Lucius "Luke" Lampton be added to the Editorial Board of the *Journal* and that Dr. Charles A. Farmer, Jr. be removed from the Editorial Board. The motion carried unanimously.

Dr. Hamdy reported that the *Journal* has changed dramatically and that he cannot continue to produce the *Journal* with the same resources that are available now. He stated that to continue with what is taking place now and to produce new ideas he will need an additional \$250,000 a year.

Dr. Holt moved that the Council table the discussion regarding the additional money requested for the *Journal* until the advertising is in order, survey is done, and the Council gets a breakdown of expenses.

ACTION: A motion was made and seconded that the *Journal* be put on a restricted website for "members and subscribers only". The motion carried unanimously.

REPORT OF THE PRESIDENT-ELECT

Jean Edwards Holt, M.D., M.H.A.

Dr. Holt reported that SMA has been through a two- year period of survival. She stated that she would like to acknowledge Dr. Hamdy, Dr. Waites, and the leadership of the Council for what they have done during this survival mode. She stated that SMA should now shift from surviving to thriving.

Dr. Holt stated that she has put

together the new committees and charged each committee chairman with meeting this year.

Dr. Holt stated that she looks forward to this year and feels that it is going to be a good year and a very active year. She stated that she is going to call upon all the Council to step forward this year and she is very optimistic that SMA can make real progress.

ANNUAL REPORTS OF THE STATE COUNCILORS

Dr. Waites invited each Councilor to comment on any state activity that was not in his or her state report.

Dr. DeRosa reported that he is still having a problem finding someone to take his place on the Council. Dr. Waites asked if he would continue to serve next year until a replacement is found. Dr. DeRosa agreed to continue to serve. It was suggested that each Councilor be sent a listing of Washington, D.C. members to possibly assist Dr. DeRosa in identifying potential candidates.

REPORT OF THE AUDIT COMMITTEE

Louis A. Cancellaro, M.D., Ph.D.

Dr. Cancellaro reported that the Committee met by conference call along with two representatives from an audit firm. He stated that the audit was as of June 30, 2000. He stated there were several major trends that were not positive for the Association. He stated that membership is declining at about 1,800 a year and the revenues from SMA Services, Inc., which includes the Insurance, Retirement, and some of the other services, also are on a decline.

Dr. Cancellaro turned the reporting over to Mr. Dunn who reported additional information on the audit to the Council. Mr. Dunn stated that the auditors seem to be reasonably satisfied and did not have any recommendations for SMA.

Dr. Waites reported with the changes made to the Board of Trustees, the reporting of the results of the audit would be the responsibility of the Administration/Budget Committee.

REPORT OF THE COORDINATING COMMITTEE ON ADMINISTRATION/BUDGET

Hugh E. Stephenson, Jr., M.D.

Dr. Stephenson reported that the Administration/Budget Committee has been meeting each month to review and discuss the financial status of the Association.

Prior to the meeting, copies of the Financial Statements for June 30, 2001, as well as August 31, 2001, were distributed for review. Dr. Stephenson called on Mr. Dunn to give an overview of these statements.

Mr. Dunn stated that the auditors began their audit after the Summer Meeting and completed the audit around September 1, 2001.

REPORT OF THE COORDINATING COMMITTEE ON MEMBERSHIP

Braxter P. Irby, Jr., M.D.

Dr. Irby reported that we continue to be faced with a challenge regarding recruiting new dues paying members as well as retention of members. He stated that the Coordinating Committee on Membership met by conference call on October 18, 2001, and discussed a proposal called "Member-Get-A-Member Campaign". A brochure was passed around to the members of the Council for review regarding the program. Mrs. Lichtefeld reviewed the brochure and program for the Council. She reported that the member-get-a-member campaign is an incentive program for members to recruit members into the Association. She stated that the campaign is a yearlong program that SMA would like to introduce in January 2002. She stated that the

brochure details what is involved in the program.

RECOMMENDATION: The Coordinating Committee on Membership recommends that the Council approve the member -get-a-member campaign for Southern Medical Association.

ACTION: It was moved by Dr. Baldwin and seconded by Dr. Mackey to approve the member-get-a-member campaign for Southern Medical Association. The motion carried unanimously.

RECOMMENDATION: The Coordinating Committee on Membership recommends that the Council approve an offer to provide first time dues paying members with a money back guarantee beginning January 1, 2002.

ACTION: A motion was made and seconded to approve the offer to provide first time dues paying members with a money back guarantee beginning January 1, 2002. The motion carried unanimously.

RECOMMENDATION: The Executive Committee recommends that the President's Leadership Program be revised for 2001-2002 as follows:

- A. Associate Councilors and Section Officers will be allowed to participate in the Member-Get-A-Member Campaign.
- B. Councilors and Officers are excluded from receiving prizes for the Member-Get-A-Member Campaign.
- C. The \$300 allotment to Associate Councilors for promotion of SMA will be discontinued.
- D. An allotment of \$500 will be provided to each Councilor upon request for promotional or state leadership activities held on behalf of SMA.

ACTION: It was moved by Dr. Baldwin and seconded by Dr. Johnson to approve the following:

- A. Associate Councilors and Section Officers will be allowed to partici-

pate in the Member-Get-A-Member Campaign.

- B. Councilors and Officers are excluded from receiving prizes for the Member-Get-A-Member Campaign.
- C. The \$300 allotment to Associate Councilors for promotion of SMA will be discontinued.
- D. An allotment of \$500 will be provided to each Councilor upon request for promotional or state leadership activities held on behalf of SMA.

The motion was approved unanimously.

RECOMMENDATION: The Executive Committee recommends that the President's Leadership Program be revised for 2001-2002 as follows:

- E. New Councilors, Associate Councilors, and Section Officers will be provided an Orientation Session at the Annual Scientific Assembly.
- F. A Leadership Training Session will be held during the Annual Scientific Assembly for Officers, Councilors, Associate Councilors, and Section Officers.
- G. First year Associate Councilors and Section Officers will receive reimbursement for attending the Annual Scientific Assembly.
- H. Associate Councilors and Section Officers that have been in this position for one or more years will be reimbursed for attending the Annual Scientific Assembly if one of the following requirements is obtained:
 - 1. Obtains \$5,000 in corporate sponsorship for an SMA CME Program.
 - 2. Recruit at least 10 dues paying members.

ACTION: A motion was made by Dr. Ellis and seconded by Dr. Campbell to keep the basic structure of the current President's Leadership Program in tact with the following modifications:

All Associate Councilors and Section Chairmen would have their way paid to the Leadership Session. If they recruit 5 dues paying members or obtain \$2,000 in corporate sponsorship for a SMA CME Program, their way is paid to the entire meeting.

AMENDMENT: An amendment to the motion was made by Dr. Johnson and seconded by Dr. Browder that first year Associate Councilors will receive reimbursement for attending the entire meeting of the Annual Scientific Assembly. The motion was approved with four opposing.

The new approved Guidelines for the 2002 President's Leadership Program are outlined as follows:

- (1) Associate Councilors and Section Officers will be allowed to participate in a new Member-Get-A-Member Campaign.
- (2) Councilors and Officers are excluded from the Member-Get-A-Member Campaign.
- (3) The \$300 allotment to Associate Councilors for promotion of SMA will be discontinued.
- (4) An allotment of \$500 will be provided to each Councilor upon request for promotional or state leadership activities held on behalf of SMA.
- (5) First year Associate Councilors will receive up to five nights reimbursement (airfare utilizing an advance purchase ticket, complimentary registration, and five nights' hotel accommodations to attend the Annual Meeting.)
- (6) All other Associate Councilors and Section Chairmen will receive free registration to the Annual Meeting, one nights' hotel accommodation, and airfare utilizing an advance purchase ticket for attendance to the leadership forum.
- (7) Associate Councilors and Section Chairmen who recruit or

retain at least 5 dues paying members or obtain \$2,000 in corporate sponsorship for an SMA CME meeting will receive up to five nights' hotel accommodations to the Annual Meeting in addition to the airfare and complimentary registration, and get to participate in a drawing for three prizes.

- (8) New Councilors, Associate Councilors, and Section Secretaries and Chairmen will be provided an orientation session at the Annual Scientific Assembly.
- (9) A Leadership Training Session will be held during the Annual Scientific Assembly for Officers, Councilors, Associate Councilors, and Section Secretaries and Chairmen.

INFORMATION SYSTEMS UPGRADE

Mr. Gary Mullins

Mr. Leverett stated that we have evaluated our existing system and needs, and identified a software application that we feel will accomplish a number of objectives for SMA. Mr. Leverett called on Mr. Mullins, Director of Information Systems, to give a brief overview of the product.

Mr. Mullins gave a brief overview of the "Cold Fusion" product and related upgrades and what we hope to accomplish within the next eight to ten months with the purchase of additional software and hardware. He stated that the total cost is approximately \$120,000.

RECOMMENDATION: The Executive Committee of the Council recommends to the Council that SMA purchase the "Cold Fusion" product.

ACTION: A motion was made by Dr. Swikert and seconded to purchase the Cold Fusion product and related upgrades and give SMA the authorization to spend up to \$120,000 towards the purchase of these products. Should

additional cost arise, the Executive Committee has the authorization to approve up to \$30,000. The motion carried unanimously.

Mr. Leverett reported that in the current budget the Council approved a 2% cost savings award for SMA employees, which will be included in the November 15th payroll.

Dr. Waites thanked the staff for all their help during the time he has served, especially this past year.

ADJOURNMENT

There being no further business to come before the Council, Dr. Waites adjourned the meeting at approximately 5:00 p.m. on Tuesday, November 6, 2001, and approximately 11:00 a.m. on Wednesday, November 7, 2001.

EXECUTIVE SESSION

The Council went into closed executive session.

GENERAL BUSINESS MEETING

Held Wednesday, November 7, 2001
Immediately following
Leadership Forum
4:00 p.m. - 4:35 p.m.

Dr. Waites called on Dr. Michael Mackey, Chairman, Advisory Committee on Constitution and Bylaws, to present proposed Bylaws changes that were outlined in a packet that was passed out to the membership.

ACTION: On behalf of the Advisory Committee on Constitution and Bylaws Dr. Mackey made a motion to accept the Bylaws changes as writ-

ten. The motion was seconded and carried unanimously.

Dr. Holt asked if any Section Officers would like to ask questions in respect to their role and changes that were made to the Annual Meeting.

A response was made from the floor that a sub-committee should be formed to communicate with the Section Secretaries to make them aware of the planning of the meeting. He stated that the Secretaries feel they should be more involved with the planning and not just the abstracts.

Dr. Jeff Morgan stated that he felt he had been left out of the loop as far as committees were concerned and as far as what Associate Councilors were suppose to do. He stated that he feels there should be better communication between all the leadership so everyone can know what is going on with the Association. He stated that he feels we need to have some quick feedback on how the new format worked at the Annual Meeting.

Dr. Jan Basile stated that he feels that in the future a meeting of all the leadership should be planned before the Annual Meeting is over to discuss the meeting. He stated that SMA should be pro-active and have the organization of next year's meeting much earlier in order to allow time to communicate with everyone and let everyone know of the planning of the meeting.

ADJOURNMENT

There being no further business to come before the membership, Dr. Waites adjourned the meeting at approximately 4:35 p.m.

Annual Meeting Activity Attendance

4 Year Comparison

<u>Activity</u>	1998 Attendance/ <u># Sessions</u>	1999 Attendance/ <u>#Sessions</u>	2000 Attendance/ <u># Sessions</u>	2001 Attendance/ <u># Sessions</u>
Section/Team Abstracts Attendance*	863 (28)	713 (27)	540 (27)	248 (15)
Symposium Attendance	2074 (13)	2619 (16)	3160 (14)	3150 (16)
Scientific Sessions	1237 (18)	1273 (17)	1084 (15)	2453 (15)
Grand Rounds	387 (5)	494 (5)	482 (3)	189 (3)

*Total of average attendance of largest section meeting held.



Mark Your Calendar for

Southern Medical Association's
96th Annual Scientific Assembly

November 14-16, 2002
Washington, DC

*“Anticipating Your Needs and
Exceeding Your Expectations”*

Annual Meeting Registration Record

Date	Location	Host Physicians	Other Physicians	Total Physicians	Students	Paramedical Personnel	Technical Exhibitors	Guests	Total
1906-1915	No Record of Attendance								
1916- Nov. 13-16	Atlanta	299	1,247	1,476	55	—	103	233	1,867
1917- Nov. 12-15	Memphis	143	1,025	1,168	46	—	78	184	1,476
1918-	No Meeting—Influenza Pandemic								
1919- Nov. 10-13	Asheville	71	912	983	—	54	85	148	1,270
1920- Nov. 15-18	Louisville	230	872	1,102	114	40	149	171	1,576
1921- Nov. 14-17	Hot Springs	81	993	1,074	—	39	90	241	1,444
1922- Nov. 13-16	Chattanooga	107	1,230	1,337	—	26	129	289	1,781
1923- Nov. 12-15	Washington	333	1,363	1,696	214	26	143	495	2,574
1924- Nov. 24-27	New Orleans	352	1,559	1,911	169	15	120	510	2,725
1925- Nov. 9-12	Dallas	310	1,732	2,042	144	19	151	513	2,869
1926- Nov. 15-18	Atlanta	327	1,557	1,884	139	27	174	445	2,669
1927- Nov. 14-17	Memphis	275	1,728	2,003	251	24	212	438	2,928
1928- Nov. 12-15	Asheville	70	1,221	1,291	—	20	154	379	1,844
1929- Nov. 19-22	Miami	163	1,180	1,343	—	19	84	572	2,018
1930- Nov. 11-15	Louisville	258	1,232	1,490	224	21	144	356	2,235
1931- Nov. 18-20	New Orleans	423	1,266	1,689	231	33	154	462	2,569
1932- Nov. 15-18	Birmingham	276	971	1,247	—	32	104	239	1,622
1933- Nov. 14-17	Richmond	264	1,319	1,583	279	61	141	407	2,471
1934- Nov. 13-16	San Antonio	304	1,641	1,945	—	27	141	739	2,852
1935- Nov. 19-22	St. Louis	695	1,999	2,694	690	18	279	614	4,295
1936- Nov. 17-20	Baltimore	847	2,365	3,212	660	51	375	581	4,879
1937- Nov. 30- Dec. 3	New Orleans	573	2,238	2,811	736	177	370	1,328	5,422
1938- Nov. 15-18	Oklahoma City	353	1,914	2,267	262	389	342	778	4,038
1939- Nov. 21-24	Memphis	385	1,837	2,222	412	595	300	734	4,263
1940- Nov. 12-15	Louisville	436	1,639	2,075	412	667	361	629	4,144
1941- Nov. 10-13	St. Louis	762	1,944	2,706	683	378	498	774	5,039
1942- Nov. 10-12	Richmond	353	1,130	1,383	337	136	187	392	2,435
1943- Nov. 16-18	Cincinnati	305	1,410	1,715	94	176	255	520	2,760
1944- Nov. 13-16	St. Louis	559	1,557	2,116	441	461	431	762	4,211
1945- Nov. 12-15	Cincinnati	207	1,270	1,477	88	52	269	545	2,431
1946- Nov. 4-7	Miami	443	1,648	2,091	—	135	241	1,074	3,541
1947- Nov. 24-26	Baltimore	949	1,718	2,667	332	407	445	674	4,525
1948- Nov. 25-28	Miami	508	1,087	1,595	27	115	308	629	2,674
1949- Nov. 14-17	Cincinnati	248	1,235	1,483	32	143	264	490	2,412
1950- Nov. 13-17	St. Louis	726	1,391	2,117	472	92	323	644	3,648
1951- Nov. 5-8	Dallas	478	1,575	2,053	160	—	190	850	3,253
1952- Nov. 10-13	Miami	582	1,591	2,173	34	177	246	1,107	3,737
1953- Oct. 26-29	Atlanta	566	1,781	2,347	266	195	325	900	4,033
1954- Nov. 8-11	St. Louis	687	1,614	2,201	614	336	391	772	4,314
1955- Nov. 14-17	Houston	807	1,579	2,386	*	*	676	951	4,013

(continued on next page)

Annual Meeting Registration Record

Date	Location	Host Physicians	Other Physicians	Total Physicians	Students	Paramedical Personnel	Technical Exhibitors	Guests	Total
1956- Nov. 12-15	Washington	1,083	2,090	3,173	314	*	982	969	5,438
1957- Nov. 11-14	Miami Beach	1,061	2,174	3,235	177	*	721	1,870	6,003
1958- Nov. 3-6	New Orleans	1,256	2,331	3,587	454	*	753	1,327	6,121
1959- Nov. 16-19	Atlanta	685	1,972	2,657	205	*	554	799	4,215
1960- Oct. 31-Nov. 3	St. Louis	628	1,400	2,028	305	*	636	735	3,964
1961- Nov. 6-9	Dallas	854	1,868	2,722	121	*	603	939	4,385
1962- Nov. 12-15	Miami Beach	768	2,253	3,021	99	115	620	1,231	5,088
1963- Nov. 18-21	New Orleans	793	2,712	3,505	545	112	593	1,875	6,630
1964- Nov. 16-19	Memphis	612	1,564	2,176	204	83	418	816	3,697
1965- Nov. 1-4	Houston	564	1,649	2,213	47	96	626	825	3,779
1966- Nov. 14-17	Washington	855	1,570	2,425	67	96	666	669	3,921
1967- Nov. 13-16	Miami Beach	**	**	2,487	55	78	555	607	3,782
1968- Nov. 18-21	New Orleans	672	2,390	3,062	440	177	726	1,314	5,719
1969- Nov. 10-13	Atlanta	452	2,339	2,791	187	78	753	1,224	5,033
1970- Nov. 16-19	Dallas	474	1,819	2,293	82	82	622	1,066	4,145
1971- Nov. 1-4	Miami Beach	526	1,606	2,132	57	119	658	1,256	4,222
1972- Nov. 13-16	New Orleans	785	2,514	3,299	448	178	667	1,387	5,979
1973- Nov. 11-14	San Antonio	**	**	2,347	97	183	628	1,842	4,097
1974- Nov. 17-20	Atlanta	388	2,372	2,760	78	140	451	690	4,119
1975- Nov. 16-19	Miami Beach	**	**	1,979	55	116	466	709	3,325
1976- Nov. 7-10	New Orleans	**	**	2,364	468	154	293	910	4,189
1977- Nov. 6-9	Dallas	**	**	1,332	46	50	410	447	2,285
1978- Nov. 11-14	Atlanta	**	**	2,504	65	98	411	1,177	4,255
1979- Nov. 4-7	Las Vegas	**	**	2,142	7	116	334	1,229	3,828
1980- Nov. 16-19	San Antonio	**	**	2,367	25	90	363	832	3,677
1981- Nov. 15-18	New Orleans	**	**	2,376	74	92	419	1,264	4,225
1982- Oct. 30-Nov. 2	Atlanta	**	**	2,614	17	112	473	1,405	4,621
1983- Nov. 6-9	Baltimore	**	**	2,697	31	105	498	1,480	4,811
1984- Nov. 4-7	New Orleans	**	**	2,627	35	81	470	1,619	4,832
1985- Nov. 17-20	Orlando	**	**	2,618	41	82	522	1,585	4,848
1986- Nov. 8-11	Atlanta	**	**	3,141	5	45	493	1,880	5,564
1987- Nov. 1-4	San Antonio	**	**	2,913	61	48	559	1,540	5,121
1988- Nov. 6-9	New Orleans	**	**	4,093	157	117	692	2,360	7,419
1989- Nov. 5-8	Washington	**	**	2,678	49	62	545	1,802	5,136
1990- Oct. 14-17	Nashville	**	**	2,759	42	54	515	1,533	4,893
1991- Nov. 16-19	Atlanta	**	**	2,305	11	15	712	1,333	4,376
1992- Nov. 12-15	San Antonio	389	2,030	2,419	9	432	1,202	4,109	4,109
1993- Oct. 28-31	New Orleans	648	1,777	2,425	63	45	455	1,207	4,195
1994- Nov. 2-6	Orlando	**	**	2,053	26	27	437	1,165	3,708
1995- Nov. 15-19	Kansas City	390	1,761	2,151	55	23	279	1,463	3,971
1996- Nov. 20-24	Baltimore	325	1,589	1,914	40	20	471	584	3,029
1997- Nov. 6-9	Charlotte	457	1,994	2,451	19	54	412	783	3,719
1998- Nov. 18-22	New Orleans	384	1,574	1,958	45	90	400	700	3,193
1999- Nov. 10-14	Dallas	421	1,133	1,554	24	57	600	525	2,760
2000- Nov. 1-5	*** Orlando	241	962	1,203	11	129	230	485	2,058
2001- Nov. 8-10	*** Nashville	206	900	1,106	18	41	267	419	1,851

* Breakdown not available; included in figure under "Technical Exhibitors."

