

# President's Page

## Passionately ambivalent...

The American Medical Association (AMA) is one of those organizations that evokes strong opinions, with both passionate supporters and equally passionate critics. Off and on for the past 18 years, I've had the privilege of serving as one of AsMA's representatives to the AMA. It is easy to say it has been my privilege; it is harder to say it has been my pleasure. The semi-annual AMA meetings are some of the toughest I attended. The meeting's activities begin early in the morning, run until late in the evening, and require an inordinate amount of "homework" beforehand. They frequently touch on topics I have little knowledge/experience with, yet are of critical importance to the practice of medicine in the United States.

Given the multi-discipline, multi-national character of AsMA's membership, more than a few of our members are not eligible for membership in the AMA and, therefore, some might question why a President's Page would focus on an organization many cannot join. True enough—many of our members are ineligible to join the AMA. I doubt many would be surprised to learn that of those AsMA physicians eligible for AMA membership, approximately 75% have elected not to join. Nationally, the percentage of eligible physicians who are AMA members is even lower—now hovering\* around 18%.

While I'm somewhat ambivalent about the AMA's value to me as an individual, given that my career has been spent practicing within the military healthcare system, I am passionate about the AMA's value to AsMA as an organization. As one of the smaller medical specialty organizations in the United States, AsMA always faces challenges when performing our advocacy mission. Our representation in the AMA offers AsMA the opportunity to reach far beyond our membership on issues of importance to our members. Over the past 25 years, the AMA has developed policy positions on a broad range of aviation- and space-related topics. Current AMA policy addresses 23 aviation-related topics including HIV infected pilots, air travel safety, airborne infections on commercial flights, and in-flight medical emergencies. Many of these issues were brought to the AMA through AsMA's resolutions process.

Equally important is the role AsMA's representatives play in educating our clinical colleagues on concerns they raise regarding aviation-related issues. The most recent (and perhaps best example) involved the issue of flight-related deep vein thrombosis (DVT), which has gained the unfortunate, but popular label of "Economy-Class Syndrome." A well-meaning but poorly informed state delegation brought the issue to the AMA House of Delegates in 2010, asking the AMA to send a letter to the FAA and all airlines urging that they provide each passenger with a handout in their seatback materials (along with the usual safety evacuations cards, monthly airline magazine, and the SkyMall catalog) warning of the risk of DVT development in-flight. During committee hearings and debate on the floor of the AMA House of Delegates, Drs. Joe Ortega and Dan Shoor provided their fellow delegates with the latest studies on the actual risk levels associated with the development of DVT in flight. Their efforts had a significant impact on the discussions within the AMA on DVT and played a direct role in the actual policy the AMA ultimately approved.

\*All use of the word "hovering" by this former Harrier pilot is purely intentional....



**P. Glenn Merchant, Jr., M.D., M.P.H.**

As the largest organization in the "House of Medicine," the AMA has a significant impact throughout the practice of medicine. The AMA selects and nominates four of the eight members of the Accreditation Council on Graduate Medical Education's (ACGME) Preventive Medicine Residency Review Committee (the American Board of Preventive Medicine nominates the other four). The AMA has a strong influence in undergraduate medical education and in appointing representatives to the American Board of Medical Specialties and Accreditation Council on Continuing Medical Education (ACCME). The AMA has also taken a strong role in encouraging American physicians to care for patients insured under the military's TRICARE insurance. Say what you will about the AMA; it remains the 800-pound gorilla of American medicine.

I bring the AMA to your attention as there are costs associated with AsMA's participation. AsMA covers the direct travel expenses of our Delegate and Alternate Delegate. We also help defray the expenses of our two additional representatives to the Section Council on Preventive Medicine (a caucus within the AMA which AsMA delegates chair on a rotating basis). No other stipend is provided. Currently Joe Ortega, Johann Westphal, and Cheryl Lorwy serve as your representatives. They cheerfully give up almost a week in the summer (usually over Father's Day weekend, so AsMA-related travel pretty well wipes out both Mother's and Father's Day for them...) and another in the fall to attend the semi-annual meetings of the House of Delegates [I should note that another of our members, Bob Orford, serves as the Delegate from the American College of Occupational and Environmental Medicine (ACOEM)].

