The Year in Review

So, what did we accomplish this year? The work of AsMA is a continuous process. Each President and their Executive Committee contribute a snapshot along that continuum. Several years ago, AsMA leaders created a Strategic Plan, casting a vision, mission and strategic goals, which were embraced in principle, by the membership. This strategic engine, if you will, stood majestically on the tracks at the fore of the AsMA bylaws, until one day we realized it was not operationally connected with the good work of the association. It was time to develop an Action Plan which would connect the work of the committees and constituent organizations to the AsMA goals.

AsMA leaders worked hard throughout the year with committee chairs and constituent organization presidents to align their work with the goals of AsMA, using a standardized template that clearly displays activities and work processes using metrics. Action plans are then presented at Council meetings and are available upon request.

The Long Range Planning ad hoc committee (LRPC), created this year, will serve as a beacon for ExComm and the association. Its members will examine the results of the work of AsMA, as displayed in the Action Plan. It will systematically analyze and evaluate the relevance and timeliness of the year’s work to AsMA goals and to the discipline of aerospace medicine. Are we the leaders we say we are? Are we creating the tapestry for the future of aerospace medicine? The LRPC will serve as a think tank, examine issues, and shape recommendations for ExComm consideration, ensuring that we position AsMA in the forefront of global aerospace medicine leadership.

Are we meeting the needs and interests of our members? Many of you responded to the membership survey conducted this year to determine perceived value of membership in AsMA. Results yielded 90% member satisfaction and members would recommend AsMA to others. Nine areas of interest were cited that could enhance member satisfaction and increase perceived value in membership. Topping the list was a request for clarity and direction on how to advance within the organization. Efforts are underway to strengthen collaboration between the Associate Fellows and the Fellows Group, offering guidance and mentorship on ways to negotiate their progress within AsMA. ExComm has examined each of the top nine areas of interest and linked them to appropriate committees or avenues for further resolution. Member satisfaction is a top priority.

Focus on International collaboration gained momentum this year. Please read the President’s message in the January 2011 issue of the journal where I discuss in greater detail the collaborative efforts between AsMA and ESAM, increasing interest in the International Congress of Aviation and Space Medicine, and encouraging attendance and participation the upcoming meeting in Bucharest, Romania. Deliberations continue regarding the possibility of an AsMA meeting in Europe.

Realizing that the AsMA website needs significant enhancement to effectively showcase the professional image of the Association, ExComm is embarking on a “Capital Campaign” to raise $60,000 to enhance the web site, and have collectively pledged 5% of the campaign goal to launch this initiative. More to come!

“Thriving in Changing Environments” the theme chosen for the annual meeting in Anchorage is our strategy for infusing environmental health into the annual scientific meeting pro-
Alerts for Electronic Journal

Did you ever wish there was a way to receive an e-mail notifying you of a new edition of Aviation, Space, and Environmental Medicine posted on the Ingenta Connect website? Well, there is a way to set this up. Ingenta Connect hosts our electronic journal and they offer automated e-mails that notify registered users of new postings for our journal. The automated e-mails also provide you with a Table of Contents for the new posting. It takes a few minutes to set up your account and the automated Table of Contents Alerts, but when you are ready follow these steps:

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Please Note: After you register, you will receive an e-mail notifying you of a new edition of Aviation, Space, and Environmental Medicine.

Donate to the Foundation

The AsMA Foundation supports the field of Aerospace Medicine through financing educational & scientific programs, providing scholarships, supporting grants for research, etc. Please visit the Foundation page on the AsMA website: www.asma.org. Send checks to: AsMA Foundation, 700 Gemini St., Suite 110, Houston, TX 77058. Donations are tax deductible.

Executive Director Column:

Automatic Table of Contents Alerts for Electronic Journal

RAMS Train at Discovery Shuttle Launch STS-133

Education and training of residents in aerospace medicine (RAM’s) is a collaborative effort. The Discovery Shuttle launch STS-133 from Kennedy Space Center (KSC) on February 24th, is a snapshot of this training continuum.