** Breakdown not available see "Total Physicians."

***Excludes "No Shows" - prior years do not.



CONSTITUTION AND BYLAWS

SOUTHERN MEDICAL ASSOCIATION

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Constitution - Articles of Incorporation

ARTICLE I- NAME

The name of the corporation shall be the Southern Medical Association.

ARTICLE II- PURPOSE

The purposes of the Southern Medical Association (the "Association" or the "Corporation") shall be to develop and foster the art and science of medicine by:

- A) developing and promoting initiatives in medical education;
- B) providing practice-related services to enhance the ability of the members of the Association to serve their patients;
- C) providing activities which encourage membership and collegial interaction among the members of the Association.

The Association shall not at any time take active part in any political or sectarian questions or take concerted action for securing legislative enactments.

ARTICLE III- POWERS

The Corporation shall possess and may exercise all of the powers and privileges granted by the laws of the State of Alabama to nonprofit corporations, together with all powers necessary or convenient to the conduct, promotion or attainment of the activities or purposes of the Corporation, limited only by the restrictions set forth in these Articles of Incorporation; provided, however, that the Corporation shall not engage in activities that are not in furtherance of its charitable purposes other than as an insubstantial part of its activities.

ARTICLE IV- TERM OF EXISTENCE

The term for which the Corporation is to exist shall be perpetual. In the event of dissolution, the residual assets of the corporation will be turned over to one or more organizations which themselves are exempt as organizations described in Sections 501(c)(3) and 170(c)(2) of the Internal Revenue Code or corresponding sections of any prior or future law, or the

Federal, State or local government for exclusive public purposes.

ARTICLE V- MEMBERSHIP

SECTION 1. Active Members. The membership of this Association shall be by invitation to physicians who are eligible to be members of the following state medical societies: Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia, and the District of Columbia who are sponsored by the respective state Councilor, to invited medical officers of the United States Army, Navy, Air Force, Public Health Service and Veterans Administration on active duty, and to invited members of the Puerto Rico Medical Association who are citizens of the United States of America.

SECTION 2. Associate, Emeritus and Other Members. This Association may have such classes of associate, emeritus and other memberships as may be provided for in the Bylaws of this Constitution.

ARTICLE VI- OFFICERS

SECTION 1. Officers of the Association. The officers of the Association shall be a President, President-Elect, Immediate Past-President, Trustees, Councilors, and an Executive Vice-President. There shall also be officers of each Section of the Association.

SECTION 2. Elected Officers

A. General Officers. The President shall automatically be that person who was elected and served as President-Elect during the previous year. The Immediate Past-President shall be that person who served as President during the previous year. The President-Elect shall be that person who has won the election process for that position as outlined in the Bylaws. The results of the elections along with the report of the Council shall be submitted to the membership as the final order of business

at the first general session of an annual meeting.

B. Councilors. The Councilors shall be elected by the states as provided in the Bylaws - one from each of the states and the District of Columbia enumerated in **ARTICLE V- Membership, Section 1. Active Members** and shall serve for five years, and shall be eligible for one and only one re-election after at least a five-year hiatus following their first term. The Councilor terms expire with the close of annual meetings. The Council shall be the governing body of the Association. It shall have jurisdiction over all questions involving the rights and standings of members, whether in relation to other members or to this Association. All matters brought before the general sessions or Sections shall be referred to the Council for consideration.

C. Section Officers. The officers of each Section may consist of a Chairman, Vice-Chairman and Secretary, and when so desired by the members of the Section, a Chairman-Elect and/or Secretary-Elect as an additional officer or in place of the Vice-Chairman, elected annually by the members of the respective Sections at a regular session of the Section during an annual meeting. Section Officers must assume office at the end of the annual meeting during which they were elected and shall be members of the Association. A Section Officer may serve up to three years, as desired by the members of the Section, in any position except Secretary-Elect, whose term shall be one year.

SECTION 3. Appointed Officers.

A. Administrative Officers. An Executive Vice-President shall be selected by the Council, with salary, duties, and tenure of office to be determined by the Council.

ARTICLE VII- SCIENTIFIC ACTIVITIES

SECTION 1. Annual Meetings. The Association shall hold an annual meeting during which there shall be not less than

two general sessions, one of which may be devoted to the business of the Association and restricted exclusively to the membership when so determined by the Council or by the Executive Committee of the Council or upon a petition filed by not less than twenty-five members of the Association; there may be meetings of the Executive Committee of the Council and the Council, scientific Section sessions, technical and scientific exhibits, and such general programs as may be arranged by the Section Officers in cooperation with the Committee on Scientific Activities. The time and place for holding each annual meeting shall be fixed by the Council.

SECTION 2. Scientific Sections. The Association may from time to time constitute and designate Scientific Sections of the Association, which shall be organized and shall perform such duties and responsibilities as may be from time to time designated.

SECTION 3. Publications. The Association shall own and publish the Southern Medical Journal, which shall be the official organ of the Association, and other such publications which may be provided for by the Association. The Association may designate such ownerships of publications as deemed advisable.

ARTICLE VIII- SEAL

The Association shall have a common seal, with power to break, change, or renew the same at pleasure.

ARTICLE IX- REGISTERED AGENT AND REGISTERED OFFICE

The address of the registered office of the Association is 35 Lakeshore Drive, Birmingham, Alabama 35209.

ARTICLE X- AMENDMENTS

The Association may, at any annual meeting, amend the Articles of Incorporation by a two-third's affirmative vote of the members present and voting during a general session of that meeting, provided the amendment has been presented to the membership at least 30 days prior to the meeting.

**ARTICLE XI - REQUIREMENTS OF
THE ALABAMA NONPROFIT
BUSINESS CORPORATION ACT
AND SECTION 501(c)(3)
OF THE INTERNAL REVENUE
CODE**

The foregoing clauses of these Articles of Incorporation shall be exercised subject to and consistently with the following affirmative duties:

- (i) The corporation shall distribute its income for each taxable year at such time and in such manner as not to become subject to the tax on undistributed income imposed by Section 4942 of the Internal Revenue Code ("Code") or the corresponding section of any future federal tax code;
- (ii) The corporation shall not engage in any act of self-dealing in such a manner as to subject it to tax under Section 4941(d) of the Code or the corresponding section of any future federal tax code;
- (iii) The corporation shall not retain any excess business holdings so as to subject it to tax under Section 4943(c) of the Code or the corresponding section of any future federal tax code;
- (iv) The corporation shall not make any investments in such manner as to subject it to tax under Section 4944 of the Code or the corresponding section of any future federal tax code; and
- (v) The corporation shall not make any taxable expenditures so as to subject it to tax under Section 4945(d) of the Code or the corresponding section of any future federal tax code.

Bylaws

ARTICLE I. MEMBERSHIP

Section 1. Classification

There shall be the following classes of members.

A. Active Members.

1. The active membership of this Association shall be by invitation to physicians who are eligible to be members of the state medical societies of Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia, and the District of Columbia, and who are sponsored by the respective state or district Councilor; to invited medical officers of the United States Army, Navy, Air Force, Public Health Service and Veterans Administration on active duty; and to invited members of the Puerto Rico Medical Association who are citizens of the United States of America.
2. Active Members shall have full privileges of Association membership, including the right to hold office, vote, and receive the publications of the Association.
3. Active Members shall pay full dues to the Association, either annually or by payment of a life membership fee. Active Members who retire from practice may become active retired members at a rate of 50% of the current dues structure. Active Members may be excused from the payment of Association dues for one of the following reasons: financial hardship, extended illness, postgraduate training (defined as that period during which a member participates in an organized educational program), retirement from active practice, or on temporary service as full-time commissioned medical officers in the reserve Armed Forces. Active Members excused from the payment of

Association dues shall have the right to vote and hold office, but shall not receive publications of the Association except by personal subscription. Nothing in this or following sections shall be construed to be retroactive to affect previously classified Honorary Members.

B. Associate Members

The Association may have the following classes of Associate Members:

- Class 1. A member who has moved from the territory of the Association;
- Class 2. A physician from outside the territory of the Association;
- Class 3. The Association may have International Members composed of physicians who are eligible for membership in medical associations in the country where they reside and practice medicine. If they receive the *Southern Medical Journal* there will be a surcharge to their dues; if they reside in the U.S. there will be no surcharge;
- Class 4. An intern or resident not yet a member of a state medical society and medical students of the medical schools in the member states or the District of Columbia.
- Class 5. A physician assistant or nurse practitioner who is sponsored by an Active Member.
 1. To be eligible for Associate Membership, under Classes 2 and 4, a person must satisfy the requirements set forth in Section 1. Active Members, except eligible for membership in a state or district society in the case of Class 4, and holding the degree of Doctor of Medicine or Osteopathy in the case of Class 4, medical students or osteopathy students.
 2. Under Classes 1, 2, 3 and 4 individuals may be accepted for Associate Membership by the Executive Vice-

President, their eligibility under the provisions of this Section having been determined.

3. Associate Members shall neither hold office nor be entitled to vote.
4. Associate Members under Classes 1 and 2 shall pay regular annual dues and shall receive the *Southern Medical Journal*.
5. Associate members under Class 3 shall pay regular annual dues and may elect to receive the *Southern Medical Journal* at an additional surcharge if they reside outside the U.S.
6. Associate Members under Class 4 shall not pay dues, and may receive the publications of the Association by personal subscription at a reduced rate.
7. Associate Members under Class 5 shall pay annual dues equal to 50% of the Active Member dues rate and may receive the publications of the Association by personal subscription at a reduced rate.

C. Interim Members

An Interim Member shall be a physician who is otherwise eligible for membership in the Association and who has been invited by the Association to become an Interim Member. Interim Members shall have a dues structure as determined by the Council, and shall have such rights and privilege of membership as may be determined by the Council. The term of membership of Interim Members shall be determined by the Council. Interim Members shall not be eligible to vote or hold office.

D. Honorary Members

The Association may designate Honorary Members who shall be composed of those physicians whose contribution to the promotion of medical science is recognized by the Association in conferring such membership. Such membership shall be approved by the Council. Honorary Members shall have all privileges of other members of the

Association, excepting that they shall not be eligible to vote or hold office. Honorary Members shall not pay dues.

E. Ex Officio Members

The Association may designate Ex Officio Members who shall be composed of those persons who by virtue of their positions as active Deans of Medical Schools or other institutions of learning are conferred membership by the Council of the Association. Ex Officio Members shall have all privileges of other members of the Association except that they shall not be eligible to vote or hold office. Ex Officio Members shall not be dues paying members.

F. Emeritus Members

An Active Member in good standing who is over 70 years of age and who has been a member for a period of twenty-five (25) years is eligible for Emeritus Membership. Emeritus Members shall not pay dues but shall enjoy all privileges of the Association, except they may not hold office.

G. Medical Practice Services Members

Membership is available to any medical practice where at least one physician of the practice is an Active Member of the Association. Non-physician staff employed by the medical practice services member are eligible to participate in the programs and services offered through the medical practice membership. Non-physician staff are eligible by virtue of the fact that the medical practice pays the dues established for this membership category by the Council.

H. Corporate Members

Corporate membership may be available to any medical practice where all physicians are individual members of the Association and non-physician staff are eligible to participate in the programs and services offered through

the medical practice membership. Corporate members pay dues as established by the Council. Physician and non-physician members in the Corporate Program are eligible for special rates on products as defined by the Association.

I. Institutional Members. The Association may have Institutional Members composed of Physicians who are members of medical associations which have entered into affiliation agreements with the Association for educational programs and other programs of the Association; provided, the privileges and dues of such members shall be as specified in the affiliation agreements but they shall not be greater than the privileges or dues of dues paying Associate Members.

Section 2. Application for Membership

Application for membership in this Association shall be made in writing or electronically via the Internet. The Association reserves the right to accept or reject any applicant for membership.

Section 3. Termination of Membership

Any member who is subject to a license revocation or suspension by a state board of medical examiners or comparable licensing agency shall automatically forfeit his/her membership in the Association. The Association may at any Annual Meeting, on recommendation of the Council, suspend or expel any member of the Association by a majority vote of those present and voting.

Section 4. Reinstatement

A former member whose membership in the Association has been terminated may, after a period of one year, reapply for membership in the Association. Such application shall be referred to and acted on by the Council.

ARTICLE II. DUES

Section 1. Annual Membership Dues

The dues of this Association shall be established by the Council, and shall be payable annually on the member's anniversary date in advance. Membership shall begin on the date of application, provided the application for membership is approved. The Council shall also be authorized to establish Life Membership fees.

Section 2. Non-Payment of Dues

Any member whose dues are unpaid on the member's anniversary date shall thereafter be deemed a member not in good standing and shall be ineligible after such date for any benefits of membership. If such member's dues remain unpaid for three months after the member's anniversary date, the member shall be automatically suspended at the end of such period. On a full payment of the member's arrearage, the member shall be automatically reinstated as a member in good standing from the date of suspension.

ARTICLE III. OFFICERS

Section 1. Elected Officers

Elected officers of this Association shall be a President, a President-Elect, an Immediate Past-President and Councilors.

Section 2. Appointed Officers

The appointed officers of the Association shall consist of the Executive Vice-President (CEO), who will also serve as the Treasurer of the Association.

Section 3. Qualifications

To be eligible for the office of President-Elect of the Association such person shall be a member in good standing of the Association and a current Councilor with at least two years experience in his/her present term as Councilor. To be eligible for the office of Councilor, such person shall be a member in good

standing of the Association and either currently be a Section Officer, or an Associate Councilor, or have been an Associate Councilor within the last five years, or be a Past Councilor or have served in a leadership role in the Association.

Section 4. Term of Office

A. The term of the elected officers shall be five years for Councilor and one year for other officers commencing at the conclusion of the Annual Meeting at which such officers' election results are announced. Notwithstanding anything contained in this section or these Bylaws to the contrary, those individuals who are serving as Councilors as of November 6, 1997, shall each have their terms extended two years in order to implement extensive changes in these Bylaws and the leadership selection process.

B. Each elected or appointed officer shall serve the term designated or until his/her successor is elected or appointed.

Section 5. Election Process for President-Elect

Eligible Councilors will declare their intent to run for the office of President-Elect by January 1st each year. They will be required to submit standardized information relating to their accomplishments and involvement in the Association to the Association's office at that time. This information along with a letter from each candidate stating his or her motivation to become President of the Association will be sent to the Council along with the ballot by January 15. The ballot must be returned to an independent auditor identified by the Association no later than February 1. The ballots will be counted within five (5) working days after due date in the presence of the independent auditor, either the President, President-Elect, Immediate

Past President, or Councilor representative appointed by the President and the Association's representative(s). The Council will vote in rank order for two candidates from among those listed on the ballot. Two points will be awarded for the "first choice" candidate and one point for the "second choice" candidate. The two candidates receiving the most points will be selected as the candidates to be placed on the final ballot. In case of a tie, the President will have the responsibility of selecting from among those candidates tied with the most points the two that will be presented to the Council. A final ballot will be mailed to the Council by February 15 on which the names of the two candidates will be listed along with the standardized information provided to the Council. The Council will select which of the two candidates will become President-Elect. That ballot must be returned to the independent auditor by March 1 in order to be counted. The President will be responsible for breaking any tie. The ballots will be counted within five (5) working days after due date in the presence of the independent auditor, either the President, President-Elect, Immediate Past President, or Councilor representative appointed by the President and the Association's representative(s).

Section 6. Election Process for Councilor

Councilors will be elected by mail ballot by all eligible active members within the state. The process will begin with the outgoing Councilor nominating four individuals who have agreed to serve as Councilor, prioritizing them from first through fourth. Nominees for Councilor must meet the qualifications outlined in Section 3. of this Article. Should a Councilor feel he/she does not have four eligible candidates, a letter of explanation for a lesser number will be accepted. The Selections Committee will choose two names from

those sought, received or considered by the Committee to be placed upon a ballot to be distributed to all eligible voting members in the state along with a brief written synopsis of each candidate's accomplishments, personal data and statement of why that individual would like to serve as Councilor. The election will be managed through the Association office, which will maintain election results and supporting ballots for a period of six months. The winner will be that candidate who receives the simple majority of ballots cast and received by the election deadline. The President shall cast a vote only in the unlikely event of a tie vote between the candidates. The election winners will be announced approximately 60 days prior to the Annual Meeting in order that the Councilors-elect can make travel plans to be present for the meeting at which they will assume office.

Section 7. Vacancy in Office

- A. A vacancy in any elected office other than that of President or Immediate Past President, shall be filled by going through the respective election process again. The Selections Committee will contact the Associate Councilors and other state leadership, in the event of a Councilor vacancy, to arrive at a new list of candidates for the ballot.
- B. A vacancy in the office of President shall be filled by the President-Elect for the remainder of that term of office.

