

# President's Page

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Two years ago, Dr. Fanancy Anzalone spoke of the Aerospace Medical Association (AsMA) as a family. I agree and hope you do as well. Your Aerospace Medical Association family's service to humanity has been providing better equipment design principles, better procedures, and improved safety through maintenance and improvement of health for nearly 85 years. Our members have improved Aerospace Medicine clinical practice through incorporation of research findings and Continuing Medical Education (CME), such as that available during attendance at our Annual Scientific Meeting. The personal interaction with those who do the research at such meetings provides insight and stimulates innovation in better ways than can be accomplished by teleconferencing or email. Face-to-face meetings and their exchanges of information build knowledge and a basis for further communication.

However, in response to your need for alternative means of obtaining CME and Maintenance of Certification (MOC), our Association is responding with alternative mechanisms for you to obtain credit online as announced in early December. Capture of the video and audio associated with a portion of our Chicago meeting and continuing improvements to our website have made this possible. Aerospace Medicine professionals who cannot attend our Annual Scientific Meeting will be able to get some of their CME and MOC credits via this online process. Along with this new online initiative, we are planning to begin offering journal-based CME and MOC in 2015.

Dr. Paulo Alves is the current President of the Airline Medical Directors Association (AMDA) Constituent Organization of the Aerospace Medical Association and provided the following summary.

AMDA was founded on the 3rd of September 1944 by a group of 14 United States physicians and, in 1946, became truly international. At present just under half of our members are from countries other than the U.S. We have three objectives:

- 1.) to improve the practice and standards of aviation and industrial medicine, particularly as pertaining to airlines operations;
- 2.) to encourage research and the study of medical problems in these fields; and
- 3.) to aid in the establishment and support of any scientific or benevolent associations that are inaugurated to further these objectives.

As of our last meeting in May 2013 AMDA has 71 active members. Our membership is open to any physician who is a member of the Aerospace Medical Association and is limited to physicians who are full or part-time members of medical departments of commercial airlines, or who are consultants to commercial airlines as determined by the AMDA Executive Council. However, any physician who wishes to affiliate because of his or her interest in airline medicine may join as an Associate member who also holds current membership in the Aerospace Medical Association. Both Active and Associate members serve on committees



**James T. Webb, Ph.D.**

and participate at the general business meeting. However, only Active members may vote at the meetings, and only Active members may hold elected offices. The application form must be signed by two Active AMDA members, or by one Active and one Emeritus member. The form must be accompanied by two letters of reference, one from the primary AMDA sponsor, and one from the applicant's employer or supervisor. The application fee is \$90 U.S.; annual dues are \$50. Requests for membership are approved by vote of the AMDA Executive Council. One of the beauties of our organization is the level of formal and informal cooperation among the peer members, despite working for sometimes fierce competing commercial airlines!

AMDA holds a scientific meeting on the Saturday preceding AsMA's inaugural day. Usually a topic is elected and panels and speakers are invited to present around that main topic. AMDA always discusses aspects of airline medicine, namely those affecting crew health as well as passenger health. Topics span from those related to medical certification for crewmembers to those around international public health matters affecting commercial aviation. For the May 2014 meeting, the topic is Technology and its impacts on aspects of crew and passenger health. The meeting itself is free for everyone who wants to attend and takes place in the same venue as AsMA. AMDA also promotes a Saturday night dinner at which we present the George J. Kidera Award, named after a former corporate medical director for United Airlines, who contributed for more than 40 years to airline medicine and our organization. The dinner is also open to non-members for a fee.

We have been very active in reviewing airline transport related inclusions on the Aerospace Medical Association website and other activities which support the Aerospace Medical Association. Presently, AMDA supports the Coalition for Healthful Airports along with World Heart Federation, the Airports Council International, European Region (ACI EUROPE) and the International Air Transport Association (IATA). Visit our website, <http://www.amda.aero> for more information.

# Association News

## 2013 AsMA Fellows Scholarship Winner Announced

by Melchor Antuñano, M.D., M.S., Chairman,  
AsMA Fellows Scholarship Committee

The AsMA Fellows Scholarship Committee is pleased to announce their selection of the winner of the 2013 scholarship. Adam Sirek,



M.D., won the scholarship for his presentation and publication of a manuscript on "Doppler Ultrasound of the Central Retinal Artery in Microgravity."

