



ASMBBS

2016–2017

ANNUAL REPORT

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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 2017 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 re-operative 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 ASMBS Weekend and ObesityWeek 2017. 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 "Stacy Brethauer". The signature is fluid and cursive.

Stacy Brethauer, MD, FASMBS
ASMBS President

Executive Council



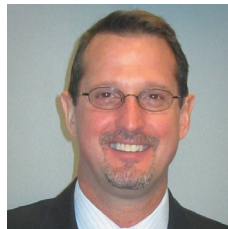
President-Elect
Samer Mattar, MD,
FASMBS

Secretary/Treasurer
Eric DeMaria, MD,
FASMBS

Past President
Raul Rosenthal, MD,
FASMBS

Senior Past President
John Morton, MD,
FASMBS

President
Stacy Brethauer, MD,
FASMBS

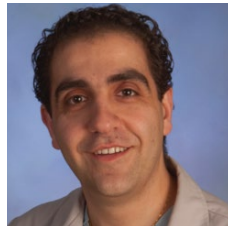


Councilperson-At-Large
Wayne English, MD,
FASMBS

Councilperson-At-Large
Michel Gagner, MD

Councilperson-At-Large
Shanu Kothari, MD,
FASMBS

Councilperson-At-Large
Marina Kurian, MD,
FASMBS



Councilperson-At-Large
Rami Lutfi, MD, FASMBS

Councilperson-At-Large
Rachel Moore, MD,
FASMBS

Councilperson-At-Large
Aurora Pryor, MD, FASMBS

Councilperson-At-Large
Ranjan Sudan, MD,
FASMBS



IH President
Karen Flanders, MSN,
ARNP, CBN

IH President-Elect
Pamela Davis, BSN, MBA,
RN, CBN

Our ASMBS Staff

Georgeann Mallory

Executive Director

Kristie Kaufman

Director of Operations

Kim Carmichael

Financial Manager

Jennifer Wynn

Director of Committee Affairs

Liaison to Executive Council

Amie Buehler

Assistant to Executive Director

Liaison to Corporate Council Committee

Martha Lindsey

CME Compliance & Grants Manager

Liaison to Clinical Issues, IH Clinical Issues and Guidelines, Bariatric Surgery Training, and Video Committees

Stephenie Anderson

Program Manager

Liaison to Program, IH Program and Professional Education Committees

Leslie Vinson

State Chapters Manager

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

Chantelle Morgan

Surgeon and Integrated Health Membership Manager

Liaison to International Development and Membership Committees

McKenzie O'Leary

Executive Coordinator to IH Leadership & CBN Program Staff Coordinator

Liaison to IH CBN Certification Committees Research Committee and Flex Endoscopy Committee Liaison

Reba Liddy Hernandez

Communications Coordinator

Liaison to Communications, Public Education, Obesity Prevention, IH Support Group, and IH Communications Committees

James Osterhout

Director of Information Technology

Max McMahon

Creative & Software Development Manager

Linnea "Naya" McCarty

Graphic Designer

Chanda Lapham

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

John Scott, 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

John Scott, MD

Co-Chair

Teresa LaMasters, MD
Joseph Northup, MD

Executive Council Liaison

John Morton, MD FASMBS

OAC Liaisons

Chris Gallagher
Joseph Nadglowski

ASMBS Staff Liaison

Leslie Vinson

Members

Nicholas Brown, MD
David Chengelis, MD
Dan Eisenberg, MD
Jeff Genaw, MD
Ashutosh Kaul, MD
Rachel Moore, MD
Pradeep Pallati, MBBS
Brian Smith, MD
Jawad Ali, MD
Allen Browne, MD
Christopher Daigle, MD
Tammy Fouse, DO

Tanyaradzwa Kajese, MD
Robert Lim, MD
Fady Moustarah, MD
Carl Pesta, DO
Fernando Bonanni, MD
Arthur Carlin, MD
George Eid, MD
Luke Funk, MD
Linden Karas, MD
Walter Lindstrom, Esq.
Robert O'Rourke, MD
Kinga Powers, MD

Super STARS & STARS (State Access Representatives):

Super STARS

Valerie Halpin, MD (NW & OR)
Ajay Upadhyay, MD (SW & CA)
Guilherme Campos, MD (MA)
Matthew Hutter, MD (NE)
Brandon Williams, MD (SEC)
Luke Funk, MD (UMW)
Richard Peterson, MD (LMW)

STARS

(AR) John Baker, MD
(FL) Joseph Chebli, MD
(TN) Pamela Davis, BSN MBA RN
CBN
(MO) J. Chris Eagon, MD
(HI) Steven Fowler, MD
(NH) John Gens, MD
(WY) Kevin Helling, MD
(CO) Matthew Metz, MD
(NJ) Alexander Onopchenko, MD
(NH) Maureen Quigley, APRN
(NE) Gary Anthone, MD
(AZ) Robert Berger, MD
(IA) Matthew Christophersen, MD
(OK) Laure DeMattia, DO
(AL) Todd Foreman, MD
(ID) Alian Garay, MD
(VA/WV) Troy Glembot, MD

(WI) Shanu Kothari, MD
(OH) C. Joe Northup, MD
(MA) Sheila Partridge, MD
(KS) Robert Aragon, MD
(IN) Brenda Cacucci, MD
(NY) Terence Clarke, MD
(GA) Titus Duncan, MD
(VT) Patrick Forgione, MD
(ND) Luis Garcia, MD MBA
(KS) James Hamilton, Jr., MD
(ME) Jamie Loggins, MD
(MS) Jennifer O'Flarity, RN BSN
(MT) John Pender, MD
(IL) Jayaraj Salimath, DO BSN
(KY) Joshua Steiner, MD
(CT) Darren Tishler, MD
(SD) Kristin Turek, CNP
(MD) David Von Rueden, MD
(LA) William Richardson, MD
(DE) Rahul Singh, MD
(NC/SC) Ranjan Sudan, MD
(AK) Michael Todd, MD
(RI) Sivamainthan Vithianathan, MD
(WI) Kevin Wasco, MD
(PA) Ann Rogers, MD
(MN) Daniel Smith, MD
(WA) Brian Sung, MD
(NV) Shawn Tsuda, MD

(UT) Eric Volckmann, MD
(MI) Matthew Weiner, MD

Industry Ad Hoc

Ethicon
Kay Sadik
Gary A. Richardson
Medtronic
Gina Baldo
Michael Morseon
Apollo Endosurgery
Michael Oberg
Industry Ad Hoc
TOS
Scott Butsch

Continue on following page ➔

COMMITTEE REPORTS

Committee Goals:

Short-Term:

- › Publish “Bundled Care” Toolkit for monitoring trends for bundled payments decisions in each state, and possibly for industry and private insurers
 - › Effectively communicate this resource’s availability to the membership through email, website, social media, and notification to all committee members on any current committee of the ASMBS
- › Publish Pre-Op Weight Loss Toolkit
 - › “Stop the Wait” Social Media Campaign
 - › Physician-led letter writing using Super STARS and STARS to identify insurance companies’ CMOs
 - › Example letters
 - › Bibliography created by Dr. LaMasters
- › ObesityWeek 2017 combined ASMBS and TOS Access to Care Symposium and Hill Visits during ObesityWeek to spread awareness of access issues

Mid-Term:

- › MEDCAC Health Outcomes After Bariatric Surgical Therapies in the Medicare Population Meeting 8/30/17 in Baltimore, MD at CMS
- › Update Access to Care toolkit to include links to websites for improved access to current information

Long-Term:

- › Continue efforts with “Leave No States Behind” campaign
 - › Convert 27 “No” states to “Yes” states
 - › Monitor filed complaint
- › Support for “National Obesity Care Week” in conjunction with OAC/industry
- › Continued presence and response to healthcare changes that are coming
 - › Future of Healthcare Reform in the Wake of AHCA defeat
- › Medicaid Coverage in all 50 States: Only Montana remains
- › State employee coverage in all 50 states: PA, SC, MT, ID, WI
 - › Monitor pilot programs
- › Advocacy Efforts Tracking
- › Medtronic Local Level Support for Select ASMBS STARS
- › Continue to support VA Bariatric Surgery Task Force