Section 8. Duties of Officers

A. President

- 1. The President shall preside at all general sessions of an Annual Meeting and all functions at which the Association is host.
- 2. The President may deliver an annual address at the general session to be held at a time and place decided upon by the Executive Committee of the Council.

- 3. The President shall be the Chairman of the Council and of the Executive Committee of the Council, but shall not be eligible to vote for the election of a President-Elect except to cast a vote in the event of a tie. He/She shall preside at all meetings of the Council and of the Executive Committee.
- 4. The President shall consult with the Committee on Scientific Activities in the formulation of the program for the Annual Scientific Assembly.
- 5. The President shall appoint members of the Association to carry out duties of local arrangements in conjunction with the Annual Scientific Assembly.
- 6. The President shall appoint, on nomination by the respective Councilor, five Associate Councilors from each state or district.
- 7. The President shall report to the membership of the Association at its Annual Meetings on the activities of the Council during the interval between Annual Meetings and shall recommend to the membership such actions as are appropriate under these Bylaws.
- 8. The President or any two members of the Executive Committee may convene a meeting of the Executive Committee.
- 9. The President shall appoint the members of the Presidential Committee on Special Awards.
- 10. The President shall appoint members of committees and chairmen of such committees in accordance with these Bylaws except as otherwise provided.
- 11. The President shall carry out the planning of the Annual Meeting of the membership.
- 12. The President shall serve as an ex officio member of all committees of the Association, except the Committee on Selections.
- 13. The President shall fulfill such

other duties as may pertain to the office of President.

B. President-Elect

1. The President-Elect shall assist the President in the discharge of his/her duties and in the absence of the President shall assume such duties.
2. The President-Elect shall serve as Vice-Chairman of the Council and the Executive Committee.
3. The President-Elect shall serve as Chairman of the Presidential Committee on Special Awards and shall have such other duties and responsibilities as may be required by the office.
4. The President-Elect shall serve as Chairman of the Presidential Committee on Endowments, of the Presidential Committee on Affiliated Societies and of the Presidential Committee on Selections.
5. The President-Elect shall, in the absence of the President, preside at the meetings of the Council and of the Executive Committee.
6. The President-Elect shall act as Parliamentarian at all meetings of the Council, the Executive Committee and the membership.
7. The President-Elect shall serve as a liaison to the Association's Auxiliary.

C. Executive Vice-President

- A. The duties and responsibilities of the Executive Vice-President shall be as stated in Article VI, Section 1.

D. Councilors

1. Composition of Council

The Council shall consist of twenty members, three of whom shall be the President, the President-Elect, and the Immediate Past-President. The other seventeen shall be the Councilors, elected by the states and the District of Columbia, as provided in these Bylaws.

2. Annual Meeting of Council

The Annual Meeting of the Council shall be held at such time and place as may be set by the President, during or immediately preceding the general Annual Meeting of the Association.

3. Notice of Meeting of Council

At least ten days prior to a meeting written notice shall be given to members of the Council of the date, time and place for holding of the Annual Meeting of Council. The Council may hold such additional meetings as deemed necessary.

4. Special Meetings of Council

A special meeting of the Council shall be called by the President to accomplish any business of the Council or shall be called at the written request of any three Councilors. Notice of special meetings shall be the same as for the Annual Meeting.

5. Quorum for Meetings of Council

The quorum for any meeting of the Council shall be a majority of the members of Council.

6. Council Authority

- a. The Council shall be the governing body of the Association.
- b. The Council shall have and exercise between meetings of the Association the following power and authority over the affairs of the Association:
 1. It shall cause to be established Committees and Sections in accordance with these bylaws and shall designate the President to appoint the members of such Committees and Sections.
 2. It shall be charged with the responsibility to cause to be conducted annually

an audit of the financial affairs of the Association.

3. It shall, subject to these bylaws, establish policies and procedures for the conduct of the affairs of the Association.
4. It shall appoint the Executive Vice-President (CEO) of the Association, a Treasurer of the Association, and the Editor of the *Southern Medical Journal*.
5. It shall establish the fiscal year of the Association.

- c. Any Councilor shall be subject to removal from such office by the President upon the concurrence in that action of two-thirds of the members of the Council.

7. Duties of Councilors

- a. Councilors shall represent the state or the district in which the Councilor resides or practices.
- b. Each Councilor will represent the Association to the members in his/her state or district and seek to encourage membership in and participation in the activities of the Association by physicians in his/her state.
- c. Each Councilor shall attend the meetings of the Council.
- d. Each Councilor shall perform such other duties as may be designated by his/her position.

ARTICLE IV.

ASSOCIATE COUNCILOR

Each Councilor who represents a state or the District of Columbia shall nominate for appointment by the President, five physician members from such Councilor's territory who shall be designated as Associate Councilors. A

past Councilor may be considered for appointment as an Associate Councilor without having to serve any waiting period following the completion of a term as Councilor.

A. Duties

Associate Councilors shall be charged with the duty and responsibility to stimulate interest in all activities of the Association with particular emphasis on membership, and to assist their respective Councilor in any way. In the absence of the Councilor, he/she may appoint one of the Associate Councilors to act in his/her stead as a member of the Council.

B. Term of Office

The term of office of the Associate Councilors shall be at the pleasure of the current Councilor and concurrent with the term of the Councilor who represents the State or District in which the Associate Councilor resides or practices.

ARTICLE V.

EXECUTIVE COMMITTEE

Section 1. Composition

The Executive Committee of the Council shall consist of the Immediate Past President, President, President-Elect, and President-Elect Designate of the Association.

Section 2. Chairman and Vice-Chairman of Executive Committee

The President and President-Elect shall serve as Chairman and Vice-Chairman respectively of both the Council and the Executive Committee of the Council.

Section 3. Duties of Executive Committee

The Executive Committee of the Council shall act for the Council between meetings of the Council to consider special matters and report its

findings and conclusions to the Council. Any matters of such urgency that they feel should not be held over to the Council meeting shall be acted upon by the Executive Committee.

ARTICLE VI.

COUNCIL APPOINTMENTS

Section 1. Executive Vice-President (CEO) and Treasurer

There shall be an Executive Vice-President (CEO) who shall be responsible for implementing the policies and direction of the Council; execute and administer Association programs; and manage the day-to-day operation of the Association. The Executive Vice-President (CEO) shall employ and direct all staff personnel, full and part-time, including the assignment of duties of such employees. In this capacity, he/she shall be generally charged with engaging, promoting, and assigning duties and tasks to all staff personnel, shall seek to expand the membership and participation of the Association and its activities, shall be generally charged to receive and administer funds of the Association, shall represent the Association to the public and to other Associations, and shall perform such other tasks and duties as may be delegated or assigned to him/her by the Council. He/She shall act as the Managing Editor of the *Southern Medical Journal* and other publications of the Association.

The offices of the Executive Vice-President (CEO) and Treasurer will be combined and vested in the same person at the discretion of the Council. The Treasurer shall be charged to receive all funds of the organization and deposit the same in a bank or banks located in the domicile of the Association and shall be held accountable for appropriate documentation for all financial transactions of the Association. Such depositories and investments shall be designated by the Association,

the Council, and such appropriate advisory groups as approved by the Council. He/She shall also perform other duties and tasks as assigned by the Council.

Section 2. Editor

A. The Editor shall have the following areas of responsibilities:

1. Shall be responsible for the non-advertising portion of the *Southern Medical Journal*, and other publications of the Association, including the preparation of editorials, the selection and editing of scientific articles, and the general format with approval of the Executive Vice-President (CEO).
2. May appoint or recommend the employment of assistant or associate editors and/or an Editorial Board with the consent of the Council.
3. Shall review, or cause to be reviewed, any books which in his/her discretion merit the publication of a review in the *Southern Medical Journal*.
4. Shall establish practical mechanics for handling manuscripts and other materials for publication with the consent of the Executive Vice-President (CEO).
5. May employ necessary secretarial assistance with the consent of the Executive Vice President (CEO).
6. May perform such other duties as may be assigned.

ARTICLE VII. COMMITTEES

Section 1. Coordinating Committees

A. There shall be five Coordinating Committees to be known as:

1. Coordinating Committee on Education.
2. Coordinating Committee on Membership.
3. Coordinating Committee on Insurance and Physicians' Retirement Program.

4. Coordinating Committee on Budget/Administration.
5. Coordinating Committee on Long-Range Planning.

B. Chairman

The Chairman of each Coordinating Committee shall be appointed by the President annually, but no person shall be able to serve more than five consecutive years.

C. Composition of Coordinating Committees

1. Each of the Coordinating Committees shall have from three to nine members appointed annually by the President.
2. The Chairman of each Advisory and Ad Hoc Committee shall be made a member of the appropriate Coordinating Committee. No person shall serve more than eight years as combined member and chairman. The President is charged to provide continuity of these committees when making appointments.
3. The President shall be an ex officio member of all Coordinating Committees.

Section 2. Advisory Committees

A. There may be eight Advisory Committees known as:

1. Advisory Committee on Scientific Activities.
2. Advisory Committee on Grants, Loans and Scholarships.
3. Advisory Committee on Multi-Media Programs.
4. Advisory Committee on Constitution and Bylaws.
5. Advisory Committee on New Physicians.
6. Advisory Committee on Practice Management Services.
7. Advisory Committee on Special Projects and Services.
5. Advisory Committee on Management Compensation.

B. Chairman of Advisory Committee.

1. The Chairman shall be appointed annually by the President.
2. No person shall serve more than eight years as combined member and chairman.

C. Composition of Advisory Committees.

1. Each Advisory Committee shall have from three to nine members who may be Councilors, Associate Councilors, or members of the Association.
2. Each Advisory Committee member shall be appointed annually by the President.
3. The President shall be an ex officio member of each Advisory Committee.
4. No person shall be eligible to serve for more than six consecutive years as a committee member, except the Chairman.
5. The President is charged to provide continuity of these committees when making appointments.

Section 3. Presidential Committees

A. There shall be two Presidential Committees known as:

1. Presidential Committee on Special Awards.
2. Presidential Committee on Selection.

B. There may be two Presidential Committees known as:

1. Presidential Committee on Endowments.
2. Presidential Committee on Affiliated Societies.

Section 4. Ad Hoc Committees

Ad Hoc Committees may be appointed by the President as may be deemed necessary. Ad Hoc Committees may be appointed annually by the President to undertake such activities as shall be designated for such committee and shall have constitution and duration and shall make reports as shall be designated.

Section 5. Duties and Responsibilities of Coordinating, Advisory, and Presidential Committees

A. Coordinating Committee on Education:

Shall coordinate the activities of the Committee on Scientific Activities, the Committee on Multi-Media Programs and such Ad Hoc Committees as shall be annually assigned to it. The Coordinating Committee on Education shall be responsible for supervising all publications related to education of the Association acting in both a regulatory and advisory capacity. Suggested changes to any publication must be reviewed and approved by the Editor(s) and Executive Vice-President.

A-1. Advisory Committee on Scientific Activities

B. The Committee on Scientific Activities shall be vested with the responsibility for the formulation and content of the scientific activities of the Annual Meeting.

The Committee shall include in its scope of activities the following:

1. The format and content of the scientific sessions of the Annual Meeting;
2. The development and assignment of a scientific theme or themes for the Annual Meeting in cooperation with the Section Secretaries;
3. Design and nature of postgraduate courses, workshops, specialty and multi-disciplinary programs for the Annual Meeting;
4. Shall maintain liaison with:
 - a. Medical school faculties and students in the site of the Annual Meeting;
 - b. Specialty and sub-specialty organizations;
 - c. Allied health science organizations, and cooperate with them, in developing and designing of scientific programs and continuing education activities;
5. Shall be responsible for the selection

and judging of scientific exhibits shown at the Annual Meeting.

6. Shall be responsible for monitoring and evaluating scientific activities of the Annual Meeting.
7. May serve as an advisory group to the Section Secretaries in developing their Section specialty programs, when appropriate, and coordinating and assisting the Secretaries in arranging combined Section meetings.

A-2. Advisory Committee on Multi-Media Programs

It shall be the duty of this committee to review education programs developed for dissemination through electronic mediums and audio/video mediums.

B. Coordinating Committee on Membership

Shall coordinate the activities of the Advisory Committee on New Physicians and such Ad Hoc Committees as shall be annually assigned to it.

B-1. Advisory Committee on New Physicians

It shall be the duty of this committee to review specific program areas and services that would be of interest to New physicians. The Committee will also generate an annual list of both Educational Programs and Membership Services that would meet the perceived needs of physicians in the under forty age category.

C. Coordinating Committee on Insurance and Physicians' Retirement Program

This Committee shall periodically review the insurance program of the Association and work in liaison with the administrator and/or underwriters to ensure the success of the program, and to see that the interests of participants are adequately protected. This Committee shall also periodically re-

view the Physicians' Retirement Program of the Association and work in liaison with the staff of the Association.

D. Coordinating Committee on Budget/Administration

This Committee shall coordinate the activities of the Advisory Committee on Constitution and Bylaws, the Advisory Committee on Grants, Loans and Scholarships, the Advisory Committee on Practice Management Services, the Advisory Committee on Special Projects and Services, the Advisory Committee on Management Compensation and such Ad Hoc Committees as shall be annually assigned to it. It shall also be the duty of this Committee to meet at least annually to review the staff pension plan(s) and recommend changes that might improve the employee benefits package and to review any personnel problems that may arise during the year relative to the staff. This Committee shall review budgetary information including revenues and expenses, financial projections, major capital expenditures, and key financial indicators. The Committee will also review variances in the Budget and other major program developments from a financial perspective. This Committee shall be responsible for the annual independent audit and reporting audit results to the Council at the appropriate Annual Meeting of the Council. This committee shall consist of the President, President-Elect, and Immediate Past President, who shall chair the committee, and six (6) members at large from the Council appointed by the President. The members at large should serve rotating terms in a manner that maximizes continuity.

D-1. Advisory Committee on Constitution and Bylaws

It shall be the duty of this Committee to periodically review the Constitution and Bylaws, to receive suggestions from members of the Association

relative to any changes which should be made and to bring the suggested changes before the Coordinating Committee on Budget/Administration for approval and recommendations to the Council.

D-2. Advisory Committee on Grants, Loans and Scholarships

It shall be the duty of this Committee to formulate and recommend policies and criteria for awarding grants, loans and scholarships. It shall review all applications and determine the recipients of the grants, loans and scholarships available through the Association at a meeting to be held annually after the deadline for receiving applications. The Committee may be composed of members who are representative of the specialties of medicine at the discretion of the President.

D-3. Advisory Committee on Special Projects and Services

This Committee shall review such potential projects and services proposed to be conducted by the Association as may from time to time be submitted to the Committee for its study and recommendations or which the Committee may independently select for study.

D-4. Advisory Committee on Practice Management Services

This Committee shall periodically review the programs, services, and products offered by Reimbursement Services and the Physicians' Purchasing Program and shall make recommendations to enhance participation in these programs.

D-5. Advisory Committee on Management Compensation

This Committee shall be responsible for the development and implementation of an equitable and competitive compensation program for the Association's senior management staff. It shall be responsible for the annual per-

formance evaluation of the Executive Vice President (CEO). The Committee shall consist of six members including the President, who shall chair the Committee, President-Elect, Immediate Past President and three members at large appointed by the President each year with rotating terms.

E. Coordinating Committee on Long Range Planning

This Committee shall select the time, location, and agenda of periodic study sessions for the Council. These sessions are to be spent considering past, present, and future problems of the Southern Medical Association. Recommendations are to be given to the Executive Committee for approval and presentation to the Council.

F. Presidential Committee on Special Awards

A confidential Committee on Special Awards consisting of five members with the President-Elect as Chairman, shall be appointed by the President to evaluate the contributions of the various candidates for special awards. If suitable candidates are selected by the Committee, it shall submit the names of not more than three such members to the Council for each award. The Council may elect one for each respective award and presentation of the awards will take place at the Second General Session of that Annual Meeting.

G. Presidential Committee on Selections

This Committee shall seek, receive, and consider names for all elected officers with the exception of the Section Officers. The members of this Committee shall consist of four Councilors and two members at large who may be, but are not necessarily, Councilors as appointed by the President-Elect who shall chair this Committee. The appointment of this Committee will be

on an annual basis, but no person shall be eligible to serve more than two consecutive annual terms.

H. Presidential Committee on Endowments

This Committee shall provide direction for the development, visibility and viability of the Research and Education Foundation, a permanent endowment established to ultimately fund the Association's Grants, Loans, and Scholarships programs, recommend and approve programs, policies and marketing efforts required to generate contributions to the Research and Education Foundation, and recommend and approve methods of giving to the Foundation and ways in which contributors can be recognized for various levels of giving. Also, volunteer personal time and effort in securing major gifts to the Foundation and set an example, by personal contributions, for the general membership of the Association. The Committee shall support The Society of 1906 and recommend and approve programs to enhance the visibility and growth of the Society.

I. Presidential Committee on Affiliated Societies

This Committee shall discuss common goals, objectives and programs among the various affiliated societies and identify ways of effecting stronger working relationships between the Association and the Affiliated Societies. This Committee shall consist of the President of each of the Affiliated Societies and shall be chaired by the President-Elect of the Association.

ARTICLE VIII. ANNUAL MEETING

Section 1. Annual Meeting

There shall be an Annual Meeting of the Association, which shall be at such time and place as shall be determined by the Council and reasonable

prior notice of the time and place of holding such Annual Meeting shall be given to all members of the Association. At all business sessions the attendance of not fewer than twenty members shall constitute a quorum to conduct business.

Section 2. Composition of Annual Meeting

The Annual Meeting shall consist of such sessions to include Business, Scientific, Educational, and such other endeavors as may be designated for consideration. The schedule of activities for the Annual Meeting shall be established by the Council annually and such activities shall be furnished to the membership in advance of the Annual Meeting. The President of the Association shall preside at all general sessions of the Annual Meeting, or in his/her absence the President-Elect. Such business shall be conducted at the General Session as shall be designated by the Presiding Officer.

Section 3. Scientific Sections of the Annual Meeting

The Scientific Sections of the Association may hold such sessions as may be arranged by the Section Secretaries with the approval of the Committee on Scientific Activities.

Section 4. Creation of New Sections and Abolition of Existing Sections.

New Sections may be created by vote of the Council after receiving petition from thirty active members of the Association representing that specialty or sub-specialty and representing twelve of the states or the District of Columbia in the Association territory. Recommendations to abolish a Scientific Section may be made to the Council when that Section's participation, interest, and attendance warrant review over a period of two years. The Council shall consider such recommendations and act with respect to the same.