The DOD Human Space Flight Support Office at Patrick AFB, FL, provides Search, Rescue and Medevac capability to all launches and landings of the Space Shuttle. At the NASA-KSC, this DOD office provides one HH-60 helicopter, one physician and two parajumpers (PJs)/paramedics per two astronauts on each shuttle mission.

In addition to completing a training course over several days, provided by NASA, the physicians, or Air Docs, and the PJs receive a refresher briefing one day before the launch and landing, called the “Air Doc Brief.” The Air Doc Brief provides refresher training to the Air Docs and PJs on shuttle contingency injuries and spaceflight medical issues, familiarization with NASA and DOD medical contingency operations, NASA-provided medical supplies, equipment, and communications. The meeting also updates the DOD crews on any current issues with the crew or with the mission. Equipment demonstrations often include familiarization with the astronaut launch and landing suit (Advanced Crew Escape Suit-ACES) and suit and helmet removal. The astronaut suit (ACES) helmet removal is a controlled and steady process that requires three persons to perform successfully to minimize head and neck motion during an uncertain spinal cord status. This is similar to motorcycle helmet removals in the Emergency Room. Basically, one person holds the helmet, another uncouples the helmet from the suit, opens the visor and reaches in the helmet and removes the neck and head while the second person reaches under the base of the helmet and stabilizes the neck and head while the second person progressively lets go of the head while the helmet is coming off.

The NASA-KSC provides a short course in Aerospace Medicine for interested medical students and residents. Offered several times per year, the one-month course provides lectures, tours, and medical operational experience, depending on the current activities of the KSC medical operations personnel. The student is also expected to provide a presentation as a final exam project. Part of the operational experience is to attend Air Doc Briefings. The training course program tries to accommodate any student who wishes to return to KSC for shuttle launch or landing activities if they did not get to participate in a mission during their previous rotation at Kennedy Space Center. During both the STS-133 launch and landing several students returned for this operational experience.

AIR DOC BRIEF—Air Docs practice fitting the three person helmet on volunteer, Dr. Marian Sides.

THREE-PERSON HELMET—Residents of Wright State University and UTMB, practicing the three person helmet removal process on Dr. Sides, trainee.

CAMA Sunday

Aviation: Lifeblood of Alaska
May 8, 2011
Hilton Hotel, Denali Room
8:00 AM-12:00PM
### European School of Aviation Medicine

#### Training Courses 2011/2012 for JAA/FAA Aero Medical Examiners

<table>
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<tr>
<th>Course</th>
<th>Dates</th>
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<tr>
<td><strong>AME class 2</strong></td>
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<tr>
<td>Basic course 21</td>
<td>3–11 September 2011</td>
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<tr>
<td><strong>AME class 1</strong></td>
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<tr>
<td>Advanced course 21</td>
<td>3–11 December 2011</td>
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<tr>
<td><strong>Aviation Medicine/ Travel Medicine</strong></td>
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<tr>
<td>Diploma course 21</td>
<td>17 – 25 March 2012</td>
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**Venue:** Lufthansa Aeromedical Center, Frankfurt Airport.

Application forms and further details under www.flugmed.org or www.eusam.org.

### Upcoming FAA AME Seminars:

<table>
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<tr>
<th>Event</th>
<th>Dates</th>
<th>Location</th>
<th>Type</th>
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<tr>
<td>May 9-12, 2011</td>
<td>Anchorage, AK</td>
<td>AsMA ‡</td>
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<tr>
<td>June 13-17, 2011</td>
<td>Oklahoma City, OK</td>
<td>Basic *</td>
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<tr>
<td>Oct. 31-Nov. 4, 2011</td>
<td>Oklahoma City, OK</td>
<td>Basic *</td>
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<tr>
<td>Nov. 18-20, 2011</td>
<td>Portland, OR</td>
<td>N/NP/P †</td>
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**Please note:** The only FAA seminar AsMA takes registrations for is the one held in conjunction with our annual meeting in May. For all others, please see below.

- N/NP/P = Neurology/Neuropsychology/Psychiatry
- 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.

‡ A 3-1/2 day AME seminar held in conjunction with AsMA’s Annual Scientific Meeting. Registration must be made through AsMA. To register or for more information, call 703-739-2240 x 106 or 107. AsMA charges a registration fee to cover their overhead costs. Registrants have full access to the AsMA meeting. CME credit for the FAA seminars is free.