Specific Projects that Achieve Goals and Objectives

- › “[Bundled Payments Toolkit](#)” published on ASMSB website under Access to Care Toolkits. Led by Dr. Northup
- › “Stop the Wait” Task Force formed February 2017 in conjunction with Communications and Insurance Committees: Dr. Scott and Dr. LaMasters (Leads), Dr. Richard Peterson (Communications Chair), Dr. Neil Floch (Communications Co-Chair), Dr. Billy (Insurance Co-Chair), Dr. Kaul (Insurance Co-Chair), Pamela Davis, Chris Gallagher, Joe Nadglowski
 - › Collected patient denial examples
 - › Task force met January and March 2017
 - › Engaging a consultant for social media efforts
 - › Super STARS instructed to identify one insurance company that has a 6 or 12-month medical weight loss hold in their region; plan to initiate a conversation with Chief Medical Officer to discuss reducing or eliminating the requirement
 - › Member meetings with various Medicaid offices and insurance companies, for example Blue Cross, Aetna and Centene
 - › This project is on-hold
- › Access to Care Scientific Session scheduled Wednesday, November 1st
- › ASMBS Hill Visits being scheduled in conjunction with OAC

- › Mid-month Access to Care conference calls with Chair, Co-Chairs, ASMBS Liaison, Joe Nadglowski (OAC), and Chris Gallagher (Washington)
- › Monthly Access to Care Committee meetings
- › Several Access to Care members, directed by EC Liaison Dr. John Morton, including Chair, Dr. John Scott, Co-Chair, Dr. Teresa LaMasters, members Chris Gallagher, Joe Nadglowski, Dr. Ranjan Sudan, Dr. Matthew Hutter, Dr. Wayne English, and industry members Kay Sadik, Michael Morseon, among other ASMBS members, attended preparatory conference calls, created presentations, and travelled to Baltimore to speak in person at the MEDCAC Meeting on 8/30/17
- › Sent state-specific complaints from ASMBS Attorney under Dr. Morton’s direction
- › Healthcare reform is currently not clear and is a moving target, but it will require our response and involvement as soon as we know which direction it is going
- › OCC Health Care Reform Principles
- › Sign on Letter Opposing HR1313: Preserving Employee Wellness Programs Act
- › Plans for reintroduction of Treat and Reduce Obesity Act
- › OCAN Letter Focusing on Obesity as a Preventative Service to Insurance Commissioners
- › Member meetings on Hill with Chris Gallagher and state constituents
- › Advocacy Efforts document - updated monthly by members, STARS, Super STARS, Industry Ad Hoc Members, OAC and Chris Gallagher
- › Medtronic creating plan for the states of TX, FL, PA, LA
- › VA Bariatric Surgery Task Force collaborating with Military Committee

Committee Objectives:

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

2017 Completed Projects

- › Several members went to D.C. on February 27th for the OCAN Hill Visit Day
- › Bundled Payments Toolkit published on ASMBS website
- › Several members attended the MEDCAC Health Outcomes After Bariatric Surgical Therapies in the Medicare Population meeting in Baltimore, MD on 8/30/17
- › Course outline for the combined ASMBS and TOS completed for Scientific Session at ObesityWeek 2017 on 11/1/17



Bariatric Surgery Training

Corrigan McBride, MD

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

Co-Chair

Keith Gersin, MD

Executive Council Liaison

Ranjan Sudan, MD

Fellowship Council

Daniel Jones, MD

ASMBS Staff Liaison

Martha Lindsey

Members

Melissa Bagloo, MD

Gregor Dakin, MD

Shaina Eckhouse, MD

John Gabrielsen, MD

Chandra Hassn, MD

Emanuele Lo Menzo, MD

Rachel Moore, MD

Alfons Pomop, MD

Prashanth Ramachandra, MD

Philip Schauer, MD

Ambar Banerjee, MD

Shaun Daly, MD

Laura Fischer, MD

William Gourash, ARNP

KunoorJain-Spangler, MD

Matthew Martin, MD

Nissin Nahmias, MD

Dana Portenier, MD

Raul Rosenthal, MD

Bruce Schirmer, MD

Judy Chen, MD

Eric DeMaria, MD

Matthew Fourman, MD

Brandon Grover, DO

James Lau, MD

Samer Mattar, MD

Carl Pesta, DO

John Price, MD

Michael Russo, MD

Scott Shikora, MD

Committee Goals

Short-Term:

- › ASMBBS Certificate of Satisfactory Training in Bariatric Surgery Fellowship (award annually)

Mid-Term:

- › Create a Competency Based Fellowship Curriculum for Broad Adoption
- › Coordinate the EPA to meet the Fellowship Council work to standardize across all fellowship
 - › Example: Adv GI fellowship Adv MIS/bari fellowship, Bari fellowship who have an EPA on an anastomotic bariatric operation should all use the same EPA
 - › SIMPL feedback tools

Long-Term:

- › ABS is working on EPA for general surgery residency. At this point, there are no bariatric EPA however will continue to advocate for EPA at this stage of training as it is in the score curriculum.

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; applications are currently under review by the committee members
 - › Pilot curriculum participants: 19
 - › Traditional tract applicants: 57
- › A working group is meeting at ASMBS Weekend to map the Fellowship council EPA to the General surgery competencies
- › Year 1 Pilot completed

- › Survey fellows and PD regarding content and evaluation tools-completed
- › Modify curriculum and evaluation tools for year 2.
 - › Dr. Shaun Daly has been added to the committee and is working with Martha Lindsey to simplify and modifying the evaluation tools to SurveyMonkey so it can be done electronically
- › Drs. McBride, Kothari are the ASMBS representative to the Fellowship Council Bariatric EPA writing work. Drs JB Bittner and Jacob Greenberg (who are ASMBS members) are the SAGES representatives to this work.
- › Current strategy is 7 EPA:
 - › Evaluate and Manage Clinically Severe Obesity
 - › Identify and manage patients with clinically severe or morbid obesity for medical supervised weight loss and/or psychosocial support
 - › Identify and manage patients with clinically severe or morbid obesity eligible for primary surgical weight loss procedures
 - › Identify and manage a patient with weight recidivism for revisional surgical weight loss procedure.
 - › Identify and Manage Patients with clinically severe or morbid obesity eligible for primary endoluminal therapy.
 - › Evaluate and manage Patients with Acute Complications of Surgical Weight Loss Procedures
 - › Evaluate and manage Patients with Chronic Complications of Surgical Weight Loss Procedures.



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

<p>Chair Julie Kim, MD, FASMBS</p> <p>Co-Chair Ann Rogers, MD, FASMBS</p> <p>Executive Council Liaison Shanu Kothari, MD, FASMBS</p> <p>IH Clinical Issues Committee Liaison Stephanie Sogg, PhD</p> <p>ASMBS Staff Liaison Martha Lindsey</p>	<p>Members Mohamed Ali, MD T Javier Birriel, MD Jonathan Carter, MD Eric DeMaria, MD, FASMBS Sofiane El Djouzi, MD Isam Hamdallah, MD Jason Michael Johnson, DO Sabrena Noria, MD, PhD Manish Parikh, MD Bruce Schirmer MD</p>	<p>Ali Aminian, MD Stacy Brethauer, MD Afaneh Che, MD Dan Eisenberg, MD Saber Ghiassi, MD Marcelo Hinojosa, MD Ozanan R. Meireles, MD Robert O'Rourke, MD Anthony Petrick, MD Harvey Sugerman, MD Dan Azagury, MD</p>	<p>Guilherme Campos, MD Julie Chang, MD Maher El Chaar, MD Brandon Grover, DO Anna Ibele, MD Fady Moustarah, MD Pavlos Papasavas, MD Rana Pulatt, MD</p>
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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 (EC) 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 2016-2017 Activities