Section 5. Section Officers

The following Section Officers may be elected by the Section under such procedures and rules as may from time to time be adopted by each section:

A. Chairman.

1. The Chairman shall perform such duties as may be provided by the rules of the Section.
2. The Chairman shall be responsible for assisting the Secretary in selecting Section abstracts and posters, when appropriate, for the Annual Meeting and coordinating the Section business meeting at the Annual Meeting.
3. The Chairman, in cooperation with the Secretary, shall be responsible for enhancing participation in Section activities through Section promotion, membership recruitment activities and improved quality and content of the program.

B. Vice-Chairman.

The Vice-Chairman shall assist the Chairman in his/her duties and preside over the Section meetings in the absence of the Chairman.

C. Secretary.

1. The Secretary shall be responsible for selecting Section abstracts and posters, when appropriate, for the Annual Meeting.
2. The Secretary shall be the official correspondent with the headquarters office.
3. The Secretary shall maintain or cause to be maintained the records of the Scientific Section.
4. The Secretary shall consult with the Association Membership Services Department to determine if the prospective nominees for Section Officers are eligible to hold office prior to their nomination.
5. The Secretary shall be responsible for collecting papers, when appro-

prate, presented at an Annual Meeting and forwarding them to the Association offices along with the list of newly elected Section Officers.

6. The Secretary shall attend the annual Section Secretaries' Conference, when scheduled, after the Annual Meeting for the purpose of formulating the general schedule of scientific sessions for the Annual Meeting in cooperation with the Advisory Committee on Scientific Activities.

D. Secretary-Elect

1. The Secretary-Elect shall make himself/herself acquainted with the duties of the Secretary and attend the Section Secretaries' Conference, when scheduled.
2. The Secretary-Elect shall perform such other duties as may be appointed.

Section 6. Section Officer Requirements and Terms.

- A. All sections are required to have a Secretary, Chairman and Secretary-Elect. Sections may elect to have additional officers such as a Vice-Chairman and Chairman-Elect. The Secretary and Chairman shall be elected for a term of up to three (3) years. The term for Secretary-Elect shall be one year. Sections may elect to vary terms of office with the approval of the Chairman of the Committee on Scientific Activities.
- B. The Secretary-Elect shall serve during the final year of the incumbent Secretary's term.

Section 7. Scientific Section Steering Committees.

- A. The Scientific Section Committees may have a formal Steering Committee at the election of such Committee. If constituted, the Steering Committee shall be made up of the current Chairman, Vice-

Chairman, Secretary, the Chairman-Elect, if this office is utilized by the Section, and the three immediate past Chairmen. The duties of the Section Steering Committee shall include:

1. Aid in planning the work of the Section;
2. Evaluation of papers read before the Section for possible publication;
3. Serve as a Section nominating committee;
4. Fill vacancies that occur among Section Officers;
5. Perform such other duties as they appear necessary.

ARTICLE IX.

SPECIAL AWARDS

Section 1. Distinguished Service Award.

There shall be a Distinguished Service Award of the Association which may be awarded annually to any member of the Association in recognition of outstanding contributions to the advancement of medical science and/or the Association. Any member of the Association shall be eligible to receive the award and nominations may be made by any member of the Association.

Section 2. Seale Harris Award.

There shall be a Seale Harris Award which may be awarded annually to any member of the Association as recognition for important research accomplishment in the broad field of metabolism, endocrinology, nutrition, or for research which contributes to a better understanding of the chemical changes occurring in disease. Any member of the Association shall be eligible to receive the award and nominations may be made by any member of the Association.

Section 3. Original Research Award.

There shall be an Original Research Award of the Association, consisting of

a medal and a cash prize, which may be awarded annually in recognition of original research in clinical medicine or the basic science as applied to medicine. Any member of the Association shall be eligible to receive the award and nominations may be made by any member of the Association.

Section 4. Determination of Awards.

These awards will be determined by a confidential Committee appointed by the President to evaluate the contributions of the various candidates for special awards. The Committee shall submit the names of not more than three persons to the Council for each award. The Council may elect one for each respective award and presentation of awards will take place at the Second General Session of the Annual Meeting.

ARTICLE X. SOUTHERN MEDICAL ASSOCIATION AUXILIARY

There shall be an Auxiliary to the Southern Medical Association that will function under the jurisdiction of the Council. The Executive Committee of the Council will be the Advisory Committee to the Auxiliary. Financial support to the Auxiliary may be granted at the discretion of the Council. The fiscal year will coincide with that of the Association.

ARTICLE XI. RULES OF ORDER

The rules contained in the current edition of Roberts' Rules of Order,

Newly Revised shall govern the proceedings of the Association in all cases in which they are applicable and in which they are not inconsistent with these Bylaws or special Rules of Order which the Association may adopt.

ARTICLE XII. INDEMNIFICATION OF OFFICERS AND AGENTS OF THE SOUTHERN MEDICAL ASSOCIATION

Every person who is, or has been, a Councilor, Trustee, Officer, Employee or Agent of the Association, or of a subsidiary or of an affiliate owned or controlled by the Association, shall be indemnified by the Association in a manner and to the extent authorized and permitted by the Alabama Non-profit Corporation Act. The foregoing rights of indemnifications shall be without prejudice to any other rights to which any such Trustee, Councilor, Officer, Employee or Agent may be entitled as a matter of law.

ARTICLE XIII. AMENDMENTS

These Bylaws may be amended at any Annual Meeting by a two-thirds affirmative vote of the members present and voting at a General Session of that Meeting after the Amendment has been presented in writing to the Council prior to the meeting and copies of the changes are disseminated to the membership attending the meeting.



FACTS

SOUTHERN MEDICAL ASSOCIATION

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What is the Southern Medical Association?

Even long-time members have difficulty at times recalling all the facts about SMA—so, this portion of the YEARBOOK is designed to give, in capsule form, facts which you—as an Officer—should know about your organization.

Birth of a Medical Association

NAME: Southern Medical Association

DATE OF BIRTH: October 3, 1906

PLACE OF BIRTH: The Read House, Chattanooga, Tennessee

FOUNDING FATHERS: Approximately 150 “attending physicians” were on hand for the organizational meeting.

Vital Statistics

1906

Membership—Approximately 200 members from a six-state territory—Alabama, Florida, Georgia, Louisiana, Mississippi, Tennessee

Annual Dues—\$2

Scientific Assembly—3 Sections

Publications—None

Assets—Just some dedicated physicians

2001

Approximately 32,000 members from a territory comprised of Alabama, Arkansas, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia and all across the continental U.S.

\$150

27 Sections

Southern Medical Journal (monthly) and *ChartNotes* (quarterly); both owned and published by the Association

A growing roster of dedicated physicians, an Annual Meeting unparalleled for its scientific sessions, its publications, a headquarters building valued at \$2,100,000.00, Southern Orthopaedic Association and Southern Association for Oncology Affiliates, are but a few of the Association's assets today. SMA Services, a wholly owned for-profit subsidiary providing services to SMA and its members.

Purpose of the Southern Medical Association

The exclusive purpose of this unique organization is to develop and foster scientific medicine. Conceived as an organization which could, on a regular basis, promote the progress of scientific medicine generally and in particular, attack problems peculiar to the South; established as a voluntary, non-profit organization, and chartered under the laws of the State of Alabama, the Association is independent of other medical societies, but works closely with them.

Dedicated exclusively to serving the professional needs of physicians of the South, SMA strives to bring its members into closer touch and in more perfect harmony with each other, creating a society unique in its opportunity for fraternal relationships and in its personal significance.

Although the Association has grown from a membership of approximately 200 in 1906 to a membership of over 32,000 today, its purpose remains the same and is so stated in its **CONSTITUTION and BYLAWS, ARTICLE II—PURPOSE.**

Organization and Early History of the Southern Medical Association

The Southern Medical Association, like the sturdy oak, from a little acorn grew; but this was no ordinary acorn. Its embryo contained the elements of need, vision, and opportunity embodied in a previously existing organization known as the Tri-State Medical Association of Alabama, Georgia, and Tennessee, which was composed of some two hundred physicians.

Representatives of the Tri-State group, along with representatives from Florida, Louisiana, and Mississippi, met in Chattanooga, Tenn., on October 2, 1906, in response to an invitation from the President of the Tennessee State Medical Association. The invitational letter stated that the members of the Nashville Academy of Medicine felt that "there was a growing feeling among doctors of the southern group of states that a Southern Medical Association should be organized."

These representatives, most of whom were presidents of their state medical associations, adopted a resolution for presentation to the Tri-State Medical Association, stating among other reasons, that "a greater opportunity for self-improvement and achievement in the realm of scientific research is required by the progressive and cultured physicians of the district (the South) than is afforded by the state societies, and which, on account of its large membership, is denied them in the American Medical Association." The resolution, presented the next day (October 3, 1906), called for the merging of the Tri-State Medical Association into this larger body, thereby becoming the nucleus of the proposed Southern Medical Association.

Anticipating favorable action on the resolution, a Committee on Constitution and Bylaws was appointed on October 2, 1906, with instructions to have a tentative draft of the CONSTITUTION and BYLAWS for the proposed Southern Medical Association ready to present to the Tri-State group the next day. Working all night, the Committee drafted a proposed CONSTITUTION calling for the formation of a voluntary, independent organization of physicians which would eventually embrace all of the sixteen Southern states and the District of Columbia. It further called for the Tri-State Medical Association to "thaw and resolve themselves into a dew; to die in order that the baby Southern Medical Association could be born."

In an atmosphere charged with emotion, the resolution and the tentative draft of the first CONSTITUTION were debated as the first order of business of the Tri-State group. There were impassioned pleas "on behalf of the young physicians of the Southern states for a wider field to engage our talents," as well as for "a stimulus, an

incentive to spur us on to worthy deeds to more intensive study, to greater accomplishments in the field of medicine and surgery." Jere L. Crook, M.D., Chairman, Committee on Constitution and Bylaws, tried to make the group visualize a great Southern Medical Association whose programs would deal with diseases peculiar to the Southern states and would present to the world the results of the research, the clinical experience, at the bedside and in the operating room, of the splendid body of men composing the ranks of the medical profession of the South.

Naturally, the fine record of the Tri-State group was ardently defended, citing loyalty and accomplishments of its members but the arguments for greater opportunities for scientific improvement and for a wider fellowship among physicians triumphed. The founder of the Tri-State group, J. B. Cowan, M.D., Tullahoma, Tenn., who was Chief Surgeon on the staff of Lieutenant General Nathan Bedford Forrest 1861-1865, understandably loathe to see his own brainchild die, and having pledged to fight any move to that effect, was so impressed with the "pleas of these ambitious young doctors for a chance to try their wings over all Dixie Land" that he moved the adoption of the resolution and the tentative CONSTITUTION and BYLAWS "without changing one jot or one tittle." The motion carried unanimously and thus the Southern Medical Association was born.

The work of organizing moved rapidly—a Nominating Committee was appointed, met promptly, and upon making its report, the first officers of the Southern Medical Association were elected and installed on October 3, 1906, at The Read House in Chattanooga, Tenn.

The first annual meeting was held in Birmingham, Ala. September 24-25, 1907, with a Scientific Assembly composed of three sections: Medicine, Surgery, and Ophthalmology. At this meeting H.H. Martin M.D., Savannah, Ga., first President of the Association, summarized the general feeling of the members of the Southern Medical Association in regard to their new organization when, in closing his President's Address, he said:

"I wish to express my entire satisfaction with the unqualified success of this, our first annual meeting, and to publicly thank the various Section Officers for the most excellent program furnished for this meeting. I have never seen a better one in any medical association in this country. The Southern Medical Association is tonight an accomplished fact. Its future is in your hands to make of it what you will."

Thus began the growth and development of the Southern Medical Association.

Officers and Governing Bodies of the Southern Medical Association

Just as the individual shares the responsibility of democratic government so the individual member of the Southern Medical Association shares the responsibility of managing its affairs. But a pure democracy is an inefficient and cumbersome form of organization and each of the members does not wish to study and vote on every single detail of the business of the Association. Therefore, provisions have been made whereby grants of power are distributed among officers and governing bodies.

GRANTS OF POWER...

The membership has adopted a CONSTITUTION and BYLAWS (which it may abolish, change, or amend) which invests power in, and describes the duties of certain bodies and officers of the Association. In addition, the CONSTITUTION and BYLAWS (1) states the purpose of the Association; (2) establishes requirements for and classes of membership; (3) provides for the scope and mechanics of meetings; (4) describes the manner of election, power, and duties of officers; (5) provides for the election or appointment of committees; (6) establishes and defines the administrative machinery; (7) prescribes dues and fiscal procedures and (8) provides for amendments.

OFFICERS...

The officers of the Association fall into two categories—the elected and the appointed officers. A complete outline of the duties of all officers, elected and appointed, is included in the BYLAWS.

THE GOVERNING BODIES... THE COUNCIL

Through provisions in the CONSTITUTION and BYLAWS, the membership established the Council as the governing body of the Association, and defined its composition, duties, and powers.

The Council consists of twenty members; three officers and one member representing each of the sixteen states and the District of

Columbia which constitute the territory of the Association. Elected by their respective states, Councilors serve for five years and can be eligible for re-election for a second term following a five-year hiatus from ending their first term. The President shall be that person who was elected by the Council as President-Elect the previous year and the Immediate Past President will be that person who served as President during the previous year.

Much of the detail work of the Council is accomplished by efficient use of committees created for specific purposes. Through the Association's President, the Council makes a report of its findings, recommendations, and actions to the membership at the first general session of each annual meeting.

EXECUTIVE COMMITTEE OF THE COUNCIL

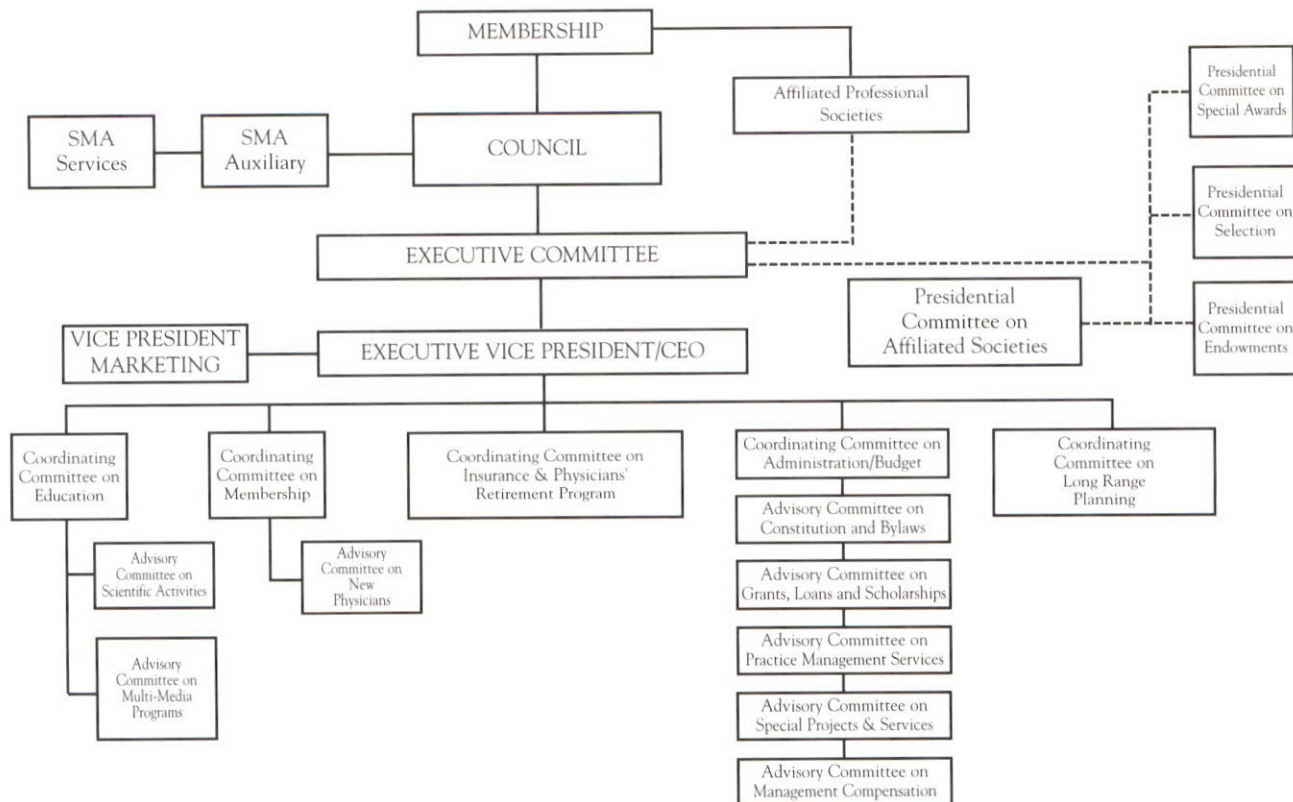
The Executive Committee of the Council acts for the Council and the membership between Annual Meetings. This smaller body is composed of the President, President-Elect, Immediate Past President, and President-Elect Designate.

The primary function of the Executive Committee of the Council is to consider all matters of business and report its findings and conclusions to the Council for action. Any matters of such urgency that they should not wait over until the Annual Meeting may be acted upon by the Executive Committee of the Council, however.

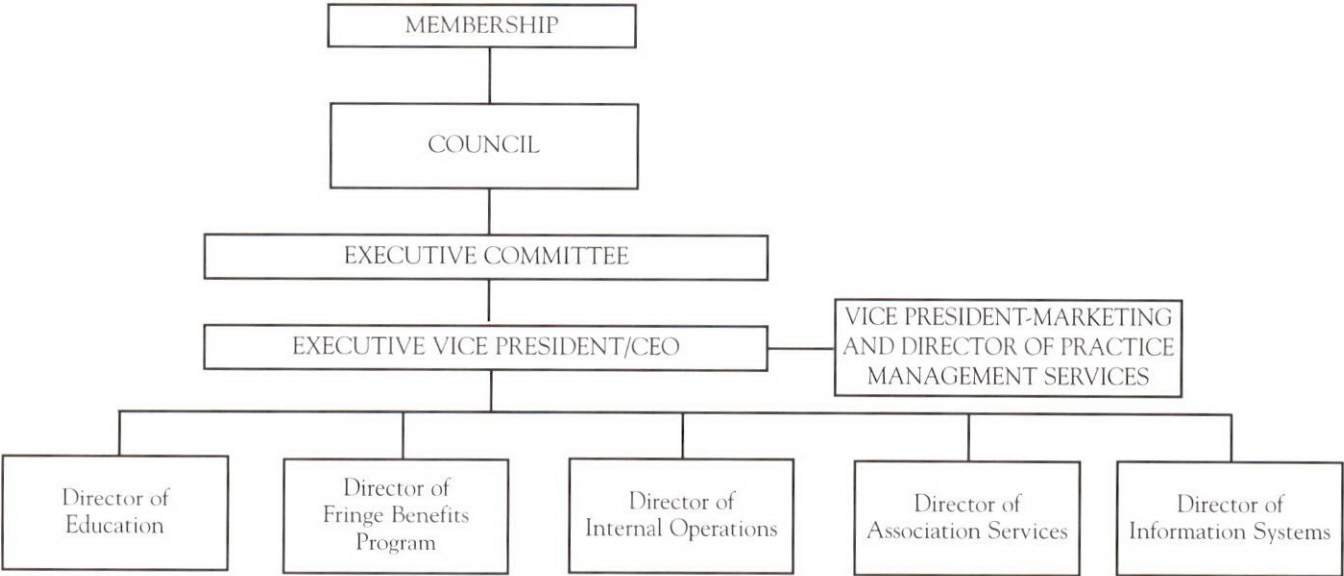
GENERAL ADMINISTRATION

By and large, the official governing bodies of the Association are policy-making groups. Decisions, programs, and policies established by the governing bodies are put into effect through (1) the administrative machinery of the Executive Vice-President and his staff at the headquarters office in Birmingham, Alabama, and (2) the Editor, Associate and Assistant Editors, and the Editorial Board.