For more information, you can visit the FAA’s site at: www.faa.gov/other_visit/aviation_industry/designee/delegations/designee_types/ame/seminar_schedule/
ESAM: A View from Europe

by Dr. Kevin Herbert,
ESAM 2nd Vice President

In a recent journal, the President of AsMA, Marian Sides, commented upon the collaborative work being done with the European Society of Aerospace Medicine (ESAM) and the prospect of a joint conference between the two organisations, to be held in Europe, at some stage in the future.

“What is ESAM?” you may well ask. You can be forgiven for asking the question, as ESAM is very much the ‘new kid on the block’ in Aerospace Medicine.

ESAM was founded in 2006 by a group of aerospace-medical who could foresee the need for a more consistent approach to aviation and aerospace medical opinions across an ever-growing Europe. Since 1999, regulation of safety in the European Union and a number of other states outside this union who were a party to the regulations was under the auspices of the Joint Aviation Authorities (JAA) who produced the Joint Aviation Regulations (JARs). These were adopted, and implemented, by the JAA member states, but were not legally binding. Over subsequent years a growing number of differences emerged in the way national authorities interpreted the JARs, and cracks in the process started to appear. Among others, one fact became very clear during the JAA years, namely the widely different approaches to aviation safety regulation across the JAA states, let alone across the wider continent of Europe.

Harmonisation—this is a word used in the establishment of the European Aviation Safety Agency (EASA) in 2003. This body, an agency of the European Commission, has wider responsibilities than the JAA, and its rule making and regulation will be legally binding on European Union member states. So a need was seen for a Pan-European association which could, in time, be a source of authoritative and consistent medical advice to EASA.

There was never a better time to create ESAM. It is true to say that the birth of ESAM was coincident with the need for those who did not see the need for another aerospace organisation, and feared that it would be a competitor to existing ones. The enthusiasts who drove its formation feared that EASA would make its rules on aerospace medical matters in isolation (a fear that has, in some part, been vindicated over the past couple of years). And so ESAM was founded in 2006, with the objectives to:

- Work for the health and safety of all persons involved in aviation and space operations, including passengers.
- Be a Pan-European, independent forum for aerospace medicine, coordinating European aerospace medicine interests.
- Base its decisions on expert knowledge, evidence, and open debate.

Under the leadership of its President Dr. Roland Vermeiren, ESAM has grown at an astonishing pace. Roland, a Belgian who is fiercely proud of his Flemish origins, and who modestly describes himself as being a specialist in beer, chocolate, and typical Belgian dam, has guided the Society to its present position of having every significant aerospace organisation in Europe as a member. It must be stressed that this is the continent of Europe, not merely the European Union. Stretching from Spain in the West to the Russian Federation in the East it can truly be regarded as Pan-European.

ESAM now has a representative role on several influential committees in EASA, particularly the SSCC (the Safety Standards Consultative Committee which is the industry’s voice in EASA’s Rulemaking Directorate), and the review group for medical certification of flight and cabin crew. It is true to say that the activities of EASA have tended to dominate the ESAM agenda in its early years. The proposed new pilot’s licence, the Light Aircraft Pilots Licence (LAPL) has been particularly controversial, as it has medical standards below those published by ICAO, and allows doctors with no formal training in aviation medicine to make decisions on fitness to fly. An article on this topic has already appeared in Aviation Space and Environmental Medicine 2009; 80(7): 663–4.

We are pleased with strong links we have developed with AsMA, helped enormously by its representation by Past President Andy Bellerose. As a Society born in the 21st century, we are committed to using the tools of the 21st century for communication. Our website, www.esam.aero, is the main portal of communication, and will see the publication of our strategy for the future, and position statements on current topics in aerospace medicine, produced by our Scientific Advisory Board.

ESAM has facilitated two European Conferences in Aerospace Medicine (ECAM) in Budapest in 2008 and Athens in 2010, and looks forward to welcoming you to the third, in the United Kingdom in Olympic Year, November 2012. We will be represented at the AsMA conference in Anchorage in May, where there will be an ESAM session on Wednesday, May 11, at noon.