- > ASMBS Updated Position Statement on Insurance Mandated Preoperative Weight Loss Requirements
 - » Published SOARD 6/2016
- > Policy Statement on Single Anastomosis of Duodenal Switch (SADS)
 - » Published SOARD 6/2016
- > New Statement: American Society for Metabolic and Bariatric Surgery Consensus Guideline on Weight Loss Surgery and Hernia Surgery
 - » Writing Group: Emanuele Lo Menzo, Marcelo Hinojosa, Alfredo Carbonell, David Krpata, Jonathan Carter, and Ann Rogers (lead)
 - » Collaborative with AHS - however was not co-endorsed and therefore will just be published in SOARD
 - » Draft approved by EC and awaiting submission to SOARD
- > New Statement: Reactive Hypoglycemia after Bariatric Surgery
 - » Writing group: Dan Eisenberg (lead), Saber Ghiassi, Brandon

- Grover, Dan Azagury and Julie Kim.
 - » Published SOARD 3/2017
- > New Statement: Maintenance (Durability) of Weight Loss After Bariatric Surgery
 - » Literature review completed 6/10/16
 - » Writing group: Dan Azagury (lead), Pavlos Papasavas, Isam Hamdalla, Julie Kim, Eric DeMaria, Samer Mattarand Tony Petrick
 - » Resubmitted to EC awaiting approval for submission to SOARD
- > New Statement: Weight Bias and Discrimination
 - » Initially suggested by Eric DeMaria. The committee is assessing interest toward developing a statement.
- > Revision of 2012 Low BMI statement - literature review completed
- > Revision of 2012 Sleeve Statement – literature review is in process
- > Collaborative statement with ACOG and ASRM on Infertility and Bariatric Surgery – Published SOARD 6/2017
- > Collaborative [project](#) with Emergency Physicians (ACEP)
- > Collaborative project with Hip & Knee surgeons – published in SOARD 1/2017
- > Statement on SAGB – Submitted to EC awaiting approval
- > Collaborative project with Hip & Knee surgeons – published in SOARD 1/2017
- > Statement on SAGB – Submitted to EC awaiting approval



Communications

Richard Peterson, MD

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

Richard Peterson, MD

Co-Chair

Neil Floch, MD

Immediate Past-Chair

Daniel Herron, MD

Executive Council Liaison

Ranjan Sudan, MD

IH Communications Liaison

Nathaniel Sann, MSN CRNP
FNP-BC

ASMBS Staff Liaison

Reba Liddy Hernandez

Members

Jawad Ali, MD
Jonathan Finks, MD
Marina Kurian, MD
Carlos Galvani, MD
Kevin Reavis, MD
Joshua Alley, MD
Valerie Halpin, MD
Abdelrahman Nimeri, MBCh
Matthew Dong, MD, MPH

Marcelo Hinojosa, MD
Arghavan Salles, MD PhD

Committee Goals:

Short-Term:

- > Update the ASMBS Website
- > Post on the 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 tri-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 website to ensure all content remains up-to-date.
- > ASMBS Social Network Updates
 - » Facebook page – 4,663 likes as of 9/26/17
 - » Twitter – 21.3K followers as of 9/26/17
 - » SOARD Facebook Journal Club – 1,253 members as of 9/26/17
- > Webinar Series continues with Surgeons and IH specific Webinars
- > Task force/subcommittee created to create Visual Abstracts for SOARD
 - » Initiated first SOARD Visual Abstract October 2017
 - » Plan for roll out of new Visual Abstract 2 times per month
- > Moderated 9 SOARD Facebook Journal Clubs since May 2016



Emerging Technologies & Procedures

Eric Wilson, 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

<p>Chair Erik Wilson, MD</p> <p>Co-Chair Dean Mikami, MD</p> <p>Immediate Past Chair George Eid, MD</p> <p>Executive Council Liaison Aurora Pryor, MD</p> <p>ASMBS Staff Liaison Leslie Vinson</p>	<p>Members Mohamed Ali, MD Jawad Ali, MD Allen Browne, MD Gregory Dakin, MD Paul Enochs, MD, FASMBS Keith Gersin, MD, FASMBS Barry Greene, MD Valerie Halpin, MD, FASMBS Donald Hess, MD Matthew Hutter, MD, MPH</p>	<p>FASMBS Leon Katz, MD Shanu Kothari, MD, FASMBS Matthew Kroh, MD, FASMBS Matthew Lin, MD Emanuele Lo Menzo, MD, PhD, FASMBS Kamal Mahawar, MD, FRCSEd Jaime Ponce, MD, FASMBS David Provost, MD, FASMBS Michael Russo, MD</p>	<p>Alan Saber, MD Kuldeep Singh, MD, MBA, FASMBS Konstantinos Spaniolas, MD Natan Zundel, MD, FASMBS</p>
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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

- > 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

- > Dedicated Innovation Summit
- > Continue to engage industry with form on website, other activities – increase awareness via website



Flexible Endoscopy

Bipan Chand, MD

The mission of the Flexible Endoscopy Committee is to examine methods of training, clinical applications, and research for existing and evolving endoscopic therapies in the treatment of the obese patient. Ideal training focuses on understanding the anatomy and physiology of the obese patient, past and current surgical procedures, and the role of endoluminal therapies.

Committee Members

Chair

Bipan Chand, MD

Co-Chairs

Matthew Kroh, MD

Dean Mikami, MD

Executive Council Liaison

Marina Kurian, MD

ASMBS Staff Liaison

McKenzie O'Leary

Members

Aaron Carr, MD

Afaneh Cheguevara, MD

Brooke Henson, RN, CBN

Daniel Guerron, MD

Leena Khaitan, MD

Shanu Kothari, MD

Corrigan McBride, MD

John Morton, MD

Ninh Nguyen, MD

Jaime Ponce, MD

Aurora Pryor, MD

Kevin Reavis, MD

Nabil Tariq, MD

Kevin Wasco, MD

Erik Wilson, MD

Natan Zundel, MD

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

Committee Goals

Short-Term

- > Develop and provide endoscopy focused curriculum for ASMBS members

Mid-Term

- > Develop low stakes exam, following curriculum outline
- > Collaborate with Endoscopy Societies in developing/validating high stakes exam
- > Develop certification process

Long-Term

- > Dissemination of endoscopy educational curriculum among trainees
- > Develop Hands-on modules to test skill acquisition
- > Develop and provide online endoscopy focused curriculum for ASMBS members

Committee Objectives

- > Establish an endoscopy focused curriculum for ASMBS members with a focus on bariatric surgery and interventions
- > Work with the Clinical Issues and Emerging Technology committees on position statements and guidelines when adopting new Endoluminal Bariatric Therapies.
- > Provide educational courses (didactic and hands-on) in flexible endoscopy in the obese and bariatric patient.

Specific Projects that Achieve Goals and Objectives

- > Electronic Database established to house content
- > Endoscopy Sessions at Obesity Weekend 2016: Debate: Laparoscopic Plication vs. Endoscopic Plication; Debate: Sleeve Gastrectomy Leaks: Endoscopic Stenting vs. Reoperation; Bariatric Flexible Endoscopy and Intra-gastric Balloon
- > Endoscopy Courses at ObesityWeek 2016: Balloons/Endoscopy Didactic and Lab; Why These Endoscopic/Laparoscopic Devices for Weight Loss Failed?
- > Establish test topics/presentations/questions
- > Meeting held with leadership of several GI and Surgical Societies
- > Dissemination of endoscopy educational curriculum among trainees
- > Develop Hands-on modules to test skill acquisition
- > Develop and provide online endoscopy focused curriculum for ASMBS members



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>Chair Anthony Petrick, MD FASMBS</p> <p>Co-Chairs Aurora Pryor, MD FASMBS Ranjan Sudan, MD FASMBS</p> <p>Executive Council Liaison Ranjan Sudan, MD FASMBS</p> <p>ASMBS Staff Liaison Linnea Erickson</p>	<p>Members 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>
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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:

- > ASMBS Weekend 2017 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
- > ASMBS Weekend 2017 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