The \$2,000 AsMA Fellows Scholarship is funded by the AsMA Foundation and is presented annually to an AsMA member who is a student in an aerospace medicine residency program, graduate program in aerospace medicine (Master or Ph.D.), medical certificate or aerospace diploma course, or in a full time education/training program in the allied fields of nursing, physiology, human factors, psychology, ergonomics, and engineering.

Selection criteria include delivering a slide or poster presentation as a first author at the AsMA Annual Scientific Meeting and then submitting a manuscript as first author for publication in *Aviation, Space, and Environmental Medicine* based on the same topic and/or material covered in the slide or poster presentation. The winner is selected by the AsMA Fellows Scholarship Committee based on the high scientific value, originality, quality, and relevance of the candidates' presentations and published manuscripts.

## Board Certification Announcement 2014

by Heath M. Clifford, Lieutenant Commander, USN, M.A. ED., CAsP

The Executive Council of the Aerospace Medical Association (AsMA), acting upon recommendations of the Aerospace Physiology Certification Board, grants certification in aerospace physiology. Board certification in aerospace physiology was established by the Aerospace Medical Association to encourage the study, improve the practice, and elevate the standards of excellence in aerospace physiology. Formal Board Certification provides an avenue for professional and peer recognition in aerospace medicine, and is a worthy goal for members to attain.

This year's certification examination will be offered at the 85th Annual Scientific Meeting of the Aerospace Medical Association on Sunday, 11 May 2014, in San Diego, CA.

Board certification is for professionals with an abiding interest and demonstrated productivity in the field of aerospace physiology. Applicants must possess, as a minimum, a baccalaureate degree either in physiology, or a closely related science. A history of significant contributions to aerospace physiology is also required. Applicants should have five years of active professional experience in an aeromedical field. Exceptional applicants can request a waiver of any and all of the aforementioned eligibility requirements by submitting a letter to the Admissions Committee Chair. This letter shall specify experience, knowledge, education, or other facets, which alleviate the need to meet eligibility requirements.

The 5-hour exam contains questions covering various areas relevant to aerospace physiology including, but not limited to general

human physiology, acceleration physiology, decompression physiology, impact, hypoxia, vibration and noise, operational aspects, space physiology, and spatial orientation.

Applications and letters of reference are due to the Admissions Committee no later than Saturday, 01 March 2014. Applicants should contact the Admissions Chair for an application form (available in English only). Applicants must also submit a suitable digital portrait photograph (5x7), a short professional biography of less than 300 words, two professional letters of recommendation submitted directly to the Board, and a one-time, non-refundable Application Fee of \$25 (U.S.). A non-refundable \$75 Examination Fee is due prior to the exam. Make checks payable to the Aerospace Physiology Certification Board. Applicants must submit documents to the Admissions Chair in a digital format; MS-Word compatible for text documents, and high-resolution JPEG for graphics/photos.

Applications for Aerospace Physiology Board Certification are available from the Admissions Committee Chairman:

James W. Davis, Major, USAF, BSC, M.S.,  
CAsP

Aerospace & Operational Physiology Flight  
Commander  
20<sup>th</sup> Aerospace Medicine Squadron  
431 Myers Street  
Shaw AFB, SC 29151

Email: james.davis.16@us.af.mil  
Comm: (803) 895-6789

**Deadline for Application: 01 March 2014**

## Proposed Changes to the AsMA Bylaws

In accordance with Article XII of the Bylaws of the Aerospace Medical Association, the following proposed changes to the Bylaws are printed herein. They will be voted upon at the next Annual Business Meeting to be held Tuesday, May 13, 2014. The meeting is open and all members are encouraged to attend (no lunch purchase is necessary to participate in the meeting).

The omissions are listed as strikethroughs. The additions are italicized and underlined.

### ARTICLE VII. COUNCIL OF THE AEROSPACE MEDICAL ASSOCIATION AND EXECUTIVE COMMITTEE SECTION 2. Membership of the Council.