And so, to the future. Our strategy will appear on the website during 2011, but a very exciting component of this is a joint meeting with AsMA, in Europe, in the future, possibly by 2016. There is a joint working party, which is pursuing this goal, and we are making good progress. There is great enthusiasm on both sides, but we do not underestimate the challenges this brings, particularly in these tight financial times.

There remains much to be done as ESAM matures over the next few years. The implementation of EASA rules, scheduled for April 2012, will no doubt keep us on our toes. We are committed to improving the communication with our member societies, no small challenge due to the diversity of languages, despite English being, allegedly, the common language of aviation. We must work hard to forge a consensus on controversial aerospace topics across groups of people whose diversity of geography is only matched by its diversity of opinion. This must be based on science and evidence, not merely opinion. If we do not achieve this, then we risk giving way to opinion based on pressure groups or the media, with all the risks this entails. One too often sees opinion quickly becomes ‘fact’ in today’s media.

“Harmonisation”—this is a word used much in Europe, and indeed our own documents refer to the harmonisation of training in aviation medicine. I have avoided it until now in this article. The definition in the Oxford English Dictionary is: “to make, or form, a pleasing or consistent whole.” In the context of the wider Europe this feels like a Herculean task, and the prospect of pleasing everyone seems slight. We would do well to remember that it does not mean everyone doing the same thing in the same way. That is unification. This misinterpretation is at the root of much dissent in Europe.

ESAM should strive to harmonise aerospace medical opinion, at the same time as acknowledging and respecting the differences of opinion across our members. Such harmonisation will not be a static process, and is likely to be a dynamic, patchy, and often noisy one. Or as Spock might say, “Harmony…but not as we know it.”

MEETINGS CALENDAR

May 2–5, 2011; 16th International Symposium on Aviation Psychology; Dayton, OH. Wright State University, Dayton, OH. Info: www.wright.edu/saap
May 8-12, 2011; 82nd AsMA Annual Scientific Meeting; Anchorage, AK. Denai’na Convention Center. Info: www.asma.org
June 15–18, 2011; 44th UHMS Annual Scientific Meeting; Fort Worth TX. Renaissance Worthington. Info: www.uhms.org
September 11–15, 2011; International Congress of Aviation and Space Medicine; Bucharest, Romania. Info: www.iaasm.org/congresses.cfm
October 6–8, 2011; CAMA Annual Scientific Meeting; Tucson, AZ. Info: david.millet@yahoo.com
Oct 17-19, 2011; 2011; Air Medical Transport Conference; St. Louis, MO. Association of Air Medical Services Info: www.aams.org

CALL FOR PAPERS!!!
October 24-26, 2011; 49th Annual SAFE Symposium; Reno, NV. Deadline for abstracts is June 12. Info: safe@peak.org; www.safesassociation.com

Space Medicine Association Luncheon Speaker

The Space Medicine Association Luncheon Speaker in Anchorage will be Dr. Jon Clark. He will be speaking on the topic: “Medical Support For A Manned Stratospheric Balloon Freefall Parachute Flight Test Program.”

CAMA Annual Scientific Meeting
Tucson, Arizona
October 6-8, 2011

“Cognition, Sleep Disorders and Fatigue in Aviation: A Comprehensive View”
Superb Faculty
AME Seminar Credit
Inquiries welcome:
david.millet@yahoo.com
Aqua Lung’s Parent Company Donates to Japan

Aqua Lung’s parent company, Air Liquide, has donated $1 million US dollars to the Japanese Red Cross to help those affected by the earthquake and tsunami. Due to after-shocks, interruptions in the supply of electricity, and difficult logistics, they have temporarily closed their headquarters in Tokyo and have relocated employees to the Osaka region. They have also been cooperating with Japanese authorities and ensuring the continuous delivery of critical supplies.

—For more information, please visit www.aqualung.com/us/content/view/552/383/.