2017 Completed Projects

- > ASMBS Weekend 2017 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>Chair Helmuth Billy, MD</p> <p>Co-Chair Ashutosh Kaul, MD, FASMBS</p> <p>Immediate Past Chair Matthew Brengman, MD, FASMBS</p> <p>Executive Council Liaison Wayne English, MD, FASMBS</p> <p>ASMBS Staff Liaison Leslie Vinson</p>	<p>Members Michael Barker, MD Yijun Chen, MD Ann Couch, RN, CBN, CPC Todd Foreman, MD, FASMBS Matthew Hutter, MD, MPH, FASMBS Gregg Jossart, MD Ben Kocaj, MBA Peter LePort, MD, FASMBS Walter Lindstrom Jr., Esq.</p>	<p>Rachel L. Moore, MD FASMBS Mario Morales, MD Alexander Onopchenko, MD Jaime Ponce, MD FASMBS Beth Schrope, MD Don Jay Selzer, MD Nova Szoka, MD Mary Lou Walen Kevin Wasco, MD FASMBS Thomas J. White, MD FASMBS</p>	<p>Industry AD HOC Appointed Natalie Heidrich, Ethicon Chris Gallagher, Washington Liaison Nicole Gier, Ethicon</p>
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Committee Goals:

Short-Term:

- > Work with Access to Care Committee on identifying areas of concern with respect to insurance issues that affect access to care with policy plan changes and other restrictions affecting bariatric surgery
- > Toolkit: determine impact/feedback/data on uses; send message to members that it exists
- > Implement toolkit “How to Survive an RAC Audit” checklist –Draft has been Approved. Need guidance on how to transform to a web based toolkit with the appropriate IT department the ASMBS uses. Need guidance on how to specifically implement an online version
- > Work with EC on necessity and timing of any new code generation proposal for intragastric balloon placement. Currently in the early forms of implementing this project
- > 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](#) 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:

- > Implement the resource to educate Members regarding RAC (Recovery Audit Programs) as an online resource. Currently is in approved form but not yet implemented on an online resource.
- > 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 – Currently still in affect
- >> Initiate Discussions with Blue Cross of California and United Healthcare to consider revising or eliminating mandatory six month medically supervised weight management requirement –
- >> Identify Specific areas of concern with respect to Blue Shield of California Policy Changes effective May 2017
- > 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 2017
- > 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:

- > Prepare an assessment as to the major payers exclusions with respect to staged procedures. Develop a recommendation to forward to EC regarding the appropriateness of a position statement to address the issue of denial of staged procedure and the affected insurance coverage and policies.
- > 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

Continue on following page ➤

COMMITTEE REPORTS

- › 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
 - › 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
- › Assist the Access to Care Committee in designing a study to evaluate discriminatory insurance benefit design in bariatric surgery
- › Assist the Access to Care Committee in negotiations between ASMBS and major carriers to modify overly restrictive plan language in current benefit language
- › Continue to develop course content with Program Committee as needed to develop Coding and Insurance Courses for ObesityWeek 2017
- › Maintain and Update the Re-Operative Toolkit as needed
- › Continue coding hotline
- › Continue communication process with State Chapters and Access on local and national Insurance issues
- › Prepare for bariatric CPT codes review when notified
- › Provide support to re-operative task force as needed
- › Continue Process for BPD-DS CPT code in conjunction with ACS and SAGES
- › Respond to initiatives and requests for information by CMS

Specific Projects in Progress to Achieve Goals and Objectives

- › Coordinated with Program Committee to develop faculty and curriculum for any proposed course or sessions at ObesityWeek 2017
- › Discussed and responded to approximately 5 member inquiries (via insurance@asmbs.org) per month regarding insurance issues
- › Determine FAQ for dissemination to membership via e-newsletter and website and continue to develop communication/alerts to inform members about new codes and updated insurance coverage changes
- › Begin the process of identifying the frequency of exclusion of “Staged Procedures” by major insurance carriers and develop a recommendation for approaching a new position statement regarding an ASMBS position on the appropriateness of challenging the insurance industry position of denying staged procedures.
- › Completed a preliminary RAC audit checklist and submitted to EC; complete development of a web based toolkit resource by ObesityWeek 2017 based on the preliminary draft of the RAC audit toolkit The toolkit was approved by EC. Is currently ready for an IT to develop as an online resource
- › Review of CMS changes affecting membership and the associated impact on access to care
- › Completed a preliminary RAC audit checklist and submitted to EC; complete development of a web based toolkit resource by Obesity Week 2017 based on the preliminary draft of the RAC audit toolkit The toolkit was approved by EC. Is currently ready for an IT to develop as an online resource
- › Review of CMS changes affecting membership and the associated impact on access to care

2017 Completed Projects

- › 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

Samuel Szomstein, MD

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>Chair Samuel Szomstein, MD</p> <p>Co-Chair Homero Rivas, MD</p> <p>Immediate Past Chair Natan Zundel, MD</p> <p>Executive Council Liaison Samer Mattar, MD</p> <p>IFSO Coordinator Samer Mattar, MD</p> <p>IFSO Past President Kelvin Higa, MD</p>	<p>IFSO President Jacques Himpens, MD</p> <p>IFSO President-Elect Almino Ramos, MD</p> <p>Ad Hoc Member, IFSO Executive Director Manuela Mazzarella</p> <p>ASMBS Staff Liaisons Amie Buehler Chantelle Morgan</p> <p>Members Sanjay Agrawal, MD John Dixon, MD, PhD</p>	<p>Shashank S. Shah, MS Dan Azagury, MD Wei-Jei Lee, MD Peng Zhang, MD Minyoung Cho, MD Alan Saber, MD Werener Andrade, MD Mousa Khoursheed, MD Ramon Vilallonga, MD, PhD Guilherme Campos, MD Blanca Rios Ramzi Alami, MD FACS Yitka Graham, Researcher</p>	<p>Antonio Torres, MD, PhD Diego Camacho, MD Pablo Omelanzuck, MD Ahmed Ahmed, MD Michel Gagner, MD Aley El-Din Tohamy, MD Estuardo J. Behrens, MD Abdelrahman Nimeri, MD</p>
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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. Additionally, create a directory of places outside the US which may be of interest for US ASMBS members to visit

Mid-Term

- > Diversifying the committee with new committee members from Emergent Countries and specially those with Obesity causing a large socioeconomic burden. Include more women in our committee
- > Increase attendance at ObesityWeek with more attendance from other countries
- > Conduct co-sponsored international courses
- > Creation of symposium within ObesityWeek to Cater IFSO membership/regions
 - » World IFSO Symposium
 - » Pacific Asia IFSO Symposium
 - » Latin American IFSO Symposium
- > A complete Session in ObesityWeek in Portuguese to cater the Brazilian Surgeons

Long-Term

- > Offering applications in other languages to facilitate the process to future International members. Languages suggested were Mandarin, 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

Specific Projects that Achieve Goals and Objectives

- > Increase and maintain relationships with other societies
- > Closer contact with our International members
- > Awards for Best International Presenters
- > Inclusion of a full session dedicated to The Mexican Society of Surgeons (Cirugía para la Obesidad - CMCOEM) at ASMBS Weekend
- > Offering applications in other languages to facilitate the process to future International members. Languages suggested were Mandarin, French, Spanish, Arabic, and Portuguese. Volunteers from the International Committee will assist in the translation process
- > Create Standardized Training Guidelines for Global Bariatric Surgery
- > 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 Liaisons

Amie Buehler
Chantelle Morgan

Members

Naif Alenazi, MD, FASMBS
Philip Cohen, MD, FASMBS
Jon Pressett, MD
Stephen Wohlgemuth, MD, FASMBS
Darrell Doucette, MD, FASMBS
Kamran Samakar, MD
Christopher DuCoin, MD

Stephanie Dunkle-Blatter, MD
Andre Teixeira, MD, FASMBS
Robert Lim, MD, FASMBS
Erik Lough, 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

