



**ASMB** 2015–2016  
**ANNUAL REPORT**

# TABLE OF CONTENTS

## Contents

From Our President	3
Executive Council	4
Our ASMBS Staff	5
About the Society	6
Access to Care	7
Bariatric Surgery Training	9
Clinical Issues	10
Communications	11
Emerging Technologies & Procedures	12
General and Foregut Surgery Committee	13
Insurance	14
International Development	16
Membership	17
Pediatric Surgery	18
Program	19
Public Education	20
Obesity Prevention	21
Quality Improvement & Patient Safety	22
Research	24
State and Local Chapters	25
Video Committee	26
From Our Integrated Health President	27
Integrated Health Executive Council	28
IH CBN Certification	29
IH Clinical Issues and Guidelines	31
IH Communications	32
IH Membership	33
IH Multidisciplinary Care	34
IH Program and Professional Education	35
IH Support Group	36
Awards and Honors	37
Membership Growth	38
Financial Report	39
Financial Statements	40
Media Outreach and Public Relations	41
SOARD Annual Report	43
Advocacy Update	44
State Chapters	46
Corporate Council	48
The ASMBS Foundation	49

# From Our President



## Dear ASMBS Members,

As my term as ASMBS president is coming to an end, I would like to share with you a summary of our achievements over the last year.

It has been an exciting and extremely productive year. We have expanded and added several new dynamic committees such as Flexible Endoscopy, Foregut, Video Education,

Certification, Obesity Prevention, Military, Presidents Council, and Private Practice.

Working collaboratively with our committee chairs and committee members, and under the excellent coordination of our executive director Georgeann Mallory and her outstanding staff, we are currently managing close to 90 projects. Projects include quality improvement initiatives, a collaborative among military centers, and a national consumer survey of 1,500 Americans about their perceptions (and misperceptions) of obesity and its treatment.

In addition, we're working on a new and modular bariatric surgery fellowship training curriculum and a sleeve gastrectomy care path that will soon be accessible to download and implement for your own patient care. None of these could have been achieved without the exceptional engagement and strong work of our membership.

In an effort to increase membership representation and transparency, we expanded our Executive Council by two member-at-large representatives. In addition, we invited the chairs of the MBSAQIP, State Chapters, Private Practice, and Presidents Council committees to participate in our monthly Executive Council conference calls.

The state of our finances is excellent and our investment account continues to grow. Estimated annual surgical volumes continue to gradually increase, with sleeve gastrectomy clearly becoming the most popular bariatric procedure in the U.S., followed by gastric bypass and reoperative interventions.

Under Dr. John Morton's leadership, and in conjunction with over 35 medical societies, we developed at our 3rd Annual Obesity Summit, a soon to be published consensus statement on the best treatment modalities for obesity.

With over 460 submissions from ASMBS members, ObesityWeek 2016 in New Orleans has received the largest number of abstracts ever. Under the leadership of Michel Gagner MD (Chair), Nathan Zundel MD and Shanu Kothari MD (Co-chairs), and Kristie Kaufman (Operations Director), our Program Committee put together an impressive scientific and social program. The program includes outstanding postgraduate courses such as quality,

endoscopy, communications, private practice, and reoperative interventions.

Additionally there are outstanding live surgery sessions, mini-consensus meetings on current and controversial topics such as best re-operative interventions for banding and single anastomosis procedures. Together with our partner, The Obesity Society, we developed five combined scientific sessions and a debate that addresses best treatment modalities for special situations such as obesity in the elderly, adolescents, metabolic interventions, and weight regain.

The ASMBS Corporate Council, which was initiated in 2002, hit a milestone this year. As of this year, the Corporate Council has contributed over one million dollars to ASMBS education, access initiatives and special projects. This is an excellent example of how we can engage with industry partners to improve the field and serve the best interest of our patients.

The ASMBS Foundation investment had an excellent year. The Foundation supported many society-related initiatives related to research, education, and awareness. Marina Kurian, MD, ASMBS Foundation President, is hosting the Foundation's annual LEAD awards luncheon to celebrate our best and brightest. Also, the Foundation is having their "Walk from Obesity" led by a traditional New Orleans "second line" brass band.

Our PAC has experienced continuous growth during my presidency — with ObesityPAC Chair, Dr. John Morton, energizing ASMBS members around this new initiative. To date, ObesityPAC has raised over \$85,000 and sponsored several successful events in conjunction with ASMBS meetings such as Obesity Week-End and ObesityWeek 2016. During the latter, the PAC hosted a special reception for United States Senator Bill Cassidy, MD (R-LA), who has been a major champion for those affected by obesity. ObesityPAC has also supported both Republicans and Democrats -- at the presidential, congressional and state level -- who have a record of supporting the broad goals of ObesityPAC to promote better patient access to, and coverage of, evidence-based obesity treatment services.

My dear fellow members, I eagerly anticipate seeing you all in New Orleans at my presidential address to share with you my review of this outstanding year and the final results of our national survey, and to say thank you for your trust. I have known no greater honor but the opportunity and privilege to serve as your 30th ASMBS President.

Sincerely,

A handwritten signature in black ink that reads "Raul Rosenthal". The signature is written in a cursive, flowing style.

**Raul Rosenthal, MD**  
ASMBS President

# Executive Council



**President**  
Raul Rosenthal, MD



**President-Elect**  
Stacy Brethauer,  
MD, FASMBS



**Secretary/Treasurer**  
Samer Mattar, MD,  
FASMBS



**Past President**  
John M. Morton, MD,  
FASMBS



**Senior Past President**  
Ninh Nguyen, MD,  
FASMBS



**Councilperson-At-Large**  
Matthew Brengman,  
MD, FASMBS



**Councilperson-At-Large**  
Eric DeMaria, MD,  
FASMBS



**Councilperson-At-Large**  
Matthew Hutter, MD,  
FASMBS



**Councilperson-At-Large**  
Shanu Kothari, MD,  
FASMBS



**Councilperson-At-Large**  
David Provost, MD,  
FASMBS



**Councilperson-At-Large**  
Aurora Pryor, MD,  
FASMBS



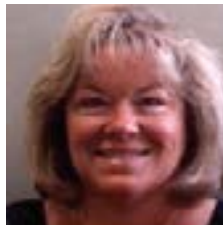
**Councilperson-At-Large**  
Ranjan Sudan, MD,  
FASMBS



**Councilperson-At-Large**  
Rachel Moore, MD,  
FASMBS



**IH President**  
Christine Bauer,  
MSN, RN, CBN



**IH President-Elect**  
Karen Flanders, MSN,  
ARNP

# Our ASMBS Staff

## **Georgeann Mallory**

**Executive Director**

## **Kristie Kaufman**

**Director of Operations**

## **Kim Carmichael**

**Financial Manager**

## **Jennifer Wynn**

**Director of Committee Affairs, Assistant to Executive Director**  
*Liaison to Executive Council*

## **Martha Lindsey**

**CME Compliance & Grants Manager**  
*Liaison to Clinical Issues, IH Clinical Issues and Guidelines, Bariatric Surgery Training, and Video Committees*

## **Stephanie Anderson**

**Program Manager**  
*Liaison to Program, IH Program and Professional Education Committees*

## **Kristina Young**

**Events Manager**  
*Liaison to Corporate Council Committee*

## **Leslie Vinson**

**State Chapters Manager**  
*Liaison to State Chapters, Access To Care, Military, Quality Improvement & Patient Safety, Insurance, Emerging Technology & Procedure Committees, and ObesityPAC*

## **Sara Bayles**

**Surgeon and Integrated Health Membership Manager**  
*Liaison to International Development and Membership Committees*

## **Christine Hawn**

**IH Membership and CBN Manager**  
*Liaison to IH Executive Council, IH Support Group, IH Multidisciplinary Care Committees and IH CBN Certification Committees*

## **Reba Liddy Hernandez**

**Communication Coordinator**  
*Liaison to Communications, Public Education, Obesity Prevention, and IH Communications Committees*

## **James Osterhout**

**Director of Information Technology**

## **Linnea Erickson**

**Committee Liaison**  
*Liaison to Community/Independent Practice, Flexible Endoscopy, General and Foregut Surgery, Pediatric and Research Committees*

## **Linnea "Naya" McCarty**

**Graphic Designer**

## **Amie Buehler**

**Front Office Coordinator and Staff Assistant**

# About the Society



## THE MISSION OF THE AMERICAN SOCIETY FOR METABOLIC AND BARIATRIC SURGERY

### Our Universal Goals:

- › Improve patient care
- › Advance the science and understanding of metabolic and bariatric surgery
- › Foster interdisciplinary communication on obesity and obesity related conditions
- › Improve access to metabolic and bariatric surgery
- › Provide high quality education and support for our members
- › Increase membership, retention, and value
- › Increase public understanding of obesity and metabolic and bariatric surgery



# Access to Care

Wayne English, MD

The Access to Care Committee has the principal mission to assist patients affected by metabolic disease and obesity in obtaining appropriate, safe and effective medical care. Committee activities include: developing the strategic vision and strategies to make improvement in access to care; advocating for legislative changes on the state and local level that will affect health care coverage; addressing the politics, policies and ethics of access issues on the local, state and national levels; and bringing together initiatives/partners to effectively address access issues.

## Committee Members

### Chair

Wayne English, MD

### Co-Chair

Brandon Williams, MD  
John D. Scott, MD FASMBS

### Executive Council Liaison

John Morton, MD FASMBS

### OAC Liaisons

Chris Gallagher  
Joe Nadglowski

### ASMBS Staff Liaison

Leslie Vinson

### Members

Roc W. Bauman, MD FASMBS  
Luke M. Funk, MD MPH FASMBS  
Rachel L. Moore, MD FASMBS  
Gustavo E. Bello, MD  
Philip Gachassin, MD FASMBS  
Fernando Bonanni, MD FASMBS  
Michel Gagner, MD  
Robert W. O'Rourke, MD  
Allen F. Browne, MD  
Pradeep Pallati, MBBS  
Arthur M. Carlin, MD FASMBS  
Jeff A. Genaw, MD FASMBS

Carl M. Pesta, DO FASMBS  
Carol M. Church, RN MS Ed MA  
CNS-BC  
Anna R. Ibele, MD  
Kinga A. Powers, MD PhD  
George M. Eid, MD  
Robert B. Lim, MD FASMBS  
Jerome F. Schrapps, MD  
Dan Eisenberg, MD  
Walter Lindstrom Jr., Esq.  
Brian R. Smith, MD  
Tammy S. Fouse, DO  
Corrigan L. McBride, MD

FASMBS  
Mary Lou Walen

## Super STARS & STARS (State Access Representatives):

### Super STARS

Valerie J. Halpin, MD FASMBS (NW & OR STAR)  
Teresa L. LaMasters, MD FASMBS (UMW)  
Ajay K. Upadhyay, MD (SW & CA STAR)  
Matthew M. Hutter, MD MPH FASMBS (NE)  
Richard M. Peterson, MD MPH FASMBS (LMW)  
Brandon Williams, MD FASMBS (SEC)

### STARS

Gary J. Anthonie, MD FASMBS (NE)  
Luis A. Garcia, MD MBA (ND)  
Ann M. Rogers, MD FASMBS (PA)  
John W. Baker, MD FASMBS (AR)  
John P. Gens, MD (NH)  
Jayaraj Salimath, DO BSN (IL)  
Charles F. Bellows, MD (NM)  
Troy M. Glembot, MD FASMBS (VA/WV)  
Rahul Singh, MD (DE)  
Robert A. Berger, MD (AZ)  
James J. Hamilton, Jr., MD (KS)  
Daniel A.P. Smith, MD (MN)  
Brenda M. Cacucci, MD FASMBS (IN)  
Kevin Helling, MD (WY)

Joshua Steiner, MD (KY)  
Robert O. Carpenter, MD MPH FASMBS (TX)  
Sarah M. Kitchen, RN BSN CBN (OK)  
Ranjan Sudan, MD FASMBS (NC/SC)  
Joseph E. Chebli, MD FASMBS (FL)  
Shanu N. Kothari, MD FASMBS (WI)  
Brian Sung, MD FASMBS (WA)  
Matthew C. Christophersen, MD (IA)  
Jamie P. Loggins, MD (ME)  
Darren S. Tishler, MD FASMBS (CT)  
Terence J. Clarke, MD FASMBS (NY)  
Matthew A. Metz, MD (CO)  
Michael A. Todd, MD (AK)  
Pamela R. Davis, BSN MBA RN CBN (TN)  
Christopher J. Northup, MD (OH)  
Shawn Tsuda, MD (NV)  
Titus D. Duncan, MD (GA)  
Jennifer O'Flarity, RN BSN (MS)  
Kristin J. Turek, CNP (SD)  
J. Chris Eagon, MD FASMBS (MO)  
Alexander Onopchenko, MD (NJ)  
Sivamainthan Vithianathan, MD FASMBS (RI)  
Todd Foreman, MD FASMBS (AL)  
Sheila Partridge, MD FASMBS (MA)  
Eric T. Volckmann, MD (UT)  
Patrick M. Forgione, MD (VT)

John R. Pender, MD (MT)  
David G. Von Rueden, MD (MD)  
Steven Fowler, MD FASMBS (HI)  
Maureen T. Quigley, APRN (NH)  
Kevin Wasco, MD FASMBS (WI)  
Alian G. Garay, MD (ID)  
William Richardson, MD FASMBS (LA)  
Matthew J. Weiner, MD (MI)

### Industry Ad Hoc

**Ethicon**  
Henry Alder  
Natalie Heidrich  
Gary Richardson  
**Covidien**  
Gina Baldo  
Vincent Zeringue  
Michael Morseon  
**Apollo Endosurgery**  
Janet S. Fike, MHA, FACHE, CPC-H, CPMA  
Ted Stephens  
Michael Oberg

Continue on following page ➔

# COMMITTEE REPORTS

## Committee Goals:

### Short Term:

- › Essential Health Benefits Toolkit
- › Develop “Bundled Payment” Task Force
  - › Meetings already held in MS, WA, TN to develop bundled payment plans; anticipate other states to have similar meetings in the near future
  - › Developing Toolkit and Coverage Map for monitoring trends for bundled payments decisions in each state, and possibly for industry and private insurers
- › Revision Language HCSC - BCBS IL, TX, OK, NM, MT
  - › Comments submitted regarding restrictive language on band revisions
- › Develop “Patient Denials Due to Pre-Op Weight Gain” Task Force
  - › Collecting denial examples from committee members
- › Discrepancy between BCBS Distinction Center and MBSAQIP Requirements
  - › Insurance Companies’ “Quality” Centers and MBSAQIP Centers survey to determine how many MBSAQIP centers are not BC, AETNA, etc. quality centers
- › Critical Illness Supplement Product
- › Legislative Directive for Metabolic Surgery Mandate in Florida Task Force - Dr. Joseph Chebli Lead

### Mid-Term:

- › ObesityWeek 2016 Access to Care Symposium - topics and speakers in progress August 2016
- › VA Bariatric Surgery Task Force
  - › Members: George Eid, Dan Eisenberg, Pradeep Pallati, Robert O'Rourke, Carl Pesta, Brian Smith, Kinga Powers, Chris Gallagher, Brandon Williams, Wayne English
  - › Developing network of VA surgeons within each of the 23 VISNs to expand bariatric surgery access to all veterans
  - › Patient education, legislative action website and social media campaign
  - › Washington DC campaign
    - › Director of VA
    - › Veterans Affairs Committee
    - › Each VISN surgeon champion will be asked to request a meeting with regional directors
    - › Identify gaps (void VISN)
- › Meeting with Military Committee Chair and Co-Chair on September 15th, 2016

### Long-Term:

- › Jump starting national campaign to abolish insurance mediated medical weight loss delays
- › Continuing efforts with “Leave No States Behind” campaign
  - › Affordable Care Act/Health Insurance Exchanges
  - › Convert 27 “No” states to “Yes” states
  - › Monitor filed complaint
- › Medicaid Coverage in all 50 States: Only MONTANA remains
- › State employee Coverage in all 50 States: PA, SC, MT, ID, WI
  - › WI activity
    - › PILOT programs in: GA, OK, AR, LA, UT
    - › Pilot completed in GA - monitoring activity closely
- › Advocacy Efforts Tracking
- › Medtronic Local Level Support for Select ASMBS STARs Meeting 7/28/16
  - › Medtronic creating plan for the states of TX, FL, PA, LA
- › Bundle payment plan tracking and analysis monitor the development of bundled payment plans and tracking their impact on access to care

## Specific Projects that Achieve Goals and Objectives:

- › “Bundled Payment” Task Force, First Meeting 5/4/16; Second Meeting 6/14/16
  - › Members: John D. Scott (Lead), Wayne English, Brandon Williams, Joseph Chebli (FL/BARINet), Dawn Gabriel (Ethicon), Natalie Heidrich (Ethicon), Mike Morseon (Medtronic), Joe Nadglowski (OAC), Chris Gallagher (Washington)
  - › Draft “Bundled Payment Considerations ASMBS Toolkit Outline” presented at Obesity WeekEnd SPI; determining next steps
- › “Patient Denials Due to Pre-Op Weight Gain” Task Force, First Meeting 8/24/16
  - › Members: John D. Scott (Lead), Wayne English, Brandon Williams, Teresa LaMasters, Jamie Loggins, Anne Rogers
  - › Draft letter to Aetna insurance in editing process
- › Monthly Access to Care Meetings
- › ObesityWeek Access to Care Symposium will be held November 2nd, 2016
- › National VA is developing a task force to address obesity treatment issues amongst veterans
  - › Convert 27 “No” states to “Yes” states
  - › Will monitor activity
  - › Developing toolkit
  - › Chief of Surgery and Regional Director Lists Generated
- › State-specific Complaints from ASMBS Attorney under Dr. Morton’s Direction
- › OCAN Letter Focusing on Obesity as a Preventative Service to Insurance Commissioners
- › WI article in newspaper demonstrating frustration with patient unable to undergo surgery due to lack of coverage
- › Successful at converting Colorado from “No” state to “Yes” state within the ACA
- › Medicaid Program to Cover Sleeve Gastrectomy effective July 1, 2016 in South Carolina and North Carolina; Connect June/July 2016: <http://connect.asmb.org/june-2016-sleeve-south-carolina.html>
- › Created an Advocacy Efforts document - updated monthly by STARs, Super STARs, Industry Ad Hoc Members, OAC, Chris Gallagher

## Committee Objectives:

- › Increase awareness of access issues and progress among public and members
- › Identify reasonable targets for progress in short mid and long term

## 2016 Completed Projects

- › ObesityWeek 2016 Access to Care Symposium will be held November 2nd, 2016
- › Creation of bundled payment task force
- › Initiation of campaign to modify Aetna weight gain denials policy





# Bariatric Surgery Training

*Corrigan McBride, MD FASMBS*

The Bariatric Surgery Training Committee is responsible for designing guidelines and resources for metabolic and bariatric surgery training and fellowship programs. It also certifies that trainees have received adequate training through validation of their experience and the development and continuous updating of examinations. The mission of the committee is to raise and maintain the quality and safety standards of metabolic and bariatric surgery through provision of standard curricula, supportive resources, and evaluation of the training of bariatric surgeons, fellows and residents.

## Committee Members

### Chair

Corrigan McBride, MD FASMBS

### Co-Chair

Keith Gersin, MD FASMBS

### Executive Council Liaison

Ranjan Sudan, MD, FASMBS

### Fellowship Council

Daniel B. Jones, MD, FASMBS

### ASMBS Staff Liaison

Martha Lindsey

### Members

Melissa Bagloo, MD

Morgan Bresnick, MD

Judy Chen, MD, FASMBS

Gregory Dakin, MD

Eric DeMaria, MD, FASMBS

Karen Flanders, MSN, ARNP

Matthew Fourman, MD

William Gourash, ARNP

Brandon Grover, DO, FASMBS

James Lau, MD

Matthew Martin, MD, FASMBS

Samer Mattar, MD, FASMBS

Rachel Moore, MD, FASMBS

Nissin Nahmias, MD

Carl Pesta, DO, FASMBS

Dana Portenier, MD

John Price, MD, FASMBS

Prashanth Ramachandra, MD

Raul Rosenthal, MD, FASMBS

Michael Russo, MD

Philip Schauer, MD

Bruce Schirmer, MD

Scott Shikora, MD, FASMBS

## Committee Goals

### Short Term:

- > ASMBS Certificate of Satisfactory Training in Bariatric Surgery Fellowship (award annually)

### Mid Term:

- > Create a Competency Based Fellowship Curriculum for Broad Adoption

### Long Term:

- > Work towards a designated Board added qualification through the ABS Task Force.
- > Create a web-based resource for residents and fellows that has the fundamentals of bariatric surgery, based in curriculum from Fundamentals of Bariatric Surgery course.