The other cost comes from the requirement that 25% of AsMA's eligible physicians must be members of the AMA for us to continue to hold our seat in the House of Delegates. Every 5 years the AMA conducts a survey of our membership to ensure that we continue to meet the minimum threshold requirement. Should our percentage of eligible members fall below the 25% requirement, AsMA would lose our seat in the House, thereby losing an important tool for our advocacy mission.

I have been an AMA member since medical school and, while I debate whether to renew my membership every year, I also understand the value the AMA brings to AsMA as an organization and to me as a U.S. physician. For those who are currently AMA members, I hope you will continue your member-

See *PRESIDENT*, p. 926.

# Association News

## Thomas W. Travis Promoted to Lieutenant General and Confirmed as Surgeon General of the Air Force

Thomas W. Travis was nominated and confirmed as Lieutenant General in June, and as of July 13, 2012 assumed the duties and



rank of U.S. Air Force Surgeon General. The promotion ceremony was held July 20, 2012 at Bolling AFB, DC.

General Travis now serves as functional manager of the U.S. Air Force Medical Service.

In this capacity, he advises the Secretary of the Air Force and Air Force Chief of Staff, as well as the Assistant Secretary of Defense for Health Affairs on matters pertaining to the medical aspects of the air expeditionary force and the health of Air Force people. General Travis has authority to commit resources worldwide for the Air Force Medical Service, to make decisions affecting the delivery of medical services, and to develop plans, programs and procedures to support worldwide medical service missions. He exercises direc-

tion, guidance and technical management of more than 42,800 people assigned to 75 medical facilities worldwide.

General Travis entered the Air Force in 1976 as a distinguished graduate of the ROTC program at Virginia Polytechnic Institute and State University. He was awarded his pilot wings in 1978 and served as an F-4 pilot and aircraft commander. The general completed his medical degree from the Uniformed Services University of the Health Sciences School of Medicine, where he was the top Air Force graduate, and in 1987 he became a flight surgeon. For more than three years, General Travis was Chief of Medical Operations for the Human Systems Program Office at Brooks Air Force Base, Texas. He later served as the Director of Operational Health Support and Chief of Aerospace Medicine Division for the Air Force Medical Operations Agency in Washington, D.C.

Prior to his current assignment, Gen Travis served as Deputy Surgeon General, Headquarters U.S. Air Force, Washington, D.C. The general has commanded the U.S. Air Force School of Aerospace Medicine; 311th Human Systems Wing at Brooks AFB;

## Executive Director's Column September 2012

Well, summer is past and the kids are back in school. It will soon be November and the AsMA Council will be gathering to reflect on the months since the conclusion of the Annual Scientific Meeting in Atlanta and prepare for the activities required to prepare for the 84th Annual Scientific Meeting scheduled for May 12 – 16, 2013 in Chicago, IL. As only some of you will be able to attend the Council meeting in November, I wanted to bring you up to date on several significant events that occurred during the months following the Atlanta scientific meeting.

We received some very exciting news just prior to the May 2012 Annual Scientific Meeting in Atlanta. The Internal Revenue Service (IRS) of the United States notified us that our Application for Recognition of Exemption under Section 501(c)(3) of the IRS code was approved. In essence, the IRS approval moved the Aerospace Medical Association from a non-profit Trade Association to a non-profit public charity dedicated to scientific and educational activities. **So, what does this decision mean to you?** For U.S. AsMA members, this approval means that your annual dues payment is now considered a donation to our non-profit public char-

See *TRAVIS*, p. 925.

See *EXECUTIVE DIRECTOR*, p. 925.