Verathon Improves Laryngoscopes

Verathon, Inc., recently announced that its Verathon Medical Canada new product development to GlideScope GVL®, Cobalt AVL, and Cobalt video baton laryngoscopes to better withstand more rigorous vaporized hydrogen peroxide disinfection and sterilization systems. Newer vaporized hydrogen peroxide disinfection and sterilization systems in the market prompted this product development work. In addition, Verathon® has notified those health care facilities that currently own GlideScope video laryngoscopes, of an upgrade opportunity to vaporized hydrogen peroxide compatible units.

—To read more, please visit http://verathon.com/uploads/Press_Releases/8000-3570-00-86.pdf.

AOPA’s Air Safety Institute Release Latest Nail Report

The new edition of the Joseph T. Nall Report, the most comprehensive review of general aviation (GA) safety published by the Air Safety Institute (formerly the AOPA Air Safety Foundation), is now available online. It contains some surprisingly good news about commercial GA operations, but raises significant concerns in other areas. The current Nall Report is based on 2009 accident data – the last year for which enough accident data are available to be statistically valid and give a complete safety picture. The analysis from the Nall Report helps identify safety trends – good or bad – and training opportunities where the Air Safety Institute can focus its efforts. It is available online at www.airsafetyinstitute.org/nall. Hard copies are available by sending an email request to safety@aopa.org.

—For more information, please visit www.aopa.org/newsroom/newsitems/releases/2011/11-1-028.html.

Lockheed Martin Delivers 8000th Combat Computing Unit

Lockheed Martin recently delivered the 8,000th AN/UYQ-70 combat console suite to the U.S. Navy, marking a key milestone for a system that is currently installed on 90% of the Navy’s commissioned ships. The milestone Q-70 system will be installed on the USS Minnesota (SSN 783) submarine to upgrade combat control and navigation systems. It is a command workstation that permits operators to display combat control and navigation decision data onto high definition displays located in the command and control center, providing real-time situational analysis. The Q-70 servers, workstations and network systems are widely used on Navy platforms in the air and on land, and in naval systems operated by Australia, Germany, Japan, Norway and Spain.


Baxter Clinics in Columbia Focus on Heart-Kidney Disease Link

Baxter’s renal business runs clinics in Colombia that focus on reducing the increased risk of cardiovascular disease among kidney disease patients every day of the year, helping keep renal failure patients as healthy as possible, and helping keep them off of dialysis for as long as possible. Founded in 2004, the Clínica de Salud Renal (Clinic for Renal Health) is the first program with a specific infrastructure for slowing progression of chronic kidney disease (CKD) in Colombia and Latin America. The clinic has six locations in Colombia’s largest cities, and treats more than 5,000 patients.

Patients go through an education program that covers relevant topics on CKD prevention throughout 11 modules, which include a focus on prevention of cardiovascular disease. Educational contents are reinforced by practice sessions where patients learn how to measure their blood pressure at home. They also learn how to measure their blood glucose levels and participate in workshops about their clinical goals.


Mayo Researcher Honored with Potamkin Prize

The American Academy of Neurology (AAN) has awarded the 2011 Potamkin Prize to Dennis Dickson, M.D., a neuropathologist at Mayo Clinic in Florida and the Robert E. Jacoby Professor for Alzheimer’s Disease Research. The Potamkin Prize honors researchers for their efforts advancing the understanding of Pick’s disease, Alzheimer’s disease, and related disorders. The Prize was awarded to Dr. Dickson in recognition of his wide-ranging neuropathologic research in neurodegenerative disorders, in particular studies on tau protein. Tau is a protein that accumulates in tangles in the nerve cells in the brains of people with Alzheimer’s disease and other disorders that are collectively termed “taupathies.” Partly because of his research, scientists now believe that tau has a critical role in causing dementia in Pick’s disease and Alzheimer’s disease and movement problems in PSP and other atypical parkinsonian disorders.

—To read more about this, please visit www.mayoclinic.org/health/Nerve/Potamkin-Prize/DS00166/index.html.