## Committee Objectives

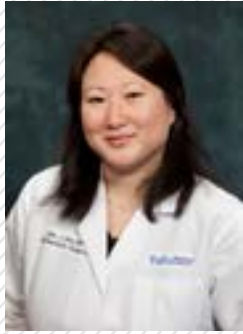
- > Establish the standard for bariatric surgery training by trainees in general surgery and advanced fellowship training.
- > Collaborate with the Endoscopy Committee and the Allied Health Committees with regards to training issues that cross into their domains

## Specific Projects that Achieve Goals and Objectives

- > Application window is closed; 2015-16 applications are currently under review by the committee members.
- > 10 programs (16 fellows) are participating in a pilot during the 2016-7 academic year
  - >> Curriculum
  - >> EPA based evaluation tools
  - >> SIMPL feedback tools
- > Develop evaluation for the pilot program to receive feedback from the Program Directors, Faculty & Fellows
- > Adjust curriculum as needed

## 2016 Completed Projects

- > Submit manuscript to SOARD regarding the Competency Based Fellowship Curriculum
- > Pilot Kick off- all program directors and fellows oriented to the new curriculum
  - >> Several fellows have begun taking the multiple choice tests for the initial modules
- > SIMPL Kick off- program directors and fellows have been oriented to the app that allows immediate feedback on fellow performance.



## Clinical Issues

Julie Kim, MD, FASMBS

The mission of the Clinical Issues Committee is to create evidence-based guidelines and position statements regarding clinical issues to enhance quality in metabolic and bariatric surgery patient care and to support ASMBS member practices. The Clinical Issues Committee also performs systematic review of existing statement and guidelines, research the current data and makes appropriate updates and revisions as evidence becomes available. The committee is also charged with developing time-sensitive statements or recommendations related to new developments in the field of bariatric surgery.

### Committee Members

**Chair**

Julie Kim, MD, FASMBS

**Co-Chair**

Ann Rogers, MD, FASMBS

**Executive Council Liaison**

Shanu Kothari, MD, FASMBS

**IH Clinical Issues Committee Liaison**

Stephanie Sogg, PhD

**ASMBS Staff Liaison**

Martha Lindsey

**Members**

Mohamed Ali, MD  
 Ali Aminian, MD  
 Dan Azagury, MD  
 Naveen Ballem, MD  
 Stacy Brethauer, MD, FASMBS  
 Guilherme Campos, MD, FASMBS  
 Robert Carpenter, MD, MPH, FASMBS  
 Jonathan Carter, MD, FASMBS  
 Eric DeMaria, MD, FASMBS

Dan Eisenberg, MD  
 Maher El Chaar, MD  
 Saber Ghiassi, MD, MPH, FASMBS  
 Brandon Grover, DO, FASMBS  
 Isam Hamdallah, MD, FASMBS  
 Marcelo Hinojosa, MD  
 Jason Michael Johnson, DO  
 Mark Kligman, MD, FASMBS  
 Fady Moustarah, MD  
 Sabrena Noria, MD, PhD, FASMBS  
 Robert O'Rourke, MD

Pavlos Papasavas, MD, FASMBS  
 Manish Parikh, MD, FASMBS  
 Anthony Petrick, MD, FASMBS  
 Keith Scharf, DO, FASMBS  
 Bruce Schirmer MD  
 David Schumacher, MD  
 Brian Smith, MD, FASMBS  
 Harvey Sugerman, MD  
 Dana Telem, MD, FASMBS

### Committee Goals:

**Short-Term:**

- > Identify existing and emerging gaps in guidelines/position statements
- > Increase understanding of clinical issues
- > Establish and disseminate standards and protocols
- > Establish timeline based on relative clinical importance of issues

**Mid-Term:**

- > Ongoing identification of issues to develop statements and provide topics for Executive Council Review
- > Ongoing review/revision of all existing and new statements

**Long-Term:**

- > Joint guidelines with American Heart Association and American Diabetes Association
- > Provide ongoing clarity on issues related to bariatric and metabolic surgery

### Status of 2016 Activities

- > Call ASMBS Updated Position Statement on Insurance Mandated Preoperative Weight Loss Requirements
  - >> Final version reviewed and approved by Executive Council on April 1.
  - >> Published SOARD 6/2016
- > ASMBS Policy Statement on Single Anastomosis of Duodenal Switch (SADS)
  - >> SADS statement submitted to SOARD 4/23/16
  - >> Published SOARD 6/2016
- > New Statement: Reactive Hypoglycemia after Bariatric Surgery
  - >> After Member Comment, Executive Council requested edits before final publication. Writing group working on requested edits.
  - >> Resubmitted to Executive Council awaiting approval for submission to SOARD
- > New Statement: Durability of Weight Loss after Bariatric Surgery/Prevention of Weight Regain
  - >> Literature review completed 6/10/16

- >> Draft awaiting final edits with plan to distribute/discuss at CIC meeting with timeline draft to Executive Council for approval after ObesityWeek
- > New Statement: Weight Bias and Discrimination – Eric DeMaria participating but is not the lead. Writing group to be recruited at ObesityWeek.
  - >> After Member Comment, Executive Council requested edits before final publication. Writing group working on requested edits.
  - >> Resubmitted to Executive Council awaiting approval for submission to SOARD

### Status of Activities from Late 2015

- > ASMBS Position Statement on Intra-Gastric Balloon Therapy – Published SOARD 5/2016
- > ASMBS Position Statement on Vagal Blocking Therapy for Obesity – Published SOARD 5/2016
- > ASMBS Position Statement on Long-Term Survival Benefit after Bariatric Surgery – Published SOARD 5/2016
- > Collaborative statement with NLA, OMA and ASMBS re: Lipids and Bariatric Surgery – Part 2 of 2 (bariatric surgery section); has been submitted to SOARD, currently in press as an uncorrected proof; will be published in March/April issue
- > ASMBS Position Statement on Alcohol Use Before and After Bariatric Surgery – published in SOARD February 2016.
- > Accreditation statement – Submitted and accepted for publication by SOARD 4/2016



# Communications

*Daniel Herron, MD, FASMBS*

The aim of the Communications Committee is to facilitate communication between the ASMBS and its members, potential members and the public. This includes making recommendations on new opportunities and technologies to enhance communications; working with the ASMBS staff to develop methods for timely identification of pertinent journal articles, special reports, media events, and Society activities appropriate for promotion; and maintaining active communication channels with the ASMBS President and the Executive Council.

## Committee Members

**Chair**  
Daniel Herron, MD, FASMBS

**Co-Chair**  
Richard Peterson, MD, FASMBS

**Immediate Past-Chair**  
Brian Smith, MD

**Executive Council Liaison**  
Ranjan Sudan, MD

**IH Communications Liaison**  
Nathaniel Sann, MSN CRNP  
FNP-BC

**Liaison to Public Education**  
Richard Peterson, MD, MPH

**ASMBS Staff Liaison**  
Reba Liddy Hernandez

**Members**  
Janey Pratt, MD  
Joshua B. Alley, MD  
Jonathan Finks, MD  
Carlos Galvani, MD  
Valerie Halpin, MD  
Marcelo Hinojosa, MD  
Marina Kurian, MD

D. Wayne Overby, MD  
Allan Okrainec, MD  
Aileen A. Murphy, DO  
Emma Patterson, MD  
Kevin Reavis, MD, FACS  
Michael A. Russo, MD  
Shawn Tsuda, MD  
Duc C. Vuong, MD  
Matthew J. Weiner, MD

## Committee Goals:

### Short Term:

- > Continue updates to ASMBS.org website and ASMBS Member Database
- > Create an ASMBS LinkedIn page to disseminate information

### Mid Term:

- > Continue to use social media as a platform for ASMBS
- > Work with ASMBS staff to identify and implement optimal ObesityWeek app
- > Collaborate with the Integrated Health Communication Committee to help them create bi-monthly webinars

### Long Term:

- > Create bi-monthly webinars for ASMBS members
- > Work with the Public Education Committee to create illustrated patient videos

## Specific Projects that Achieve Goals and Objectives:

- > ASMBS IT launched member dashboard and online renewal tools for 2015
- > Currently working on expanding the potential uses for the new ASMBS online member database
- > Committee continues to review and provide feedback about the ASMBS.org website
- > ASMBS Social Network Updates
  - » Facebook page – 4,094 likes as of 9/9/16
  - » Twitter – 11.7K followers as of 9/9/16
  - » SOARD Facebook Journal Club – 870 members as of 9/9/16
- > First webinar was launched Wednesday, March 9, 2016 with over 100 participants. Topic: Gastric Balloon Debate.
- > Second Webinar took place Wednesday, May 4, 2016 with over 100 attendees. Topic: The Band is Coming Out – Now What? Sleeve v. Bypass Debate
- > Moderated SOARD Facebook Journal Clubs for May, June and August



# Emerging Technologies & Procedures

*George M. Eid, MD*

The Emerging Technology and Procedures Committee advises the Executive Council, other committees and general membership of new technologies and procedures and how these may impact current and future care of patients. The goal of the committee is to not only evaluate these technologies and procedures, but also to better educate our members on how they can evaluate and possibly incorporate them into practice.

## Committee Members

### Chair

George M. Eid, MD

### Co-Chair

Erik B. Wilson, MD

### Executive Council Liaison

Aurora D. Pryor, MD

### ASMBS Staff Liaison

Leslie Vinson

### Members

Mohamed R. Ali, MD

Matthew D. Kroh, MD FASMBS

Allen Browne, MD

Shanu N. Kothari, MD FASMBS

Gregory F. Dakin, MD

Matthew Y. Lin, MD

Paul E. Enochs, MD FASMBS

Emanuele Lo Menzo, MD PhD  
FASMBS

Keith S. Gersin, MD FASMBS

Dean J. Mikami, MD

Barry Greene, MD

Jaime Ponce, MD FASMBS

Valerie J. Halpin, MD FASMBS

David A. Provost, MD FASMBS

Donald T. Hess, MD Michael A.

Russo, MD

Matthew M. Hutter, MD MPH

FASMBS

Alan Saber, MD

Leon V. Katz, MD

Konstantinos Spaniolas, MD

Zeid M. Keilani, MD

Natan Zundel, MD FASMBS

## ASMBS Missions Met by the Committee

- > To improve the care and treatment of people suffering from obesity
- > To advance the science and understanding of metabolic and bariatric surgery
- > To be the recognized authority and resource on metabolic and bariatric surgery

## Committee Goals

### Short-Term

- > Obesity Week-End 2016 Emerging Technology Innovation Summit to Engage Industry
- > Early access to new technologies

### Mid-Term

- > New procedures – committee will be involved as part of a process for new procedures and technologies
- > More emphasis and presence at our annual meetings
- > IRB Templates - create a Toolbox for New Procedures on ASMBS website; collect templates via committee members

### Long-Term

- > Establish ASMBS as one of the main societies for reference and authority for new procedures especially endoscopic interventions

## Committee Objectives

- > Engage all stakeholders in the field of emerging bariatric and metabolic procedures, in the form of educational sessions or by inviting them to contribute data and new information to our web-based educational tools

## Specific Projects that Achieve Goals and Objectives

- > Hosted Emerging Technology Obesity Week-End 2016 Innovation Summit; Invited Industry guests using committee members' disclosure relationships and industry knowledge
- > Created an Emerging Technology Industry letter of invitation and online form
- > Maintained the Clearing House, a list of contacts for all emerging technology industries using ASMBS faculty disclosure information

- > Voting member of the new procedure committee
- > Emerging Technology Innovation Summit at ObesityWeek 2016
- > Dedicated Innovation Summit
- > Continue to engage industry with form on website, other activities – increase awareness via website
- > If the Emerging Technology Innovation Summit at ObesityWeek 2016 goes well have an Emerging Technology Summit in Palo Alto in 2017
- >

## 2016 Completed Projects

- > Obesity Week-End 2016 Emerging Technology Innovation Summit
- > Active participant of the new procedure committee
- > Clearing house for new industries



# General and Foregut Surgery Committee

**Anthony Petrick, MD FASMBS**

The mission of the General and Foregut Surgery Committee is to develop evidence-based guidelines and identify unique diagnostic and treatment strategies required for the management of general surgical and foregut disease in patients undergoing metabolic and bariatric surgical procedures.

## Committee Members

<p><b>Chair</b> Anthony Petrick, MD FASMBS</p> <p><b>Co-Chairs</b> Aurora Pryor, MD FASMBS Ranjan Sudan, MD FASMBS</p> <p><b>Executive Council Liaison</b> Ranjan Sudan, MD FASMBS</p> <p><b>ASMBS Staff Liaison</b> Linnea Erickson</p>	<p><b>Members</b> Adam Beall, MD Peter Benotti, MD Miguel Burch, MD FASMBS Diego Camacho, MD Patrick Domkowski, MD FASMBS Sofiane El Djouzi, MD Neil Floch, MD Anthony Gonzalez, MD Colleen Kennedy, MD FASMBS</p>	<p>Adolfo Leyva-Alvizo, MD Emanuele Lo Menzo, MD FASMBS Alexander Onopchenko, MD David Parker, MD John Romanelli, MD Hazem Shamseddeen, MD FASMBS Ian Soriano, MD FASMBS William Strodel, MD</p>	<p>Andre Teixeira, MD FASMBS</p>
--	--	--	----------------------------------

## Committee Goals:

### Short Term:

- > Develop GERD and Sleeve Gastrectomy White Paper
- > Develop Joint White Paper on management of hernias with bariatric surgery in conjunction with the Clinical Issues Committee

### Mid Term:

- > Obesity Week-End 2016 Foregut Course

### Long Term:

- > Develop White paper on bariatric surgical options for gastroparesis
- > Develop White paper on management of gallbladder disease in bariatric patients
- > Develop White paper on the role of vagotomy in the treatment of weight loss and GERD
- > Obtain funding for research study of Linx device for the treatment of GERD after LSG and LRYGB

## Specific projects in progress to achieve goals and objectives:

- > Joint White Paper on management of hernias with bariatric surgery with Clinical Issues Committee in progress
- > GERD and Sleeve Gastrectomy White Paper in progress
- > Survey for submission to Executive Council for approval
- > Obesity Week-End 2016 Course: Foregut Issues: Before and After Bariatric Surgery
- > Established Trello Board including Literature for GERD and Hernia White Paper

## ASMBS Mission(s) Met by the Committee

- > To improve the care and treatment of people suffering from obesity
- > To advance the science and understanding of metabolic and bariatric surgery

To be a highly valued specialty society that serves the educational professional needs of its diverse membership

## Committee Objectives

- > Increase awareness of the incidence of common general surgical and foregut problems in patients before and after metabolic and bariatric surgery
- > Establish and disseminate guidelines and protocols for the management of general surgical and foregut problems before and after metabolic and bariatric surgery

## 2016 Completed Projects

- > Obesity Week-End 2016 Course: Foregut Issues: Before and After Bariatric Surgery
- > Trello Board established with Literature for GERD and Hernia White Paper
- > Trello Board established with specific roles of committee members for GERD and Hernia White Paper



# Insurance

*Helmuth Billy, MD*

The Insurance Committee bridges the gap between the details of insurance coverage and coding and the practicing surgeon. We focus on education of the surgeon and office administrative staff on the trends and changes in insurance coverage, coding and insurance access. The committee acts as a liaison between the ASMBS, insurers and CMS on the specifics of coverage for bariatric procedures. The committee seeks to identify new and commonly performed bariatric procedures and acts as a champion for the development of CPT codes for effective and efficient reimbursement. The committee acts as a concert with other committees of the ASMBS on acute and chronic access to care issues.

## Committee Members

<p><b>Chair</b> Helmuth Billy, MD</p> <p><b>Co-Chair</b> Ashutosh Kaul, MD FASMBS</p> <p><b>Executive Council Liaison</b> Stacy Brethauer, MD FASMBS</p> <p><b>ASMBS Staff Liaison</b> Leslie Vinson</p>	<p><b>Members</b> Michael Barker, MD Matthew Brengman, MD FASMBS, Past Chair Yijun Chen, MD Ann Couch, RN CBN CPC Wayne J. English, MD FASMBS Matthew M. Hutter, MD MPH FASMBS Gregg H. Jossart, MD Ben Kocaj, MBA</p>	<p>Peter C. LePort, MD FASMBS Walter Lindstrom Jr., Esq. Rachel L. Moore, MD FASMBS Mario P. Morales, MD Alexander Onopchenko, MD Jaime Ponce, MD FASMBS Beth A. Schrope, MD Don Jay Selzer, MD Mary Lou Walen Kevin Wasco, MD FASMBS Thomas J. White, MD FASMBS</p>	<p><b>Industry AD HOC Appointed</b> Natalie Heidrich, Ethicon Chris Gallagher, Washington Liaison Nicole Gier, Ethicon</p>
--	--	--	--

## Committee Goals:

### Short Term:

- > Insurance Course at Obesity Week-End 2016
- > Toolkit: determine impact/feedback/data on uses; send message to members that it exists
- > Create “How to Survive an RAC Audit” checklist
- > Work with Executive Council on necessity and timing of any new code generation proposal for intragastric balloon placement
- > Regularly evaluate and update the CPT and ICD-10 Codes for Bariatric Surgery for the website
- > Update FAQ and online information for the website
- > Develop communication/alerts to inform members about new codes
- > Handle hotline via insurance@asmbs.org to respond to member inquiries regarding insurance issues
- > Create updates for dissemination to membership via Connect and the website
- > Maintain communication with Insurance carriers’ Medical Directors, ASMBS State Chapter Presidents regarding policy changes

### Mid Term:

- > Develop a resource to educate Members regarding RAC (Recovery Audit Programs)
- > How to understand the audit process, how documentation affects outcome of an audit; currently in Checklist form, Connect article can be submitted for publication following Obesity Week-End 2016
- > Develop a resource for our Members that describe the direct implications on the future ICD-10 on bariatric codes, diagnosis, etc.
- > Communicate with State Chapters and Access Committees to identify local & national insurance issues
  - » Current and ongoing issues include Medicaid and private insurance Bundled payment proposals, Blue Cross and United Healthcare 6 month Medically supervised weight management,

and other access to care barriers

- » Currently primary issue of concern is with respect to Aetna’s requirement for medically supervised preoperative weight management program during which there can be no net weight gain as a condition of approval for bariatric surgery in collaboration with the Access to Care Committee
- » Initiate Discussions with Blue Cross of California and United Healthcare to consider revising or eliminating mandatory
- > Assisting in evaluation of regional discrepancies regarding access to care and Medicare guidelines secondary to apparent “crosswalk” issues as they arise
- > Continue to coordinate with Program Committee on updating insurance coding educational courses at ObesityWeek 2016
- > Monitor AMA CPT or RUC issues that would involve bariatric surgery: continue to develop and pursue need for CPT Codes for bariatric issues as they arise and approach AMA CPT panel as required

### Long Term:

- > Achieve leadership on insurance issues
- > Pursue and negotiate with major carriers a plan to implement exceptions to 6 month medically supervised weight management criteria or once in a lifetime bariatric surgery restrictions based on evidence based medicine
- > Prepare for bariatric CPT codes review when notified
- > Be a resource to ASMBS State Chapters, Access, Membership and their staff
- > Expand the utilization of the insurance committee as a resource to ASMBS State Chapters, Access, Membership and their staff
- > Develop and implement a resource guide for understanding Medicare Guidelines; assist members in improving documentation of having met Medicare guidelines prior to performing bariatric procedures:
  - » Implementation of a step by step algorithm designed to assist Members in understanding the Medicare Recovery Audit Program

Continue on following page ➤

## COMMITTEE REPORTS

- » Outline the process from start to finish of the Medicare Recovery Audit Program
- » Assist Members in improving Medicare documentation and demonstration of having met criteria prior to performing bariatric procedures

### Specific projects in progress to achieve goals and objectives:

- > CPT coding for Biliopancreatic Diversion/Duodenal Switch, Laparoscopic Application: Survey of DS surgeons completed May 2014 for the application process. Executive Council to make the final determination once application completed as to whether ASMBS will pursue CPT code with AMA
- > Regularly evaluate and update the CPT and ICD-9 Codes for Bariatric Surgery for the website
- > Handle hotline via insurance@asmbs.org to respond to member inquiries regarding insurance issues.
- > Determine FAQ for dissemination to membership via e-newsletter and web site and continue to develop communication/alerts to inform members about new codes and updated insurance coverage changes
- > Coordinated with Program Committee to develop Sprint Event 2014 and ObesityWeek 2014 business and coding courses
- > Published articles in connect – the official news magazine of the ASMBS

### Future Plans:

- > Continue to work with Program Committee to develop Coding and Business Courses for Spring Event and ObesityWeek
- > Continue process for CPT application for Laparoscopic Duodenal Switch

- > Educate members on appropriate coding and changes in coding
- > Develop guidelines for appropriate inpatient and outpatient bariatric classification
- > Continue coding hotline
- > Continue communication process with State Chapters and Access on local and national Insurance issues
- > Continue involvement and guidance toward bariatric reoperation CPT codes
- > Refine and publish post-operative bariatric laboratory testing coding guide



# International Development

*Natan Zundel, MD, FASMBS*

The ASMBS International Development Committee works to integrate international members from around the world by developing relationships between the ASMBS and its members with organizations and institutions in foreign countries with similar goals and activities; facilitating international collaboration and cooperation to advance the treatment of obesity through education, research and policy initiatives; and maintaining an active relationship with the International Federation for the Surgery of Obesity and Metabolic Diseases.