## European School of Aviation Medicine

### Training Courses 2013 for JAA/FAA Aero Medical Examiners

Aviation Medicine/Travel Medicine  
Diploma Course 22 9 – 17 March 2013

AME Class 2  
Basic Course 23 31 August – 8 September 2013

AME Class 1  
Advanced Course 23 7 – 15 December 2013

Venue: Lufthansa Aeromedical Center,  
Frankfurt Airport.

Application forms and further details under [www.flugmed.org](http://www.flugmed.org)  
or [www.eusam.org](http://www.eusam.org).

**ECAM 2012**  
the 3<sup>rd</sup> European Conference of  
Aerospace Medicine

9<sup>th</sup> to 11<sup>th</sup> November 2012  
Sheraton Skyline Hotel & Conference Center

At Heathrow, London - close to the airport  
With special delegates hotel rates

## Medicine in the Extreme Environment

Organised by **ESAM** the European Society of Aerospace Medicine and **AAME** the Association of Aviation Medical Examiners (UK)

Organised by **ESAM** - The European Society of Aerospace Medicine  
 **UK AAME** - the Association of Aviation Medical Examiners

Supported by **BHA** - The British Hyperbaric Association  
 **AsMA** - the Aerospace Medical Association

**Programme**

- reception buffet on the evening of Friday 9<sup>th</sup>
- scientific programme on 10<sup>th</sup> and 11<sup>th</sup> November
- gala dinner on Saturday evening
- programme for accompanying persons to Westminster Abbey and trip to Central London
- General Assembly of ESAM with presentation of the new Executive Committee over lunchtime on Sunday 11<sup>th</sup>
- flight deck experience in a mobile flight simulator available

**Information & Online Registration**

- [www.ecam2012.eu](http://www.ecam2012.eu) [www.aame.org.uk](http://www.aame.org.uk) [www.ecam2012.eu](http://www.ecam2012.eu)
- Registration also possible by post or fax 0044 1534 531 272
- Discounted package rates are available
- All Delegate rates include lunch and morning / afternoon beverages

Recommended for  
**12** hours  
CME credit

TRAVIS, from p. 924.

Malcolm Grow Medical Center and 79th Medical Wing, Andrews AFB, Md.; and the 59th Medical Wing, Wilford Hall Medical Center, Lackland AFB, Texas. He also served as the Command Surgeon, Headquarters Air Force District of Washington, and Command Surgeon, Headquarters Air Combat Command, Langley AFB, Va. He is board certified in aerospace medicine. A command pilot and chief flight surgeon, he has more than 1,800 flying hours and is one of the Air Force's few pilot-physicians. He has flown the F-4, F-15 and F-16 as mission pilot and, the Royal Air Force Hawk as the senior medical officer and pilot.

Gen. Travis's major awards and decorations include: the Distinguished Service Medal, Legion of Merit with oak leaf cluster, Meritorious Service Medal with four oak leaf clusters, Aerial Achievement Medal, Air Force Commendation Medal, Joint Service Achievement Medal, Combat Readiness Medal, and the Air Force Recognition Ribbon. His other achievements include: the 1994 Julian E. Ward Memorial Award from AsMA; 1994 Unger Literary Award from the Society of U.S. Air Force Flight Surgeons; 1995 Paul W. Myers Award for outstanding contributions to Air Force medicine, from the Air Force Association; 2003 Stewart Lecturer, Royal Aeronautical Society; 2007 Marie Marvingt Award from AsMA; 2007 George E. Schafer Award, Society of USAF Flight Surgeons; and 2008 John D. Chase Award for Physician Executive Excellence, Association of Military Surgeons of the United States.