Cobham Awarded U.S. Navy Aircraft Contract

Cobham has been awarded a contract from the U.S. Navy to develop an advanced, oxygen-generating life support system for use by a broad range of fighter, patrol, and military transport aircraft. Cobham has been installing On Board Oxygen Generator Systems (OBOGS) throughout the Navy on both fixed wing and rotary aircraft for more than 20 years. Cobham Life Support’s patented and unique ceramic membrane oxygen generating technology produces high purity oxygen suitable for military, medical, and aviation applications. Instead of filling and shipping multiple cylinders of oxygen, the Cobham system generates oxygen at the point where it is used, eliminating the need for delivery and storage. The technology requires no support personnel, and it is scalable to meet the oxygen demands of any base with size and weight appropriate for deployment to remote forward operating bases. The work on this contract will be performed in Davenport, IA, and is expected to be completed in February 2016. The contract was awarded by the U.S. Naval Air Warfare Center Aircraft Division at Patuxent River, Maryland.

—For more, please visit www.cobham.com/media/230420/376%20-%20cobham%20aircraft%20contract%20376%20develop%20advanced%20life%20support%20contract.pdf.

Wyle Teams with Northrop Grumman on Life Support Tasks

Wyle has teamed with Northrop Grumman to perform two task orders under the A-10 Thunderbolt Life-cycle Program Support indefinite delivery, indefinite quantity contract. Wyle will perform critical systems component analysis on both task orders. Rowan Catalyst, Inc. is also a subcontractor on the work. The first task order is designed to ensure that the A-10’s operational safety, suitability, and effectiveness program is achieved and maintained by performing component analysis of critical systems and providing solutions for increased system reliability, safety, aircraft availability, and reducing maintenance requirements and man-hours. Under the second task order, called the Critical Safety Item Technical Deficiency Improvement activity, Wyle and its teammates will identify the engineering and technical data tasks required to correct critical safety item technical and acquisition data deficiencies on a life cycle basis that will help align the A-10 program with the latest requirements from the joint aeronautical logistics commanders.

—To read more about this, please visit www.wyle.com/News/Pages/03-02-2011.aspx.
Robert Orford, M.D., M.P.H., was recently elected President of the Arizona Medical Association. His term is to start in June 2011. He is Board certified in Internal Medicine, General Preventive Medicine and Public Health, Aerospace Medicine, and Occupational Medicine. Currently, Dr. Orford serves at the Mayo Clinic in Scottsdale, AZ, where he has been since 1986, has been an Assistant Professor in the Mayo Clinic College of Medicine since 1988, and also holds an Associate Professorship at the University of Texas Medical Branch in Galveston, TX.

Ioannis M. Aslanides, M.D., Ph.D., MBA, whose specialties are in aviation medicine and ophthalmology, is currently an assistant professor in Ophthalmology at Cornell in New York and Clinical Director of Emmetropia Eye Institute in Crete, Greece. He has a special interest in tracking of pilots’ eye movements.

Dr. Dave Baldwin, DAME/AME, of Bulls, New Zealand, has developed a personal pilot medical database that provides a simple query-builder, which allows review of pilot demographics, flight details, and disease profiles. It uses Borland Delphi software and lets Dr. Baldwin search various facts about his patients such as gender, type of aircraft flown, disease prevalence, etc. He gave a presentation on his database at the ASAM meeting in Canberra in September 2010.

Laura Drudi is a third-year medical student at McGill University and has returned from participating in the Students on Ice Program in Antarctica, which was designed to educate students about climate change and more specifically how human activity is affecting the polar regions. Laura will be involved in education and outreach, spreading the knowledge she has gained and inspiring others to begin planting seeds of change in order to protect the Earth.

Richard Kretschmann, M.D., CCFP, ABAM, CD, of Edmonton, Alberta, Canada, is currently serving as Flight Surgeon for the Department of National Defense.

Dolores Y. Ortega-Largo, M.D., formerly MAJ, in the Medical Corps Philippine Air Force, Manila, Philippines, has been promoted to LTC. She is a Diplomate of the Philippine Board of Psychiatry and the Philippine College of Addiction Medicine, and a Fellow of the Philippine Association of Military Surgeons.

Jerry B. Owen, D.O., M.P.H., retired Colonel, USAF, MC, CFS, who was a Contract USAF Aerospace Medicine Physician, Flying Class I program, USAFPXAM, Brooks AFB, TX, is now a Contract USAF Aerospace Medicine Physician for the Defense Language Institute, 599th AMDS, Lackland AFB, TX.