## Committee Members

<p><b>Chair</b> Natan Zundel, MD, FASMBS</p> <p><b>Co-Chairs</b> Homero Rivas, MD, FASMBS Samuel Szomstein, MD, FASMBS</p> <p><b>Executive Council Liaison</b> Samer Mattar, MD, FASMBS</p> <p><b>IFSO Coordinator</b> Samer Mattar, MD, FASMBS</p> <p><b>IFSO Past President</b> Natan Zundel, MD, FASMBS</p> <p><b>IFSO President</b> Kelvin Higa, MD, FASMBS</p>	<p><b>IFSO President-Elect</b> Jacques Himpens, MD</p> <p><b>Ad Hoc Member, IFSO Executive Director</b> Manuela Mazzarella</p> <p><b>ASMBS Staff Liaison</b> Sara Bayles</p> <p><b>Members</b> Sanjay Agrawal, MD, FASMBS John B. Dixon, MD PhD Francesco Papadia, MD Ahmed R. Ahmed, MD Michel Gagner, MD</p>	<p>Rana Pullatt, MD, FASMBS Ramzi Alami, MD FACS Manoel Galvao Neto, MD Blanca Rios, MD Werener Andrade, MD, FASMBS Yitka Graham, Researcher Alan Saber, MD Dan Azagury, MD Sayeed Ikramuddin, MD Shashank S. Shah, MS Moataz Bashah, MD, FASMBS Mousa Khoursheed, MD Ian S. Soriano, MD, FASMBS Estuardo J. Behrens, MD</p>	<p>Muffazal Lakdawala, MD Aley El-Din Tohamy, MD Cynthia-Michelle Borg, MD Joo-Hoo Lee, MD Antonio Torres, MD, PhD Diego R. Camacho, MD Wei-Jei Lee, MD Ramon Vilallonga, MD, PhD Guilherme Campos, MD, FASMBS Abdelrahman Nimeri, MD Paul Wizman, MD, FASMBS Minyoung Cho, MD Pablo Omelanzuck, MD Peng Zhang, MD</p>
---	--	--	--

## ASMBS Mission Met by the Committee

- › To foster communication between health professionals on obesity and related conditions throughout the world

## Committee Goals

### Short-Term

- › Increase international membership - coordinate with the Membership Committee.
- › Manage all aspects of Awards for Best International Presenters - including budget, logistics, and selection criteria.
- › Develop the criteria for US sites that will host visiting international surgeons and create a listing of these programs on our website

### Mid-Term

- › Diversifying the committee with new committee members from other Countries like Kuwait, Argentina, Korea, China and more.
- › Increase attendance at ObesityWeek 2016 with more attendance from other countries
- › Conduct co-sponsored international courses

### Long-Term

- › Offering applications in other languages to facilitate the process to future International members. Languages suggested were Chinese, French, Spanish, Arabic, and Portuguese. Volunteers from the International Committee will assist in the translation process.
- › Offering applications in other languages to facilitate the process to future International members. Languages suggested were Chinese, French, Spanish, Arabic, and Portuguese. Volunteers from the International Committee will assist in the translation process.
- › Create Standardized Training Guidelines for Global Bariatric Surgery.

## Committee Objectives

- › Increase membership of international members
- › Enhance experience for international members

## 2016 Activities Accomplished to Meet the Objectives

- › Increase and maintain relationships with other societies
- › Closer contact with our International members
- › Awards for Best International Presenters
- › Diversification of the International members of the Committee
- › Co-sponsored courses





# Membership

*Anthony Petrick, MD, FASMBS*

The function of the Membership Committee is to act as a liaison for members to ensure needs of membership are being met by the society, address member concerns, review membership applications, assist applicants in the application process when necessary, facilitate the FASMBS program, stimulate membership, and ensure access of members to society benefits.

### Committee Members

#### Chair

Anthony Petrick, MD, FASMBS

#### Co-Chair

Keith Sharf, DO, FASMBS  
Vafa Shayani, MD, FASMBS

#### Executive Council Liaison

Aurora Pryor, MD, FASMBS

#### Immediate Past Chair

John Kelly, MD, FASMBS

#### IH Liaison

Adam L. Dungey, BSN RN

#### ASMBS Staff Liaison

Sara Bayles

#### Members

Naif Alenazi, MD, FASMBS  
Prakash Paragi, MD  
Philip Cohen, MD, FASMBS  
Jon Pressett, MD  
Darrell Doucette, MD, FASMBS  
Kamran Samakar, MD  
Christopher DuCoin, MD

April Smith, MD  
Stephanie Dunkle-Blatter, MD  
Andra Teixeira, MD, FASMBS  
Robert Lim, MD, FASMBS  
David Tichansky, MD  
Erik Lough, MD, FASMBS  
Stephen Wohlgenuth, MD, FASMBS  
Scott Monte, MD  
Natan Zundel, MD, FASMBS

### ASMBS Mission Met by the Committee

- > To be a highly valued society that serves the educational and professional needs of our diverse membership

### Committee Goals

#### Short Term

- > Expedite processing of new membership applications
- > Initiate New Member Campaign targeting – Candidates (Graduation Fellows) and bariatric surgeons in their first 1-2 years of practice (< 25 cases)
- > Identify common membership between SAGES and ASMBS
- > Contact lapsed member for renewal
- > Target non-ASMBS member attendees at ObesityWeek
- > Explore potential

#### Mid Term

- > Coordinate recruitment efforts with other committees
- > Target graduating fellows to join.
  - » Identify Bariatric fellows who have not responded and repeat blast email
  - » Email bariatric program directors asking them to encourage and facilitate candidate members in ASMBS
- > Increase International membership
- > Increase FASMBS membership
- > Continued discussion ongoing about value added possibilities
  - » Continuing to work on direct transfer of CME to ABS
- > Follow up on number of non-ASMBS member ObesityWeek attendees who joined after blast email

#### Long Term

- > Increase membership by 10%
- > Improve Retention by 10%
- > Enhance Value of ASMBS Membership
- > Increase Non-Surgeon membership
- > Affiliate physicians

- » Anesthesiologists
- » Bariatricians
- > Pharmacists
- > Mid-level providers
- > Explore the options for giving discounts as a reward for new member recruitment. (discount on next year dues, or a gift card, etc)
- > Recognition for long-time members

### Committee Objectives

- > Increase membership
- > Enhance value of membership
- > Improve retention

### Specific Projects that Achieve Goals and Objectives

- > ITrello website utilized. New membership application backlog has been eliminated.
- > Discounted price for Candidate members
- > Increased number of candidate members
- > About 707 members of both SAGES/ASMBS identified
- > Lapsed member board set up on Trello
- > 114 non-ASMBS member attendees at ObesityWeek received email blast
- > List of graduating fellows was used to send emails to all graduating Bariatric fellows.
- > Contacting all lapsed and inactive members for membership recruitment

### 2016 Completed Projects

- > Investigation of membership category for Gastroenterologists. Decision has been made to utilize the Affiliate Physician category and NOT to permit regular membership or to create a separate membership category for Gastroenterologists
- > Trello Board for management of new applications
- > Contacting all lapsed and inactive members for membership recruitment



# Pediatric Surgery

*Kirk Reichard, MD*

The mission of the Pediatric Surgery committee is to develop, foster and promote best care practices and resources for the pediatric/adolescent bariatric surgery patient. The Pediatric committee has continued to carry out its strategic mission in response to the increase prevalence of severe obesity within the adolescent population and associated rise in the number of weight loss surgeries being performed as a result of this public health crisis.

## Committee Members

### Chair

Kirk Reichard, MD

### Co-Chair

Samer Mattar, MD

### Executive Council Liaison

Samer Mattar, MD FASMBS

### ASMBS Staff Liaison

Linnea Erickson

### Members

Jeremy Aidlen, MD

Karen Bailey, MD

Kathryn Bass, MD

Mary Brandt, MD

Allen Browne, MD

Nancy Tkacz Browne RN

Matias Bruzoni, MD

Joy Collins, MD

Anita Courcoulas, MD

Robert Cywes, MD, PhD

Nestor de la Cruz-Munoz, MD

Ashish P. Desai, MBBS

Daniel DeUgarte, MD

Thomas Inge, MD

Bradley Linden, MD FASMBS

Marc Michalsky, MD

Ann O'Connor, MD

Janey Pratt, MD FASMBS

Elizabeth Renaud, MD

Nancy Thompson, CPNP CBN

Mark Wulkan, MD

Meg Zeller, PhD

Jeffrey Zitsman, MD

## Committee Goals

### Short-Term

- › Develop resources for adolescent - pediatric program development: Integrated Health Tool Kit to include patient and family materials and informed consents as well as professional journal. Nancy Browne spearheading this effort.
- › Develop and present Extremes of Age course for ObesityWeek 2016
- › Other educational offerings (including MBSAQIP information) in conjunction with the Program Committee
- › Continue to work with the Access to Care committee addressing pediatric/adolescent bariatric issues

### Mid-Term

- › Develop and Present educational track for ObesityWeek 2016
- › Establish national leadership position on responsible use of pediatric/adolescent surgery in bariatric and metabolic surgery and continue to serve as an expert resource for developing pediatric/adolescent centers
- › Continue to refine or add resources for developing & existing pediatric/adolescent centers
- › Maintain web content for Patient Learning Center. Work with MBSAQIP Standards Subcommittee to develop parameters for separate Pediatric/Adolescent Accreditation guidelines and credentialing recommendations
- › Develop Joint Best Practice Statement with American Academy of Pediatrics

### Long-Term

- › Rewrite the January 2012 "Pediatric Best Practice Guidelines" on adolescents, publish in *SOARD*. Janey Pratt spearheading this effort.
- › Partner with Obesity Prevention committee addressing strategies against obesity
- › Partner with Academy of Pediatrics to develop a pediatric section
- › Expand and disseminate resources for developing pediatric/adolescent centers
- › Collaboration with the research committee to foster the use of the new database to answer pediatric/adolescent specific questions
- › Identify members of committee to serve as site reviewers for MBSAQIP

## Committee Objectives

- › Provide leadership on pediatric/adolescent bariatric surgery
- › Develop and maintain resources for existing/developing centers that provide care for adolescent patients
- › Develop and maintain web content for adolescent patients (public information to be coordinated with public education committee)
- › Collaborate with Access to Care Committee for adolescent-pediatric bariatric surgery issues

## Completed Projects

- › ObesityWeek 2016 Joint Course entitled: Pediatric/Adolescent Obesity: When is the right time to consider surgery?
- › ObesityWeek 2016 Meet-the-Expert Roundtable Luncheon: Extremes of Age and Bariatric Surgery

## Specific Projects that Achieve Short-Term Goals and Objectives

- › ObesityWeek 2016 Meet-the-Expert Roundtable Luncheon: Extremes of Age and Bariatric Surgery
- › ObesityWeek 2016 Joint Course with TOS entitled: Pediatric/Adolescent Obesity: When is the right time to consider surgery?
- › Collect payer information by state for adolescent bariatric procedures (ongoing)
- › Developing Joint Best Practice Statement with American Academy of Pediatrics
- › Ongoing collaboration with MBSAQIP committee to refine pediatric standards



## Program

*Michel Gagner, MD*

The Program Committee is responsible for developing and arranging all of the annual educational events for the ASMBS with ObesityWeek and Obesity Week-End being the primary educational events. The committee identifies needs, professional gaps, and barriers; reviews and grades submitted abstracts; selects relevant topics and educational design; secures guest speakers; and contributes to the development of overall conference programming. The Program Committee, through the Professional Education Subcommittee, is responsible for the promotion and development of accredited post-graduate educational programs that advance the skills, clinical practices, and research endeavors of metabolic and bariatric surgery professionals to enhance the quality of patient care, optimize outcomes, and improve patients' quality of life.

### Committee Members

**Chair**

Michel Gagner, MD

**Co-Chairs**

Natan Zundel, MD

Shanu Kothari, MD

**Immediate Past Chair**

Aurora D. Pryor, MD

**Executive Council Liaison**

Shanu Kothari, MD

**Staff Liaison**

Stephenie Annarumma

**MOC**

Wayne J. English, MD

**Subcommittee Chair**

John J. Kelly, MD

Jonathon F. Finks, MD

Bradley J. Needleman, MD

**Poster**

Brandon Williams, MD

**Subcommittee Chair**

Monali Misra, MD

Jason M. Johnson, MD

Peter T. Hallowell, MD

**Emerging Technologies and Concepts**

Erik B. Wilson, MD

**Subcommittee Chair**

Bipan Chand, MD

Ann M. Rogers, MD

**Scientific Papers**

Ranjan Sudan, MD

**Subcommittee Chair**

Stephen D. Wohlgemuth, MD

Benjamin E. Schneider, MD

**Awards**

Dana A. Telem, MD

**Subcommittee Chair**

Shawn Tsuda, MD

Jeremy T. Aidlén, MD

**International Effort**

Natan Zundel, MD

**Subcommittee Chair**

Bruce Schirmer, MD

Keith C. Kim, MD

**Video Education**

Alan Saber, MD

**Subcommittee Chair**

Mohamed R. Ali, MD

John D. Scott, MD

Sivamainthan Vithiananthan, MD

**Labs**

Matthew D. Kroh, MD

**Subcommittee Chair**

Marcelo W. Hinojosa, MD

Richard M. Peterson, MD

### ASMBS Missions Met by the Committee

- > To improve the care and treatment of people with obesity and related diseases.
- > To advance the science and understanding of metabolic and bariatric surgery. To be a highly valued specialty society that serves the educational and professional needs of our diverse membership.

### Committee Goals

**Short-Term**

- > Suggest areas of focus for member submissions; identify subject area gaps and plan new sessions for Obesity Week-End and ObesityWeek 2016.
  - » Live Surgery
  - » Controversies
  - » Revisions
  - » Video
  - » IH – MBSAQIP Clinical Reviewers Course
  - » Balloon/Endolumenal
  - » Practice Building
- > Evaluate educational course offerings.
- > Provide recommendations for future educational activities based on data collected from learner evaluations and post-tests which clearly identify professional practice gaps and needs assessments.
- > Define success for professional education offerings; number of offerings, attendance and revenue.
- > Continue to work with TOS on development of ObesityWeek 2016.
- > Develop audience response system based on smart phone texting.

- > Develop an electronic system for submission of questions.

**Mid-Term**

- > Offer downloadable program and record/replay of concurrent sessions
- > Establish educational activity targets for each year
- > Collaborate with TOS to develop ObesityWeek program

**Long-Term**

- > ObesityWeek program development.
- > Improve attendance at ObesityWeek and Obesity Week-End.
- > Increase member satisfaction
- > Create new opportunities to attract members to educational activities
- > Establish educational activity targets for each year

### Committee 2016 Objectives

- > Enhance value and quality of programming for ASMBS members
- > Increase member satisfaction
- > Identify professional education needs: topics, faculty, teaching models, venues, regional vs. national, international and online
- > Increase member attendance by 5%

### 2016 Activities Accomplished to Meet the Objectives

- > Great program for both ObesityWeek and Obesity Week-End
- > Excellent reviews and attendance at Obesity Week-End.
- > Selected dates and venues for ObesityWeek through 2019.

### 2016 Activities Still in Progress



# Public Education

*Richard Peterson, MD FASMBS*

The Public Education Committee is responsible for educating the public on bariatric surgery via printed and web-based materials as well as through the media; i.e. radio, newspaper, television and journals

### Committee Members

#### Chair, Executive Council Liaison

Richard Peterson, MD FASMBS

#### Co-Chair

Joshua Alley, MD

#### Liaison to Obesity Action Coalition

Joe Nadglowski

#### Liaison to Integrated Health Program

Pamela R. Davis, RN, CBN, MBA

#### ASMBS Staff Liaison

Reba Liddy Hernandez

#### Members

Adam Beall, MD

Joy Collins, MD

Elizabeth A. Dovec, MD

Timothy B. Ehrlich, MD

Valerie J. Halpin, MD FASMBS

Walter S. Medlin, MD

Carl Pesta, DO FASMBS

Christopher J. Northup, MD

Michael Seger, MD FASMBS

Irene Lo, MD

Franchell Richard-Hamilton, MD  
FASMBS

Flavia Soto, MD FACS FASMBS

Colleen Cook

#### Ad Hoc

Joe Nadglowski

James Zervios

Roger Kissin

### ASMBS Missions Met by the Committee

- > To improve the care and treatment of people suffering from obesity
- > To advance the science and understanding of metabolic and bariatric surgery
- > To be the recognized authority and resource on metabolic and bariatric surgery

### Committee Goals

#### Short-Term

- > Revising patient learning center articles to ensure up-to-date content
- > Plan initiatives for marketing ASMBS patient video
- > Creation of a video library to serve as a means of communication for the ASMBS to the public about metabolic and bariatric surgery.

#### Mid-Term

- > Create a video course to educate people considering weight loss surgery on important information to know prior to surgery, in conjunction with the Communications Committee
- > Further develop the Public Education Committee web page
- > Translate articles in the Patient Learning Center into Spanish

#### Long-Term

- > The videos filmed during ObesityWeek 2016 will be on a YouTube channel, with other applications as potential sources of touch points

with the public.

- > Expand the marketing of Patient Learning Center content to ASMBS members
- > Continue providing review and updates of patient-focused content

### 2016 Completed Projects

- > Submitted articles to connect and for the ASMBS Foundation newsletter
- > Link film festival videos to public education section
- > Promote the section with Twitter (ongoing)



# Obesity Prevention Committee

*Stephen Archer, MD FASMBS*

The Obesity Prevention Committee advocates for, educates, and empowers individuals and families, healthcare providers, public policy framers and society at large to work across generations to realize lifestyles, healthcare strategies and public polices that prevention obesity.