Now a Fellow of Aerospace Medical Association, then Major Travis joined the organization in 1989 as an F-15 pilot-physician, and since then has served on the Council of AsMA and the Scientific Program Committee. Gen. Travis is an Academician, International Academy of Aviation and Space Medicine, a Member and former President, Society of U.S. Air Force Flight Surgeons, a Member and former President, International Association of Military Flight Surgeon Pilots; a Fellow and former Aerospace Medicine Regent, American College of Preventive Medicine; a Life member, Association of Military Surgeons of the United States; Member of the Order of the Daedalians; and inductee of the Alpha Omega Alpha Honor Medical Society.

EXECUTIVE DIRECTOR, from p. 924.

ity. U.S. members are now eligible to claim a portion of the dues as a donation to a public charity. For example, if a member renews the AsMA membership and pays the annual renewal fee of \$255.00, that member would be eligible to claim 60% (\$153.00) of the dues payment as a charitable donation to AsMA. Why only 60%? Because AsMA uses 40% of every member's membership dues to provide a print journal, electronic journal, or both. These journals are considered "tangible assets" and that portion of the donation is not tax deductible. Should members, affiliated organizations, Constituent Organizations, or Corporate Members want to donate money to assist AsMA with our operations, we will be able to

accept it and the donating individuals or organizations will be able to claim it as a tax deductible donation to a public charity.

Another activity that has taken up much time and effort, has been the redesign of the Aerospace Medical Association website. The AsMA Council authorized the expenditure of money to significantly upgrade the AsMA website and that effort began just prior to the 83rd Annual Scientific Meeting in Atlanta. Since the end of the meeting, the AsMA Staff have worked closely with the website programmers and received training on the content management software we will be using to manage the website design and content. The AsMA Staff worked aggressively to build numerous webpages for the new website. That new website went live in early August. We are pleased with the look and feel of the new website and we will work to continually improve the website and make it more useful to our members and non-member visitors. The new website should be useful in providing the public with critical Aerospace Medicine information.

In addition, I would like update you on our efforts to complete our reaccreditation efforts with the Accreditation Council for Continuing Medical Education (ACCME). AsMA has been offering Continuing Medical Education for our physician attendees for many years. AsMA must apply for reaccreditation as a CME Provider every four years. This reaccreditation process is no small task! The AsMA Staff and the Education & Training Committee have been working on building our application for nearly one year and the final product was shipped to the ACCME in July. To give you some sense of the enormity of this project, the final shipment included nearly 20 pounds of materials for the ACCME to review. Their review will work to ensure AsMA is developing and executing our CME activities in accordance with the numerous ACCME standards. The ACCME Review Committee will carefully digest the materials we provided in July and we will then participate in a conference call with the ACCME Review Committee in early November to discuss those materials and answer specific questions from the reviewers. The ACCME Review Committee will report their findings to the Decision Committee of the ACCME Board of Directors. The Decision Committee will make their decision on our reaccreditation application in March 2013 and notify us of that decision then. I will be sure to keep you informed as this process moves forward.

And finally, for those of you who plan to submit abstracts for the upcoming 84th Annual Scientific Meeting in Chicago, May 12-16, 2013, we have partnered with a new company for our abstract submission process. One World Presentation Management, Ltd. (OWPM) will be hosting our abstract submission site. You will notice some distinct differences from the previous site. One of the major changes is that AsMA is working to comply with the American Nurses Credentialing Center (ANCC) to provide nurses with Continuing Education. Therefore the conflict of interest form has been reworked to accommodate their process. The panel submission process is also new. We hope you will find these changes positive and please consider submitting an abstract for 2013. The theme will be: "Transforming Today's Challenges into Tomorrow's Opportunities."