- › Initiate New Member Campaign targeting – Candidates (Graduation Fellows) and bariatric surgeons in their first 1-2 years of practice (< 25 cases)
- › Contact lapsed member for renewal
- › Target non-ASMBS member attendees at ObesityWeek
- › Explore potential of IH Member to the Surgeon Memberships Committee and vice versa
- › 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

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

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

- › Increased number of candidate members
- › Non-ASMBS member attendees at ObesityWeek received email blast and follow up
- › List of graduating fellows was used to send emails to all graduating Bariatric fellows
- › Contacting all lapsed and inactive members for membership recruitment

Completed Projects

- › Trello Board for management of new applications
 - › Expedite processing of new membership applications
- › Follow up on number of non-ASMBS member ObesityWeek attendees who joined after blast email



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

Chairs

Kirk Reichard, MD
Janey Pratt, MD, FASMBS

Co-Chair

Bradley Linden, MD, FASMBS

Executive Council Liaison

Samer Mattar, MD FASMBS

ASMBS Staff Liaison

Martha Lindsey

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
Ashish P. Desai, MBBS
Daniel DeUgarte, MD
Thomas Inge, MD
Marc Michalsky, MD
Ann O'Connor, MD
Elizabeth Renaud, MD
Nancy Thompson, CPNP CBN

Mark Wulkan, MD
Meg Zeller, PhD
Jeffrey Zitsman, MD

Committee Goals

Short-Term

- › Provide up to date guidelines for adolescent weight loss surgery with joint indorsements from appropriate groups
- › Develop content for ObesityWeek and promote the concept of grouping pediatric content at one end or the other of the conference
- › Other educational offerings in conjunction with the Program Committee
- › Continue to work with the Access to Care committee and prevention committee addressing pediatric/adolescent bariatric issues
- › Organize current efforts in various adolescent societies with assigned "point person" for each project
- › Develop relationship with the TOS pediatric committee

Mid-Term

- › Develop and Present educational track for ObesityWeek 2018
- › 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

Long-Term

- › 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 difficult research questions in adolescent WLS

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

- › Draft of new ASMBS adolescent weight loss surgery guidelines submitted to the guidelines committee
- › AAP statement near completion
- › ObesityWeek pediatric program contributions
 - › TOS Pediatric Obesity Section Mentor Program, ASMBS/TOS Opening Keynote with Rudolph Leibel, ASMBS/TOS Adolescent Weight Management Course, ASMBS QuickShots Abstract Session 1, TOS Poster (T-P-3044), TOS Trick or Treat Session, TOS Pediatric Obesity Section Meeting, TOS Hot Topics in Pediatric Obesity Prevention Session, TOS Empowering Solutions Course, TOS Beyond the Breast is Best Course, TOS Emily Oken Session, TOS Joseph Skelton Session TOS Causes and Consequences of Pediatric Obesity Poster Session

Specific Projects that Achieve Goals and Objectives

- › Guidelines for Adolescent Weight loss surgery with the ASMBS committee to be reviewed at ObesityWeek 2017.
- › Near completed Joint Best Practice Statement with American Academy of Pediatrics
- › Get a member representative on the program committee for 2018
 - › Get a tag for pediatrics
 - › Get pediatrics grouped into early or late conference
 - › Coordinate with TOS
- › Assure that we are represented on the access to care committee as well as the obesity prevention committee
- › Create list of each collaborative program and who is the point person
- › Ask TOS for liaison to pediatric committee and vice versa
- › Ongoing collaboration with MBSAQIP committee to refine pediatric standards
- › Develop recommendations for pediatricians for follow-up of bariatric surgery patients
- › Members of the Committee now working with the academy of pediatrics
- › Develop list of specific research questions that are difficult to answer but important in pediatrics.



Program

Natan Zundel, MD

The Program Committee is responsible for developing and arranging all of the annual educational events for the ASMBS with ObesityWeek and ASMBS Weekend 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

Natan Zundel, MD

Co-Chair

Shanu Kothari, MD

Immediate Past Chair

Michel Gagner, 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 ASMBS Weekend and ObesityWeek.
 - » 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.
- > 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

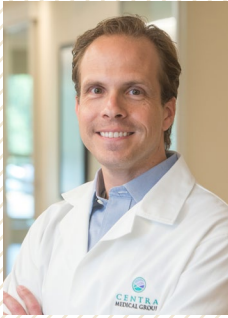
- > ObesityWeek program development.
- > Improve attendance at ObesityWeek and ASMBS Weekend.
- > Increase member satisfaction
- > Create new opportunities to attract members to educational activities
- > Establish educational activity targets for each year

Committee 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%

Specific Projects that Achieve Goals and Objectives

- > Great program for both ObesityWeek and ASMBS Weekend
- > Excellent reviews and attendance at ASMBS Weekend.
- > Selected dates and venues for ObesityWeek through 2019.
- > Finalizing plans for ObesityWeek and future meetings.



Public Education

Joshua Alley, MD

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

Joshua Alley, MD

Co-Chair

Valerie J. Halpin, MD, FASMBS

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

Walter S. Medlin, MD

Carl Pesta, DO, FASMBS

Christopher J. Northup, MD

Richard Peterson, MD, FASMBS

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 add hyperlinked literature references
- > Creation of a video library to serve as a means of communication for the ASMBS to the public about metabolic and bariatric surgery
- > Recruit new members interested in helping the public learn more about metabolic and bariatric surgery

Mid-Term

- > Create additional videos on remaining topics (first 5 topics were recorded in 2016-2017)
- > Develop ASMBS YouTube channel with reliable, expert-curated information about metabolic and bariatric surgery, using video content above
- > Translate articles in the Patient Learning Center into Spanish

Long-Term

- > The videos filmed during ObesityWeek 2017 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
- > Develop ASMBS Public Education YouTube channel to be the reliable source for video content on metabolic and bariatric surgery
- > Continue providing review and updates of patient-focused content

Completed Projects

- > Recorded patient education content at ObesityWeek 2016
- > Video content in review by committee members
- > Patient learning center articles under review by committee members to add references

Specific Projects that Achieve Goals and Objectives

- > Committee members and EC members were asked to participate to record patient education content at ObesityWeek 2016
- > Committee members reviewed patient learning center articles and submitted supporting PubMed references to ASMBS staff liaison
 - » Made the alteration of content more evidence-based
- > Committee members reviewed video content from ObesityWeek and time-stamp useable material for inclusion in final edited video product
- > Committee members created storyboards for video producers to create final edited video product

Committee Objectives

- > Identify gaps in patient education
- > Identify tools to help ASMBS members



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 policies that prevent obesity.

Committee Members

Chair Stephen Archer, MD FASMBS	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	Vanessa Cobarrubia, RDN
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ASMBS Mission Met by the Committee

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

Committee Goals

Short-Term

- › Send survey to ASMBS Members
- › Complete survey analysis
- › Walk from obesity research ongoing
- › Continue to find avenue for expressing obesity prevention statements from the committee

Mid-Term

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

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 obesogenic 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

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

Dana Telem, 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>Chair Dana Telem, MD</p> <p>Co-Chair Jon Gould, MD</p> <p>Executive Council Liaison Eric DeMaria, MD</p> <p>Immediate Past Chair Eric DeMaria, MD</p> <p>ASMBS Office Liaison Leslie Vinson</p>	<p>Members John Baker, MD Arthur Carlin, MD Jacob Greenberg, MD Tammy Kindel, MD Michael Malvesti, PharmD Sabrena Noria Carl Pesta, MD Kinga Powers, MD, PhD Andre Teixeira, MD Noel Williams, MD</p>	<p>Fernando Bonanni, MD Michael Edwards, MD Caitlin Halbert, DO Henry Lin, MD Sara Martin Del Campo, MD Philip A. Omotosho, MD Anthony T. Petrick, MD Konstantinos Spaniolas, MD Oliver Varban, MD Lionel Brounts, MD Luke Funk, MD</p>	<p>Daniel Jones, MD Saniea Majid, MD Tracy Martinez, RN CBN Richard Parent, MD John Pilcher, Jr., MD William Sweet, MD Eric Volckmann, MD</p>
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Committee Goals