## Committee Members

### Chair

Stephen Archer, MD FASMBS

### Co-Chair

Robert Woodbury, MD FASMBS

### Executive Council Liaison

Aurora Pryor, MD, FASMBS

### ASMBS Staff Liaison

Reba Liddy Hernandez

### Members

Anthony Gonzalez, MD

Colleen Kennedy, MD FASMBS

Christine Bauer, RN, MSN, CBN

Rosa Cataldo, DO

Leslie Heinberg, PhD

Shanu Kothari, MD FASMBS

Stacy Brethauer, MD FASMBS

Eric DeMaria, MD FASMBS

Julie Kim, MD FASMBS

Joshua Pfeiffer, MD

David Podkameni, MD

Saniea F. Majid MD, FASMBS

Samer Mattar, MD FASMBS

Maureen Mosti, RN

Ann Rogers, MD FASMBS

Ranjan Sudan, MD FASMBS

Lillian Craggs-Dino, DHA RDN  
LDN CLT

Kirk Reichard, MD

Miguel Burch, MD FASMBS

Paul Wizman, MD FASMBS

## ASMBS Mission Met by the Committee

- › To improve the care and treatment of people suffering from obesity

## Committee Goals

### Short Term

- › Literature search on weight regain
- › Create an outreach email to send to ASMBS members asking for community projects and activities that can be made available to the entire membership
- › Make available the best of the community projects to the membership and promote prevention.
- › Consider adding prevention to the accreditation process for MBSAQIP
- › Develop a coalition of medical/integrated societies to confront misinformation from food industry and lead that coalition to take action in the form of statements to the public

### Specific Projects that Achieve Goals and Objectives

- › Completed literature search on weight regain
- › Sent an email on Aug. 31 soliciting ideas from membership.
- › Planned for Obesity Summit: Chris Bauer to develop integrated health connections
- › Discussed with Executive Council the issue of changing accreditation criteria

### Mid Term

- › Rough draft of pathway to prevent obesity after surgery
- › Look for local solutions in schools, community planning etc.
- › National statement from ASMBS about the statement of the food supply in concert with other societies

### Specific Projects that Achieve Goals and Objectives:

- › Write draft
- › Develop clearing house of ideas—possibly via the accreditation process--what is already being done? Could site inspectors ask for ideas already in process.

- › Make draft of first statement—sugar sweetened beverage e.g.

### Long Term

- › Prevention of weight regain after bariatric surgery and development of oncologic model of multidisciplinary treatment in all phases of care
- › Robust and evolving local solutions to prevention involving communities, municipalities, schools etc.
- › Hold unsafe players in food industry accountable and turn the tide of perception about obesigenic food. Potentially look for financial relief from food industry. Address congressional or presidential committees

### Specific Projects that Achieve Goals and Objectives:

- › Widespread education effort and research supporting multidisciplinary approach to prevention of recurrence of obesity after surgery.
- › Potentially utilize state chapters to assimilate and disseminate ideas for prevention so as to always strive to make solutions as local as possible
- › Persistently assimilate the willing societies to help make more impactful statements.

### Committee Objectives

- › To create a clinical pathway for prevention of weight regain (prevention of obesity) in post bariatric surgery patients
- › To develop community solutions to obesity prevention by partnering with the foundation to create a mini-grant program, with the ability to scale up the successful ones
- › To develop a program to address issues related to the food supply on a national level to include national statement about the food industry, school lunches and/or empty foods

### 2016 Completed Projects

- › Investigation of membership category for Gastroenterologists. Decision has been made to utilize the Affiliate Physician category and NOT to permit regular membership or to create a separate membership category for Gastroenterologists
- › Trello Board for management of new applications
- › Contacting all lapsed and inactive members for membership recruitment



# Quality Improvement & Patient Safety

*Eric J. DeMaria, MD*

The Quality Improvement & Patient Safety Committee supports the mission and values of the American Society of Metabolic and Bariatric Surgeons by promoting continuous improvement in patient safety and risk reduction. These goals are achieved by the integration and coordination of patient safety initiatives of member surgeons. Patient safety initiatives are processes designed to reduce medical errors through process analysis and participation in quality improvement reporting. The committee believes that the most effective manner to decrease surgeon exposure to liability is through improving patient safety. The committee is studying trends in malpractice suits, identifying gaps in risk management and developing education offerings. The committee also believes there is a role for teleproctoring, simulators, and team simulation to advance safer practices.

## Committee Members

<p><b>Chair</b> Eric J. DeMaria, MD FASMBS</p> <p><b>Co-Chair</b> Dana A. Telem, MD FASMBS</p> <p><b>Executive Council Liaison</b> Eric J. DeMaria, MD FASMBS</p> <p><b>Immediate Past Chair</b> Daniel B. Jones, MD</p> <p><b>ASMBS Office Liaison</b> Leslie Vinson</p>	<p><b>Members</b> John W. Baker, MD FASMBS Fernando B. Bonanni, MD FASMBS Arthur M. Carlin, MD FASMBS Lionel R. Brounts, MD Jonathan T. Carter, MD FASMBS Daniel R. Cottam, MD Edward L. Felix, MD FASMBS Luke Funk, MD MPH FASMBS Jon C. Gould, MD</p>	<p>Jacob Greenberg, MD EdM Caitlin A. Halbert, DO MS Giselle G. Hamad, MD Daniel B. Jones, MD MS FASMBS, Immediate Past Chair Christopher Joyce, MD FASMBS David B. Lautz, MD Robert B. Lim, MD FASMBS Henry Lin, MD Jeffrey L. Lord, MD Saniea F. Majid, MD FASMBS</p>	<p>Michael A. Malvesti, PharmD Tracy Martinez, BSN RN CBN Philip A. Omotosho, MD Richard Parent, MD Carl Pesta, MD FASMBS Anthony T. Petrick, MD FASMBS Kinga A. Powers, MD, PhD William A. Sweet, MD Andre F. Teixeira, MD FASMBS Eric Volckmann, MD Noel N. Williams, MD FASMBS</p>
---	---	---	---

## Committee Goals

### Short Term

- > Work with Program Committee to develop tracks for ASMBS 2016 and 2017 educational events
- > Collect more case studies to allow resumption of efforts to publish Malpractice/Patient Safety Vignettes to ASMBS membership via CONNECT – ASMBS Online Magazine Case review to create ASMBS Closed Claims Registry by partnering with several medical malpractice insurance carriers
- > Develop Quality Improvement focus and certification process
- > Contribute a nomination from QIPS committee discussion for the ASMBS Patient Safety Award each year
- > ASMBS endorsed clinical pathway for bariatric surgery sleeve gastrectomy procedure
- > Publish research from Closed Claims registry

### Mid Term

- > National Registry for Closed Claims Cases - analyze and report on data collected
- > Continue to develop a curriculum for an ASMBS Certificate of Quality
- > Develop Quality symposium for ObesityWeek-End and ObesityWeek 2017
- > Pursue alternate publication/online discussion options for Patient Safety/Malpractice Vignettes with Invited Discussion commentary
- > Provide updates to members on important professional liability and patient safety issues as they arise
- > Continue to develop resources for risk management
- > Help create a mechanism by which ASMBS can endorse and encourage high performing programs exhibiting patient safety and quality improvement in all aspects of bariatric care
- > Postgraduate course on Medical Liability with Mock Trial for ObesityWeek November 2016

- > Evaluate clinical pathway and continue to refine strength of recommendations based on data, hopeful partnership with MBSAQIP +/- state chapters

### Long Term

- > Patient Safety Education programs for surgeons, nurses, anesthesiologists
- > ASMBS Clinical Care Pathways Library
  - >> To include RYGB/revisions
  - >> Therapeutic interventions to weight regain
- > Partner with liability carriers to create patient safety curriculum to reduce exposure and injuries
- > Further partnering opportunities with liability carriers such as education regarding benefits of requiring MBSAQIP accreditation

## Committee Objectives

- > Identify gaps and members needs in patient safety, risk management and professional liability
- > Identify and develop optimal resources for patient safety, risk management and professional liability
- > Provide recommendations for promotion and dissemination of patient safety and risk management information
- > Identify and employ process measures to identify and disseminate quality improvement initiatives

## Specific projects in progress to achieve goals and objectives

- > Obesity Week-End 2016 Course offerings regarding liability reduction and patient safety
- > ObesityWeek 2016: Full Day Quality Session 10/31
- > Clinical Pathways Paper written and submitted for SOARD review; accepted for publication in SOARD, will be available soon (hopefully)
- > Development of a national clinical pathway for sleeve gastrectomy (Drs. Telem, DeMaria, Gould, Powers and Pesta)

## COMMITTEE REPORTS

- » Literature review complete
- » Pathway developed based on published evidence
- » Supporting document (library) complete
- » CIC reviewed
- » Completed and vetted by ECEC and Executive Council; up for membership comments with close date 10/6
- » Final version to be submitted for approval to ECEC by 10/14 in time for ObesityWeek
- » Plan to publish as a supplement for *SOARD*
- > Continue to review and recommend candidates for annual award
- > Closed claims reviewers (Drs. DeMaria, Morton, Sweet, Baker, Brethauer, Nguyen, Mattar) travelled to four major Medical Malpractice Insurers to collect data create closed claim files in the first quarter 2016; Reviewed, scored and analyzed data collected, resulting in an abstract
- > ObesityWeek 2016 Course offerings regarding liability reduction and patient safety

### 2016 Completed Projects

- > Submitted abstract from Closed Claims Registry for presentation at ObesityWeek 2016
- > Sleeve Gastrectomy Pathway project - complete in time for ObesityWeek 2016
- > Clinical Pathway publication



# Research

*Matthew Hutter, MD, FASMBS*

The mission of the Research Committee is to advance the science of metabolic and bariatric surgery by advocating clinical and basic science research.

### Committee Members

#### Chair

Matthew Hutter, MD, FASMBS

#### Co-Chair

Mohammed Ali, MD

#### Executive Council Liaison

Mohammed Ali, MD

#### ASMBS Office Liaison

Linnea Erickson

#### Members

Ali Aminian, MD

Peter Benotti, MD

Scott Cunneen, MD FASMBS

Ramsey Dallal, MD

John Dixon, MD

Jonathan Finks, MD

R. Armour Forse, MD

Luke Funk, MD

Luis Garcia, MD

William Gourash, MSN

Donald Hess, MD

Jill Hurley, OTRL

Timothy Jackson, MD

Wendy King, PhD

Subhash. Kini, MD

Michael Lee, MD FASMBS

Emanuele Lo Menzo, MD FASMBS

Peter Lopez, MD

Corrigan McBride, MD FASMBS

Robert O'Rourke, MD

Nancy Puzifferri, MD

Malcolm Robinson, MD

Isaac Samuel, MD

Michael Schweitzer, MD FASMBS

Vadim Sherman, MD

Kimberley E. Steele, MD

Dimitrios Stefanidis, MD

Gladys Strain, PhD

Dana Telem, MD FASMBS

Jayasharee Todkar, MBBS

Mark Wulkan, MD

### Committee Goals

#### Short Term

- › Promote bariatric surgery research through grant awards
- › Promote education regarding the conduct of bariatric surgery research
- › Promote member awareness of available research resources and funding

#### Mid Term

- › Maintain ability to fund ASMBS research grants
- › Promote relationships between ASMBS research efforts and MBSAQIP

#### Long Term

- › Promote relationships between ASMBS and Society for Surgery of the Alimentary Tract (SSAT) research efforts
- › Increase availability of research support funds for members
- › Pool member research efforts to answer research questions of major import

### Committee Objectives

- › Promote the highest quality research in metabolic and bariatric surgery
- › Establish grant opportunities for academic and private practice research
- › Identify new research opportunities

### Specific Projects that Achieve Goals and Objectives:

- › Complete the 2016 Research Grant Review Process
- › Design and implement ObesityWeek 2016 course in research
- › Coordinate with the Communications Committee to offer research opportunities information on ASMBS website
- › Secure funding for grants in 2017 from ASMBS Foundation
- › Create a mechanism to elicit research topics of interest to the membership
- › Continue to work with MBSAQIP to develop the ability to provide data to researchers in participant use files
- › Collaborate with the SSAT to develop joint Post Graduate course in research
- › Work with ASMBS Foundation and others to increase available funding and work to identify other potential funding sources
- › Investigate the potential to create mechanisms for multi-institutional studies

### 2016 Completed Progress

- › Completed the 2016 Research Grant Review Process; Two awards granted
- › ObesityWeek 2016 Course titled: Panel Research





# State and Local Chapters

*Christopher Joyce, MD*

The State and Local Chapters committee is charged with promoting the ASMBS state chapter initiative and advancing the work of the chapters. They are responsible for reviewing applications and charter agreements, assisting chapters in the formation process, and ongoing monitoring of chapter activities.

## Committee Members

### Chair

Christopher Joyce, MD

### Co-Chair

Rachel Moore, MD

### Executive Council Liaison

Raul Rosenthal, MD

### Immediate Past Chair

Michael Nussbaum, MD

### ASMBS Office Liaison

Leslie Vinson

### Chapter Presidents

Todd Foreman (AL)\*

Josh Roller (AR)

David Podkameni (AZ and Southwest Group: AK, AZ, CO, NM, NV)

Brian Smith (CA)

Michel Gagner (Canada)

Jason Johnson (NC/SC)\*

Jonathan Schoen (CO)\*

Aziz Benbrahim (CT)\*

Michael Peters (DE)\*

Samuel Szomestein (FL)\*

Titus D. Duncan (GA)

Josh Steiner (KY)

Mark Grief (HI)\*

Michael Phelps (IA)\*

Vafa Shayani (IL)

Margaret M. Inman (IN)

Uyen Chu (LA)\*

Elizabeth Dovec (MD)\*

Carl Pesta (MI)\*

Howard McCollister (MN)\*

Stephen Scott (MO)\*

David Carroll (MS)

Luis A. Garcia (Dakota Yellowstone: MT, ND, SD, ID & WY)\*

Thomas J. White (NE)

Michael Bilof (NJ)\*

Terence J. Clarke (NY)\*

Christopher Joe Northup (OH)

Hamilton S. Le (OK)

Kevin Reavis (OR)\*

Michael D. Bono (PA)

Jenny Weaver (TN)\*

Richard Peterson (TX)\*

Troy M. Glembot (VA/WV)\*

Robert L. Michaelson (WA)\*

Kevin E. Wasco (WI)

\* New

## Committee Goals

### Short Term

- > Develop new chapters: There is now a chapter presence in every state. We have 36 Chapters: 26 Individual Chapters (including Canada), 5 joint chapters of 2 adjacent states, and 3 group chapters of 5 states combined. One individual state, KS, and one group chapter, New England, have preliminary status. See maps for details, first map shows group chapters and the second map shows updated Chapter Presidents and STARS.
- > Continue developing webpages on ASMBS site for current chapters; waiting on updates from State Chapter Presidents
- > Research forming a Military Chapter & International Chapter of ASMBS
- > Determine best practices in each state to share with other chapters

### Mid Term

- > Develop a State Chapter of the Year Award, to be awarded at the ASMBS annual Business Meeting
- > Advance the remaining preliminary chapters to full chapter status
- > Create a strategy for reviewing chapter website content, in conjunction with Communications committee
- > Establish early warning system to uncover beginnings of favorable or unfavorable activity in a market
- > Develop/promote access to care and rapid response plans

### Long Term

- > Hold Annual Chapter Presidents' Summit – training for presidents (media, etc.) – Review 2015 Las Vegas event and plan for the 4th Annual Presidents' Summit in 2016
- > Facilitate AR-OK and KY-OH joint chapter merges. Leadership from TN and MS have discussed merging their meetings and possibly their chapters.
- > Promote positive relations and ongoing communication between Chapters and national ASMBS

## Committee Objectives

- > Increase number of state chapters.
- > Establish need/value of chapter creation
- > Improve communication between chapters and ASMBS
- > Evaluate state of care in each state
- > Identify needs and opportunities in each state chapter
- > Improve the collegiality of colleagues and programs in each state
- > Offer joint sponsorship to provide CME credits during Chapter meeting can now be found at [asmbs.org/state-chapters/state-chapter-meeting-cme](http://asmbs.org/state-chapters/state-chapter-meeting-cme)
- > Provide accounting tax filing assistance for the chapters

## 2015 Activities Accomplished to Meet the Objectives

- > Established Chapter presence in all 50 states
- > Collected State Chapter dues – ASMBS is collecting dues for all but a few states
- > Successfully completed the 3rd Annual State Chapter Presidents' Summit in Las Vegas
- > ASMBS sponsored CME available for State Chapter Meetings
- > We have quarterly State Chapter Presidents' conference calls

## 2015 Activities Still in Progress

- > Advance remaining states with preliminary to full chapter status
- > Strengthen existing chapters
- > Plan next Annual Presidents' Summit
- > Facilitate more collaboration between states in the same region



## Video Committee

*Alan Saber, MD*

The ASMBS video committee works to advance the surgical techniques for metabolic and bariatric surgery via video demonstration of surgical procedures. The committee's mission is to advance the science and understanding of metabolic and bariatric surgery with the intent of improving medical care and treatment of people with obesity and related diseases.

### Committee Members

**Chair**

Alan Saber, MD

**Co-Chair**

Arthur Carlin, MD, FASMBS

Timothy Ehrlich, MD

**Executive Council Liaison**

Ninh Nguyen, MD, FASMBS

**ASMBS Office Liaison**

Martha Lindsey

**Members**

Mustafa Aman, MD

Neil Floch, MD

Emanuel Lo Menzo, MD, FASMBS

Venkat Modukuru, MD

Tom Rogula, MD, PhD

Keith Scharf, DO, FASMBS

Sajani Shah, MD

Andre Teixeira, MD, FASMBS

Aley Tohami, MD

Stuart Verseman, MD, FASMBS

### Committee Goals

**Short Term**

- > Identify pool of video presentations and prepare them for online video library
- > Develop Standardized Video Format Requirements
- > Begin offering 'Unedited Video' Sessions at ASMBS Educational Meetings

**Mid Term**

- > Collaborating with the program committee; the video committee will be responsible for reviewing submitted videos for presentation at the upcoming annual meeting.
- > To work closely with the program committee to review the feedback from previous year's video sessions and to look for opportunities for improvement

**Long Term**

- > Rating system for the videos in video library;
- > Comment of video committee members on the technical aspects of each video with a taking home message
- > To implement more video sessions for our national meeting

### Committee Objectives

- > Develop video library to be archived on the ASMBS website for member reference
- > Develop standardized Video Format
- > Develop 'Unedited Video' Sessions for Educational Meetings
- > To implement more video sessions for our national meeting

### Specific Projects that Achieve Goals and Objectives:

- > Videos selected and categorized for video library development
- > Unedited Video Session Scheduled for ObesityWeek 2016
- > Established a Standardized format for video presentation

### 2016 Activities Still in Progress

- > Continuing to review, provide feedback, and revise content on the ASMBS video library to ensure that the library is up-to-date and containing videos from both recent and previous meetings.
- > Working with the program community to increase the number of video sessions at the national meetings.

# From Our Integrated Health President

## Amazing and grateful.

Words I can only say when I think of these last 2 years serving as President of Integrated Health. My term has been better than I could imagine with fun, surprise and productivity!

I'm am privileged to announce the many accomplishments of our committee members and executive council in 2016. These integrated health professionals have donated hours of their competency and expertise in order to produce patient centered, multidisciplinary approached, patient safety and quality resources for you and your patients' plan of care. By committee:



- › **Advanced Healthcare Providers Taskforce** - Collaboration of Integrated Health and Executive Council with members of 2 bariatric surgeons, 2 Nurse Practitioners, 2 Physician Assistants, and 1 Clinical Nurse Specialist. There has been an advance practice session added to ObesityWeek this year in addition to a focus group as continuation of the assessment of interest among these practitioners for credentialing of some sort (i.e. certificate program).
- › **CBN Committee** - Successful onboarding of Applied Measurement Professionals, Inc. to assist with updated practice analysis needed for certification accreditation and to support exam development, administration, and certification renewal processes and policies.
- › **Clinical Issues and Guidelines Committee** - Publication of the “Presurgery Psychosocial Recommendations”, release of the “Revised Nutritional Guidelines 2016” and pending release of “Guidelines for Sensitivity Training”. Resource development for newly established toolkits.
- › **Communication Committee** - The Integrated Health page of the ASMBS website has been improved to include toolkits with resources and links to MBSAQIP webinars by ACS. IH is represented on several Executive Council ASMBS committees demonstrating ASMBS’s commitment to the value of multidisciplinary care (i.e. Executive Council, Communications, Clinical Issues Committee, Obesity Summit, Essentials Taskforce, MBSAQIP Quality Committee).
- › **Multidisciplinary Care Committee** - Completion of data review from survey among integrated health regarding multidisciplinary care participation in plan of care for bariatric patients. Pending release of valuable findings a recommendation will be made for continued investigation in the value of multidisciplinary care in the treatment and reduction of obesity.
- › **Membership Committee** - Soon to be distributed Integrated Health Membership Survey to better address the needs of our current members and value added opportunities.
- › **Professional Education and Program Committee** - Successful design and administration of 2016 Obesity Week-End and ObesityWeek education sessions and courses.
- › **Support Group Committee** - Successful design and attendance of a support group session at ObesityWeek. Focused efforts on feasibility and development of a Support Group Facilitator certificate course.