Membership of the Council shall consist of the President, President-Elect, the immediate Past President, the four Vice Presidents, the Secretary, the Treasurer, 12 elective members, one member selected by each of the Constituent Organizations, one member selected by the Fellows group, one member selected by the Associate Fellows Group, the Editor-in-Chief of the *Aviation, Space, and Environmental Medicine Association's official journal* (*ex officio* member without vote), the Regent for Aerospace Medicine of the American College of Preventive Medicine, the

Parliamentarian (*ex officio* member without vote; appointed by the President and approved by Council), and a student or resident representative selected by the Aerospace Medicine Student Resident Organization. The Executive Director shall be an *ex officio* member without vote. Of the 12 elective members, 4 shall be elected to the Council each year for three-year terms. No such elected member shall be eligible for more than two successive terms as an elective member. In the event an elected member of the Council resigns or is otherwise unable to complete a term on the Council, the Nominating Committee shall propose a nominee or nominees for election to fill the remaining year or years in that term. In the event a non-elected member resigns, is incapacitated, or is otherwise unable to attend a Council meeting, the appointing entity may designate an alternate by notifying the Executive Director or Secretary. All voting members of the Council must be members of the Association.

**Rationale:** Mention of the journal title is not necessary. Also, the journal title will be changing on 1Jan15. Adds requirement for voting members of Council to also be members of the Association.

### SECTION 5. Executive Committee.

H. The Executive Committee shall ~~create, review, and amend~~ approve changes to the Aerospace Medical Association ~~Policy~~ Policies and Procedures Manual as necessary to be consistent with the Bylaws and ~~submit it for approval by Council~~ direction.

**Rationale:** The Executive Committee should be authorized to approve changes in the Policies and Procedures Manual which are not in conflict with the Bylaws.

### ARTICLE XI. COMMITTEES SECTION 2. Appointment and Duties.

B. The chair of each committee may be directed by the President of the Association to accomplish specific tasks and reports relative to the area of expertise of that committee. Committee Chairs shall identify at least one Deputy Chair. Committees may have such sub-committees as the President and the committee may deem necessary to carry out their purposes. The Policies and Procedures Manual describes the committees' reporting responsibilities and details of their activities and function.

See BYLAWS, p. 207

**SECTION 3. Standing Committees Functions.**

B. Aerospace Safety Committee: The goal of this committee shall be to improve the safety of aviation and space activities. The committee shall direct its efforts to identifying specific, important aviation and space safety issues, national or international in scope that represents a significant threat to the health and safety of people involved in aviation and space activities, either as crew members or passengers. The objective of the committee shall be the resolution of aviation and space safety issues through either educational or regulatory processes. The committee may, with approval of the Council or Executive Committee, recommend research projects, prepare reports and scientific papers, sponsor panels and seminars, or formulate recommendations and resolutions to accomplish this objective. ~~This committee may have such subcommittees as the President and the committee may deem necessary to carry out its purposes.~~

C. Air Transport Medicine Committee: This committee shall be responsible for performing studies and preparing reports, resolutions, and recommendations on biomedical aspects of air transport operations. This committee shall concentrate its efforts on the promotion of international health, safety, and care through the mechanism of collecting information, analyzing data, and recommending solutions leading to improving health and safety in air transport operations. ~~This committee may have such subcommittees as the President and the committee may deem necessary to carry out its purpose.~~

**Rationale:** The first change, if approved, would allow follow-on or concurrent changes to eliminate excess verbiage in the descriptions of two Committee functions [Air Transport Medicine and Aviation Safety; "~~This committee may have such subcommittees as the President and the committee may deem necessary to carry out its purposes.~~"]

**SECTION 3. Standing Committees Functions.**

A. Aerospace Human Factors Committee: ~~This committee shall be responsible for performing studies, sponsoring panels and seminars, and preparing reports, resolutions, and recommendations concerned with improving human factors input in the concept, design, development, test, and evaluation and operational deployment of aerospace programs and systems. The committee will seek to promote research and applications of human performance knowledge in every phase of systems development and deployment. Aerospace human factors include a multidisciplinary approach involving behavioral, biomedical, psychosocial, physiological, and engineering factors. The goal of the committee is to produce better aerospace systems performance. This committee may have such subcommittees as the President and the committee may deem necessary to carry out its purposes.~~ Aerospace Human Performance Committee: This committee shall be responsible for establishing an integrating function and forum sponsoring panels and seminars, preparing reports, resolutions, and recommendations concerned with personnel selection, human performance, and human factors input in the concept, design, development, test and evaluation, and operational deployment of aerospace pro-

grams and systems. The committee will seek to promote research and application of human performance knowledge in every phase of systems development and deployment. Human performance and systems integration require a multidisciplinary approach involving decision-making, behavioral, biomedical, psychosocial, physiological, and engineering factors. The goal of the committee is to produce recommendations for improving aerospace systems performance.