## Future AsMA Meetings

May 12-16, 2013  
Chicago Sheraton  
Chicago, IL

May 11-15, 2014  
San Diego Hilton  
San Diego

May 10-14, 2015  
Walt Disney World Swan and  
Dolphin Hotel  
Lake Buena Vista, FL

## Meetings Calendar

**September 8-9, 2012;** URMPM World Congress 2012; University of London, London, UK. Organized by the Union of Risk Management for Preventive Medicine. Info: <http://www.urmpm.org/UWC2012/>

**September 16-20, 2012;** 60th International Congress of Aviation & Space Medicine. Melbourne Convention Centre, Melbourne, Australia. Info: <http://www.icebergevents.com/icas2012>

**October 4-6, 2012;** the Civil Aviation Medical Association's (CAMA) Annual Scientific Meeting; San Diego Marriott La Jolla, La Jolla, CA. The theme for this year's meeting is "Taming the Complex Aeromedical Examination: Flight Physician Preparedness." For more information, please see CAMA's website: [www.civilavmed.com/](http://www.civilavmed.com/).

**October 22-24, 2012;** 50th Annual SAFE Symposium; Grand Sierra Resort and Casino, Reno, NV. For further information contact: SAFE Association, Post Office Box 130, Creswell, OR 97426; (541) 895-3012; [safe@peak.org](mailto:safe@peak.org); [www.safeassociation.com](http://www.safeassociation.com).

**October 29-November 16, 2012;** Aviation Leaders Programme in Advanced Management (ALPAM); Singapore. For more information, please visit [www.saa.com.sg/ALPAM/alpam.html](http://www.saa.com.sg/ALPAM/alpam.html).

**October 31-November 3, 2012;** The 23rd International Symposium on the Autonomic Nervous System; Paradise Island, Bahamas. For info, contact: Anita Zeller, AAS Executive Secretary, American Autonomic Society, Phone: 952-469-5837, Fax: 952-469-8424; or visit [www.americanautonomicsociety.org](http://www.americanautonomicsociety.org).

**November 9-11, 2012;** The 3rd European Conference in Aerospace Medicine: Medicine in the Extreme Environment; Sheraton Skyline Hotel, Heathrow, London, UK. For info: [www.esam.aero](http://www.esam.aero) or [www.aame.co.uk](http://www.aame.co.uk).

ABSTRACT SUBMISSION SITE  
OPENS

SEPTEMBER 1, 2012!  
SUBMIT YOUR ABSTRACT EARLY!

## MedCareProfessional Is Newest Corporate & Sustaining Member

The Aerospace Medical Association welcomes MedCareProfessional GmbH as its newest Corporate and Sustaining Member. MedCareProfessional offers patient transport both nationally and internationally. They have won awards many times for excellent service and cooperate well with insurance, hospitals, and multicorporate enterprises. Their fleet of ambulances, intensive care transports, and air ambulances, as well as coordination with commercial carriers, allows them to provide worldwide professional help for sick or injured people. They strive to ensure that their people are well-trained and their equipment is kept up to date; for example, they now use the Epop blood gas analysis system. For more information on their company, please visit [www.medcareprofessional.com](http://www.medcareprofessional.com) (for English, click on the British flag).

## New Members

Beauregard, Wesley C., M.D., Pensacola, FL  
Bloom, Philip D., Dr., Wonga Park, Australia  
Gall, John A. M., M.B., B.S., Melbourne, VIC, Australia  
Ketchens, Milorad P., M.D., Urbana, IL  
Kornberg, Andrew J., Prof., M.B., B.S., Elwood, Australia  
Miranda, David J., Washington, DC  
Muthu, Alexandra H. R., M.D., Auckland, New Zealand  
Rosa, Ramon A., Dr., Lewes, DE  
Sarlay Jr., Robert, Lt.Col., USAF, MC, Beavercreek, OH  
Semple, George J., CAPT, USN, MC, Pensacola, FL  
Winnard, Andrew J., Chesterfield, UK

## Upcoming FAA AME Seminars:

Oct. 4-6, 2012  
La Jolla, CA  
CAMA ††

Oct. 29-Nov. 2, 2012  
Oklahoma City, OK  
Basic \*

Nov. 16-18, 2012 (tentative)  
Denver, CO  
O/O/E †

O/O/E = Ophthalmology/Otolaryngology/Endocrinology

\* A 4-1/2 day AME seminar focused on preparing physicians to be designated as Aviation Medical Examiners. To sign up or for more information, contact your Regional Flight Surgeon.