And finally, I write this during a time when I have decided to move to a new life passage....retirement! I feel enriched professionally and personally having been a part of this caring society and while I am singing off I am not signing out! I will continue to support the efforts of you the members and Integrated Health leadership as you work together toward a shared goal to treat and reduce the disease of obesity, demonstrating the value of the multidisciplinary approach.

*Christine C Bauer*

**Christine Bauer, MSN, RN, CBN**  
President ASMBS Integrated Health

# Integrated Health Executive Council



**President**  
Christine Bauer, MSN, RN,  
CBN



**President-Elect**  
Karen Flanders, MSN,  
ARNP



**Secretary**  
Jill Meador, RN, BSN, CBN



**Past President**  
Karen Schulz, MSN, CNS,  
CBN



**Senior Past President**  
Laura Boyer, RN, CBN



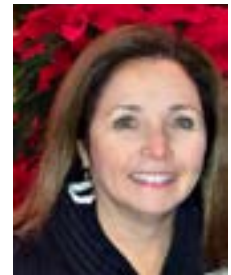
**Executive Council Liason**  
Stacy Brethauer, MD,  
FASMBS



**Member-At-Large**  
Lynn Bolduc, MS, RD, LD,  
CDE



**Member-At-Large**  
Laura Andromalos, MS,  
RD, LDN



**Member-At-Large**  
Melissa Davis, DNP, ANP-  
BC, CNS, CBN, CNOR,  
RNFA



**Member-At-Large**  
Leslie Heinberg, Ph.D.



**Member-At-Large**  
Nathaniel Sann, MSN,  
CRNP, FNP-BC



**Member-At-Large**  
Stephanie Sogg, PhD

## Goals of the ASMBS Integrated Health Section

- ▶ Increase awareness of the importance of an integrated multidisciplinary approach to the treatment of obesity
- ▶ Optimize patient access to comprehensive and long-term bariatric and metabolic surgical health care
- ▶ Promote a better understanding of the role of integrated health professionals in bariatric and metabolic surgery
- ▶ Be the recognized authority in the integrated multidisciplinary approach to caring for the bariatric and metabolic surgical patient
- ▶ Increase integrated health professional membership value and retention
- ▶ Cultivate a knowledgeable, skilled and empowered membership inclusive of all integrated health specialties



## IH CBN Certification

*William Gourash, MSN, CRNP*

This committee is responsible for maintaining the all of the aspects necessary for the maintenance, further development and growth of the CBN certification program. It is divided into nine subcommittees of three or more members which focus on areas vital to the certification program: Practice Analysis, Examination Development, Policy and Procedures, Marketing & Feasibility, Educational Preparation, Accreditation, Financial and Recertification. Additionally, it supports credentialing efforts in the other Integrated Health disciplines.

### Committee Members

#### Chair

William Gourash, MSN, CRNP

#### Co-Chair

Jessie Moore, ARPN

#### ASMBS Staff Liaison

Christine Hawn

#### Accreditation

Tammy Beaumont (leader)

Renee O'Daniel

James D. Meyer

#### Practice Analysis

Sandy Tompkins (leader)

Susan Dugan

Teresa Fraker

#### Marketing

Jamie Carr (leader)

Narelle Story

Trudy Ivins

Nicole Forryan

#### Policy and Procedures

Ann Couch (leader)

Lisa Luz

#### Examination Development

Ruth Davis (leader)

Cheryl Holsworth

Alice Jackson

Maureen Quigley

Mara Berman

#### Examination Preparation

Bobbie Lou Price (Leader)

Christine Bauer

Barb Lawrence

Vanessa Shay

#### Finance

Tracy Martinez

Bobbie Lou Price

Jessie Moore

William Gourash (Leader)

#### Recertification

Sally Strange

Carrie Smith

Wanda Szymanski

#### Other Discipline Credentialing

William Gourash

Jessie Moore

### Committee Goals:

- › Continue to develop and maintain an RN professional practice certification for the specialty of Bariatric Nursing Care.
- › Administer a fair, valid, reliable and legally defensible examination process.
- › Administer an examination that certifies professional knowledge and skill in bariatric standards of care and expected outcomes.
- › Administer a fair, valid, reliable and legally defensible re-certification process.
- › Communicate the value of this credential to the public and other key constituencies.
- › Administer a fiscally responsible certification program while allocating appropriate resources for growth.
- › Share credentialing and certification knowledge within the ASMBS and related organizations.

### Committee Objectives:

- › Continue to develop, maintain and grow an RN professional practice certification for the specialty of Bariatric Nursing Care.
- › Administer a fair, valid, reliable and legally defensible examination process.
- › Administer an examination that certifies professional knowledge and skill in bariatric standards of care and expected outcomes.
- › Administer a fair, valid, reliable and legally defensible re-certification process.
- › Communicate the value of this credential to the public and other key constituencies.
- › Administer a fiscally responsibly certification program while allocating appropriate resources for growth.
- › Extend the availability of the CBN examination/certification to international registered nurses.
- › Support the credentialing interest and efforts for all Integrated Health Professionals.

### Short and Mid Term Activities:

#### › Overall Committee

- › Review the examination offering windows
- › Continue the transition to our new certification consultant AMP
- › Fill in the subcommittee member vacancies
- › Increase the examination candidates by 25% (275/year by 2018).
- › Achieve goal of recertification by certificants at 50% (January 2018)
- › Integrate and coordinate all of the activities of the subcommittees especially the undertaking of the Practice Analysis Update, the quest for accreditation, expansion of marketing efforts, and revision of the recertification management process.
- › Foster the review of old committee policies and the development of a comprehensive policy structure.
- › Further develop and explore Advanced Practice Practitioner (APP) credentialing (PAs, NPs, & CNSs) evaluation by participating in discussions with APP professional organizations and participating in the development of a final recommendation to the IHEC.
- › Continue to support and explore credentialing exploration for dietitians, behavior health professionals and other bariatric professionals
- › Establish Practice Analysis Task Force, develop updated survey, implement survey, interpret results revise Practice Analysis document and publish in SOARD.
- › Incorporate results of practice analysis survey into all aspects of the CBN program.
- › Recruit, train and mentor new group of Item Writers.

#### › Marketing Subcommittee

- › Continue and further develop: Newsletter publication and development, Nursing Certification Day celebration, develop International presence
- › Explore Special Incentives: "fail safe" certification; organizational discounts, hospital packages,

## IH COMMITTEE REPORTS

- » Further develop CBN recognition award
- » Develop marketing strategies from PVCT survey results and publish the survey results – Oral Presentation at ObesityWeek 2016
- » Expand ObesityWeek CBN events.
- » Start preparations for CBN 10 (CBN 10th Birthday Celebration Events)
- > **Accreditation**
  - » Re-educate (with regard to new accreditation standards) members of subcommittee
  - » Explore and implement consultation with consultant (Sea Crest and/or AMP)
  - » Develop strategy and time-line for submission for ABNS accreditation
  - » Develop platform with which to house accreditation submission materials
  - » Respond to ANCC “Magnet” Hospital Recognition Program policy changes when requested
- > **Practice Analysis**
  - » Establish Practice Analysis Task Force, Develop update survey, Implement survey, interpret results and revise Practice Analysis document
  - » Publish manuscript of results from Practice Analysis Update
- > **Policy and Procedure**
  - » Candidate eligibility and audit implementation, review & update CBN Handbook,
  - » Development, approval and implementation of policy regarding cost of those that re-take the examination
  - » Review of all CBN policies and develop plan for “new” policy development to especially cover the accreditation efforts
  - » Add additional member
- > **Examination Development**
  - » Post examination and survey reviews, construction of 2017 examination, Cut-score setting, review of examination policies and “in-person” item review meeting, update item bank.
  - » Item review/update and new item development to respond to the Practice Analysis Update
  - » Invite, organize, educate, precept, and management of “new” 2016 group of Item Writers
  - » Evaluation of the current examination windows and future recommendation
  - » Reclassify items within bank as needed to concur with updated test blueprint from Practice Analysis committee.
- > **Examination Preparation**
  - » Continue yearly “in-person” review course, Decision on next revision of Online Review Course, Review evaluation surveys
- » Complete study “flash-card” project
- » Take initial steps to develop a “core curriculum”
- » ObesityWeek 2016 In-Person Review Course
- » Explore & implement trial use of On-line course for Live presentation (e.g. Texas ASMBS Chapter – January 2017)
- » Prepare to review online course at Obesity Week-End 2017
- > **Financial**
  - » Annual Review of the financial standing of the CBN program
  - » Development of first draft of a 3-year financial strategic plan
  - » Give annual report to IH President and President elect with regard to the overall status and update during year.
- > **Recertification**
  - » Eligibility and audit implementation, review/update CBN Handbook, Quarterly review of recertification candidates
  - » Review of the “entire” process and explore other potential platforms to manage the process
  - » Learning Builder and AMP
  - » Collaborate with Marketing Subcommittee to market the recertification
  - » Develop and update the recertification policy: Precepting as Professional Development Approach, Retired CBN, and Review of candidate recertification materials
- > **Other Disciplines Credentialing**
  - » Monthly Chair & Co-chair and Chair/Co-chair and ASMBS CBN Coordinator communication calls to discuss the progress of each of the subcommittees (2015).
  - » Continue to develop a strong relationship with the American Board of Nurse Specialties (ABNS) by attending their meeting and actively participating in the organization (March and September 2014 and annually).
  - » Work with ASMBS administrative staff to develop a “certificate of recognition” for committee members, item writers and special events participants.
- > **Management**
  - » Continue to explore services, procedures & resources of AMP and develop relationship.
  - » Support the 2016/2017 activities of each of the subcommittees as listed above with special focus on the practice analysis update, the item writer project, submitting for accreditation, recertification process update and marketing expansion.
  - » Implement formal regular communication calls with the ASMBS CBN coordinator.
  - » Focused support to the Other Disciplines Credentialing Task Force initiative
  - » Foster Increased relationship with ABNS



# IH Clinical Issues and Guidelines

*Stephanie Sogg, PhD*

The ASMBS Clinical Issues and Guidelines Committee represents multiple disciplines of bariatric Integrated Health professionals with at least one member representing the following disciplines - nursing, behavioral health, nurse practitioner or physician assistant, registered dietitian, pharmacist, and exercise physiologist. The Committee members are appointed by the IHEC President with input from the Committee Chair and Co-Chair.

## Committee Members

### Chair

Stephanie Sogg, PhD

### Co-Chair

Terry McKenzie, RN, CBN

### IHEC Liaison & Immediate Past Chair

Pam Davis, RN, CBN, MBA

### ASMBS Staff Liaison

Martha Lindsey

### Members

#### Registered Dietitians

Katie Chapmon, MS, RD, ACE-CPT  
Julie Parrott, MS, RD, ACE-CPT  
Carol Wolin-Riklin, MA, RD, LD

#### Behavioral Health

Allison Grupski, PhD  
Leslie Heinberg, PhD  
Jennifer Lauretti, PhD, ABPP  
Stephanie Sogg, PhD  
Sally Strange, PhD, RN, CBN

Lisa West-Smith, PhD, LCSW

#### Registered Nurses

Ann Couch, RN, CBN, CPC  
Pam Davis, RN, CBN  
Charmaine Gentiles, RN  
Terry McKenzie, RN, CBN  
Debra Proulx, RN, BHS, MBA, CBN

#### Nurse Practitioner/Physician's Assistant

Melissa Davis, MSN, APRN, BC,  
Nancy Browne, MS, PNP-BC,

CBN

Melissa Davis, MSN, APRN, BC,  
CNS, RNFA

Michael Dougherty, PA-C  
Karen Flanders, MSN, ARNP, CBN  
Charmaine Gentiles, ANP-BC,  
RNFA

Sandy McCoy, RN, MSN, FNP-BC,  
CBN

#### Pharmacist

April Smith, PharmD, BCPS

## ASMBS IH Mission(s) Met by the Committee

- > Improve outcomes through the multidisciplinary approach to the care of patients affected by obesity
- > Increase awareness of the critical role the multidisciplinary approach plays throughout the continuum of care
- > Promote best practices and an evidence-based approach to the treatment of patients affected by obesity
- > Cultivate and support a knowledgeable, skilled and empowered membership

## Committee Objectives:

- > Identify, develop, and revise best practice recommendations, clinical guidelines, position statements and protocols for the different disciplines within Integrated Health
  - » Review and reassess every 2 years
- > Identify and provide support to the committee/member(s) developing best practices, clinical guidelines, position statements and recommendations

## 2015/16 Activities Still in Progress

- > Sensitivity Guidelines: Ready for IHEC review by October 2016
- > Nutrition Guidelines Revision: Reviewed by IH CIGC and IHEC and Legal; have been reviewed by surgeons' Clinical Issues Committee and Executive Council, after which it will go to membership for comment.
- > Toolkit Development:
  - » Each Toolkit content area (or "bucket") has a designated leader; each "bucket" working group has developed a list of documents needed and a timeline for procuring these documents.
  - » Collection of documents in many of the buckets is completed or nearly completed, and documents are being sent to IHEC for review a few at a time; first set of documents will be sent to IHEC in early September. As there are dozens of documents, the flow through these reviews will be ongoing for the foreseeable future;

materials will be made available through the online Toolkit as they are finalized and approved.

- » IH Support Group committee is working with IHEC Patient Education Toolkit Subcommittee in developing content for this section of the Toolkit.
- > Online Psychosocial Evaluations: As approved by EC and IHEC, an ad-hoc task force has been formed. A literature search has been conducted and the websites of the companies in question have been examined for potential areas of concern. A summary document has been prepared and submitted to IHEC for review, to be passed along to EC and we await further guidance from them.
- > Standardized protocol for Developing Guidelines/Position Statements: A working group has been formed; they have developed a timeline for the tasks involved in completing this project and work has begun.

## Activities Slated to Begin late 2016/early 2017:

- > Revise Gastric Band Adjustment Credentialing Guidelines for Physician Extenders: A working group has been formed and this group is working on a timeline for the tasks involved in completing this project.
- > Create Guidelines for Advanced Practitioners: A working group has been formed and this group is working on a timeline for the tasks involved in meeting this goal



# IH Communications

*Nate Sann, FNP-BC, MSN*

The aim of the Integrated Health Communications committee is to facilitate communication within AMSBS integrated health membership, between integrated health and surgeon members, and with potential members. This includes communicating in outside forums, moderating communication over official forums, and ensuring that relevant integrated health is available to all members.

### Committee Members

#### Chair

Nate Sann, FNP-BC, MSN

#### Co-Chair

Amanda B. Cross, BSE, CPT, LWMC

#### IHEC Liaison

Nate Sann, FNP-BC, MSN

#### ASMBS Staff Liaison

Reba Liddy Hernandez

#### Members

John Archibeque, MSN, MBA, CBSGL, RN, CBN

Rachel Blind, NP-BC, CBN

Stephanie Cox

Teresa Fraker, MS, RN

Heidi Grap, MBSCR

Alison Olsen

### ASMBS Mission(s) Met by the Committee:

- > Increase awareness of the critical role the multidisciplinary approach plays throughout the continuum of care
- > Optimize patient access to comprehensive obesity treatment
- > Cultivate and support a knowledgeable, skilled and empowered membership

### Committee Objectives:

- > Improve communication within ASMBS membership
- > Increase awareness of IH activities to external audiences and stakeholders
- > Facilitate communication between committees
- > Identify and provide mechanisms for communication and collaboration for project development

### 2016 Activities Accomplished to Meet the Objectives:

- > Launched Integrated Health portion of the ASMBS.org website, creating a space for integrated health professionals to find information, news, and resources.
- > Developed a video encourage members to become leaders and perse professional development

### 2016 Activities Still In Progress

- > Developing an Integrated Health organization chart for ASMBS.org website and for new IH committee members
- > Creating an orientation packet for new ASMBS IH members
- > Creating an electronic nomination application for the Circle of Excellence Award
- > Continuing to build and improve online content for integrated health professionals, including a resource of online articles for professional development and to share with patients
- > Augmenting online resources with a comprehensive “Tool Kit” to guide IH membership through the various aspects of developing or enhancing a bariatric practice
- > Developing an online resource such as “Ask an Expert” or online “Journal Club” for IH membership.
- > Creating a larger social media presence
- > Working with ASMBS and TOS leadership to have some online resources from ObesityWeek & Obesity Week-End.
- > Collaborating with the ASMBS Communication Committee for ongoing communication needs and collaborative efforts within the organization as well as with other Societies.





# IH Membership

*Lisa Luz, RN, MSN, CBN*

The IH Membership Committee works to ensure needs of membership are being met by the society, address member concerns, review membership applications, assist applicants in the application process when necessary, stimulate both new and renewal memberships, increase visibility of IH members in the ASMBS and ensure access of members to society benefits, thereby increasing value of membership.

### Committee Members

#### Chair

Lisa Luz, RN, MSN, CBN

#### Co-Chair

Adam Dungey, BSN, RN

#### Executive Council Liaison

Lynn Bolduc, MS, RD, LS, CDE

#### Immediate Past Chair

Constance S. Simms, RN, CBN

#### ASMBS Staff Liaison

Sara Bayles

#### Members

Colleen M. Berg, FNP-C

Rachael L. Carrasca, PharmD

Tammy Dodds, MPAS, PA-C

Kristin E. Kamprath, MPAS PA-C

Amy K. Pearce, RN, CBN

Chris Potito, RN, BSN, MEd

Constance S. Simms, RN, CBN

### Committee Objectives:

- > Increase membership by 5%
  - » Retention goal
  - » Target resources or marketing campaigns to bariatric coordinators
- > Develop outreach tools to encourage surgeon members and administrators to promote IH membership
  - » Reach out to the surgeon membership via letter from IH and ASMBS President encouraging the promotion of IH membership among their staff and key institutional players
- > Create incentives and identify barriers to membership
  - » Collect both personal and work email, contact personal email periodically and list regular email types (Connect, letter from president, etc.) and ask if receiving
  - » Promote online IH continuing education offerings with option to forward to colleagues
  - » Use registration numbers to analyze popularity of IH courses and promote most popular courses accordingly
  - » SOARD discount
- > Provide recommendations and rationale for potential alliances with other organizations to expand membership base

### 2016 Activities Accomplished to Meet the Objectives

- > Increase accessibility of membership by allowing associate members to write letters of recommendation
- > Develop outreach tools to encourage surgeon members and administrators to promote IH membership
- > 2016 Integrated Health group discount

### 2016 Activities Still In Progress

- > Promote membership value through website and social media
- > Satisfaction survey for active members for the year 2017
- > Continue targeted recruitment efforts to increase overall membership



# IH Multidisciplinary Care

*Tracy Martinez, BSN, RN*

This committee is comprised of a representative from each specialty of the integrated team; fitness, behavioral health, nursing, nutrition, surgeons and obesity medicine. The goal of the committee is to investigate what literature has been published regarding the role of the team members in the care and long-term success of the bariatric surgical patient.