Short-Term

- > Work with Program Committee to develop Quality tracks for ASMBS 2017 educational events
- > Identify key research gaps to focus projects on using knowledge gaps identified by sleeve pathway as a guide
- > Develop Quality Improvement focus and certification process – deliverables by ObesityWeek 2017
- > Contribute a nomination from QIPS committee discussion for the ASMBS Patient Safety Award each year
- > ASMBS endorsed clinical pathway for bariatric surgery roux-en-y gastric bypass 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 2017 Quality Certification
- > 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
- > Evaluate sleeve clinical pathway and continue to refine strength of recommendations based on data, hopeful partnership with MBSAQIP

+/- state chapters

- > Utilize sleeve pathway to identify research initiatives and priorities
- > Create a pathway for primary roux-en-y gastric bypass

Long-Term

- > Development of a longitudinal education curriculum for non-surgeon providers who care for our patients, i.e., Patient Safety Education programs for surgeons, nurses, anesthesiologists
- > ASMBS Clinical Care Pathways Library
 - » To include revisions, primary endoscopic procedures
 - » Therapeutic interventions to weight regain in conjunction with the Obesity Prevention Committee, which is working on weight regain pathway
- > 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
- > CQI projects with sleeve pathway (possible joint venture with Research Committee)
- > Consider a standardized preop curriculum – to discuss with Dr. Brethauer

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

Continue on following page ➡

COMMITTEE REPORTS

Specific Projects that Achieve Goals and Objectives

- > ASMBS 2017 Course offerings regarding quality with possible certificate at the end
- > ObesityWeek 2017: Quality track +/- postgrad course
- > National clinical pathway for sleeve gastrectomy paper written and published in SOARD
- > Continue to review and recommend candidates for annual award
- > Closed Claims manuscript is in preparation for submission to SOARD based on closed claims data collected
- > Developing a Quality Improvement curriculum based on lessons learned from data analysis; Drs. DeMaria and Morton asking to use the curriculum as basis for a QI course at ObesityWeek 2017
- > Continual literature review to update sleeve pathway as necessary
- > CQI and research projects based on identified knowledge gaps from the sleeve pathway
- > Committee members assigned to all projects
- > QI Practice Gaps Survey sent to committee

2017 Completed Projects

- > National clinical pathway for [Sleeve Gastrectomy Paper](#) written and published in SOARD, full content available to members on ASMBS website



Research

Mohamed Ali, MD

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

Mohamed Ali, MD

Co-Chair

Ali Aminian, MD

Executive Council Liaison

Matthew Hutter, MD

ASMBS Office Liaison

McKenzie O'Leary

Members

Peter Benotti, MD
 Scott Cunneen, MD
 Ramsey Dallal, MD
 John Dixon, MD
 Salvatore Docimo, MD
 Byron Faler, 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
 Tammy Kindel, MD, PhD
 Wendy King, PhD
 Subhash. Kini, MD
 Michael Lee, MD
 Emanuele Lo Menzo, MD
 Peter Lopez, MD
 Corrigan McBride, MD
 Robert O'Rourke, MD
 Nancy Puziferri, MD

Malcolm Robinson, MD
 Isaac Samuel, MD
 Michael Schweitzer, MD
 Vadim Sherman, MD
 Eric Sheu
 Kimberley E. Steele, MD
 Dimitrios Stefanidis, MD
 Gladys Strain, PhD
 Dana Telem, MD
 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
- > Identify and promote the research interests of the ASMBS membership
- > 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
- > Explore new research opportunities and funding streams

Specific Projects that Achieve Goals and Objectives

- > Completed the 2017 Research Grant Review Process
- > Designed and implemented ObesityWeek 2017 course in research
- > Promoted new robotic surgery research funding opportunities
- > Funding secured for grants in 2017 from ASMBS Foundation
- > Secured funding for grants in 2018 from ASMBS Foundation
- > Created a mechanism to elicit research topics of interest to the membership
- > Brainstormed ideas to leverage the MBSAQIP participant use files to further metabolic and bariatric surgery research
- > Collaborated with the SSAT to develop joint Post Graduate course in research
- > Worked with ASMBS Foundation and others to increase available funding and work to identify other potential funding sources
- > Investigated the potential to create mechanisms for multi-institutional studies

Completed Projects

- > Completed the 2017 Research Grant Review Process
 - » Three grants were awarded
 - » There was a specific call for robotics grants. There was one robotics grant winner



State and Local Chapters

Rachel Moore, 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

Rachel Moore, MD

Co-Chair

Teresa LaMasters, MD
Carl Pesta, DO

Executive Council Liaison

Rachel Moore, MD

Immediate Past Chair

Christopher Joyce, MD

ASMBS Office Liaison

Leslie Vinson

Chapter Presidents

Michael Todd, MD (AK)
Kenneth Todd Foreman, MD (AL)
Josh Roller, MD (AR)
David Podkameni, MD, (AZ)
Helmuth Billy, MD (CA)
Jonathan Schoen, MD (CO)
Neil Floch, MD (CT)
John Pender, MD (Dakota
Yellowstone: MT, ND, SD, ID &
WY)
Michael Peters, MD (DE)
Samuel Szomstein, MD (FL)
Titus Duncan, MD (GA)

David Henry, MD (HI)
Stephen Cahalan, MD (IA)
Jonathan Wallace, MD (IL)
Margaret Inman, MD (IN)
G. Brice Hamilton, MD (KS)
Joshua Steiner, MD (KY)
James Redmann, MD (LA)
Alejandro Gandsas, MD (MD)
Jeffrey Genaw, MD (MI)
Todd Kellogg, MD (MN)
James Pitt, DO (MO)
David Carroll, MD (MS)
David Overby, MD, (NC/SC)
Thomas White, MD (NE)

Matthew Hutter, MD (MA)
Jamie Loggins, MD (ME)
Naveen Ballem, MD (NJ)
Shawn Tsuda, MD (NV)
William O'Malley, MD (NY)
Joe Northup, MD, (OH)
Hamilton Le, MD (OK)
Catherine Boulay, MD (OR)
Fernando Bonanni, MD (PA)
Jenny Weaver, MD (TN)
Michael Seger, MD (TX)
Kinga Powers, MD, PhD (VA/WV)
Jeffery Hunter, MD, (WA)
Luke Funk, MD (WI)

Committee Goals

Short-Term

- › Provide each ASMBS member with chapter membership
 - › There is now a chapter presence in every state - 36 chapters: 25 individual chapters, 5 joint chapters of 2 adjacent states, and 3 group chapters of 5 states combined. Some of the large regions may need to reconfigure. There is some interest in Idaho having its own chapter, rather than being part of Dakota Yellowstone. Online services like "Go-to-meeting" may be something to consider in order to help big territories connect.
 - › Advance remaining states with preliminary to full chapter status: Kansas and New England have preliminary status
- › Maintain webpages on ASMBS site for chapters
- › Host Annual Chapter Presidents' Summit to train chapter leaders and facilitate dialogue among them

Mid-Term

- › Strengthen existing chapters
- › Plan State Chapter Rally at ObesityWeek 2017

Long-Term

- › Promote positive relations and ongoing communication between members and national ASMBS
- › Facilitate more collaboration between states in the same region
- › Help chapters develop and host high-quality state/regional meetings
- › Increase membership of practicing bariatric surgeons in ASMBS
- › Utilizing the State Chapter system to encourage participation in the most important voting initiatives of the year as identified by the Executive Council

Committee Objectives

- › Improve communication between individual members and the ASMBS leadership

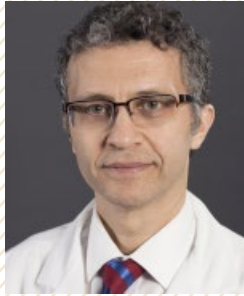
- › Promote collegiality among colleagues and programs in the chapter
- › Offer [joint sponsorship](#) to provide CME credits during Chapter meeting
- › Provide accounting and tax filing assistance for the chapters
- › Help implement projects from other committees as they roll out to the general ASMBS membershi