Dr. Annette Sobel of Columbia, MO, formerly a Major General in the Arizona National Guard, has retired. She is currently Assistant to the Provost for Strategic Opportunities, Adjunct Professor in Family and Community Medicine, Adjunct Professor in Electrical and Computer Engineering, Adjunct Professor, Nuclear Science and Engineering Institute, University of Missouri, and Guest Scientist at Los Alamos National Laboratory. She was recently awarded NATO recognition for lifetime service in the understanding of Weapons of Mass Destruction Threat Environment.

In Memoriam
Christopher J. Lambertsen, M.D.

Christian J. Lambertsen, M.D., died in February. Born in New Jersey in 1917, Dr. Lambertsen earned his M.D. in 1943 from the University of Pennsylvania Medical School. From 1944 to 1946, he served in the Army Medical Corps, where he was a lead trainer for O.S.S.’s underwater operations using the Lambertsen Amphibious Respiratory Unit (LARU) he developed in 1939 at Pennsylvania’s Medical School. The LARU is a closed-circuit pure oxygen rebreather which does not emit bubbles and thus was of use during World War II for underwater missions around enemy ships.

After the war, Dr. Lambertsen joined the University of Pennsylvania as an Instructor in the Department of Pharmacology. He stayed with the University throughout his career in various positions, including Assistant Professor in the Department of Pharmacology, Associate in the Department of Medicine, Professor of Pharmacology and Experimental Therapeutics and later Professor of Medicine. For a year, from 1951-1952, he served as a Visiting Research Associate Professor in the Department of Physiology at University College in London, UK.

Dr. Lambertsen was a founder and first president of the Undersea Medical Society and was Vice President of the Aerospace Medical Association (AsMA) in 1966-1967, where he later became an Emeritus Member and Fellow. His awards include AsMA’s Arnold D. Tuttle Award in 1970 and its Sidney D. Leverett, Jr., Environmental Science Award in 1979 for his role as the senior author of “Human Tolerance to He, Ne, and N2 at Respiratory Gas Densities Equivalent to He-O2 Breathing at Depths to 1200, 2000, 3000, 4000, and 5000 Feet of Sea Water” (ASEM 1977; 48:843-55). He also received the Undersea Medical Society’s Award in 1970 and, in 1978, a Commendation from the Secretary of the Navy for Service with the Oceanographic Advisory Board and a Distinguished Achievement Award for Individuals from the Offshore Technology Conference. He additionally had many other honors from both civilian and military organizations, including NASA, the Department of Defense, the U.S. Navy, the U.S. Army, and the U.S. Coast Guard.

Dr. Lambertsen was a Member of the National Academy of Engineering, a Fellow of the College of Physicians of Philadelphia, and held an Honorary Doctor of Science degree from Northwestern University. He was also a Charter Member of the American College of Clinical Pharmacology and Chemotherapy and a member of many other societies, including the American Physiological Society, the Association of Medical Colleges, the International Academy of Astronautics, the International Astronautical Federation, the International Union of Physiological Sciences, and the Society for Mathematical Biology. He wrote many papers, edited several books and proceedings, and was on the editorial board of three journals including Aviation, Space, and Environmental Medicine, in the fields of marine technology, oceanography and limnology, and space life sciences.

For more information on Dr. Lambertsen and his LARU unit, readers can visit the New York Times article on him at www.nytimes.com/2011/02/26/us/26lambertsen.html?_r=1

In Memoriam
Frederick E. Guedry, Jr., Ph.D.

Frederick E. Guedry, Jr., Ph.D., died in February. A native of New Orleans, LA, he earned a B.A. in psychology from Tulane University in 1943, an M.S. in 1948, and his Ph.D. in 1953. He received a commission as an officer from the U.S. Navy midshipman school at Northwestern University in Chicago in 1943, serving until 1946. His final posting was as commanding officer of the LST 273. During his enlistment, he participated in...
seven major invasions and 10 landings on Japanese-held islands.