Southern Medical Association Organizational Chart



Southern Medical Association Management Chart



Membership in the Southern Medical Association

WHO CAN BELONG...

The membership of SMA is by invitation to physicians eligible for membership in the following state medical societies: Alabama, Arkansas, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia, who are sponsored by the respective state Councilor, to invited medical officers of the United States Army, Navy, Air Force, Public Health Service and Veterans Administration on active duty, and to invited members of the Puerto Rico Medical Association who are citizens of the United States of America.

..The CONSTITUTION and BYLAWS of the Association provides for active membership as well as for various classes of associate and emeritus membership.

DUES...

The modest dues of the Association, which includes the member's subscription to the SOUTHERN MEDICAL JOURNAL, keeps membership in this scientific organization well within the financial reach of all physicians. Effective January 1, 2000, the annual dues were set at \$150, payable in advance, with membership effective on the date of the application.

Life membership is available to members in good standing upon application and the payment of the appropriate fee.

Activities of the Southern Medical Association

I. The Annual Meeting

GENERAL INFORMATION...

The Association's annual meeting is traditionally held in November each year in one of the cities located within the Association's territory. Dates for the Annual Meeting are selected at least 5 years in advance and conform to a Thursday-Sunday schedule. Dates and sites are subject to review and approval by the Council. All scientific activities, meetings, and exhibits at SMA annual meetings are open to physicians who are eligible for membership in their local and state medical societies whether or not they are members of the Southern Medical Association. Medical and nursing students, interns, residents, and paramedical personnel may also attend.

Generally, the format of an annual meeting consists of two parts—the scientific program and the exhibits both scientific and technical. Specifically, the scientific activities of the annual meeting are divided into symposia, scientific sessions, grand rounds, and abstract presentations. Specialty sections cooperate to present programs of special interest, special symposia on timely subjects, meetings of conjoint societies, post-graduate courses, scientific posters, and technical exhibits, all designed for one purpose—to enhance the practice of medicine.

SCIENTIFIC SECTIONS...

The modern concept of Section work was instituted by the Association at its first annual meeting in Birmingham, Ala., in 1907 when scientific programs were presented in three Sections: Medicine, Surgery, and Ophthalmology. Thus the basic reason for the founding of the Association in 1906 – “to provide a greater opportunity for self-improvement and achievement...”

As specialization developed, the need for a forum for the discussion of problems and progress in these new fields developed also. The Southern Medical Association has been quick to sense these needs related to special interests and has created Sections for their benefit. The Association has often led the way in the recognition of certain specialties by being the first general medical organization to create Sections for these specialties. When interest in, and the need for more than a single session are demonstrated, and the specific needs cannot be incorporated into existing Section programs, a new Section is created for that special need. At the same time, when need for a Section no longer exists or when its work has been absorbed by other Sections, then such Sections are discontinued. This practice of being constantly alert to the needs and wishes of the physicians in the South has produced an ever-changing list of the Association's Sections. The following list summarizes the Sections created by the Association in chronological order, with any changes from the original listed under the appropriate Section.

YEAR APPROVED BY COUNCIL	SECTION ON...
1906	Medicine
1906	Surgery
1906	Ophthalmology
	1912— changed to Ophthalmology, Rhinitis, Otolaryngology and Laryngology
	1923— changed to Eye, Ear, Nose and Throat
	1929— changed to Ophthalmology and Otolaryngology
1911	1963— changed to Ophthalmology Hygiene and Preventive Medicine
	1913— changed to Public Health
	1961— changed to Preventive Medicine
	1968— discontinued
1912	Ophthalmology, Rhinology, Otolaryngology and Laryngology
	1923— changed to Eye, Ear, Nose and Throat
	1929— changed to Ophthalmology and Otolaryngology
	1963— changed to Otolaryngology
	1983— changed to Otolaryngology— Head and Neck Surgery
1916	Pediatrics
	1983— changed to Pediatrics and Adolescent Medicine
1919	Urology
1919	Orthopedic Surgery
	1923— changed to Bone and Joint Surgery
	1942— changed to Orthopaedic and Traumatic Surgery
	1994— changed to Orthopaedic and Trauma Surgery
1919	Röntgenology
	1920— changed to Radiology
1920	Obstetrics
1920	Neurology and Psychiatry
	1974— changed to Neurology, Neurosurgery, and Psychiatry
	1986— changed to Neurology and Psychiatry; new Section on Neurosurgery formed
	1999— changed to Psychiatry and Neurology
1922	Dermatology and Syphilology
	1961— changed to Dermatology
1922	Medical Directors of Southern Life Insurance Companies
	1923— discontinued
1923	Pathology
1924	Gastro-Enterology
	1931— changed to Gastroenterology
1926	Medical Education
	1938— changed to Medical Education and Hospital Training
	1954— discontinued
1927	Railway Surgery
	1944— discontinued
1927	Gynecology
1937	Anesthesia
	1945— changed to Anesthesiology

YEAR APPROVED BY COUNCIL	SECTION ON...
1938	Allergy
	1983— changed to Allergy & Immunology
1938	Proctology
	1970— changed to Colon and Rectal Surgery
1941	Physical Therapy
	1944— changed to Physical Medicine
	1949— changed to Physical Medicine and Rehabilitation
	1980— discontinued
1941	General Practice
	1973— changed to Family Practice
1944	Industrial Medicine and Surgery
	1980— discontinued
1960	Plastic and Reconstructive Surgery
1973	Chest Diseases
1978	Emergency Medicine
1986	Neurosurgery
1987	Oncology
1989	Rheumatology
1992	Occupational Medicine
	1998— changed to Occupational & Environmental Medicine
1993	Cardiology
1994	Geriatric Medicine
1995	Medical Management and Administration
1999	Military Medicine

Currently the scientific assembly of the Southern Medical Association is comprised of the following Scientific Sections:

SECTION ON...

Allergy & Immunology	Orthopaedic and Trauma Surgery
Anesthesiology	Otolaryngology—Head and Neck Surgery
Cardiology	Pathology
Chest Diseases	Pediatrics and Adolescent Medicine
Colon and Rectal Surgery	Plastic and Reconstructive Surgery
Dermatology	Psychiatry and Neurology
Emergency Medicine	Radiology
Family Practice	Rheumatology
Gastroenterology	Surgery
Geriatric Medicine	Urology
Gynecology	
Medical Management and Administration	
Medicine	
Military Medicine	
Neurosurgery	
Obstetrics	
Occupational & Environmental Medicine	
Oncology	
Ophthalmology	

Each Section elects its own officers—a Chairman, Secretary, and Secretary-Elect, with pri-

mary responsibility for program planning resting with the Secretary. Other officers may be elected depending on the needs of the Section. Duties of all officers are outlined in the CONSTITUTION and BYLAWS. The program for the Annual Scientific Assembly is coordinated in the winter at the Annual Scientific Assembly Planning Committee meeting which is attended by members of the Advisory Committee on Scientific Activities in addition to the Section Secretaries. Every effort is made to see that a well-rounded scientific program is planned.

A physician attending a Southern Medical Association meeting may participate in any session where, in his opinion, it will be most beneficial to him. This freedom to choose provides great program flexibility, variety and personal appeal. At the same time this plan enables the Southern Medical Association to reach one of its continuing goals—helping doctors practice better medicine.

EXHIBIT HALL...

SCIENTIFIC POSTERS - In addition to the scientific sessions, postgraduate courses and symposia offered to physicians attending the annual meeting, there is an opportunity for physicians to submit and present scientific posters for display in the Exhibit Hall. Scientific posters were first introduced in 1988, and since then, submissions have continuously increased. Scientific exhibits, effective for the 1996 Assembly, have been discontinued.

TECHNICAL EXHIBITS - Technical Exhibits offer the busy physician the opportunity to view the latest drugs, medical equipment, and services on the market. These exhibits are carefully screened by Committees and represent the highest standards in quality, originality, and value. Awards are made for the most outstanding technical exhibits.

THE SOCIAL SIDE...

The annual meeting, while geared primarily for education, also has its moments of relaxation. Thriving on an informal atmosphere—where physicians from every type of practice can meet to exchange ideas—SMA has a widely known reputation for its "Southern Hospitality." Social highlights of the annual meeting include: alumni reunions, Section social events, President's Reception, Dinner Dance, activities for the spouses planned by the Southern Medical Association Auxiliary, and, of course, fellowship with members of the medical profession from all parts of the United States and many foreign countries.

II. Continuing Medical Education Activities

The Southern Medical Association is committed to expanding and diversifying its educational opportunities to provide a more comprehensive network of continuing medical education activities. Seminars and regional postgraduate conferences are conducted throughout the year in major cities in SMA's territory. Clinical, managed care, and reimbursement CME activities are offered to SMA members at discounted fees. SMA's satellite

broadcasts reach 1,000's of health care professionals at one setting via satellite. Newly added Internet activities on SMA's website at www.sma.org increase SMA's reach through the newest technology. SMA makes every effort to fill physician's needs for Category 1 CME Credit towards the AMA Physician's Recognition Award.

III. Publications

THE SOUTHERN MEDICAL JOURNAL...

BRIEF HISTORY

During the first years of its history, the Association did not actually own a journal. Various publications were named "official organ of publication" from time to time.

At the annual meeting held in Atlanta, Ga., November 10-12, 1908, arrangements were made for the *Medical Report of Shreveport*, Shreveport La., to serve as the official organ of publication, with the name to be changed to *Journal of the Southern Medical Association*, effective January 1909 (Vol. 2, No. 1). Oscar Dowling, M.D., Shreveport, La., Secretary-Treasurer of the Southern Medical Association, was Editor. It was discontinued as *Journal of the Southern Medical Association* as of December 1909.

The *Gulf States Journal of Medicine and Surgery*, Mobile, Ala., formerly the *Mobile Medical and Surgical Journal*, became the Association's official organ of publication in January 1910 (Vol. 16, No. 1). Owners Seale Harris, M.D., and H. A. Moody, M.D., both of Mobile, Ala., served as Editors.

The *Southern Medical Journal*, a publication privately owned by a group of Nashville, Tenn., physicians began in Nashville, Tenn., in July 1908 (Vol. 1, No. 1). It was purchased in October or November 1910 by Seale Harris, M.D., Mobile, Ala., as principal owner with some other physicians having minor financial interest. Thus, the owners of the *Gulf States Journal of Medicine and Surgery* merged this publication (Vol. 17, No. 5) with their newly acquired publication, the *Southern Medical Journal* with the December 1910 issue (Vol. 3, No. 11). Also, beginning with the December 1910 issue, the new *Southern Medical Journal* carried the additional designation of *Journal of the Southern Medical Association*. Seale Harris, M.D., Mobile, Ala., served as Editor until November 1921, and H. A. Moody, M.D., Mobile, Ala., served as Managing Editor until April 1916.

From December 1910 to May 1916, J. A. Witherspoon, M.D., W. D. Haggard, M.D., William Litterer, M.D., W. A. Bryan, M.D., and M. M. Cullon, M.D., all of Nashville, Tenn., and Oscar Dowling, M.D., Shreveport, La., were Associate Editors.

From June 1916 to October 1917, M. Y. Dabney, M.D., became Managing Editor and James R. Garber, M.D., Birmingham, Ala., became Associate Editor. From December 1917 to December 1919, Dr. Dabney served as Acting Editor while Dr. Harris was on active military duty. From January 1920 to November 1921, both Dr. Dabney and Dr. Garber were designated Associate Editors.

In November 1921 the Southern Medical Association, with a membership of 6,328, purchased the *Southern Medical Journal* from Dr.

Harris and his co-owners and elected Dr. Dabney, Editor. Dr. Harris resigned as Editor at that meeting. Dr. Dabney served as Editor from December 1921 to December 1954 and his wife, Eugenia B. Dabney, served as Assistant Editor, 1930-1935, and Associate Editor from 1935 until December 1954.

Curtice Rosser, M.D., Dallas, Tex., and Tinsley R. Harrison, M.D., Birmingham, Ala., were Associate Editors from January 1951 to December 1954. Curtice J. Lund, M.D., New Orleans, La., served as an Associate Editor from January 1951 to December 1952. Howard L. Holley, M.D., Birmingham, Ala., served as an Associate Editor from January 1954 to December 1954.

Others who have served as Assistant Editor are Harris D. Riley Jr., M.D. (1967-1970), Sam E. Stephenson Jr., M.D. (1968-1990), Addison B. Scoville, Jr., M.D. (1976-1989), and J. Leonard Goldner, M.D. (1971-1974).

R. H. Kampmeier, M.D., Nashville, Tenn., became Editor and Mr. V. O. Foster, Birmingham, Ala., Managing Editor, effective December 1, 1954. Mr. Robert F. Butts, Birmingham, Ala., became Managing Editor, December 1, 1960. Harris D. Riley, Jr., Oklahoma City, Okla., became Associate Editor of the *Journal* in January 1971, and assumed the role of Editor in January 1973, upon Dr. Kampmeier's retirement. Dr. Kampmeier was retained as Advisory Editor. In September 1977, John B. Thomison, M.D., of Nashville, Tenn., was appointed Editor succeeding Dr. Riley.

Beginning in 1980 William J. Ranieri became Managing Editor of the *Journal*. In July 1992, the Council voted to name Dr. Thomison Editor Emeritus upon his retirement at the end of that year. In January 1993 J. Graham Smith, Jr., M.D., became Editor. In 2000, James H. Leverett became Managing Editor, and Ronald C. Hamdy, M.D., was appointed Editor.

With sound business and editorial management, the *Journal* has not only grown in size and financial stability, but it has also grown in scientific stature and influence. Its cumulative contribution to the medical literature parallels and mirrors the growth and scientific development of medicine in the South.

The Journal Today

Throughout its entire life, the *Southern Medical Journal* has adhered to its main objective announced in the first issue: to help doctors practice better medicine by bringing to them high quality, original articles by leading medical researchers and specialists and general information of concern to the medical profession.

The *Southern Medical Journal* is a general medical publication which presents monthly some 35 major articles, many of them illustrated with pho-

tographs and drawings. Its contents are as broadly based as the practice of medicine and surgery. Articles are chosen from hundreds submitted and from the 400 or so papers presented at the annual scientific sessions by leaders in the various specialized fields of medicine.

Offices of the *Journal* are in the headquarters building of the Southern Medical Association in Birmingham, Ala. The Editor, Ronald C. Hamdy, M.D., is a practicing internist in Johnson City, Tennessee.

Assisting the Editor are Associate Editors Richard D. deShazo, M.D., Angus M. McBryde, Jr., M.D. and J. Patrick O'Leary, M.D., 10 Assistant Editors; the Editorial Board (established by Dr. Kampmeier in 1954), which now consists of 49 members appointed by the Editor with the consent of the Council; and the Advisory Committee to the Editorial Board, which is composed of the Secretaries of the Scientific Sections of the Southern Medical Association.

Today the *Southern Medical Journal* goes into the 16 Southern states and the District of Columbia which comprise the Association's membership territory, as well as all other states, Puerto Rico, the Virgin Islands, the Canal Zone, and 22 European and Asiatic countries. One of the most influential medical publications in the world, the *Journal* brings to practicing physicians knowledge that will enable them to provide the best possible care for patients in this age of rapidly changing modern medicine.

THE SOUTHERN MEDICAL BULLETIN...

When the Association was only three years old—at the New Orleans Meeting, November 9-11, 1909—the Council recommended the publication of a quarterly bulletin. On November 1, 1912, the *Southern Medical Bulletin*, Volume 1, Number 1, was issued. It included the program for the forthcoming Annual Meeting and other information about the Association. The Council approved this bulletin, authorized its continuance, and the *Southern Medical Bulletin* has been published quarterly since 1912.

At the Miami Beach Meeting in 1957 a proposal to expand the quarterly *Southern Medical Bulletin* to a monthly publication was reviewed and approved by the Council. The first step of the proposed expansion was taken when the new format of the *Southern Medical Bulletin* was introduced with the March 1961 issue with R. H. Kampmeier, M.D., Nashville, Tenn., Editor. The *Bulletin* was accepted overwhelmingly by the Southern physicians.

The purpose of the *Bulletin* was to provide

interesting and up-to-date scientific and non-scientific information for virtually all of the practicing physicians in the Association's membership territory and to stimulate interest in the Association and its various activities.

Each issue was designed to be of reference value, covering various subjects of interest such as current VD problems, cancer, rehabilitation, alcoholism and habituating drugs, family planning, roadside injuries, and the impact of the federal government upon medical care. From 1912 through 1968 the September issue of the *Bulletin* contained the preliminary program for the Annual Meeting. The second step in expanding the *Bulletin* came in 1969 when all four of the quarterly issues followed the basic format, but with increased size, and the preliminary program for the Annual Meeting was published separately. During 1970 the *Bulletin* increased to six issues, one every other month.

Southern Medicine

In January 1972, the name of the *Southern Medical Bulletin* was changed to *Southern Medicine*.

After a great deal of thought and intensive costs analysis, it was decided on February 11, 1978 to terminate publication of *Southern Medicine* in its existing form.

Today, *Southern Medicine* provides important information concerning SMA's educational programs and services for its members, including details for upcoming seminars, workshops, post-graduate courses, and the annual meeting, as well as information on Dial Access, Video Access, and Audio Access offerings. *Southern Medicine* also provides up-to-date information on the benefits and services offered through the Association, including those of the Fringe Benefits Program, the Physicians Purchasing Program, SMA Travel Services, and Design Print, the Association's graphic design service.