### Committee Members

#### Chair

Tracy Martinez, BSN, RN

#### Co-Chair

Mark Verschell, PsyD

#### Executive Council Liaison

Wendy King PhD

#### ASMBS Staff Liaison

Christine Hawn

#### Members

Dale Bond, PhD

Guilherme Campos, MD

Laura Frank, PhD, MPH, RD, CD

Nicole Franklin, PsyD

Elizabeth Goldenberg, MPH, RD, CDN

Kimberly Gorman, PhD

Wendy King, PhD

Christopher Still, DO

Alan Wittgrove, MD

### Committee Goals:

#### Short Term:

- › Request \$500 statistician funds to further analyze survey results
- › Develop a strategy for writing the white paper

#### Long-Term:

- › The long-term goal is the development of a white paper on current multidisciplinary practice, define our ongoing contribution to the bariatric surgery specialty and heighten the awareness among professionals, and the public, of the impact the bariatric surgery team can make on patient outcomes. Currently, there are no society papers, guidelines or statements to define the role of the integrated team members and their impact in the field of bariatric and metabolic surgery. We have had to include other medical specialties in our literature search due to the lack of publications within bariatric surgery. Ultimately, we would like this to be published and accessible on the ASMBS website.

### Specific projects completed and in progress since last report (June 2012) that achieved the goals and objectives:

- › This committee disseminated the bariatric surgery program survey to 250 identified programs.
- › This committee developed a strategy to achieve a higher completion rate on the surveys that were submitted but were incomplete in order to have a more comprehensive survey from which to gather data.
- › The committee decided to submit an abstract for this year's annual meeting summarizing the survey findings which was accepted for presentation for ObesityWeek 2014.

- › Following the closing of the first round of surveys, analyzing of the data, and extensive committee discussion, the following steps were taken:
  - › A follow-up survey was sent to those who did not complete the survey the first time in an attempt to ascertain why the survey participants may not have completed some portions of the survey and to encourage them to take proactive steps in completing the survey.
  - › This follow-up survey gave them access to their original submission so that they could see, and hopefully complete, the areas that were incomplete.
- › The committee sent a final email to all survey recipients stating the following:
  - › "Cordial greetings once again from the ASMBS Integrated Health Multidisciplinary Care Committee. We will be closing our survey in just a few days, and the response from the ASMBS membership has been very good. If you have not yet had time, or have only partially completed our survey, we would be grateful if you would use this opportunity to represent the services that your Program | Practice provides to your bariatric surgery patients. Simply forward this email to your respective providers - our survey has sections for specialists in the fields of surgery, nutrition, behavioral health, exercise, obesity medicine, and nursing. Thank you again for taking the time to participate in our survey."

### Future Plans:

- › The committee will write and publish a white paper related to the multidisciplinary care of bariatric surgery patients and the success of bariatric surgery teams on patient outcomes.



# IH Program and Professional Education

*Maureen Quigley, MS APRN*

The Integrated Health Professional Education Committee is responsible for planning, reviewing, approving and arranging the educational content for all Integrated Health activities, including but not limited to, the ASMBS Fall/Spring Event as well as ObesityWeek. The committee develops the program in direct response to identified needs, professional gaps and barriers. The IH Professional Education Committee is comprised of a chair, co-chair, past chair, IH EC Liaison and core committee members, in addition to subcommittees consisting of IH Abstract Committee, Behavioral Health Committee, Nutrition Committee, Post-Graduate Committee, and Multidisciplinary Committee. The IH Professional Education Committee, by means of the Abstract, Behavioral Health, Nutrition, Post-graduate and Multidisciplinary Subcommittees, is responsible for the promotion and development of accredited post-professional education programs that advance the skills, clinical practices, and research endeavors of metabolic and bariatric surgery professionals to enhance the quality of patient care, optimize outcomes, and improve patients' quality of life.

## Committee Members

### Chair & IHEC Liaison

Maureen Quigley, MS APRN

### Co-Chair

Kellie Friedman, PhD  
Paul Lorentz, MS RN RD BBA

### Executive Council Liaison

Karen Flanders, MSN CBN NP-C

### ASMBS Staff Liaison

Stephenie Anderson

### Members

Maureen Quigley MS APRN, Chair  
Kelli Friedman, Ph.D, Co-chair  
Christa Trigilio-Black, PA-C  
Paul Lorenz, MS RN BBA, departing Co-Chair  
Karen Flanders, MS NP-C EC liaison

William F. Gourash, MSN CRNP  
Leslie Heinberg, PhD  
Sue Cummings, RD LD  
Dale Bond, Ph.D

### Abstract

Dory Ferraro, DNP  
Karen Flanders MS NP-C  
Rachel Goldman, PhD  
Laura Andromalos, MS RD LDN  
Wendy King, PhD  
Hilary Blackwood, MSN RN ACNP  
Patti Houston, RN  
Jane Conway, LCSW RD CDN  
Tammy Dodds, MPAS PA-C  
Chris Bauer, MSN RN

### Behavioral Health

Kelli Friedman, Ph.D  
Janelle Coughlin, PhD  
Jim Mitchell, PhD  
Meg Zeller, PhD

### Multidisciplinary

Kristine Steffen, PharmD PhD  
Dale Bond, PhD

### Nutrition

Sue Cummings, RD LD  
Carol Wolin-Riklin, MA RD LD  
Laura Andromalos, MA RD LDN

### Post-Graduate

Connie Klein, NP  
Christa Trigilio-Black, PA-C

### Professional Education

Dale Bond, PhD  
Laura Boyer, RN, CBN  
Laura Frank, PHD, MPH, RD, CD  
Kelli Friedman, PhD  
William Gourash, MSN, CRNP  
Leslie Heinberg, PhD

## Committee Objectives

- > Enhance the value and quality of educational programming at ObesityWeek, Obesity Week-End and throughout the year
- > Explore new educational opportunities such as Bariatric Times
- > Identify potential collaborations with relevant organizations
- > Fill vacancies for post-graduate subcommittee
- > Adding an area on the ASMBS website for suggestions for future presentations would increase access for all members.

## ASMBS Mission(s) Met by the Committee

- > Improve outcomes through the multidisciplinary approach to the care of patients affected by obesity
- > Increase awareness of the critical role the multidisciplinary approach plays throughout the continuum of care
- > Promote best practices and an evidence-based approach to the treatment of patients affected by obesity
- > Cultivate and support a knowledgeable, skilled and empowered membership

## 2016 Activities Accomplished to Meet the Objectives:

- > Filled vacancies including two physician assistants
- > Abstract Committee meeting June 2016, abstracts selected with discussants
- > ObesityWeek co-chair chosen: Kelli Friedman, Ph.D. Obesity Weekend co-chair chosen: Hilary Blackwood MSN, ACNP
- > Advanced Practice symposium added to Scientific Session

## 2016 Activities Accomplished to Meet the Objectives:

- > Partnership with other organizations in conjunction with other meetings such as ACSM, AND and AANP as potential organizations
- > Consider potential for international IH collaboration/ education with IFSO
- > Continue to recruit new committee members as vacancies become available
- > Work with Tracy Martinez to develop educational content for Bariatric Times



# IH Support Group

*Kellie Armstrong, MS, RN, CBN*

The mission of the Support Group committee is to promote the development of the concept of support groups in the care of bariatric surgical patient; identify the needs of support group leaders and develop strategies to meet these needs; identify, develop and distribute resources for support groups and support group leaders, and encourage the exchange of ideas and networking among support group leaders.

### Committee Members

#### Chair

Kellie Armstrong, MS, RN, CBN

#### Co-Chair

Paul Davidson, PhD

#### IHEC Liaison

Jill Meador, RN, BSN, CBN

#### ASMBS Staff Liaison

Christine Hawn, BSBA

#### Members

Francine Broder, Psy.D.

Lauren Carey, RD

Lori Nevins, LCSW

Julie Parrott, MS, RD, CPT

Jeanne Sanders, RN, BSN, CBN

Millie Sasaki, RN, BSN, CBN

LoRita Shingleton, MSN, RN, CBN

### Committee Objectives:

- › Provide resources for the education and continued advancement of support group leaders
- › Provide resources for a certificate for support group leaders
- › Increase awareness of the necessity for support groups and improve patient access
- › Further the development, implementation and continued advancement of support groups
- › Facilitate exchange of ideas and networking among support group leaders

### 2016 Activities Accomplished to Meet the Objectives

- › Publish completed support group manual on ASMBS website
- › Created and utilize email listserv for support group facilitators to communicate and share ideas and documents
- › Moderated support group facilitator networking session at ObesityWeek 2015
- › Led ObesityWeek 2015 course for seasoned support group facilitators
- › Moderated support group facilitator roundtable at Obesity Week-End 2016
- › Conducted a pre-conference half-day training in support groups at ObesityWeek 2016

### 2016 Activities Still in Progress

- › Develop support group facilitator toolkit
- › Review, refine, and make additional suggestions for MBSAQIP support group leadership definition
- › Develop an ASMBS Community Standard for program support group facilitators
- › Survey to be developed for dissemination to new support group leaders, facilitators and programs assessing their needs and resources for support group facilitation
- › Develop ASMBS policies and protocols for evidence-based and best practice with regard to the development and facilitation of bariatric surgery support groups
- › Revision of the ASMBS website Support Group Directory

# Awards and Honors

## John Halverson Young Investigator Award

Papers accepted for oral presentation in the Scientific Sessions with Medical Students or Residents as first author at the time of the application are eligible for the John Halverson Young Investigator Award. The recipient of this award demonstrates excellence in bariatric surgery research, presentation of their findings and fielding of questions during the presentation. The recipient is awarded a monetary gift and a plaque of recognition.

### 2015 Recipient

**Jennifer Kaplan, MD, San Francisco, CA**

The benefit and cost effectiveness of laparoscopic gastric bypass stems largely from resolution of metabolic disease, not just weight loss.

## Poster Awards

Two first authors of posters will be selected to receive a monetary gift and certificate based on the excellence of their poster presentation on their selected topic in the field of bariatric surgery.

### 2015 Recipients

#### First Place

Ali Aminian, MD, Cleveland, OH

Gastric Bypass Surgery Regulates Gene Expression Of Promoting Factors Of Diabetic Nephropathy in Diabetic Fatty Rats

#### Second Place

Iman Ghaderi, MD MSc, Tucson, AZ

Preoperative Endoscopic and Radiologic Evaluation Of Bariatric Patients: What Do They Add?

## Top Video Award

Presenter/first author of video will be selected from video abstract presentations to receive a monetary gift and certificate based on the quality of the video and its scientific merit to the field of metabolic and bariatric surgery.

### 2015 Recipient

**Andrew Van Osdol, MD, La Crosse, WI**

Out of sight, but not out of mind: excluded stomach pathology after roux-en-y gastric bypass

## Research Grant Awards

The ASMBS Research Grant Awards program is open to any principal investigator who is an ASMBS member. Awards are conferred on a competitive basis by submission of a grant application that is reviewed and evaluated by the ASBMS Research Committee and approved by the Governing Board. Upon their completion, the results of this project are expected to be presented at the ASMBS Scientific Sessions, as well as published in *SOARD*. Funding for the 2014 Research Grant program was provided by the ASMBS Foundation.

### 2015 Recipients

**Mohamed R. Ali, MD, University of California Davis Medical Center**

Gut Microbiota and Their Xeno-Metabolites: Associations with Metabolic Health of Women Undergoing Roux-En-Y Gastric Bypass

**Amount Awarded \$50,000**

**Eric S. Hungness, MD, University**

Effect of Laparoscopic Sleeve Gastrectomy on Esophagogastric Junction Distensibility

**Amount Awarded: \$25,000**

## Integrated Health Research Award

First authors of papers accepted for the Integrated Health Papers Session are eligible for the Integrated Health Research Award. The recipient of this award demonstrates excellence in bariatric surgery research, presentation of their findings and fielding of questions during the presentation. The recipient is awarded a monetary gift sponsored by the ASMBS Foundation.

### 2015 Recipients

#### First Place

Melissa Kalarchian, PhD, Pittsburgh, PA

Psychiatric Disorders And Weight Change In A Prospective Study Of Bariatric Surgery Patients: A 3-Year Follow-Up

#### Second Place

Paul Lorentz, MS RN RD BBA, Rochester, MN

Use Of Audience Response System (Ars) Technology In A Post-Bariatric Surgery Population

## ASMBS Foundation's Outstanding Achievement Award

The ASMBS Foundation's Outstanding Achievement Award honors an ASMBS member who supports the goals and vision of the ASMBS Foundation, has displayed a lasting impression and selfless commitment to the ASMBS organization and has made significant contributions to the field of metabolic and bariatric surgery.

### 2015 Recipient

**Scott A. Shikora, MD, Brigham and Women's Hospital**

## Circle Of Excellence Award

Each year during the ASMBS Annual Meeting, the Integrated Health Chair presents the Circle of Excellence Award to an outstanding member who has made a significant contribution to the Integrated Health Sciences section of the ASMBS. This award recognizes achievement in the fields of education, research, patient care, administrative and/or public awareness, as well as dedicated and loyal services to the Integrated Health Science Section.

### 2015 Recipient

**Pamela Davis, RN, CBN, MBA**

## International Awards

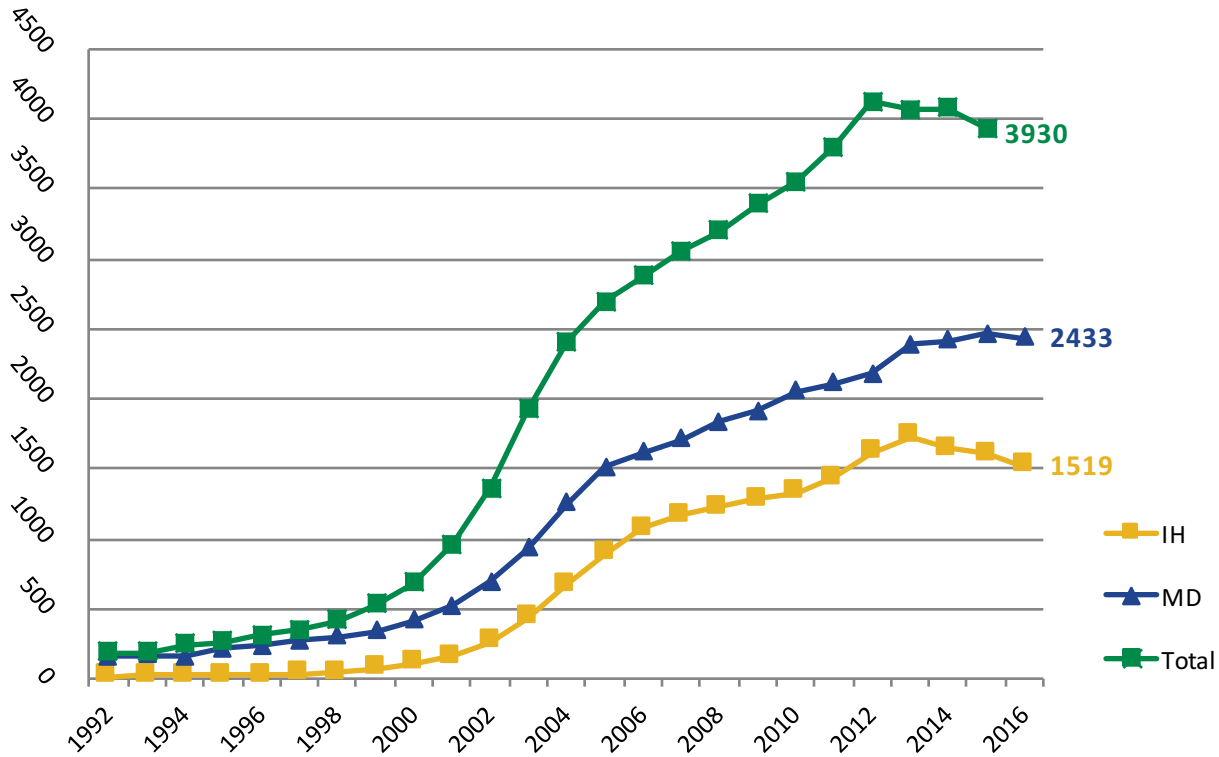
In order to encourage, support and acknowledge those surgeons from tier two and three countries who have overcome financial hurdles to attend the ASMBS Annual Meeting, we have developed the "International Awards Program". The International Committee will determine the top podium, posters or video contributions from those surgeons and acknowledge them with a monetary gift plus waived registration to the ASMBS Annual Meeting. Funding for the International Awards is provided equally in part by IFSO and the ASMBS Foundation.

### 2015 Recipient

**Matias Sepulveda**

Roux-En-Y Gastric Bypass Versus Sleeve Gastrectomy With Jejunal Bypass For The Treatment Of Type 2 Diabetes: Results At 12 Months Of Follow-Up. Id – A5024

# Membership Growth

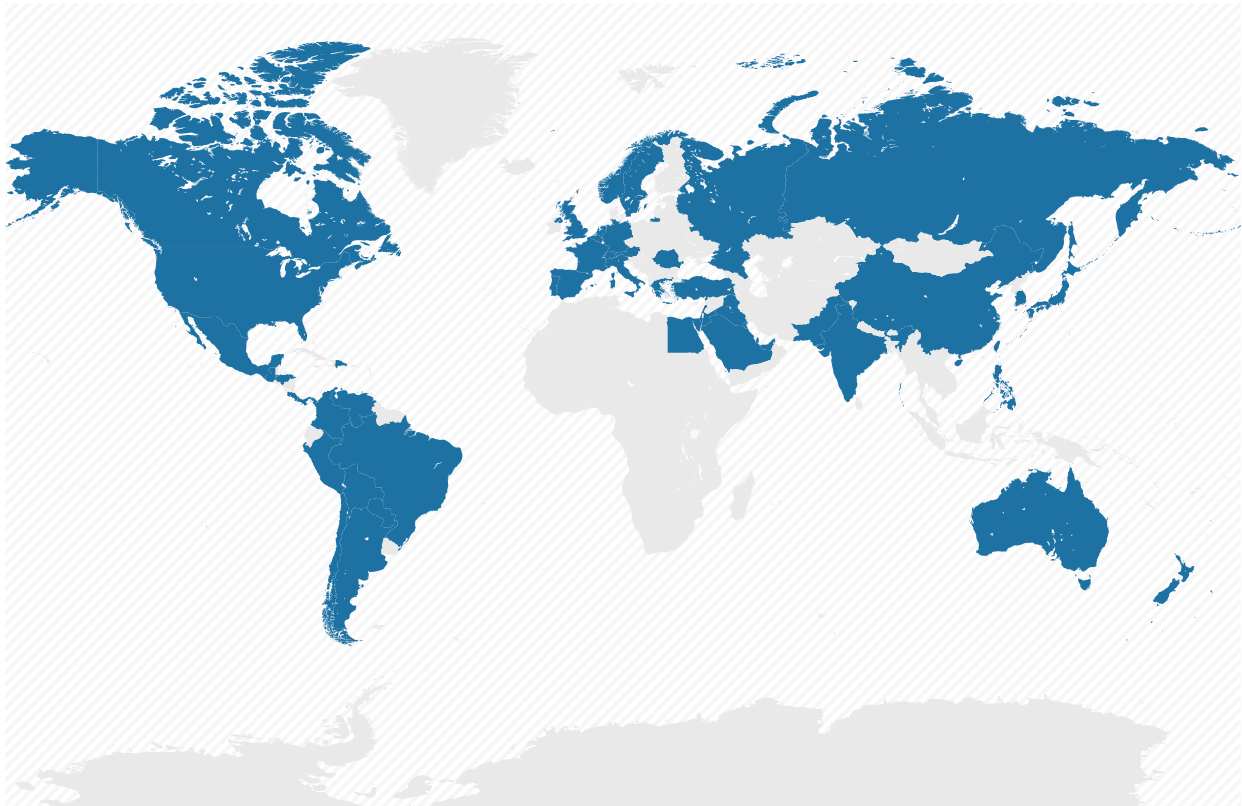


**The very essence of the ASMBS is its membership.** Our members represent surgeons and professionals from a wide variety of specializations throughout the world—all of which play crucial roles in the care of bariatric patients. Since 1983, our multidisciplinary society has grown to include over 2,300 surgeons and physicians, and over 1,600 integrated health professionals.