Specific Projects that Achieve Goals and Objectives

- › Continue chapter presence in all 50 states
- › Quarterly State Chapter Presidents' conference calls
- › Update chapter webpages with new President, meetings, and news as per chapter communication with ASMBS Liaison. Encourage chapters to set up and use websites more often
- › STARS and Super STARS in all 50 states to coordinate with Access to Care Committee as needs arise
- › Distribute dues reports and member lists to chapter Presidents to assist with communication
- › Planned agenda and activities for State Chapter Rally at ObesityWeek 2017
- › Continue ASMBS State Chapter column in Bariatric Times which highlights achievements and disseminate knowledge about chapters
- › Collect State Chapter dues (for all but a few states)
- › Provide ASMBS-sponsored CME for State Chapter meetings

Completed Projects

- › Spring 2017: ObesityWeek Survey sent from State Chapter Presidents to chapter members as first test of utilizing state chapter system to improve voter participation
- › 5th Annual State Chapter President's Summit June 8, 2017 in San Diego
- › Kansas full chapter status achieved; New England 99% complete
- › ASMBS election participation was doubled by our committee's efforts to encourage participation



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

Executive Council Liaison

Michel Gagner, MD

ASMBS Office Liaison

Martha Lindsey

Members

Mustafa Aman, MD

Venkat Modukuru, MD

Sajani Shah, MD

Stuart Verseman, MD

Neil Floch, MD

Tom Rogula, MD

Andre Teixeira, MD

Emanuel Lo Menzo, MD

Keith Scharf, MD

Aley Tohami, MD

Committee Goals

Short-Term

- > Identify pool of video presentations and prepare them for online video library
- > Developing a Standardized Video Format Requirements
- > 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 2017 (six video events ObesityWeek 2017)
- > Established a Standardized format for video presentation

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 Committee to increase the number of video sessions at the national meetings
- > Working with Dr. Rosenthal on a new project "Acquisition of Motor Skills and Surgical Planning Via Mental Conditioning and Video Editing. A New Surgical Training Tool"

From Our Integrated Health President

As I complete my first year as Integrated Health President, I am amazed at all of the accomplishments the Integrated Health Science Section has achieved, yet recognize there is still much work to be done. I want to congratulate all of the committees for their achievements, and continue to offer my support moving forward.

I would also like to extend a special thank you to Maureen Quigley and Nate Sann for stepping up to serve an additional year as chair of the IH Professional Education and Program Committee and the IH Communication Committee. The dedication and commitment you have contributed to further the IH Science Section does not go unrecognized or unappreciated. Thank you.

Here are just a few of the many the accomplishments of 2017 which are a result of the many hours and dedication from the committee members:



- › **Advanced Healthcare Providers Taskforce** - The AHP task force continues to explore credentialing options for advanced healthcare providers for ASMBS members as well as explore the potential collaboration with other similar organizations. Additionally, the task force helped to develop the newly created IH Advanced Practice Provider award criteria.
- › **Awards Committee** - The awards committee is a new committee that was formed to provide oversight for the Integrated Health awards available to IH membership. The committee is responsible for providing transparency and resolving any conflict of interest with nominees. New awards this year for Integrated Health include Advanced Healthcare Provider award, Behavioral Health Provider award, and Committee of the Year.
- › **CBN Committee** - The Certified Bariatric Nurse committee is celebrating a 10 year anniversary this year. Additionally, the CBN committee has completed a practice analysis and has submitted (and accepted) an abstract for presentation at Obesity Week. There has also been a full review of examination items, review modification and development of items to construct the 1st bridge examination, and transition to the addition of cognitive categorized items. The CBN committee has also been busy with the quest for accreditation, expansion of marketing efforts, and revision of the recertification management process.
- › **Clinical Issues and Guidelines Committee** - The IH Tool Kit went live this past year with several documents added for membership use – each bucket has an introductory section and folders with subsections where applicable. New documents will continue to be added to the tool kit once approved through the IHEC and EC. A working group has been formed for online psychosocial evaluations and for standardized guidelines for position statements/guidelines and anticipate distributing a survey in the near future related to this topic. The Sensitivity Recommendations/Survey Results are in the final stages of revision and will be available once approved. New projects for the CIG include: Nutrition Guidelines for Macronutrients, Nutrition Guidelines for Pregnancy, Adjustable Gastric Band Guidelines (revision), and Advanced Healthcare Providers project.
- › **Communication Committee** - The IH Communication Committee has been instrumental in several projects this year including the IH Tool Kit on the ASMBS website and the promotion of education and professional development with webinars, offering credit(s) to attendees. The committee has completed the ASMBS orientation packet for new committee members, and continues to build and improve online content for IH professionals. There has also been an IH Twitter presence with our IH President-elect, Pam Davis; and a new Facebook section for ASMBS members only.
- › **Multidisciplinary Care Committee** - The MDC committee created and administered a survey of IH compensation trends – and plan to capture more members during Obesity Week to make the results more robust. In addition, the MDC committee is exploring IH metrics for potential inclusion in future MBSAQIP data based on evidence. Lastly, the manuscript for the multidisciplinary team in bariatric surgery is nearing completion with the anticipation to publish it.
- › **Membership Committee** - The Membership committee has been busy updating the current application to help ASMBS to better track our Integrated Health members. The IH membership survey was shared with membership through a webinar and will also be shared in an article. Additionally the survey yielded several comments which were passed onto leadership and have resulted in the exploration of membership fees, conference fees, and an invitation of the IH President to State Chapter meetings for increasing IH membership and receiving feedback from the members at the State level.
- › **Professional Education and Program Committee** - The Professional Education and Program committee has been busy developing an educational program to appeal to the many disciplines of integrated health. Dr. J. Holst, a renowned

researcher who has extensively studied GLP-1 and bariatric surgery has been invited as the keynote speaker for ObesityWeek 2017.

- > **Support Group Committee** - The Support Group committee has developed Obesity Week courses to be offered at the preconference and at the scientific session. The committee has also helped to create the first IH Behavioral Health Provider award and has been working to develop evidence-based and best practice protocols for support group leaders. Another of the many projects the support group committee has been busy with is a literature search regarding bariatric support groups.

What a great year we have had. As we move forward into my second year, I would like to continue with the current goals – to keep educating, communicating, collaborating and advocating – and develop new goals based on the needs of the IH membership. I encourage you all to become involved – join a committee, join a task force, volunteer to speak, conduct a research study – with the integrated health science section to help achieve our goal to treat and reduce the disease of obesity. I look forward to the next year as your Integrated Health President, and continuing to work towards our goals. As always, please feel free to contact me at IH-President@asmbs.org if you have any comments or suggestions.



Karen Flanders, MSN, CNP, CBN
President ASMBS Integrated Health

Integrated Health Executive Council



President
Karen Flanders, MSN, ARNP



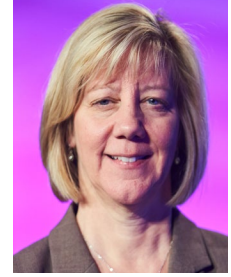
President-Elect
Pamela Davis, MBA, BSN,
RN, CBN



Secretary
Sue Cummings, MS, RD



Past President
Christine Bauer, MSN,
RN, CBN



Senior Past President
Karen Schulz, MSN, CNS,
CBN



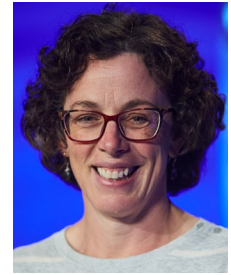
Executive Council Liason
Samer Mattar, MD,
FASMS



Member-At-Large
Christa Trigilio-Black, PA-C



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



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



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
- IHEC Liaison**
Christine Bauer
- ASMBS Staff Liaison**
McKenzie O'Leary

- Accreditation**
Tammy Beaumont (leader)
Renee O'Daniel
James D. Meyer
Sharon Hillgartner
- Practice Analysis**
Sandy Tompkins (leader)
Susan Dugan
Teresa Fraker
- Marketing**
Jamie Carr (leader)
Narelle Story
Trudy Ivins