In addition, *Southern Medicine* also regularly features articles concerning socio-economic and other issues of importance to the physician and his practice, as well as spotlights on various members of the Association and regular messages from its leading officers.

In Winter 2000, *Southern Medicine* was replaced with *SMA ChartNotes*. *SMA ChartNotes* consists of updates regarding the Association, Leadership, and Membership, Practice Management news and additional timely information. *SMA ChartNotes* is considered a member benefit for all dues paying members of Southern Medical Association and is published quarterly.

IV. Residency Training Loan Fund

ORIGINALLY A GRANT PROGRAM...

Recognizing the increasing need of financial assistance for those physicians who had completed their formal education, but who are seeking additional education in the form of residency training and fellowships, the Southern Medical Association established the Southern Medical Association Residency Training Grant Fund at the Miami Beach Meeting, November 1962. This project of the Association provided funds to allow a physician to complete a chosen number of years of training without adding to his previous indebtedness and still receive an income, which, while not necessarily commensurate with his education and value, would allow him a comfortable existence during this training period. The first four grants under this program were awarded in 1963 for the residency year 1963-1964. Five grants were awarded in July 1964; seven, July 1965; ten, July 1966; eleven, July 1967; fourteen, July 1968.

The Grant Fund was established so that recipients as well as other members of the Association, could make tax-deductible donations to the Fund thereby increasing the number of residents who could be assisted. While recipients of a grant assumed no legal obligation to repay, it was hoped all would assume a moral obligation to do so.

THEN A LOAN PROGRAM...

At the New Orleans Meeting, November 1968, the Council voted to change the existing Residency Training Grant Fund to the Residency Training Loan Fund and the Association's CONSTITUTION and BYLAWS were amended by changing the committee's name to the Committee on Grants and Loans. The amount available for loans for the year July 1969-July 1970 was \$30,000.

THEN A GRANT PROGRAM AND LOAN PROGRAM...

In order to provide assistance to those in financial need as well as give recognition to exceptional individuals, greater flexibility was needed in the program. Therefore, the Council voted at the Atlanta Meeting, November 1969, to give the Committee on Grants and Loans full authority to determine the needs and merits of each applicant and decide if a grant should be awarded or if a loan should be approved. The total amount of funds available for grants and loans for the year July 1, 1977-June 30, 1978 was \$40,000 (\$10,000, grants; \$30,000, loans).

NOW A LOAN PROGRAM...

At its Midwinter Meeting in Birmingham, Alabama, February 13, 1977, the SMA Executive Committee of the Council voted to discontinue giving grants under this program and made it strictly a loan program.

In November 1988 the council voted to increase the amount available for Residency Training Loans and Research Project Grants to \$150,000 (from the previous amount of \$100,000) to become effective July 1, 1989.

RULES GOVERNING THE LOAN PROGRAM...

- (1) Eligibility Requirements...In order to be eligible to apply for a loan from this Fund an applicant must satisfy the following requirements:
 - (a) be a graduate of an accredited medical school who is entering a program approved by the Liaison Committee on Medical Education;
 - (b) have completed one year of post medical training prior to receipt of first loan payment (application may be made, however, during final portion of internship);
 - (c) be engaged (or accepted) in residency training in an approved hospital in the territory of the Southern Medical Association;
 - (d) shall be required to have the Head of Department or the Director of Residency Program to submit a letter outlining the applicants need and their assessment of applicant's caliber. Armed Services personnel are ineligible.

Persons serving in the armed services are ineligible.

- (2) Selection of Recipients...The criteria for the selection of loan recipients shall be based on need and potential. Selection shall be made by the Advisory Committee on Grants, Loans and Scholarships prior to July 1.
- (3) Amount of Loan...The loan shall be primarily for personal use with the exact amount determined by individual need. The maximum loan available to one applicant shall be \$5,000.00, payable at the rate of \$416.67 per month for twelve months, beginning annually on July 1. A recipient may apply for another loan.
- (4) Application for Loan...Official application forms may be secured from the Chief Financial Officer, Southern Medical Association, 35 Lakeshore Drive, P. O. Box 190088, Birmingham, Alabama 35219-0088. Applicants shall be required to sub-

- mit to the headquarters office by April 1st:
- (a) a completed official application form;
 - (b) a curriculum vitae;
 - (c) letter from Head of Department or Director of Residency Program where applicant is currently enrolled or has been accepted outlining applicants need and their assessment of the applicant's caliber;
 - (d) a recent photograph of applicant.
- (5) Interest Rate on Loan...No interest shall be charged on loans made from this Fund until the beginning of the second year after the completion of recipient's residency training or at the end of the sixth year after recipient's graduation from medical college, whichever comes first. The interest rate charged shall be seven percent per annum or the current interest rate charge for FHA loans, whichever is less.
- (6) Requirements for Recipients...Loan recipients shall be required to:
- (a) Apply for associate membership (free to residents) in Southern Medical Association's territory;
 - (b) Sign properly executed promissory note to be filed at the SMA headquarters office; and
 - (c) Submit a progress report of the year's activities at the end of the loan year.

V. Research Project Fund

Members of the Committee on Grants and Loans observed that funds for initiating small research projects were not readily available in most medical centers or training areas. Therefore, at the Annual Meeting, November 1969, the Council established the SMA Research Project Fund. This Fund originally consisted of \$6,000 annually from which grants could be made to those participating in investigative projects. Due to the large number of applications received for grants from this Fund during the first year of operation, the Committee on Grants and Loans recommended to the Council at the Dallas Meeting, November 1970, that the amount of grants be increased to \$20,000 annually (July 1-June 30). This Fund is under the direction of the Committee on Grants and Loans.

At the New Orleans Meeting in November 1976, the Committee on Grants and Loans recommended that the amount for grants be increased to \$40,000 annually. In 1982 the Committee on Grants and Loans approved a grant increase in the amount of \$20,000, making the total amount available \$60,000.

In November, 1988 the Council of the SMA voted to increase the combined amount available for Research Grants and Residency Training Loans to \$150,000 from the previous amount of \$100,000. This would become effective July 1, 1989.

RULES FOR GOVERNING THE RESEARCH FUND...

(1) Amount Available...

- (a) the headquarters office shall be responsible for notifying the Deans at the medical schools and their affiliated hospitals located in SMA's territory that limited funds are available for those participating in investigative projects.
- (b) Money in the Research Project Fund will be available primarily to physicians in house-staff training (Graduate Medical Education) and Medical Students located at medical schools, medical centers, osteopathic schools and their affiliated hospitals rather than to established faculty investigators.
- (c) The maximum grant available from this Fund, per school year, shall be \$2,500. A maximum of two grants may be awarded per medical school or medical center depending upon availability of funds.

(2) Purpose...

- (a) A grant from this Fund shall be primarily for the purpose of starting a new project, or for the continuation of a relatively new project.
- (b) A grant from this Fund shall be used primarily for the purchase of expendable items (which includes the purchase and maintenance of animals) and may not be used for the purchase of computers or computer training. NO TRAVEL EXPENSES WILL BE FUNDED. Funds must be used as applied for or they revert back to SMA. Under no circumstances will funds be transferred outside of SMA's territorial boundaries.

(3) Application...

- (a) Official application forms may be secured by writing the Chief Financial Officer, Southern Medical Association, 35 Lakeshore Drive, P. O. Box 190088, Birmingham, Alabama 35219-0088. Deadline for receiving completed applications is April 1.

(4) If Approved...

When a grant is awarded, the Southern Medical Association shall issue a check jointly to the applicant and the institution with which the applicant is associated. The check shall be mailed to the applicant.

(5) Requirements...

- Faculty/Clinical Adviser is required to: Submit a letter outlining potential clinical applications of the project. Recipients of grants from this Fund shall be requested to:
- (a) Apply for membership in Southern Medical Association (Free to medical students and residents).
 - (b) Recipient and Faculty/Clinical Adviser are required to send Southern Medical Association a summary of the results of the research project upon its completion. Failure to do so will jeopardize future research funding.
 - (c) Should this Research Project Grant result in publication SMA requires a reprint.

VI. Medical Student Scholarship Fund

Recognizing the need for providing assistance to third-year medical students, particularly those of superior abilities, the Council established the Southern Medical Association Medical Student Scholarship Fund at the Atlanta Meeting, November 1969. This fund now provides \$1,500 of scholarship per medical school located within the territory of the Southern Medical Association and is under the direction of the Advisory Committee on Grants, Loans and Scholarships.

RULES GOVERNING THE MEDICAL STUDENT SCHOLARSHIP FUND...

(1) Amount Available. . .

- (a) The headquarters office shall be responsible for notifying the Deans of all medical and osteopathic schools located in SMA's territory that limited funds are available for scholarships for third-year medical students.
- (b) The maximum scholarship available from this Fund, per school year, shall be \$1,000. The \$1,000 may be allocated among one or more deserving students at the discretion of the Dean and has historically been distributed to either one or two students.

(2) Purpose...

A scholarship from this Fund shall be for the purpose of giving aid in providing tuition to third-year students of superior ability who are in need of scholarship funds.

(3) Application...

(a) Application for a scholarship from this Fund must be made by the Dean on behalf of his students, by writing to the Chairman, Advisory Committee on Grants, Loans and Scholarships, c/o Director, Operations, Southern Medical Association, 35 Lakeshore Drive, P.O. Box 190088, Birmingham, Alabama 35219-0088.

(b) The letter should give:

- (1) full name and mailing address of the student;
- (2) explanation of student's need;
- (3) deserving qualities of the student for a scholarship.

(4) If Approved...

When a scholarship is awarded the headquarters office shall notify the Dean, and shall issue a check jointly to the applicant and the school. The check will be mailed directly to the medical school.

VII. Southern Medical Research and Education Endowment Fund

In 1986 SMA established an Educational Endowment Fund to provide funding for scholarships, research projects and other programs supporting the educational purposes of the Association. In December 1987, SMA launched a Planned Giving Program incorporating the existing Endowment Fund with several other options for charitable giving. Donors may target gifts for scholarships, lectureships or special educational programs through gifts from various means including bequests, life insurance, real estate, or securities. With any gift, donors may establish memorials for deceased loved ones or recognition for a colleague.

Purposes of the Fund are to provide an investment in the future of medical and health care delivery; to stimulate interest in conducting research; to provide financial aid to deserving medical students; to initiate a professional career development relationship with SMA; and to recognize or memorialize donors and their designees.

A formal recognition program for contributors to the Research and Education Endowment Fund is as follows:

President's Circle- \$1,000 Contribution
Picture at Annual Meeting
Name in *Southern Medical Journal* and
ChartNotes

Recognition on SMA's website
Annual Meeting Ribbon

Benefactor- \$250 - \$999 Contribution
Name in *Southern Medical Journal* and
ChartNotes

Recognition on SMA's website
Annual Meeting Ribbon

Patron- \$50 - \$249 Contribution
Name in *Southern Medical Journal* and
ChartNotes-Recognition on SMA's website
Annual Meeting Ribbon

The Society of 1906

The establishment of the "Society of 1906" was approved in 1990 in Nashville. The Society recognizes major contributors to the Fund. SMA physicians may become members of the "Society of 1906" by contributing \$5000 to the fund over a five year period or by making a \$20,000 bequest. Recognition and benefits of the "Society of 1906" include:

- "Society of 1906" medallion
- "Society of 1906" tie and Annual Meeting Ribbon
- "Hall of Fame" picture at Annual Meeting
- Annual Black-Tie Reception

The twenty-seven Charter Members of The Society of 1906 were honored at the SMA's 85th Annual Scientific Assembly in Atlanta in November of 1991. Charter Members attended the first annual black-tie reception and were given a beautiful medallion representing their commitment to the goals of SMA's Research and Education Endowment Fund.

Donations to the Southern Medical Research and Education Endowment Fund may be sent or inquiries directed to Southern Medical Association Research and Education Endowment Fund.

VIII. Awards

From time to time the Southern Medical Association has created awards so that the Association may honor worthy members. Presently there are three official awards of the Association; the Distinguished Service Award; the Seale Harris Award; and the Original Research Award. Nomination and application forms, which may be obtained from the headquarters office, must be received at the headquarters office by August 1.

All nominations and applications are considered by the Committee on Special Awards. This confidential Committee, consisting of five members with the Vice-President as Chairman, is appointed by the President to evaluate the contributions of the various candidates for special awards. If suitable candidates are selected by the Committee, it submits the names of not more than three such members to the Council for each award. The Council may then select one for each respective award and presentation of the awards takes place at the last general session of the Annual Meeting.

THE RESEARCH MEDAL...

During the 1912 Annual Meeting in Jacksonville, Fla., the Association established the Research Medal which could be awarded from time to time to a member of the Association for meritorious and original research work provided the member had made contributions to medical science of sufficient importance to merit this distinction.

In 1961 both the Research Medal and the Original Research Award existed. Then in 1962 the Research Medal as established in 1912 was discontinued in favor of the Dr. Robert D. and Alma Moreton Original Research Award.

RECIPIENTS OF THE RESEARCH MEDAL

- 1912—Jacksonville Meeting—C. C. Bass, M.D., New Orleans, La., "for his epoch-making achievement in the study of malaria, namely: the cultivation of the malaria parasites in artificial media."
- 1916—Atlanta Meeting—J. Shelton Horsley, M.D., Richmond, Va., "in recognition of his original contributions and studies in the domain of vascular surgery."
- 1921—Hot Springs Meeting—Kenneth M. Lynch, M.D., Dallas, Tex., "for his original and meritorious investigations in the parasitology of tropical diseases."
- 1932—Birmingham Meeting—Evarts A. Graham, M.D., St. Louis, Mo., "for his outstanding research work, especially on the diagnosis and pathology of inflammatory diseases of the gallbladder and liver."

- 1933—Richmond Meeting—William de B. MacNider, M.D., Chapel Hill, N.C., "for original and meritorious research, especially in the field of experimental nephritis."
- 1937—New Orleans Meeting—Ernest W. Goodpasture, M.D., Nashville, Tenn., "for his outstanding achievements through his research on the cultivation and the nature of viruses."
- 1940—Louisville Meeting—Alfred Blalock, M.D., Nashville, Tenn., "in recognition of his distinguished contributions to knowledge of the circulation, especially in relation to shock."
- 1942—Richmond Meeting—Perrin H. Long, M.D., Baltimore, Md., "in recognition of his outstanding contributions to the knowledge of bacteriology and chemotherapy."
- 1943—Cincinnati Meeting—Tom Douglas Spies, M.D., Birmingham, Ala., "in recognition of his outstanding contributions to our knowledge of the science of human nutrition, especially in his elucidation of the earlier and better methods of diagnosis and treatment of disease."
- 1945—Cincinnati Meeting—Tinsley R. Harrison, M.D., Dallas, Tex., "In recognition of his outstanding contributions toward the elucidation of structural and functional aspects of cardiovascular disease and particularly of practical problems arising from failure of the circulation."
- 1946—Miami Meeting—William H. Sebrell, Jr., M.D., Bethesda, Md., "in recognition of his important contributions to the understanding of nutrition and its relation to public health."
- 1947—Baltimore Meeting—George E. Burch, M.D., New Orleans, La., "in recognition of his important investigations in the clinical physiology of the circulation and of his valuable contributions of the understanding of cardiovascular disorders."
- 1949—Cincinnati Meeting—Seale Harris, M.D., Birmingham, Ala., "in recognition for his original and pioneer description of hyperinsulinism, for continued and meritorious achievements in the fields of nutrition and metabolism and especially his investigations of diabetes mellitus and his contributions to its treatment."
- 1950—St. Louis Meeting—Guy L. Hunner, M.D., Baltimore, Md., "for clarifying the relationship of focal infections as disease producers in the genitourinary tract, and especially for his constructive work on the diagnosis and treatment of the medical and surgical diseases of the urinary tract."
- 1954—St. Louis Meeting—Robert E. Stone, M.D., Birmingham, Ala., "in appreciation of his outstanding professional attainments and

- original research of benefit to mankind in the recognition and treatment of nutritional disorders and diseases of metabolism."
- 1957- Miami Beach Meeting- Joseph H. Hill, M.D., Dallas, Tex., "in recognition of his many contributions in the field of hematology, particularly in his original mass production method of desiccating human plasma and application in the therapy of shock, in his additions to the knowledge concerning the Rh factor, and in his current studies on leukemia."
- 1960- St. Louis Meeting- Leslie V. Rush, M.D., Meridian, Miss., "for research resulting in the development of the Rush pin, an intramedullary steel pin for internal fixation of fractures."
- 1961- Dallas Meeting- May Owen, M.D., Fort Worth, Tex., "for research in determining that glove powder was the cause of foreign-body granuloma on the serosal surface of the intestines in abdominal surgery."

THE DR. ROBERT D. AND ALMA MORETON ORIGINAL RESEARCH AWARD...

At the Dallas Meeting in 1961, the Association established the Original Research Award consisting of a medal and cash prize, which may be awarded annually in recognition of original research in clinical medicine or the basic sciences as applied to medicine. Nominations for this award may be made by submitting an essay, curriculum vitae, and a photograph to the headquarters office by July 1. Any member of the Association is eligible to receive this award and nominations may be made by any member of the Association. The Committee on Special Awards evaluates all essays submitted, and the recipient is notified and receives the Award at the last general session of an Annual Meeting.

RECIPIENTS OF THE DR. ROBERT D. & ALMA W. MORETON ORIGINAL RESEARCH AWARD

- 1968- New Orleans Meeting- Donald E. McCollum, M.D., Durham, N.C., Robert S. Matthews, M.D., Greenville, S.C., and Michael T. O'Neill, M.D., Durham, N.C., for their essay "Aseptic Necrosis of the Femoral Head: Associated Diseases and Evaluation of Treatment."
- 1973- San Antonio Meeting- Gilbert H. Fletcher M.D., Houston, Tex., for his work in building the first practical head for the housing of cobalt in the giving of external radiation.
- 1974- Atlanta Meeting- John W. Kirklin, M.D., Birmingham, Ala.
- 1975- Miami Beach Meeting- Cornelia P. Channing, Ph.D., Baltimore, Md.
- 1978- Atlanta Meeting- Bruce Schoenberg, M.D., Bethesda, Md.