## International Growth

The ASMBS continues its endeavor to broaden its global community of bariatric surgery professionals. We can proudly report that we have members in over **52 countries** across the world.

( see map below )



# Financial Report

## ASMBS Finance Committee

Stacy Brethauer, MD

Raul Rosenthal, MD

John Morton, MD

Georgeann Mallory, RD

## Overview

ASMBS remains a fiscally healthy organization in 2014 with a positive change in net assets of \$153,192. ASMBS educational meetings and membership dues continued to show strength and remain the cornerstones of the revenue from which the many ASMBS projects are funded. On December 31, 2014, the ASMBS had net assets of just under \$6.8M and a balance in its investment accounts of just under \$5.4M.

## Education

2014 was the second year the ASMBS held its annual meeting in collaboration with The Obesity Society to form one meeting, ObesityWeek, which combines the science and educational programs of both organizations. This second year of collaboration resulted in net earnings for the ASMBS of \$968,000. We are looking forward to the 2015 ObesityWeek to be held in Los Angeles and expect the same success as seen in the previous two years.

The ASMBS also hosted the fifth annual ASMBS Spring Educational Event held in Miami in 2014. Attendance to this annual event continues to grow each year. In 2015 the ASMBS Spring Educational Event was renamed and is now known as “Obesity Week-End”. The first Obesity Week-End was held in Las Vegas in June, 2015, with registration more than doubling that of 2014, while also maintaining a steady growth in industry support. We are excited to watch and see the future success of this meeting.

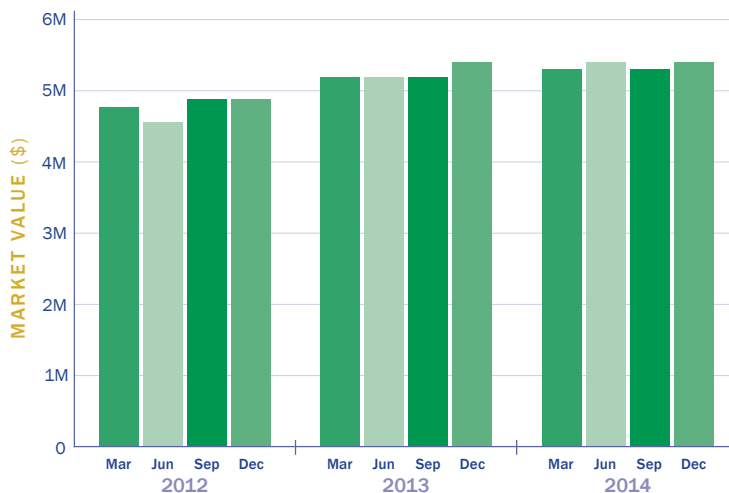
The ASMBS also continues to provide online education and other educational programs.

## Membership

The ASMBS membership exceeds 4,000 members with strong representation of surgeons and integrated health professionals. Throughout the history of the ASMBS we have experienced yearly membership increases. Membership dues make up approximately 20% of our total revenues.

## ASMBS Foundation

The Foundation supports the ASMBS and its initiatives toward education, research, and advocacy. In 2014, the Foundation gave \$178,750 in support of the ASMBS. They provide a large part of the support for the extremely important advocacy initiatives of the ASMBS and they are the sole supporter of our yearly research grants. We are very appreciative of the support from the ASMBS Foundation.



# Financial Statements

Each year the ASMBS financial records are formally reviewed by an independent accounting firm with a full audit performed every four to five years. The following report provides a summary of financial activity for the years ended December 31, 2015 and 2014.

American Society for Metabolic and Bariatric Surgery, Inc.		
Statements of Assets, Liabilities and Net Assets – Accrual Basis		
December 31, 2015 and 2014		
	2015	2014
Total Assets	\$7,490,695	\$7,306,454
Total Liabilities	\$478,916	\$506,982
Net Assets	\$ 7,011,779	\$6,799,472

American Society for Metabolic and Bariatric Surgery, Inc.		
Statements of Revenues and Expenses – Accrual Basis		
December 31, 2015 and 2014		
	2015	2014
<b>REVENUES</b>	<b>2015</b>	<b>2014</b>
Annual Meeting (net of expense)	\$983,319	\$968,355
Other Meetings & Educational Programs	\$762,745	\$522,064
Membership Dues/Journals	\$1,157,735	\$1,004,099
Royalties—SOARD Journal	\$126,271	\$116,027
Other Revenues	\$234,372	\$153,765
<b>TOTAL REVENUES</b>	<b>\$3,264,442</b>	<b>\$2,764,310</b>
<b>EXPENSES</b>		
Meetings & Educational Programs	\$630,042	\$492,090
Supporting Services/Management & General	\$2,379,756	\$2,299,324
<b>TOTAL EXPENSES</b>	<b>\$3,009,798</b>	<b>\$2,791,414</b>
NET OPERATING INCOME	\$254,644	(\$27,104)
INVESTMENT INCOME (LOSS)	\$212,307	\$153,192
<b>CHANGE IN NET ASSETS</b>	<b>\$153,192</b>	<b>\$1,199,966</b>
NET ASSETS AT BEGINNING OF YEAR	\$6,799,472	\$6,646,280
<b>NET ASSETS AT END OF YEAR</b>	<b>\$7,011,779</b>	<b>\$6,799,472</b>



# Media Outreach and Public Relations

2015-2016

The American Society for Metabolic and Bariatric Surgery (ASMBS) continues to shape the dialog around obesity and its treatment through proactive communications programming that generates news coverage in both top-tier consumer and professional media outlets. Working with its longtime strategic partner, Communication Partners & Associates, the ASMBS stands as a credible and authoritative voice and resource on the continuum of care, access to care, the science of obesity, metabolic and bariatric surgery, and emerging treatments.

Communications programs over the last year built on the success of more than a decade of public awareness and education efforts that have bolstered and clarified the role of bariatric surgery in the continuum of care in obesity treatment. Initiatives have focused on the pros and cons of surgery, access to care, diabetes surgery, the impact of weight-loss surgery on heart disease, cancer, orthopedics, high blood pressure and other obesity-related diseases and conditions. We have also increased recognition of ObesityWeek as the premier meeting focused on the science of obesity and its treatment, and focused on the healthcare community and government response to the obesity epidemic and clinical and economic consequences of obesity.

Strategic message development, media training, and national media relations sought to create a more favorable environment for obesity treatment, including weight-loss surgery, increased doctor-patient dialog, better health policies, less obesity-associated stigma, confrontation of fear and denial of obesity and treatment with bariatric surgery, and the removal of unnecessary insurance-mandated barriers to obesity treatment.

Two major highlights of the year include a landmark survey, entitled the ASMBS/NORC Obesity Poll, that elicited nationally projectable opinions of obesity and its treatment from 1,500 Americans. The ASMBS and Communication Partners partnered with independent research organization NORC at the University of Chicago and asked both consumers and people with obesity about their views between August 11 and September 21, 2016. We explored what they thought causes obesity, how big a threat they consider obesity relative to other life-

threatening diseases like heart disease, the feelings they associate with it, how safe and effective each weight-loss method is and how successful they have been in battling the disease (and whether or not they consider it a disease in the first place.)

A news release was issued the first day of ObesityWeek resulting in national news coverage, most particularly through a major story in The New York Times on the opening day of ObesityWeek.

Data collected during the poll has been summarized in two reports: “Obesity Rises to Top Health Concern for Americans, but Misperceptions Persist,” and, “New Insights into Americans’ Perceptions and Misperceptions of Obesity Treatments, and the Struggles Many Face.”

The news coverage didn’t stop there. The story was covered on CNBC, People magazine, Cosmopolitan, Managed Care Magazine, Healio, Medscape, Reuters, UPI, Yahoo News, EmPowHer, MedPage Today, Vox Media, The Advisory Board, and many other places, including social media channels.

Some of the abstracts from ObesityWeek 2016 also made national headlines as five news releases and fact sheets developed about their findings and media outreach to top news outlets including Reuters, MSNBC, Medscape, U.S. News and World Report, MedPage Today, UPI, Healio, WebMD, Endocrinology Advisor, News Medical, HealthDay and Health, among many others. New releases featured commentary from study authors and ASMBS members who were not part of the studies. These news releases, along with the survey news release and issue briefs were part of a press kit that was available for the dozen or so media representatives in attendance at ObesityWeek 2016.

In addition to the media relations activities that take place prior and during ObesityWeek, the ASMBS maintains dialog with national media outlets throughout the year and participates in stories about obesity and weight-loss surgery to provide the public with accurate information about the pros and cons of obesity treatment.

Stories featuring ASMBS members appeared in top news outlets including the Associated Press (AP) to help consumers weigh the decision about weight-loss surgery,

The New York Times, The New Yorker, The Wall Street Journal, CBS News, NBC News, Reuters, Prevention, and Health.com, as well as medical-focused outlets such as Medscape, MedPage Today, General Surgery News and Endocrine Today. These articles included commentary and insights on high-profile topics including insurance coverage, diabetes surgery, the impact of accreditation standards on patient outcomes, emerging technologies, safety, and studies published in major medical journals including Journal of the American Medical Association, The New England Journal of Medicine, Annals of Surgery and the Journal of the American College of Surgeons. Tens of millions of people have read, watched or heard stories featuring ASMBS members talking about obesity and weight-loss surgery, among other topics.

In addition to media relations, the ASMBS issued statements on developing and important issues, including a letter to the editor from ASMBS president Dr. Raul Rosenthal published by The New York Times in response to a story that claimed diet and lifestyle interventions were just as effective as bariatric surgery in treating diabetes.

### **The Opinion Pages**

Communications outreach was conducted around a milestone publication of new evidence-based guidelines endorsed by 45 international professional organizations, including ASMBS, that for the first time said there is “sufficient clinical mechanistic evidence to support inclusion of metabolic surgery among antidiabetes interventions for people with T2D and obesity,” and “health care regulators should introduce appropriate reimbursement policies.

In its third year, connect has come to be a highly-read and recognizable monthly resource for ASMBS members and others interested in topics related to obesity. On average, more than 4,000 members and other visitors read original articles and photos each month that have included stories about healthcare costs, sleeve gastrectomy, type 2 diabetes, Affordable Care Act, patient access, ASMBS joint statements, “The Biggest Loser,” the rise of obesity in America, the ASMBS PAC, and the ASMBS/NORC obesity poll.

The ASMBS continues to develop its strategic communications plan for 2016-2017 while it continues its work on elevating the importance of treating the disease of obesity through better understanding of the science behind it and the safety and effectiveness of the continuum of care, particularly bariatric and metabolic surgery.

# SOARD Annual Report

Since its inception in 2004, the journal has been published every other month for a total of six issues per year. 2016 there were 10 issues with combine months of April and May, September and October. This was a result of an increased number of submissions and accepted original manuscripts. The increased number of manuscripts has been partly responsible for the decrease in our impact factor from 4.1 to 3.5. In 2017 SOARD will be published monthly for a total of 12 issues per year. This might lead to a further decrease in the IF; however, I am confident that in that there will be a progressive increase in the IF in years to come. The impact factor is derived from the number of references to articles published over the two prior years (i.e. 2013 + 2014) of the determination (i.e. 2015) and then divided by the number of manuscripts in the the two prior years previous year (i.e. 2013 + 2014).

Our journal submissions increased from 413 in 2013 to 557 as of October 31, this year, of which 328 were original articles. We published 52 Paired Editorials. The rejection rate for original articles I is currently 46% which is the same as last year. We published 120 original articles in 2013, which increased to 140 as of the current time in 2016 . The average time between receipt of a manuscript and initial decision or referral to an Associate Editor was less than 1 day. The average time until reviewers were assigned was 14.5 days. Obviously, some reviewers received many more than 3 and many just 1. The number of revisions per original manuscript is still high at an average of 2/article with several manuscripts requiring up to 5 revisions. The top contributors for 2007 through 2016 have been Stacy Brethauer, Phil Schauer, Raul Rosenthal, James Mitchell, Alfons Cleveland clinic Florida, university of Pennsylvania and Columbia University. Duke University, University of Pittsburgh, Neuropsychiatric Research Institute, Weill Cornell Medical College, Brigham and Women's Hospital, Cleveland Clinic Florida, University of Pennsylvania and Columbia University.

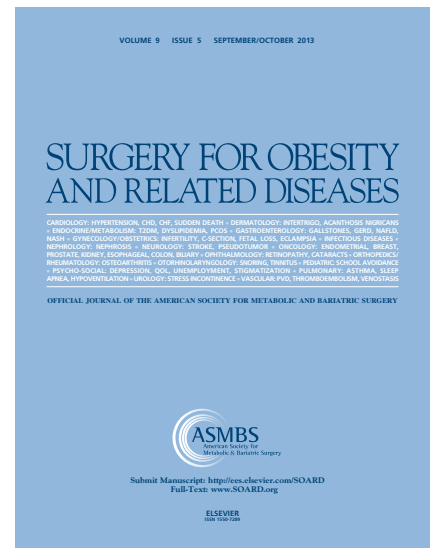
We still received 46% of our manuscripts from North America, 34% from Europe and 10% from Asia. The remaining areas are between 1 and 3% for this past year which has been well received. Beginning in 2015, a special Chinese addition has been published with 1000 copies. It is edited by a Chinese surgeon and the articles chosen are approved by myself. this past year which has been well received. There were two issues in 2015 and one so far this past year.

Since initiating a \$500 submission fee for open access case reports, there has been an appropriate decrease in the number of accepted case reports, which is managed by Dr. Michel Murr. this has produced approximately \$10,000

in income for the journal which is shared by the Society. The Continuing Medical Education program for both readers of the journal and reviewers of manuscripts has been quite successful, led by Dr. Samer Mattar. We tried to initiate a Twitter SOARD Journal Club (@soardjc) but this was not successful. We have a new journal club coordinator, Dr. Richard Peterson who switched the club from Twitter to Facebook and these last sessions have been quite popular. Dr. Peterson has been made an Associate Editor

We are in our second year of a 5-year contract with Elsevier. Our publication manager is David Newcombe who has a private company that manages journal submissions. His work has been excellent and as good as Angelica Kerr previously. Our new contract provides for an Abstract Supplement for our annual meeting as part of Obesity Week. This was provided to all ASMBS attendees this year. Manuscripts which are accepted still become available online shortly after acceptance and are replaced with edited manuscripts after galleys. They subsequently become available on PubMed as "Epub before print". At any of these stages, the manuscript can be referenced. Most manuscripts now appear in print within 4 months of acceptance.

As you all know, I suffered a severe injury falling out of a second-story window, making me a paraplegic, actually a quadriplegic. However, I have good use of my right hand and an ability to dictate. I have had some progressive movement in my right leg and I hope and trust this will continue to improve. I want to thank all of you for your kind thoughts, emails and cards during this trying period of time. Bruce Wolfe needs a great deal of appreciation from the Society for work that he did when he took over during the two months I was disabled. I gather that it was a steep learning curve. We've had some delay in publication of the August and September issues, but I think we have now caught up with our backlog. I would like to thank the ASMBS for letting me continue as editor-in-chief, now entering our 13th year of publication.



# Advocacy Update

## SUMMARY OF ADVOCACY EFFORTS IN 2016

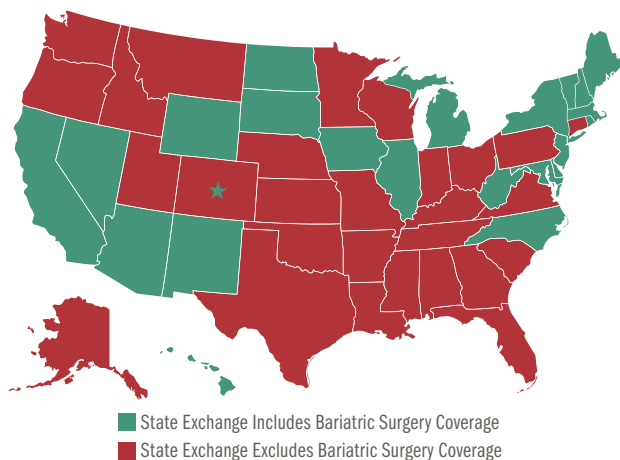
### Essential Health Benefits

The Obesity Care Continuum (OCC) continued its campaign to secure state health exchange coverage for all evidence-based obesity treatment services. In a three-pronged offensive, OCC member groups are targeting the media, legislative and regulatory policymakers at the federal level, and key decision makers in state health exchanges across the country.

The Obesity Care Continuum was established in 2011 and currently includes the Obesity Action Coalition, The Obesity Society, the Academy of Nutrition and Dietetics, the American Society for Metabolic and Bariatric Surgery, and the Obesity Medicine Association. With a combined membership of over 125,000 healthcare professionals, researchers, educators and patient advocates, the OCC is dedicated to promoting access to, and coverage of, the continuum of care surrounding the treatment of overweight and obesity.

On the federal regulatory front, the OCC continues its five-year dialogue with the Department of Health and Human Services (HHS) to address major gaps in obesity treatment coverage that are evident in a majority of state health exchanges. Most recently, these efforts have focused on providing HHS with clear examples of qualified health plans (QHPs) employing discriminatory benefit design language targeting obesity treatment – in states that have already declared bariatric surgery to be a covered service under their state health exchange plan. Discussions focused on surgery as “weight loss programs” and “bariatric surgery” are the only obesity related terms that can be tracked in QHP Summary of Benefits and Coverage forms.

### Summary of Coverage of State Health Exchange Essential Health Benefit (EHB) Benchmark Plans



Twenty-two states chose benchmark plans that cover bariatric surgery (AZ, CA, DE, HI, IL, IA, ME, MD, NV, NH, NJ, NM, NY, NC, ND, MA, MI, RI, SD, VT, WV and WY). Five states chose benchmark plans that cover weight-loss programs (CA, DC, NM, MA and MI).

Twenty-eight states chose benchmark plans that cover neither bariatric surgery nor weight-loss programs (AL, AK, AR, CO, CT, FL, GA, ID, IN, KS, KY, LA, MN, MS, MO, MT, NE, OH, OK, OR, PA, SC, TN, TX, UT, VA, WA, WI)

For example, a number of QHPs in California, Michigan, New Mexico and New York either outright exclude bariatric surgery coverage, limit patients to one procedure per lifetime or employ prohibitive patient cost sharing – as high as 70 percent for patients seeking bariatric surgery. And in one of the most egregious examples – the OCC has identified QHPs in states such as Kentucky and Missouri that not only exclude coverage for bariatric surgery but also prohibit coverage for any perceived complications that may be related to a patient’s previous bariatric surgery covered under a prior carrier or self-funded plan. Despite these clear violations of Affordable Care Act patient protections (pre-existing condition clauses, lifetime limits and discriminatory benefit design language) HHS continues to side step its oversight authority in favor of letting states work out these issues – instructing advocates to contact state insurance commissioners for any kind of recourse.

These developments signaled that it was time for the obesity community to go back to Capitol Hill in hopes of a legislative remedy. While most congressional offices had no desire to engage in a discussion about a legislative mandate for covering obesity treatment, they were intrigued by recent activity over at the Office of Personnel Management (OPM). Earlier in the year, OPM issued specific guidance to both Multi-State Health Plans and Federal Employee Health Benefit Program carriers regarding obesity treatment services – stating that the agency will no longer tolerate plans excluding obesity treatment coverage on the basis that obesity is a “lifestyle” condition or that treatment is “cosmetic.”

In sharing this news on Capitol Hill, the OCC found that many offices were both appreciative of OPM’s leadership on this issue and also a little concerned about the public perception of federal employees receiving access to obesity treatment coverage protections not afforded to the millions of Americans in state health exchange plans. These feelings led both Representative Eddie Bernice Johnson (D-TX) and Representative Earl Blumenauer (D-OR) to initiate a congressional sign-on letter to HHS Secretary Sylvia Burwell – urging the Department to follow OPM’s lead and issue similar guidance on obesity treatment coverage to state health exchanges. Representatives Johnson and Blumenauer and 47 other House Members signed on the final letter.