Dr. Guedry taught at Newcomb College in New Orleans while working on his masters and doctorate degrees. In 1948, he began a career in research at Tulane through an Office of Naval Research contract. He also conducted research in the Research Department of the School of Aviation Medicine in Pensacola, FL. In 1954, he took a research position in the Army Medical Research Laboratory at Fort Knox, KY. He returned to NAS Pensacola in 1961, serving in a variety of positions until 1990, when he retired as Chief Scientist of the Naval Aerospace Medical Research Laboratory. After his retirement, he worked from an office at home and was associated with the Human and Machine Control Institute at the University of West Florida and with the Spatial Orientation Systems Department, Naval Aerospace Medical Laboratory, NAS Pensacola.

Dr. Guedry published over 200 articles and book chapters in the area of spatial orientation, motion sickness, and sensory motor function. He was honored in several countries for his pioneering work and was awarded the Raymond F. Longacre Award in 1968, the Eric Lijencrantz Award in 1991, and the Kent K. Gillingham Award in 2001 from the Aerospace Medical Association (AsMA). He was chairman and a member of working groups on disorientation training, simulation, and simulator sickness within AGARD, was an invited lecturer on spatial orientation and motion sickness in Canada, Greece, the Netherlands, and other NATO countries, and received the John Jeffries Medical Research Award in 1995 from the American Institute of Aeronautics and Astronautics. His expertise was sought by many organizations and agencies such as NASA, NIH, and IRRC in England to evaluate proposals, develop long-range plans for research, and serve on journal editorial boards.

Dr. Guedry was a Fellow of AsMA, the American Association for the Advancement of Science, and the American Psychological Association. He was a member of numerous professional organizations, including the Southern Society for Psychology and Philosophy, the Association for Otolaryngology, and the National Academy of Sciences. He was elected to the Barany Society in 1968. He was also chairman of the Science & Technology Committee of AsMA from 1986-1988. Shortly before his death, he joined the Air Force, where he taught at the USAF Academy in Colorado Springs, CO, as an Associate Professor in the science department from 1970-1972 and from 1975-1980. Later, he was stationed at the School of Aerospace Medicine at Brooks AFB, TX, and in 1982, he was chosen for an exchange program with the Royal Air Force at the Institute of Aviation Medicine in Farnborough, UK.

Col. Bomar received numerous awards during his 26 years of active duty and was a member of the SAFE Association, the British Biomedical Engineering Society, and the Aerospace Medical Association. After he retired from the position of Branch Chief in the Crew Technology Division in the USAF, he took a position at Biodynamic Research Corporation, where he stayed until his death.

New Members
Agapoff IV, James R., Buffalo, NY
Antonsen, Eric L., M.D., Ph.D., Cambridge, MA
Aslanden, Ioannis Minas, M.D., Ph.D., Heraklion, Crete, Greece
Boyd, Linda R., L.T.Col., USAF, San Antonio, TX
Brewer, John R., Capt., USAF, D.O., San Antonio, TX
Brough, Michael B., Capt., APO, AP
Caddell, Matthew T., D.O., M.P.H., Albany, NY
Coppi, Maggie M., Capt., USAF, Newport News, VA
Foster, Chris, LCDR, USN, Ph.D., Corpus Christi, TX
Fradi, Demerick C., Anchorage, AK
Humphrey, Jordan C., 2Lt., Hershey, PA
Jimenez, Liliana, M.D., Bogota, Columbia
Kauffman, Richard, M.D., Atlanta, GA
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Michaelis, Susan Dr., Horsham, West Sussex, UK
Nebig, Marc H., L.T.Col., USAF, MC, Bryn Mawr, PA
Newman, Michael C., Southampton, PA
Pelletier, Joseph A., Ph.D., Centerville, OH
Plante, Timm E., 2Lt., USAF, ESC, Alexandria, VA
Posselt, Bonnie, M.B., Ch.B., MRAF, Worcester, UK

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The Associate Fellows’ breakfast will feature speakers who will discuss the importance of AsMA membership and details on committee participation. Service awards and the Ellingson award will also be presented. Come to breakfast and learn what being an Associate Fellow means at AsMA!