- 1980- San Antonio Meeting- George W. Molnar, Ph.D., Little Rock, Ark.
- 1981- New Orleans Meeting- John Barry McCraw, M.D., Norfolk, Va.
- 1983- Baltimore Meeting- Howard W. Jones, M.D. and Georgeanna Seegar Jones, M.D., Norfolk, Va.
- 1986- Atlanta Meeting- Franz H. Messerli, M.D., New Orleans, La.
- 1989- Washington, D.C. Meeting- David W. Bilheimer, M.D., Dallas, Tx.
- 1990- Nashville Meeting- James A. Roberts, M.D., Covington, La.
- 1992- San Antonio Meeting- Joseph G. Sinkovics M.D., Tampa, Fl.
- 1993- New Orleans Meeting- John J. Costanzi, M.D., Austin, Tx.
- 1994- Orlando Meeting- Paul C. Gillette, M.D., Charleston, SC
- 1995- Kansas City Meeting- R. Neal Garrison, M.D., Louisville, KY
- 1996- Baltimore Meeting- Richard W. McCallum, M.D., Kansas City, KS
- 1997- Charlotte Meeting- Eugene A. Woltering, M.D., New Orleans, LA
- 1998- New Orleans Meeting- Steven D. Wexner, M.D., Ft. Lauderdale, FL
- 1999- No award given
- 2000- Orlando Meeting- Mark Abel, M.D., Charlottesville, VA
- 2001- No award given

THE DISTINGUISHED SERVICE AWARD...

At the Houston Meeting in 1955 the Association created the Distinguished Service Award which may be awarded annually to any member of the Association in recognition of outstanding contributions to the advancement of medical science and/or the Association. Any member of the Association is eligible to receive this award and nominations may be made by any member of the Association. Deadline for receiving nominations is July 1. The Committee on Special Awards evaluates all nominations and the recipient is notified and receives the Award at the last general session of an Annual Meeting.

RECIPIENTS OF THE DISTINGUISHED SERVICE AWARD

- 1956- Washington Meeting- Curtice Rosser, M.D., Dallas, Tex.
- 1957- Miami Beach Meeting- Kenneth M. Lynch, M.D., Charleston, S.C.
- 1958- New Orleans Meeting- T. W. Moore, M.D., Huntington, W.Va.
- 1959- Atlanta Meeting- R. L. Sanders, M.D., Memphis, Tenn.
- 1960- St. Louis Meeting- Everett S. Lain, M.D., Oklahoma City, Okla.
- 1961- Dallas Meeting- George E. Burch, M.D., New Orleans, La.

- 1962—Miami Beach Meeting—Willburt C. Davison M.D., Durham, N.C.
- I 1963—New Orleans Meeting—Fount Richardson M.D., Fayetteville, Ark. (posthumously)
- 1964—Memphis Meeting—Hollis E. Johnson, M.D., Nashville, Tenn.
- 1965—Houston Meeting—Milford O. Rouse, M.D., Dallas, Tex.
- 1967—Miami Beach Meeting—Robert D. Moreton, M.D., Houston, Tex.
- 1968—New Orleans Meeting—M. Pinson Neal, Sr., M.D., Columbia, Mo.
- 1969—Atlanta Meeting—R. H. Kampmeier, M.D., Nashville, Tenn.
- 1970—Dallas Meeting—Joe T. Nelson, M.D., Weatherford, Tex.
- 1971—Miami Beach Meeting—Seymour F. Ochsner, M.D., New Orleans, La.
- 1972—New Orleans Meeting—Charles M. Caravati, M.D., Richmond, Va.
- 1973—San Antonio Meeting—Edgar Hull M.D., Pascagoula, Miss.
- 1974—Atlanta Meeting—Woodard D. Beacham M.D., New Orleans, La.
- 1975—Miami Beach Meeting—George H. Yeager M.D., Baltimore, Md.
- 1976—New Orleans Meeting—J. Garber Galbraith, M.D., Birmingham, Ala.
- 1977—Dallas Meeting—Harris D. Riley, Jr., M.D., Oklahoma City, Okla.
- 1978—Atlanta Meeting—N. C. Hightower, Jr., M.D., Temple, Tex.
- 1979—Las Vegas Meeting—Margaret S. Klapper, M.D., Birmingham, Ala.
- 1980—San Antonio Meeting—Howard L. Holley, M.D., Birmingham, Ala.
- 1981—New Orleans Meeting—Walter C. Jones, M.D., Coral Gables, Fla.
- 1982—Atlanta Meeting—George M. Haik, M.D., New Orleans, La.
- 1983—Baltimore Meeting—Phillip W. Voltz, Jr., M.D., San Antonio, Tex.
- 1984—New Orleans Meeting—H. William Scott, Jr., M.D., Nashville, Tenn.
- 1985—Orlando Meeting—James C. (J.C.) Tanner, Jr., M.D., Atlanta, GA.
- 1986—Atlanta Meeting—John Adriani, M.D., New Orleans, La.
- 1987—San Antonio Meeting—John B. Thomison, M.D., Nashville, Tenn.
- 1988—New Orleans Meeting—Albert C. Esposito, M.D., Huntington, W.V.
- 1989—Washington, D.C. Meeting—Hiram C. Polk, Jr., M.D., Louisville, Ky.
- 1990—Nashville Meeting—Lenox D. Baker, M.D., Durham, N.C.
- 1991—Atlanta Meeting—G. Thomas Jansen, M.D., Little Rock, Ark.
- 1992—San Antonio Meeting—Charles E. Horton, M.D., Norfolk, Va.
- 1993—New Orleans Meeting—Edward T. Krementz, M.D., New Orleans, La.

- 1994—Orlando Meeting—M. Pinson Neal, Jr., M.D., Richmond, VA
- 1995—Kansas City Meeting—J. Leonard Goldner, M.D., Durham, NC
- 1996—Baltimore Meeting—Thomas B. Dameron, Jr., M.D., Raleigh, NC
- 1997—Charlotte Meeting—James E. Davis, M.D., Durham, NC
- 1998—New Orleans Meeting—C. Thorpe Ray, M.D., New Orleans, LA
- 1999—Dallas Meeting—H. Mac Vandiviere, M.D., Lancaster, KY
- 2000—Orlando Meeting—Robert E. Pickard, M.D., South Miami, FL
- 2001—Nashville Meeting—Jack C. Hughston, M.D., Columbus, GA

SEALE HARRIS AWARD...

Established at the New Orleans Meeting in 1958, this award is presented annually to any member of the Association in recognition for important research accomplishment in the broad field of metabolism, endocrinology, nutrition, or for research which contributes to a better understanding of the chemical changes occurring in disease. Any member of the Association is eligible to receive this award and nominations may be made by any member of the Association. Deadline for receiving nominations is July 1. After nominations are evaluated by the Committee on Special Awards, the recipient is notified and receives the award at the last general session of an Annual Meeting.

RECIPIENTS OF THE SEALE HARRIS AWARD

- 1959—Atlanta Meeting—Tom Douglas Spies, M.D., Birmingham, Ala., "for his contributions and accomplishments in the field of nutrition."
- 1960—St. Louis Meeting—Nicholas C. Hightower, Jr. M.D., Temple, Tex., "for his investigations and achievements in the field of metabolic diseases and gastroenterology."
- 1961—Dallas Meeting—Henry H. Turner, M.D., Oklahoma City, Okla. "for his distinguished and meritorious work in glandular disorders in the human, to which he has contributed internationally, and for which he is so widely accepted as an authority."
- 1962—Miami Beach Meeting—Howard L. Holley M.D., Birmingham, Ala., "for his investigations on the synovial fluid in normal subjects and in patients with rheumatoid arthritis and for more recent studies on the chemical nature of hyaluronic acid."
- 1963—New Orleans Meeting—Joe M. Blumberg, M.D., Washington, D.C., "for his investigations and achievements in pathology and research and for his contributions to medicine which have been recognized and accepted all over the world."

- 1967–Miami Beach Meeting– Julian M. Ruffin, M.D., Durham, N.C., “for his original investigative work centering about the malabsorption state, elucidation of the etiology of Whipple’s disease and its management, and the nature of duodenal ulcer pain.” (Note: actual presentation of this award was at the 1968 Meeting in New Orleans).
- 1970–Dallas Meeting– Grace Goldsmith, M.D., New Orleans, La., “for her investigations and research in the fields of metabolism and nutrition.”
- 1972–New Orleans Meeting– John T. Galambos, M.D., Atlanta, Ga., “for his research and contributions to the field of gastroenterology.”
- 1973–San Antonio Meeting– Stanley J. Dudrick, M.D., Houston, Tex., “for his work in intravenous alimentation.”
- 1974–Atlanta Meeting– H. Harlan Stone, M.D., Atlanta Ga.; Robert S. Nelson, M.D., Houston, Tex.
- 1975–Miami Beach Meeting– W. Dean Warren, M.D., Atlanta, Ga.
- 1976–New Orleans Meeting– John S. Fordtran, M.D., Dallas, Tex.
- 1980–San Antonio Meeting– Elliot Weser, M.D., San Antonio, Tex.
- 1981–New Orleans Meeting– Constance Pittman, M.D., Birmingham, Ala
- 1982–Atlanta Meeting– Hiram C. Polk, M.D., Louisville, Ky.
- 1983–Baltimore Meeting– Addison B. Scoville, Jr., M.D., Nashville, Tenn.
- 1984–New Orleans Meeting– Edward M. Copeland, III, M.D., Gainesville, Fla.
- 1986–Atlanta Meeting– James M. Moss, M.D., Alexandria, Va.
- 1987–San Antonio Meeting– J. Claude Bennett, M.D., Birmingham, Ala.
- 1988–New Orleans Meeting– Albert L. Hyman, M.D., New Orleans, La.
- 1990–Nashville Meeting– Paul G. McDonough M.D., Augusta, Ga.
- 1991–Atlanta Meeting– Vardaman M. Buckalew, Jr., M.D., Winston-Salem, N.C.
- 1992–San Antonio Meeting– Basil Isaac Hirschowitz, M.D., Birmingham, AL
- 1993–New Orleans Meeting– Buris R. Boshell, M.D., Birmingham, AL
- 1994–Orlando Meeting– James A. Pittman, Jr., M.D., Birmingham, AL
- 1995–Kansas City Meeting–Antonio M. Gotto, Jr., M.D., Houston, TX
- 1996–Baltimore Meeting–David A. Clark, M.D., New Orleans, LA
- 1997–Charlotte Meeting - Samuel Eichold, M.D., Mobile, AL
- 1998–New Orleans Meeting - Alan L. Buchman, M.D., M.S.P.H., Houston, TX
- 1999–No award given this year
- 2000–No award given this year
- 2001–No award given this year

THE SCIENTIFIC EXHIBIT AND POSTER AWARDS...

Scientific exhibits became an official part of the annual meeting at the Louisville Meeting in 1920. The Council established a Committee on Scientific Exhibit Awards, and Certificates were given for: Best Exhibit by an Individual Physician; Best Exhibit by a Medical School; Best General Exhibit. In 1924, the Council voted to change the award designation to: First Award; Second Award; Third Award; and, Honorable Mention Award(s) at the discretion of the Committee. In 1984, six place awards were offered and the Honorable Mention was changed to Certificate of Merit. In 1988, poster presentations were included as part of the scientific portion of the annual meeting.

The Committee on Scientific Exhibits, Posters and Awards is a subcommittee of the Advisory Committee on Scientific Activities.

The following standards are used by the Committee in making the scientific exhibit awards: originality, practicability, applicability to practice of medicine, quality, teaching, value, quantity and personal demonstration.

A plaque, certificate and ribbon are awarded for first place, and certificates and ribbons are awarded for second through sixth places. Certificates of Merit are awarded for those exhibits warranting such recognition. Recognition certificates are given to all participating scientific exhibitors and poster presenters.

THE TECHNICAL EXHIBIT AWARD...

At a meeting of the Executive Committee of the Council held in Atlanta, Ga., March 31, 1973, the C. P. Loran Award for the outstanding Technical Exhibit was established. Recipients of this award are:

- 1973–San Antonio Meeting– Roche Laboratories, “Heart Sounds.”
- 1974–Atlanta Meeting– Roche Laboratories
- 1975–Miami Beach Meeting– Eli Lilly & Company
- 1976–New Orleans Meeting– Merck, Sharp & Dohme
- 1977–Dallas Meeting– Roche Laboratories
- 1978–Atlanta Meeting– Schering Laboratories
- 1979–Las Vegas Meeting– Wyeth Laboratories
- 1981–New Orleans Meeting– Wyeth Laboratories
- 1982–Atlanta Meeting– Pfizer Laboratories
- 1983–Baltimore Meeting– Roche Laboratories
- 1984–New Orleans Meeting– Schering Laboratories
- 1985–Orlando Meeting– Roche Laboratories
- 1986–Atlanta Meeting– The Upjohn Company
- 1987–San Antonio Meeting– Mead Johnson Pharmaceuticals
- 1988–New Orleans Meeting– Parke-Davis
- 1989–Washington, D.C. Meeting– Roerig Division, Pfizer Pharmaceuticals

1990– Nashville Meeting– Mead Johnson
Pharmaceuticals
1991– Atlanta Meeting– Sandoz
Pharmaceuticals Corporation
1992– San Antonio Meeting– Wyeth-Ayerst
Laboratories
1993– New Orleans Meeting– U.S.
Pharmaceuticals Group: Pfizer Labs, Pratt
Pharmaceuticals, and Roerig.

1994– Orlando Meeting– Wyeth-Ayerst
Laboratories
1995– Kansas City Meeting– Hoechst Roussel
Pharmaceuticals, Inc.
1996– Baltimore Meeting– Wyeth-Ayerst
Laboratories
1997– Novartis Pharmaceuticals
1998– Eli Lilly and Company
1999– Pfizer Pharmaceuticals
2000– Aventis Pharmaceuticals

IX. Southern Medical Association Auxiliary

During the Southern Medical Association Annual Meeting in Washington, D.C., November, 1923, Mrs. Seale Harris of Birmingham, Alabama, was chosen to organize an Auxiliary for this group. The proposed Auxiliary was organized the following year during the SMA Annual Meeting in New Orleans, Louisiana. There were 88 charter members from 16 states and the District of Columbia.

Spouses of members of the Southern Medical Association are automatically members of the SMA Auxiliary and there are no membership dues. Membership is limited to spouses of physicians who are members of SMA and widows/widowers of deceased members who were in good standing at the time of death.

Through the year, the SMA Auxiliary participates in several interesting projects, including the promotion of Doctors' Day, the encouragement of participation in Medical Heritage (Research and Romance) projects, Health Education Awareness, and Membership. In addition, the Auxiliary assists in fundraising for

the SMA Research & Education Endowment Fund.

The Auxiliary also maintains a close relationship with the state medical auxiliaries in each of its member states and aids in the promotion of membership in the Association.

The Southern Medical Association Auxiliary has made an organized effort to develop meaningful programs for the spouses of SMA members.

To improve communications, the SMA Auxiliary publishes a newsletter entitled SOUTHERN CONNECTION. This newsletter serves as a vehicle for presenting information, programs, and services available to Auxiliary members from the Southern Medical Association. It also helps to inform Auxiliary members around the region of activities of interest underway for various Auxiliary members.

The Southern Medical Association Auxiliary continues to grow in strength and in dedication, always striving to build a stronger and more effective organization.

Activities of SMA Services, Inc.

I. SMA Member Insurance Program

The Southern Medical Association Insurance Program was established in 1952 when a Disability Insurance Plan was approved by the Council. Since that time, the program has expanded to include seven basic insurance plans, as well as several other distinctive plans, each designed to meet the specific needs of physicians and their family members.

The Association's Coordinating Committee on Insurance, alert to the needs and wishes of the members of the Association, continuously updates the various plans in an effort to provide the most coverage for the premium dollar and, ultimately, the best insurance program available to the medical profession.

WHO IS ELIGIBLE?...

- SMA members and associate members
- Spouses of SMA members and unmarried dependent children up to 20 years of age.
- Coverage is extended for unmarried dependent children to age 30 if they are continuous full-time students.
- Employees and their spouses of physician members

PLANS AVAILABLE THROUGH THE SMA INSURANCE PROGRAM...

1. **TERM LIFE** (Up to \$2,000,000)
Payable in event of death due to any cause. Dependent coverage available. (Spouse up to \$500,000 and Children up to \$7,500).
2. **ACCIDENTAL DEATH & DISMEMBERMENT** (Up to \$2,000,000)
Full amount payable in addition to Life Insurance in the event of accidental death; proportional amounts payable for dismemberment. Spouse benefits also available up to \$500,000.
3. **LONG TERM DISABILITY INCOME** (Up to \$15,000 per month available)
The plan provides guaranteed monthly income in the event of long term disability. The plan has four benefit waiting periods to choose from, (30, 60, 90 and 180 days). Benefits are available to all actively practicing physicians and employees. After you have been Totally Disabled for 6 months, premium will be waived for you while Monthly Benefits are payable.
4. **MAJOR MEDICAL** Two major medical insurance plan choices available. Competitive rates, convenient quarterly billing, an SMA customer service team working for you.

- Network Based Major Medical - \$2,000,000 lifetime maximum, 7 deductible choices, 80/20% co-pay after deductible.
- PPO - \$2,000,000 lifetime maximum, 5 deductible choices, eligible benefits include both in-network and out-of-network services, eligibility is subject to area availability.

5. **PREFERRED PROTECTION PACKAGE** (Up to \$2,000,000 per person)
Twenty percent discount on major medical premiums for non-smoking physicians under age 40. Eighty percent of all eligible expenses up to \$5,000 (\$4,000 in benefits paid) and 100% of all eligible expenses for the remainder of that calendar year payable after deductibles are satisfied. Deductible amounts range from \$300 to \$5,000.
6. **PHYSICIANS COURTESY PLAN** (Up to \$2,000,000 per person) This plan is designed for physicians who are extended professional and medical courtesies by colleagues and require only a hospital expense plan. Deductible amounts range from \$300 to \$1,500.
7. **DENTAL—Passive PPO Dental Plans** available. Calendar year benefit maximum up to \$1,000 after deductible for insured and any covered dependent. Diagnostic and preventive—no deductible. No medical insurance required for eligibility.
8. **SURVIVOR ANNUITY INCOME** (Up to \$1,000 per month)
Five-hundred or one-thousand dollars per month for five years to any named beneficiary. If named beneficiary is surviving spouse, benefits continue for 10 additional years or until remarriage of the beneficiary. If member and spouse are killed in the same accident, benefits will continue until the youngest child reaches age 19, or age 30 if a full-time student.
9. **DAILY HOSPITAL INDEMNITY** (Up to \$300 per day) Daily benefits of \$100, \$150, \$200, \$250 or \$300 available from the first day of hospitalization. Double daily benefits are payable for hospitalization for cancer, intensive care, or coronary care treatment before age 65. Benefits are payable directly to the insured.

SPECIALIZED COVERAGES AVAILABLE

• GROUP INSURANCE PROGRAM...

The Southern Medical Association makes a true group insurance program available to medical related facilities. Programs can be tailored to meet the needs of the group with premiums based on a variety of factors, including location, size of the group and average age.

• MEDICAL STUDENT/ RESIDENT INSURANCE PROGRAMS...