**Rationale:** The committee members voted to request this change of name and function of the Human Factors Committee. They believe this change will enable a broader, more integrated functional description of relevant disciplines' involvement in Aerospace Medicine.

**SECTION 3. Standing Committees Functions.**

D. Arrangements Committee: ~~is responsible for specific aspects of the Association's Annual Scientific Meeting. The Policies and Procedures Manual describes their reporting responsibilities and details of their activities and function. The Arrangements Committee works with the Association Headquarters Staff to make logistical arrangements for the Annual Scientific Meeting.~~

O. Registration Committee: ~~is responsible for specific aspects of the Association's Annual Scientific Meeting. The Policies and Procedures Manual describes their reporting responsibilities and details of their activities and function. The Registration Committee assists with onsite registration activities associated with the annual meeting. This includes distribution of~~

See BYLAWS, p. 208



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## FEBRUARY 8-11, 2014

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registration materials and coordination of tickets for events.

R. Scientific Program Committee: is responsible for specific aspects of the Association's Annual Scientific Meeting. The Policies and Procedures Manual describes their reporting responsibilities and details of their activities and function. The Scientific Program Committee is responsible for the development and execution of the scientific program for each year's Annual Scientific Meeting. The Chair, with the help of committee members, arranges for abstract submission and review, scheduling of scientific sessions, and presentation of the scientific program.

**Rationale:** Replaces general committee descriptions with more detailed and accurate descriptions.

## News of Members

### New Members

- Akagwu, OjoChide C., M.B., B.S., London, UK
- Anderton, Ryan A., M.D., London, UK
- Chiu, Man Kuen Martin, Dr., Tsim Sha Tsui Kowloon, Hong Kong
- Duncan, Joshua R., Capt., USAF, M.D., San Angelo, TX
- Haney, Michael, Prof., M.D., Umea, Sweden
- Hutchins, Sara G., Capt., USAF, BSC, Whiteman AFB, MO
- Kapetansky, Steven D., M.D., Lancaster, OH
- McLoughoin, David C., Gp. Cpt., RAF, Bedfordshire, UK

Sczepaniak, John P., San Diego, CA  
 Noakes, Nathan D., LT, USN, Lexington Park, MD  
 Reeb, Christian, Koenigsbrunn, Germany

### Obituary Listing: Robert M. Olson

AsMA has learned that **Robert M. Olson, M.D.**, died in early November. Born in New York, he earned his M.D. from the University of Rochester, NY, and then enlisted in the Air Force, where he worked at School of Aerospace Medicine at Brooks AFB, San Antonio, TX. Following his time at Brooks, he was sent to the University of California at Berkeley and earned a doctorate in medical physics. During his career, Dr. Olson developed a noninvasive ultrasound technique for measuring blood flow in the carotid artery and assisted in the improvement of oxygen delivery systems so that pilots could perform better at higher altitudes. He received the Air Force Scientific Achievement Award in 1972 and the Meritorious Service Award, both for his research. He retired from the Air Force in 1983 and worked for Southwest Research Institute, where he worked on medical instrumentation. He retired from that position after 10 years, but continued to do research. He was an Emeritus Member of the Aerospace Medical Association and presented many papers at AsMA Annual Scientific Meetings and published several papers in *Aviation, Space, and Environmental Medicine*.

**Check out AsMA's award-winning website: <http://www.asma.org>!**

**Future AsMA Annual Scientific Meetings**

May 11-15, 2014  
Hilton San Diego Bayfront  
San Diego, CA

May 10-14, 2015  
Walt Disney World Swan & Dolphin Resort; Orlando, FL

April 24-28, 2016  
TBA

April 29-May 4, 2017  
Sheraton Denver Downtown Hotel  
Denver, CO

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## European School of Aviation Medicine

### Training courses 2014 for EASA/FAA - Aero Medical Examiners

AME class 2 Basic course 24	6–14 September 2014
AME class 1 Advanced course 24	29 November – 7 December 2014

**Venue: Lufthansa Aeromedical Center  
Frankfurt Airport**

**International Aviation Medical Examiners Seminar**      **21-24 August 2014**

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

# RAYMAN'S CLINICAL AVIATION MEDICINE

5th edition, 2013

The 2013 fifth edition is a complete, 485-page rewrite of the classic text. Fifteen physicians well experienced in aviation medicine provide aeromedical disposition guidelines for civil and military aviation, making it an indispensable reference for the aviation medical examiner or flight surgeon practicing in an operational or regulatory role.



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