OCC member groups were joined by 10 other national healthcare professional and patient organizations in supporting a full-page advertisement in the Capitol Hill newspaper Roll Call during the week that Representatives Johnson and Blumenauer released their congressional sign-on letter. The ad questioned why state health exchanges

## ANNUAL ADVOCACY UPDATE

were discriminating against obesity treatment – highlighting how over half the state health exchanges in the country exclude coverage for bariatric surgery and only a handful provide coverage for evidence-based weight loss programs or FDA-approved obesity drugs.

The OCC correctly believed that the ad would be a great catalyst for securing strong support on the Johnson/Blumenauer letter by shedding sunlight on the unequal coverage standards for obesity compared to other chronic disease states. In addition, the obesity community sought to build on the momentum of the American Medical Association's (AMA) recent adoption of policy stating that obesity is a disease and that the AMA "supports patient access to the full continuum of care of evidence-based obesity treatment modalities such as behavioral, pharmaceutical, psychosocial, nutritional, and surgical interventions."

HHS Secretary Burwell did respond to the Johnson/Blumenauer letter in early 2015 – stating that, "I agree that obesity in this country is a critical issue and that it is affecting the well-being of our nation. I also agree that consumers in the Marketplace should have access to a range of evidence-based obesity treatments. HHS has implemented several provisions of the ACA that address coverage of obesity-related treatments in the Marketplace and seeks to provide access to the full continuum of care for obesity to all Americans."

Secretary Burwell continues in highlighting examples of "obesity-related treatments" that include: obesity screening and referral to intensive behavioral therapy (IBT); intensive interventions that promote a healthful diet and physical activity to prevent cardiovascular disease in individuals with obesity and additional cardiovascular risk factors; and screening for type 2 diabetes, lipid disorders and high blood pressure. The OCC would argue that most of these treatments, with the exception of IBT for those with obesity, are simply preventive screenings to identify a chronic condition. Unfortunately, individuals identified with obesity are not guaranteed coverage to the full continuum of evidence-based treatment services specific to their condition – when compared to covered treatments for those who are identified with heart disease, diabetes, lipid disorders and high blood pressure.

### **OCC Establishes the Obesity Care Advocacy Network**

The HHS's continued disinterest in truly engaging on these issues led the OCC to found, with the help of Novo Nordisk, the Obesity Care Advocacy Network or "OCAN." The mission of OCAN is to partner with other medical societies and organizations to change how the nation perceives and approaches the U.S. obesity epidemic by educating and advocating for public policies and increased funding for obesity education, research, treatment and care. Members in OCAN include the OCC groups as well as the American Association of Clinical Endocrinologists, Endocrine Society, Novo Nordisk, the American Association of Physician Assistants (AAPA), the American Medical Group Association (AMGA), and the Health Leadership Council.

OCAN educational efforts were on display this summer during the Republican and Democratic National Conventions when OCAN leaders participated in an obesity forum that was sponsored by Novo Nordisk, Inc. Delegates, staffers, Representatives, Senators, and press were invited to the briefings, where celebrities Tim Daly, Billy Baldwin and Elizabeth Banks were also in attendance. The forum, which was moderated by OMA President Dr. Debbie Horn, helped the audience understand the state of obesity care. A tremendous panel of experts, including policy makers, military officials, obesity medicine specialists and researchers, patients, and employer experts answered audience questions.

On the policy front, OCAN has weighed in on a number of regulatory issues – recently urging HHS to rigorously follow up on Department of Labor guidance that was issued in late 2015. Since June of 2012 when the United States Preventive Services Task Force (USPSTF) issued its final recommendation statement entitled, "Obesity in Adults: Screening and Management," the obesity community has been urging HHS to carefully review state health exchange EHB benchmark plan submissions to ensure that these services are being adequately covered. These efforts led the Department of Labor to issue clear guidance in October 2015 that non-grandfathered health plans are prohibited from including general exclusions for weight management services for adult obesity in their plan documents.

Despite the clear implementing regulations of the preventive health care services section of the ACA and the subsequent guidance from the Department of Labor, health plans continue to employ discriminatory medical management techniques to limit patient access to obesity screening and counseling services. For example, a recent review and analysis of state EHB benchmark plan documents for 2017 on the Centers for Medicare & Medicaid Services website found that 24 states have general exclusions for weight/obesity management services and make NO MENTION of obesity screening and counseling services under the USPSTF covered preventive services section of their certificate of coverage document.

On October 6, 2016, OCAN highlighted these concerns in formal comments to HHS in response to proposed regulations regarding benefit and payment parameters for 2018 for federally-facilitated exchanges and state-based exchanges on the federal platform and urged the Department to exercise rigorous oversight of state insurance authorities to ensure that the millions of Americans affected by obesity receive screening and follow up treatment services in the same fashion as others affected by chronic disease.

### **FDA Review & Approval of New Obesity Therapeutics**

For more about the Obesity Care Continuum contact OCC Washington Coordinator Chris Gallagher at [chris@potomaccurrents.com](mailto:chris@potomaccurrents.com).

# State Chapters

## Alabama

### President

Kenneth Todd Foreman, MD  
FASMBS

### Vice President

Andrew DeWitt, MD FASMBS

### Secretary/Treasurer

William J. Suggs, MD FASMBS

### Past President

Richard Stahl, MD

### STAR

Kenneth Todd Foreman, MD  
FASMBS

## Arizona

### President

David Podkameni, MD

### Vice President

James Madura, MD FASMBS

### Treasurer

Carlos Galvani, MD

### STAR

Robert Berger, MD

## California

### President

Brian Smith, MD FASMBS

### Vice President

Kelvin Higa, MD FASMBS

### Secretary

John Morton, MD FASMBS

### Treasurer

Alan Wittgrove, MD FASMBS

### STAR

Ajay Upadhyay, MD

## Canada

### President

Michel Gagner, MD

### Vice President

Simon Biron, MD

### Secretary

Mervyn Deitel, MD SFASMBS

### Treasurer

Nicolas Christou, MD

### STAR

Michel Gagner, MD

## Carolinas

### President

David Wayne Overby, MD

### Treasurer

Rana Pullatt, MD FASMBS

### Immediate Past President

Jason Johnson, DO

### Past President

Stephen McNatt, MD

### STAR

Ranjan Sudan, MD FASMBS

## Connecticut

### President

Aziz Benbrahim, MD

### Vice President

Neil Floch, MD

### Secretary/Treasurer

Abe Fridman, MD

### Integrated Health Chair

Sally Strange, PhD RN CBN

### Past President

Jonathan Aranow, MD

### STAR

Darren Tishler, MD

## Dakota-Yellowstone

### President

Luis A. Garcia, MD MBA

### Vice President

John Pender, MD

### Treasurer

Kristen Loper, BSN RN

### STAR (SD)

Kristin J. Turek, CPN

### STAR (ND)

Luis A. Garcia, MD MBA

### STAR (MT)

John Pender, MD

### STAR (WY)

Kevin Helling, MD

### STAR (ID)

Alian Garay, MD

## Delaware

### President

Michael B. Peters, MD FASMBS

### Vice President

Gail M. Wynn, MD

### Treasurer

Isaias Irgau, MD FASMBS

### STAR

Rahul Singh, MD

## Florida

### President

Samuel Szomstein, MD FASMBS

### Vice President

Muhammad A. Jawad, MD FASMBS

### Secretary

John P. Gonzalvo, DO FASMBS

### Treasurer

Nestor F. de la Cruz-Munoz, MD

### Integrated Health Chair

Lynne Thompson, BA RN CBN

### Integrated Health Co-Chair

Lillian Craggs-Dino DHA RDN LDN  
CLT

### Past President

Michael Murr, MD

### STAR

Joseph Cheblis, MD FASMBS

## Georgia

### President

Titus Duncan, MD

### Vice President

Michael Williams, MD

### Secretary/Treasurer

John Bagnato, MD

### STAR

Joseph Cheblis, MD FASMBS

## Hawaii

### President

David E. Henry, MD

### Vice President

Brian K. Wong, MD

### Treasurer

Mark Verschell, PsyD

### Secretary

Sasha Goto, MBA MAOC

### Past President

Mark W. Grief, MD

### STAR

Steven Fowler, MD FASMBS

## Illinois

### President

Jonathan Wallace, MD FASMBS

### Vice President

Frederick Tiesenga, MD

### Secretary/Treasurer

Daniel Wool, MD

### Immediate Past President

Vafa Shayani, MD FASMBS

### Past President

Rami Lutfi, MD FASMBS

### STAR

Jayaraj Salimath, DO BSN

## Indiana

### President

Margaret Inman, MD FASMBS

### Vice-President/Secretary

Robert Cooper, MD

### Treasurer

Eric Knapp, MD

### STAR

Brenda Cacucci, MD FASMBS

### Members at Large

Denise C. Murphy, MD

Paul Stanish, MD FACS

## Iowa

### President

Michael Phelps, MD

### Vice President

Matthew Severidt, DO

### Secretary/Treasurer

David Aanestad, MD

### Integrated Health Chair

Alissa Lilla, PA-C

### Integrated Health Co-Chair

Kimberly Hibgy, RN CBN

### Immediate Past President

Teresa L. LaMasters, MD FASMBS

### STAR

Matthew Christophersen, MD

## Louisiana

### President

James N. Parrish, MD

### Secretary

Drake Bellanger, MD

### Treasurer

Todd Belott, MD

### Integrated Health Chair

Katherine Wardlaw, RN

### Past President

Rachel Moore, MD

### STAR

Philip Gachassin, MD

## Maryland

### President

Elizabeth Dovec, MD

### Vice-President

Alejandro Gandsas, MD MBA

### Secretary

Latasha N. Baxter, CRNP CBN

### Treasurer

Barry Greene, MD

### Past President

Michael Schweitzer, MD FASMBS

### STAR

David Von Rueden, MD

## STATE CHAPTERS

### Michigan

#### President

Jeffrey Genaw, MD FASMBS

#### Vice-President

David Chengelis, MD

#### Secretary

Oliver Varban, MD

#### Treasurer

Mindy K. Lane, DO

#### Past President

Carl Pesta, DO FASMBS

#### STAR

Matthew Weiner, MD

### Minnesota

#### President

Howard McCollister, MD

#### Vice President

Todd Kellogg, MD

#### Treasurer

Laurie Kaiser Sund, MD FAFAP

#### STAR

Daniel A.P. Smith, MD

### Mississippi

#### President

David Carroll, MD

#### Secretary/Treasurer

Jennifer O'Flarity, RN BSN  
DeeDee Anderson

#### STAR

Patrice Buisson, LD RD

### Missouri

#### President

James Pitt, DO FASMBS

#### Secretary

Angela Britt

#### Immediate Past President

J. Stephen Scott, MD

#### Past President

J. Chris Eagon, MD FASMBS

#### STAR

J. Chris Eagon, MD FASMBS

### Nebraska

#### President

Thomas J. White, MD FASMBS

#### Vice President/Secretary

Gary J. Anthone, MD FASMBS

#### Treasurer

Corrigan L. McBride, MD FASMBS

#### STAR

Gary J. Anthone, MD FASMBS

### New Jersey

#### President

Michael Bilof, MD FASMBS

#### Vice President

Glenn Forrester, MD FASMBS

#### Secretary/Treasurer

Naveen Ballem, MD FACS

#### STAR

Alexander Onopchenko, MD FACS

### New York

#### President

William O'Malley, MD

#### Secretary

William Graber, MD FASMBS

#### Treasurer

Alok Gandhi, DO FASMBS

#### Past President

Dominick Gadaleta, MD FASMBS

#### Immediate Past President

Terence Clarke, MD FASMBS

#### STAR

Dominick Gadaleta, MD FASMBS

### Ohio

#### President

C. Joe Northup, MD

#### Vice President

John Zografakis, MD FASMBS

#### Secretary

Patricia Choban, MD

#### Past President

Brad Needleman, MD

#### STARs

C. Joe Northup, MD  
Bradley Needleman, MD FASMBS

### Oklahoma

#### President

Hamilton S. Le, MD FASMBS

#### Secretary

Miranda Matlick, RN BSN CBN

#### Treasurer

Brandon Varnell, MD

#### Past President

Luis Gorospe, MD

#### STAR

Sarah M. Kitchen, RN BSN CBN

### Oregon

#### President

Donald Yarbrough, MD

#### Vice President

Samer Mattar, MD FASMBS

#### STAR

Valerie Halpin, MD FASMBS

### Pennsylvania

#### President

Fernando Bonanni, MD FASMBS

#### Vice President

Joseph McPhee, MD FASMBS

#### Secretary & Treasurer

Luciano Dimarco, DO

#### STAR

Ann Rogers, MD FASMBS

### Tennessee

#### President

Virginia M. Weaver, MD

#### Vice President

David Dyer, MD FASMBS

#### Secretary/Treasurer

Christopher Sanborn, MD FASMBS

#### Past President

Brandon Williams, MD FASMBS

#### Integrated Health Chair

Pamela Davis, BSN RN CBN MBA

#### STAR

Pamela Davis, BSN RN CBN MBA

### Texas

#### President

Michael V. Seger, MD FASMBS

#### Vice President

Robert O. Carpenter, MD FASMBS

#### Secretary

Todd D. Wilson, MD

#### Treasurer

Sina Matin, MD FASMBS

#### Past President

Richard Peterson, MD FASMBS

#### STAR

Robert O. Carpenter, MD FASMBS

### Virginia

#### President

Kinga Powers, MD PhD SAMVAMC

#### Vice President

Guilherme Campos, MD FACS

#### STAR

Troy Glembot, MD FASMBS

### Washington

#### President

Jeffrey Hunter, MD

#### Vice President

Alana Chock, MD

#### Treasurer

Judy Chen, MD FASMBS

#### Integrated Health Chair

Carmela Pontillo, RN MSN CBN

#### Past President

Ross McMahan, MD

#### STAR

Brian Sung, MD FASMBS

### Wisconsin

#### President

Luke Funk, MD FASMBS

#### Vice President

Brandon T. Grover, DO FASMBS

#### Secretary/Treasurer

Daniel McKenna, MD FASMBS

#### STARs

Shanu Kothari, MD FASMBS  
Kevin Wasco, MD FASMBS

# Corporate Council



Corporate Council enriches community relations, contributes financially, and plays a leadership role in the future of treatment of individuals with obesity. ASMBS' builds the relationship between industry and ASMBS' members, offering monthly/quarterly meetings, conferences, marketing opportunities, and other collaborative ventures. Industry plays an essential role in providing services, products, and equipment that supplement the relationship between the healthcare provider and the patient. ASMBS recognizes the importance of industry and is proud to partner with leading bariatric/metabolic companies through the ASMBS Corporate Council offering avenue for awareness and support.

In addition to supporting the spring and annual Obesity conferences; the Access to Care Initiatives; this past year the Council contributed to a one-time special project: an "Obesity in America" survey. ASMBS Leadership will utilize the results from the survey to help guide program planning and establish goals for the future.

---

## Steering Committee Members:

### Chair

Bret Petkus

### Chair-Elect

Maureen Monahan

### Senior Past Chair

Gary Richardson

### Director-At-Large

Carol O'Dell

### Directors-at-Large

Angela Saba

Michael Oberg

Jennifer Cook

### Immediate Past Chair

Gina Baldo

### ASMBS President

Raul Rosenthal, MD, FASMBS

### ASMBS IH President

Christine Bauer, MSN, RN

### Appointed Members

Raul Rosenthal, MD

Jaime Ponce, MD

### ASMBS Executive Director

Georgeann Mallory, RD

### ASMBS Staff Liaisons

Martha Lindsey

Kristina Young

---

## Corporate Council Members:

Automated Medical, Inc.

Bariatric Advantage

Bariatric Bridge

Bariatric Fusion

BariatricPal

Bariatric Times

Baxter Healthcare

BeeWell, LLC

Care Credit

Endo Pharmaceuticals

Enteromedics

Ethicon

Fortris

Gore & Associates

Health Economic Advisors

KVK-Tech

Mederi Therapeutics

Medtronic/Covidien

Optifast

Novo Nordisk

Obesity PPM

Parthenon/Devrom

ProCare

Psy Med, Inc.

Re-shape

Robard

Sequence Health

Shimadzu Medical

Unjury

USGI Medical

For full details of the goals and future projects of the Corporate Council visit [ASMBS.org](http://ASMBS.org)

**The ASMBS would like to acknowledge and extend gratitude to the Corporate Council for supporting the production of the 2016 Annual Report.**



# The ASMBS Foundation

The ASMBS Foundation has helped kick start programs, awarded research and community grants and fueled advocacy, education and awareness initiatives that have helped shape policy and perceptions of obesity and metabolic and bariatric surgery:

- › ASMBS Certified Bariatric Nurse (CBN) Program
- › Awarded 26 ASMBS Research Grants
- › ASMBS Nutrition Guidelines Project
- › ASMBS Online CME Program
- › ASMBS Integrated Health Abstract Session Awards at Obesity Week
- › Edward Mason Professorship at the University of Iowa
- › Educational and advocacy initiatives of the Obesity Action Coalition (OAC)
- › Nationwide Walk from Obesity awareness events (annual since 2003)
- › The 2008 Walk from Obesity's Walk on the Capitol in Washington, DC
- › Walk from Obesity Cookbook
- › Awarded Bryan G. Woodward Community Grants to support local initiatives to address the obesity epidemic
- › ASMBS Fall Educational Courses (2010 & 2011)
- › The Foundation supports the ASMBS' multi-pronged initiatives to increase patient access to safe and effective treatment for the disease of obesity
- › ASMBS International Committee Awards
- › ASMBS Patient Booklet (revised)
- › ASMBS jLog™ Program
- › ASMBS State Chapter Summit
- › ASMBS Educational Meetings at ObesityWeek
- › ASMBS Quality Improvement Project
- › 2/22 Pedometer Challenge (awareness campaign)
- › ASMBS Essentials of Bariatric & Metabolic Surgery App
- › ASMBS Report on Obesity National Survey
- › The ABS/ASMBS Fellowship Curriculum Pilot Program's Objective Performance Data App



The ASMBS Foundation has given a total of just over \$2 million in support of ASMBS programs and projects.

## ASMBS Foundation's Board of Directors:

### President

Marina Kurian, MD

### Secretary/Treasurer

Keith Kim, MD

### Past President

Raul Rosenthal, MD

### Members

Alfons Pomp, MD

Bipan Chand, MD

Georgeann Mallory, RD

Samer Mattar, MD

John Morton, MD

Jaime Ponce, MD

Alfons Pomp, MD

Matthew Hutter, MD

Phillip Schauer, MD

Samer Mattar, MD

Stacey Brethauer, MD

Wayne English, MD

Rami Lutfi, MD

Gina Baldo

Karen Schulz, RN

## Staff

### Executive Director

Connie Stillwell

### Program and Events Director

Randy Slade

### Financial Manager

Kim Carmichael

### Director of Marketing and Communications

Leslie Galloway

## The ASMBS Foundation's LEAD Awards

The Foundation's Outstanding Achievement, Master Educator, Excellence in Nutrition, Patient Safety & Quality and Distinguished Industry Partner awards honor leaders in the field of bariatric surgery and are presented at the annual LEAD Awards event, held in conjunction with the Annual Meeting of the ASMBS at ObesityWeek.

## ASMBS Foundation's Mission:

The mission of the ASMBS Foundation is to raise funds for conducting research and education, increasing public and scientific awareness and understanding, and improving access to quality care and treatment of obesity and morbid obesity.

- › Raise Funds that directly support critical research and education on obesity, severe obesity, and metabolic and bariatric surgery.

- › Increase Scientific and Public Awareness and Understanding of obesity as a disease and that treatment of obesity and severe obesity can prevent, improve or resolve many metabolic diseases including type 2 diabetes and other diseases including cancer.
- › Improve Access to Quality Care and Treatment for Americans with obesity and severe obesity by eliminating policy, societal, economic and medical barriers that deny people appropriate treatment and support.

*The ASMBS Foundation shares the vision of the American Society for Metabolic and Bariatric Surgery (ASMBS) to improve the public health and well-being by lessening the burden of the disease of obesity and related diseases throughout the world.*



 **obesityweek**<sup>SM</sup> **2017**  
Washington, DC • **October 30 – November 3**

SAVE THE DATE!