In 1992, SMA introduced a special insurance program: designed to meet the particular needs of medical students and residents. Both plans offer two levels of coverage: (1) a comprehensive benefit plan and (2) an economical limited benefit plan. Students and Residents may also choose to add additional coverages including Short Term Disability, Term Life insurance, and Dental insurance.

• RESIDENT/NEW PHYSICIAN PROGRAM...

In November 2001 SMA Services, Inc. began offering \$100,000 Term Life and up to \$3,000 Long Term Disability benefits to Residents/New Physicians who join the Southern Medical Association without evidence of insurability. This plan was designed to bring younger physicians into the Association and the insurance program.

• ADMINISTRATIVE SERVICES...

In 1992, SMA's for profit subsidiary, SMA Services, Inc., initiated the marketing of insurance administrative services to medical associations. The first sale of these administrative services occurred in the Summer of 1992. Administrative services provided include billing, collections, customer service, limited underwriting and program management and marketing.

• MEDJET ASSISTANCE (TRAVELERS ASSISTANCE) PROGRAM...

For an annual membership fee, the MEDjet Assistance Program, a travelers' assistance program-not an insurance policy-makes high quality aeromedical transportation available to program members in the event of an injury or illness (requiring acute medical care or life support technology) occurring anywhere in the world.

The MEDjet Assistance Program is endorsed by SMA and is available to SMA members, associate members, their families and employees.

• PERSONAL LINES INSURANCE THROUGH LIBERTY MUTUAL...

Affordable protection for your home, auto and boat with competitive rates, convenient payment plans, toll-free 24-hour claims service and direct billing.

• LONG TERM CARE...

In July 2001 we began offering a Long Term Care plan underwritten by GE Financial Assurance. Members, their employees and families are eligible. You may choose from several plan designs that best meet individual needs.

COVERAGES AVAILABLE TO FULL TIME EMPLOYEES AND THEIR FAMILI- ES, OF MEMBER PHYSICIANS....

1. TERM LIFE Amounts available: Up to \$500,000. Employee Spouse Life Available up to \$250,000.
2. ACCIDENTAL DEATH & DISMEMBERMENT Amounts available: Same as Above.
3. LONG TERM DISABILITY Up to \$5,000 per month monthly income in the event of disability. Waiting periods to choose from are: 90 or 180 days.
4. DENTAL Passive PPO product is available. Calendar year benefit maximum up to \$1,000 after deductible for insured and any covered dependent. Diagnostic and preventive - no deductible. No medical insurance required for eligibility.
5. MAJOR MEDICAL

Both Network Based and PPO products are available to employees who are, or become members of SMA through two new membership categories designed specifically for employees of physicians (except in Alabama, Georgia and West Virginia where SMA membership is not an eligibility requirement). The two new categories are Member Practice Services Membership and Corporate Membership. Employees desiring additional details about the individual health insurance coverages available should contact SMA.

II. SMA Physicians' Retirement Program

The Southern Medical Association adopted a Physicians' Retirement Program during the annual meeting in Atlanta in November, 1974. Marketing of the Retirement Program was initiated in January, 1975. In 1982, an Individual Retirement Account was added.

The Council established a Committee on Physicians' Retirement during the New Orleans Meeting in November, 1981.

In July of 1990, the Council of The Southern Medical Association approved a motion to move the administration and marketing of the retirement program in-house. The move was completed in January 1992.

WHO IS ELIGIBLE?...

SMA members, associate members, and their family and employees.

1. DEVELOPMENT OF SALES ORGANIZATION

In order to meet the more complex and growing needs of program participants, a new sales philosophy was adopted in 1993. Rather than relying on direct mail and telephone contact to promote and market the program, a sales organization was created with the ultimate goal of having an SMA Regional Representative located within driving distance of ninety percent of the membership. Today our sales organization includes regional representatives who actively service existing program participants and promote and market the program's products and services to the general membership.

2. INVESTMENT AND FINANCIAL SERVICES

At the same time that the sales organization was created, a decision was also made

to increase the scope of products and services made available to the membership through the SMA Retirement Program. Effective October 1, 1993, SMA Services, Inc. entered into a business relationship with ProEquities Inc. to make available to Southern Medical Association members the opportunity to purchase such products as Mutual Funds, Bonds, Variable Annuities and Specialized Life Insurance products. ProEquities, Inc. is a wholly owned subsidiary of Protective Life Corporation, a holding company located in Birmingham, Alabama. ProEquities, Inc. is a member of the National Association of Securities' Dealers (NASD) and Securities Investors Protection Corporation (SIPC). SMA Services, Inc. will be providing administrative support for the activities of ProEquities, Inc. being conducted at the Southern Medical Association headquarters in Birmingham, Alabama.

SMA's own Coordinating Committee on Physicians' Retirement has managed the development of this program. The Committee will continue to monitor program operation to ensure that the products and services offered are consistent with the needs of physician members. With a wide range of products and services now available through the SMA Retirement Program and the qualified sales organization in place to deliver these products and services, the SMA Retirement Program is poised to meet the competitive challenges of the next century.

III. SMA Physicians' Purchasing Program

Since the inception of the Physicians' Purchasing Program in 1982 discounted medical professional and consumer items have been purchased by more than 12,500 members of the Southern Medical Association.

The Physicians' Purchasing Program is one of the largest and most comprehensive programs of its kind available to physicians and negotiates contracts with manufacturers and vendors for the distribution of discounted products to its members. All products selected for the program must be of highest quality; must be backed by outstanding service; and must be competitively priced.

As a PPP member, you will receive our Purchasing Showcase featuring the latest in products and services available through the program. Each

year you will also receive a comprehensive catalog of namebrand products all at discounted prices. Customer service representatives are available via a toll-free number to answer questions or quote prices on most professional and personal items on the market today.

SMA's distributor network allows for prompt delivery and outstanding service on thousands of items.

Professional items available through the Purchasing Program include 70,000 medical/surgical products including vaccines and injectables. Diagnostic capital equipment and computer supplies are also available. This exclusive program is available to members of the Southern Medical Association.

IV. SMA Practice Management Services

The year 2001 brings extraordinary challenges to the practice of medicine and the business of the Practice! After extensive needs analysis, your association has developed and offers you a comprehensive Practice Management Consulting program which meets the needs of our members, joining members, and the medical community at large. The benchmark of SMA Practice Management Services is customization and the Hallmark is Quality.

CUSTOMIZED PRACTICE MANAGEMENT SERVICES

1. Practice Strategies and Development Services

- Orientation & Training for physicians and staff in a Managed Care environment
- Contract review and negotiation
- Capitation contracting and training for capitated ops - Activity based costing
- Practice mergers, acquisitions and valuation
- Development of IPA's, Physician Organizations, Individualized Networks and Services
- Total practice assessments
- Technical Applications and Info System Evaluation, Selection and Purchase
- Information System Integration to communication platforms. Internet Application both Clinical and Administrative
- Practice Marketing Strategies

2. Workshops: On-Site or Mini-Symposia - Customized

- Managed Care: Contracts Evaluation and Negotiation
- Improving practice efficiency for managed care, advanced capitation and full risk contracting
- Coding and Reimbursement: Basic and Advanced CPT, ICD-10-CM, Evaluation and Management Documentation Guidelines

3. Local Seminars and Customized Programs

- Clinical pathways and implementation from the physicians viewpoint
- Medical Director's Managed Care Education series for IPA's and Group Practices
- Utilization and Management - URAC
- Quality Assurance - NCQA - HEDIS, Joint Commission, ISO 9000

4. Compliance Programs from Development to Implementation

V. SMA Marketing and Design Print

SMA Design Print was formed as SMA Graphics in 1984 to help defray the costs of typesetting for *Southern Medical Journal*, as well as other publications of the Association. The division has grown to become a full-service graphic art, imaging, and typesetting production house, creating all of SMA's publications, direct mail, and advertisements. Design Print also makes its graphics services available to the SMA membership and the general public.

The division immediately realized its goal of saving the Association money and is proud to offer its services at extremely competitive prices.

In 1991 the Marketing Department and the Graphics division combined activities to become a full service in-house resource that performed not only the Association's graphics and typesetting functions, but also all facets involved with internal, creative development, corporate marketing, public relations, and communications.

In 1994 Graphics Operations moved to a more spacious location minutes away from

SMA's headquarters building to accommodate its newly established printing service and its enhanced imaging services. In moving to a stand-alone location, the division changed its name to Design Print to create more appeal, visibility, and understanding of its services to the general public. The print division was intended to satisfy many of the smaller printing needs of the Association at a fraction of the commercial cost. Design Print added a second printing press in the Spring of 2000 to accommodate a larger workload. Now, Design Print is producing more work for the Association than we are buying from outside vendors.

Design Print's imaging services allow for significant cost savings by saving the cost of preprint filmwork from outside vendors. SMA Marketing and Design Print continue their efforts to meet the needs of SMA membership, staff, and the local public by providing the most complete and technologically modern services available. Design Print is a division of SMA Services, Inc., a wholly owned subsidiary of SMA.

VI. SMA Travel Services

SMA Travel Services was developed in 1987 to handle the travel arrangements for Southern Medical's rapidly expanding educational programs and numerous committee and council meetings. In addition, Travel Services began arranging the annual meetings for the affiliated societies. These programs alone have made SMA Travel very successful. However, as SMA members became familiar with the services available through SMA Travel, requests for personal vacation and business travel increased. SMA Travel now operates as a full service agency reflecting the SMA tradition of quality service and efficiency.

SMA Travel offers the knowledge of an experienced travel staff, trained with an emphasis on service. All types of travel needs can be met whether it be international, domestic, vacation,

or business. SMA Travel also provides extensive special meeting planning services offering group room rates as well as savings for air travel in conjunction with a meeting.

As an added membership benefit, in 1990, SMA Travel developed the SMA Travel Club. Members of the travel club enjoy special discounts offered by selected tour companies, cruises, car rentals, and hotels. In addition, Travel Club members receive a monthly newsletter highlighting special trips and promotions in addition to important travel information.

SMA Travel Services strives to meet the needs of SMA members by offering personalized travel services often neglected in the travel agency industry today.

Headquarters Office and Staff of the Southern Medical Association

Prior to 1910, physicians elected to the office of Secretary, Treasurer, or Secretary and Treasurer maintained Association records. In that year, Seale Harris, M.D., of Mobile, Alabama, was elected Secretary and Treasurer. He maintained the Association offices in Mobile until July 1915, when he relocated to Birmingham, Alabama, and moved the Association's offices to the Empire Building. Dr. Harris served as Secretary and Treasurer, as well as Editor, until his retirement in 1921. While Dr. Harris was on active military duty from November 1917 until November 1919, James R. Garber, M.D., was Acting Secretary.

Upon Dr. Harris' retirement, Mr. C. P. Lorz of Birmingham was named Secretary-Treasurer and Business Manager, a position he held until November 1928. He had worked for Dr. Harris as Business Manager of *Southern Medical Journal*, which was then privately owned by Dr. Harris. Mr. Lorz was designated Assistant Treasurer of the Association in November 1914 and Business Manager in November 1916. His title was changed to Secretary, Treasurer, and General Manager in November 1928, and, under the all-inclusive title of Secretary-Manager, he served until December 1, 1954.

On that date, Mr. V.O. Foster of Birmingham took over the executive duties of the Association with the new title of Executive Secretary and Treasurer, with a five-year contract. However, the Council, wishing to continue using the vast experiences of Mr. Lorz after his retirement, voted to retain Mr. Lorz as Advisor and Professional Relations Counselor for a period of three years. This arrangement was renewed for a second three-year period ending December 1, 1957. Mr. Butts, who had served as Assistant to the Secretary-Manager, 1948-1950, and Assistant Secretary-Manager, 1950-1954, was elected Business Manager with a five-year contract beginning December 1, 1954.

In September 1959 Mr. Foster became ill before fulfilling his contract. Mr. Butts was asked to serve as Acting Executive Secretary and Treasurer until further notice in addition to continuing as Business Manager.

At the Dallas Meeting, November 1961, Mr. Butts was given the title of Executive Director,

which would include his present titles of Executive Secretary and Treasurer, Business Manager, and Managing Editor.

Following a Constitutional change in November 1977, Mr. Butts assumed the title of Executive Vice-President. The Bylaws were changed during the New Orleans Meeting in November 1976 to reflect this change.

Mr. Butts retired from his position as Executive Vice-President on July 1, 1980, but remained as a Consultant until December 1981.

Mr. William J. Ranieri was appointed the New Executive Officer in August 1980.

In March 2000 Mr. James H. Leverett was appointed the new Executive Officer.

In 1984 SMA Services, Inc. was organized as a wholly owned subsidiary, and Mr. Ranieri was appointed as its President and Chief Executive Officer.

Mr. James H. Leverett was appointed as its President and Chief Executive Officer in March 2000.

THE HEADQUARTERS OFFICE

The Association's offices were in the Van Antwerp Building, Mobile Ala., from November 1910 until July 1915 and in the Empire Building in Birmingham from July 15, 1915 until 1958.

Ground-breaking ceremonies for one of the country's most modern association buildings were held on August 4, 1957. The split-level structure of masonry and glass, located at 2601 Highland Avenue, Birmingham, completed at a cost of \$250,000 was dedicated September 7, 1958.

The headquarters office contained 6,854 square feet of space and was situated on a lot of nearly one and one-half acres. It provided a meeting place and business center, executive offices, offices for the Association's publications, Auxiliary room, mailing room, conference room, and storage space.

In July 1984, the headquarters office was moved to a new building at 35 Lakeshore Drive. Tastefully furnished, the building contains 22,000 square feet of space and is situated on 2 acres with beautiful landscaping, convenient to the interstate system. The office building has easy access to all areas of Birmingham and is only 15 minutes from the airport.

Places of Meetings and Presidents

- 1906 Chattanooga, TN, organization meeting
- 1907 Birmingham, AL, *H. H. Martin, Savannah, GA
- 1908 Atlanta, GA, *B. L. Wyman, Birmingham, AL
- 1909 New Orleans, LA, *G. C. Savage, Nashville, TN
- 1910 Nashville, TN, *W. W. Crawford, Hattiesburg, MS
- 1911 Hattiesburg, MS, *Isadore Dyer, New Orleans, LA
- 1912 Jacksonville, FL, *James M. Jackson, Miami, FL
- 1913 Lexington, KY, *Frank A. Jones, Memphis, TN
- 1914 Richmond, VA, *Stuart McGuire, Richmond, VA
- 1915 Dallas, TX, *Oscar Dowling, New Orleans, LA
- 1916 Atlanta, GA, *Robert Wilson, Charleston, SC
- 1917 Memphis, TN, *Duncan Eve, Sr., Nashville, TN
- 1918 Influenza pandemic; no meeting that year
- 1919 Asheville, NC, *Lewellys F. Barker, Baltimore, MD
- 1920 Louisville, KY, *E. H. Cary, Dallas, TX
- 1921 Hot Springs National Park, AR, *Jere L. Crook, Jackson, TN
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Future Annual Scientific Assemblies of Southern Medical Association

November 14-16, 2002 Washington, D.C.
 November 6-8, 2003 Atlanta, Georgia
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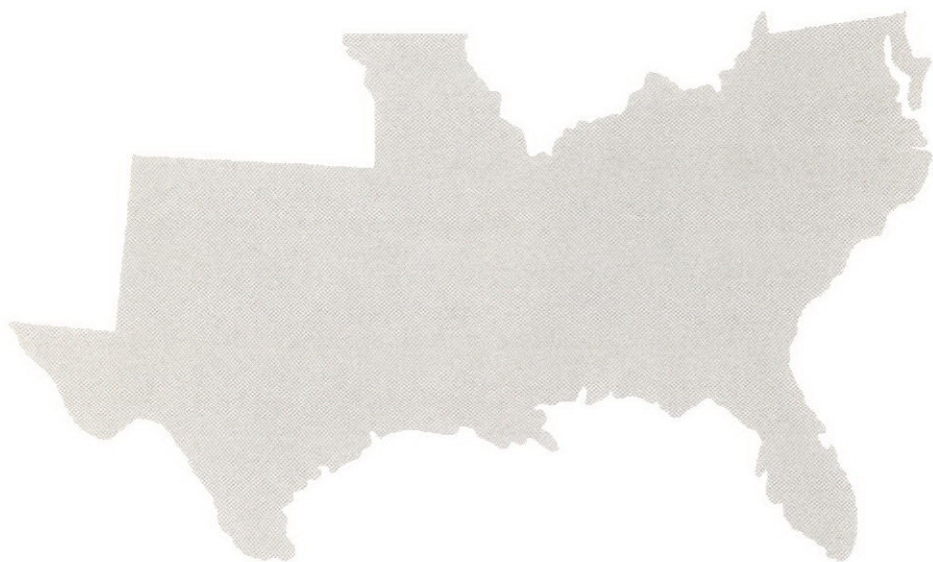
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March 7-9, 2002	Southeastern Conference Sports Medicine Update, Atlanta Marriott Marquis, Atlanta, GA
March 18-22, 2002	Legal Aspects of Healthcare, Hyatt Regency Capitol Hill, Washington, DC
April 2-7, 2002	Southern Orthopaedic Association's 19th Annual Meeting, Grand Hotel, Florence, Italy
April 26-28, 2002	Clinical Advances in Pain Management, Caribe Royale, Orlando, FL
May 9-11, 2002	Southern Orthopaedic Association's Baseball Injuries to the Upper Extremity, The Otesaga, Cooperstown, NY
May 17-19, 2002	Alternative Medicine and Complementary Therapies, Hilton Oceanfront, Hilton Head, SC
June 9-12, 2002	26th Sea Island Symposium on Pulmonary and Critical Care Medicine, The Cloister, Sea Island, GA
June 24-28, 2002	Comparative Healthcare Systems: The United Kingdom, London, England
June 28-30, 2002	6th Conference on Hypertension and Cardiovascular Diseases: Treating to Goal, Wild Dunes Resort, Charleston, SC
July 8-12, 2002	13th Annual Focus on the Female Patient, Kiawah Island Resort, Kiawah Island, SC
July 18-20, 2002	Southern Association for Oncology's 15th Annual Meeting, Hilton Sandestin, Destin, FL
July 28-Aug. 3, 2002	Hot Topics in Primary Care, Wild Dunes Resort, Charleston, SC
September 27-29, 2002	5th Conference on Diabetes, Coronado Springs Hotel, Orlando, FL
October 3-5, 2002	Southern Psychiatric Association's Annual Meeting, Loewes Ventana Canyon, Tucson, AZ
November 14-16, 2002	Southern Medical Association's 96th Annual Scientific Assembly, Grand Hyatt, Washington, DC
December 6-8, 2002	15th Annual Regional Burn Conference, The Galt House, Louisville, KY

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