† A 2-1/2 day AME theme seminar consisting of 12 hours of AME specific subjects plus 8 hours of subjects related to a designated theme. Registration must be made through the Oklahoma City AME Program staff. Please call (405) 954-4831 or (405) 954-4830.

†† Seminar sponsored by CAMA. It is sanctioned by the FAA and fulfills the FAA recertification training requirement. Registration may be completed through CAMA or by calling (770) 487-0100.

For more information, you can visit the FAA's site at: [www.faa.gov/other\\_visit/aviation\\_industry/designees\\_delegations/designee\\_types/ame/seminar\\_schedule/](http://www.faa.gov/other_visit/aviation_industry/designees_delegations/designee_types/ame/seminar_schedule/)

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ship in 2013. For those who were previously AMA members and allowed your membership to lapse, I hope you will consider re-joining the AMA, for at least 2013. If you've never been a member, I'd be delighted to discuss the benefits, as would Joe, Johann, or Cheryl. When you get right down to it, the AMA actually is a pretty amazing organization that will only be made better by AsMA members' participation.

As always, I look forward to your comments, questions and feedback ([pgmerchant@mac.com](mailto:pgmerchant@mac.com)).

## 50th Annual SAFE Symposium October 22-24, 2012 Grand Sierra Resort and Casino, Reno, NV

For further information contact: SAFE Association, Post Office Box 130, Creswell, OR 97426; (541) 895-3012; [safe@peak.org](mailto:safe@peak.org); [www.safeassociation.com](http://www.safeassociation.com).

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## Nominations Sought for 2013 AsMA Awards

The Awards Committee of the Aerospace Medical Association, which is responsible for selecting the annual winners of special awards, has set a **January 15** deadline for receiving nominations for awards to be presented at the 2013 Annual Scientific Meeting in Chicago, IL. The names of prospective award winners should be submitted as far in advance of the deadline as possible. To view a list of past recipients go to the AsMA website: <http://www.asma.org/pdf/awrdwin.pdf>

Nominations can be made by any member of AsMA.

### Rules:

1. The nominee must be a current member of the Association by Feb. 1 in the year in which the award may be given, with the sole exception that the Sidney D. Leverett, Jr., Environmental Science Award is open to nonmembers.
2. Employees of a company sponsoring an award are eligible to receive the award. Self-nomination is not allowed. Deceased members may be nominated.
3. Nominations for the Tuttle and Environmental Science Awards must cite a specific paper printed in *Aviation, Space, and Environmental Medicine*. The award will be given to the first author, with co-authors that are AsMA members receiving co-author recognition.
4. An individual can only receive one award in any one year. The same individual may receive an award more than once, so long as five years have elapsed between the last time that award was won by that same awardee. The exception is the Bauer Award, as this award is only given once to an individual.
5. Nominations are good for three years from the original award nomination. They may be updated. If substantial material has changed for the same award within that three-year cycle—a new nomination should be submitted.
6. The form is available on the AsMA website. You may either submit the nomination directly from the website or you may download the

nomination form into your computer for e-mailing as a pdf document attachment. Nomination forms sent via e-mail should be addressed to the Awards Committee Chair, Kris Belland, D.O., at [awards@asma.org](mailto:awards@asma.org); and Ms. Gisselle Vargas at AsMA Headquarters ([gvargas@asma.org](mailto:gvargas@asma.org)). If e-mail is not available, you can send a hard copy of the form via normal mail to: Aerospace Medical Association, 320 South Henry St., Alexandria, VA 22314; or fax to the AsMA Home Office: (703)739-9652. Any auxiliary biographical material in electronic or hard copy **attachments must be limited to 3 typed pages** and will be retained in Association files.

7. Nominations received after **Jan. 15th** will be considered for awards to be presented at the next annual meeting.

### ANNUAL AWARDS (descriptions online)

1. Louis H. Bauer Founders Award
2. Mary T. Klinker Award
3. Harry G. Moseley Award
4. Eric Liljencrantz Award
5. Theodore C. Lyster Award
6. Boothby - Edwards Award
7. Julian E. Ward Memorial Award
8. Raymond F. Longacre Award
9. Arnold D. Tuttle Award
10. John A. Tamsiea Award
11. Sidney D. Leverett, Jr. Environmental Science Award
12. John Paul Stapp Award
13. Kent K. Gillingham Award
14. Won Chuel Kay Award
15. Marie Marvingt Award
16. Joe Kerwin Award
17. John Ernsting Award
18. Walter and Sylvia Goldenrath Award

Send information for publication on this page to: **Lt Col Andy Woodrow**  
**hfprof@mac.com**

## President's Message

by Lt. Col. Andy Woodrow

Before you tossed out the Annual Luncheon and Business Meeting program this year, you may have looked through the names of those who have sat at this helm. Generally, they are icons; many were the senior leaders in their respective service and most are still looked upon as the subject matter expert in a particular field of study.



Looking to my left and to my right, I was humbled by the idea that the gavel is now passed to me, and I surely do not consider myself iconic! What I can do is bring nearly 30 years of experience to the table and help us harness our collective knowledge to build on an amazing foundation of excellence. As we enter a new year for our Society, it is natural that I should wish to address the year ahead. The most important volley is to first acknowledge the huge debt that I, personally, and the Society as a whole owes to my immediate predecessor, Lance Annicelli. Lance took up the Presidency at a time when the Society really needed a boost. The challenges

he faced including flagging interest in joining the organization, diversification of careers, and commitment to the tough slog of assembling our teams. His clarity of thought, personal integrity, and much hard work helped to deliver to me an organization both energized and prepared to face the challenges of the future. His team was equally incredible and, with full sails, we exit the harbor into a new year of challenges. One significant source of 'wind in our sails' is the adoption of our new By-Laws. As uninspiring as it might seem to pore over by-laws, governance procedures are critical for our existence as a Constituent Organization in AsMA. It is very important to note that the final edit of the By-Laws were unanimously approved by the Board of Governors; that really does represent every part of the Society and our integration with the Aerospace Medical Association. These are the most extensive and far-reaching changes to our governance procedures for at least 10 years and I would urge every one of you to review them to better understand our link to the parent organization. However, that said, the governance of an organization is only a shadow of how it gets things done. Vastly more important is what the AsPS actually achieves, from strategic marketing to gain members to increasing the number of nominations for the annual awards, from establishing

an annual panel discussion to sending forward representatives to AsMA Council and committees. The ongoing upgrades to the society website to enhance both content and usability should allow more focused communication of relevant information to each and every one of us. Finally, the reality of social media is upon us and will continue to allow us to share real-time and near real-time information globally.

By its very nature aerospace physiology is one of the most central core skills in aviation. I believe that it is essential that we not only reach out more effectively to potential members outside the DoD and contract partners, but that we also actively seek to grow our membership on a more global basis. Universities and commercial industry have been underrepresented in the AsPS for many years. The multi-disciplinary nature of the Aerospace Physiology Society coupled to its learned stature and unrivalled reputation for professional integrity makes it uniquely well-placed to become 'the' pivotal constituent organization in AsMA. If we can achieve and sustain this position, we can stay true to our founding objectives of developing the art and the science of aerospace and operational physiology. Let us, together, set sail for another successful year in the Aerospace Physiology Society!



**UNDERSEA & HYPERBARIC MEDICAL SOCIETY**  
**46th ANNUAL SCIENTIFIC MEETING**

**JUNE 13-15**  
**2013**  
Pre-course: June 12

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