- Policy and Procedures**
Ann Couch (leader)
- 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
Megan Daniels
- Other Discipline Credentialing**
William Gourash
Jessie Moore

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

- > was developed into format that will to be available to other ASMBS state chapters in 2018.
- > Construction of the first CBN examination utilizing the 2016/2017 Practice Analysis. This required evaluation, review and reorganization of the CBN examination item bank in the context of the updated Practice Analysis and completion of a standard Cut-score study.
- > Update of the in-person and On-line CBN Review Courses to be compliant with 2016/2017 Practice Analysis update (Both available in November 2017)
- > Initiation of a new "user-friendly" and "professional development focused" IT platform for CBN Recertification call LearningBuilder. This required extensive investigation, proposal development, and contract negotiation. Over the next year, development, implementation and rollout will take place. It is due to be fully operational in early 2018.
- > Re-contracted with AMP/PSI our Certification Consultant for the next 3 years (Completed 2-2017)

Completed Projects

- > Update of the Certified Bariatric Nurse (CBN) Practice Analysis(PA); the description of the tasks, skills and knowledge required to practice bariatric nursing. This required the development of the PA survey, capturing contact information on >2000 bariatric nurses, data collection by email survey, analysis of the data, and integration of the results and sub-analyses into the framework of a standard PA statement document including assigning weights to the tasks and skills and knowledge required. Additionally, the survey process and results were compiled into an abstract, submitted to ASMBS for OW 2017 which was accepted, and developed into a presentation that will be presented in the IH 2017 abstract session. A manuscript for publication in SOARD is in progress.
- > Modification and implementation of an experimental CBN Review Course with the Texas Chapter of the ASMBS which was held in January of 2017 which was very successful. This prototype program

Short and Mid-Term Activities

- > **Overall Committee**
 - » Foster subcommittee and entire committee communications and regular meetings
 - » Goal for 2 webinar full committee meetings in addition to the OW
 - » Fill in the subcommittee member vacancies
 - » Recruit, train and mentor new group of Item Writers.
 - » Increase the examination candidates by 25% (275/year by 2019) with development and implementation of strategies from marketing subcommittee.
 - » Achieve long-term goal of recertification by certificants at 50%
 - » Contract and collaborate with accreditation consultant to develop a plan and timeline for submission for accreditation and enlist all subcommittees to develop and document policies and other needed documentation.
 - » Foster the review of old committee policies and the development

IH COMMITTEE REPORTS

- of a comprehensive policy structure.
- » Continue to support and explore credentialing exploration for dietitians, behavior health professionals and other bariatric professionals
- » 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.
- » **Marketing Subcommittee**
 - » Continue and further develop: Newsletter publication, CBN Award, Nursing Day celebration, and International presence (Fall newsletter completion for OW 2017)
 - » Plan and implement CBN presence on the IFSO website in coordination with the IFSO IH Committee
 - » Explore and implement “special incentives”: organizational discounts, and hospital Certification packages
 - » Review PVCT results and implement changes into overall marketing strategies and publish the survey results. (Manuscript in process)
 - » Expand-further develop ObesityWeek CBN events.
 - » CBN 10 (CBN 10th Birthday Celebration Events) at ASMBS Weekend 2017. Wine & Cheese networking event and mugs with CBN 10 logo to be distributed.
 - » Exam Re-take – policy written and implemented (2017)
- » **Accreditation**
 - » Re-educate (with regard to new accreditation standards) members of subcommittee
 - » Continue to explore and implement consultation with consultant (Sea Crest and AMP)
 - » Develop strategy and time-line for submission for ABNS and/or NCCA accreditation
 - » Carry out the recommendations of the consultation
 - » Plan date and implement submission for accreditation
 - » Develop platform with which to house accreditation submission materials
 - » Add one additional committee member
- » **Practice Analysis**
 - » Completion and finalization of the results of the Practice Analysis
 - » Submission and presentation of PA Survey results at OW 2017
 - » Completion of a manuscript of the update to the PA to be submitted to SOARD (in progress)
 - » 2017 Practice Analysis Roll out across the CBN Subcommittees
- » **Policy and Procedure**
 - » Candidate eligibility and audit implementation, review & update CBN Handbook, (April & Sept)
 - » Development, approval and implementation of policy regarding cost of those that re-take the examination (implemented 2017 and fine tune policy for 2018).
 - » Review of all CBN policies and develop plan for “new” policy development to especially cover the accreditation efforts
 - » Seeking additional members (2) (1 Candidate being reviewed)
- » **Examination Development**
 - » Yearly completion of the following: Examination construction first with new Practice Analysis (Spring 2017 In-person weekend meeting), post examination psychometric test result review, review of bi-yearly test candidates’ post-examination survey, and Cut-score study when required (completed Summer 2017).
 - » Review of all examination policies
 - » Item bank review to assess gaps due to 2016 Practice Analysis Update and beginning implantation of “cognitive” categorization for the examination items & reclassification of items in bank as needed to concur with updated test blueprint by 3 webinar sessions
 - » Item writing review for selected prior item writers and subcommittee to fill in the gaps for construction of the 2017 Summer examination (completed and taped) (Completed)
- » Item bank and item review by 2 webinars (Fall 2017)
- » Reevaluate subcommittee membership (Completed)
- » Invite, organize, educate, precept, and management of “new” 2018 group of Item Writers
- » **Examination Preparation**
 - » 2017 ASMBS Weekend update of the “in-person” review course
 - » Taping of the 2017 ASMBS Weekend Update presentations and production of and update for the On-line course (Implemented 11-1-2017)
 - » Discussion and review of “core curriculum” educational approaches
 - » Evaluation of long-term strategy for CBN Preparation Education
 - » OW 2017 In-Person Review Course
 - » Implementation and review of results of a trial CBN Review Course in an innovative format (e.g. Texas ASMBS Chapter – January 2017)
 - » Proposal developed and approved to offer similar review courses to state chapters on a limited basis (2-3 per year) (Fall 2017)
- » **Financial**
 - » Finalization of the Development of 2018 Budget
 - » Annual Review of the financial standing of the CBN program (e.g. Webinar meeting)
 - » Give annual report to IH President and President elect regarding the overall status and update during year. (March 2018)
 - » Development and discussion of 2019 budget
 - » First draft of a 3-year financial strategic plan
- » **Recertification**
 - » Review recertification process/infrastructure and revise process with investigation and implementation of a new IT platform (e.g. LearningBuilder) (Fall 2017 Contract signed)
 - » Time line: Build Platform (November 2017); Implement (January 2018).; Go Live early 2018.
 - » Review specifically the use of CEUs in the recertification process.
 - » Eligibility and audit implementation, review/update CBN Handbook, Quarterly review of recertification candidates
 - » Collaborate with Marketing Subcommittee to market the recertification
 - » Continue the development of the Retired CBN proposal and the precepting option guidelines.
 - » Add an additional member for the subcommittee. (Completed)
- » **Other Disciplines Credentialing**
 - » Participate as member of EC Task Force (presentations on certification, CBN, ...)
 - » Submit proposal for PA, NP and CNS Obesity Week 2017 Symposium (Completed 5-2017)
 - » Continue to explore relevant professional organizations (e.g. AANP, OMA, AAPA) with committee members
 - » Participate in the development and implantation of a 2nd survey of APP in Bariatric Surgery
 - » Publish update and 2016 focus group data with 2nd Survey Results
- » **Management**
 - » Complete the negotiation of a 3-year contract with AMP/PSI
 - » Support the 2016/2017 activities of each of the subcommittees as listed above with special focus on the LearningBuilder project, the item writer project, submitting for accreditation, and marketing expansion.
 - » Oversee “CEU” for CBN activity ad hoc committee
 - » Implement calendar of formal regular communication calls for each of the subcommittee
 - » Foster increased relationship with the American Board of Nursing Specialties (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

<p>Chair Stephanie Sogg, PhD</p> <p>Co-Chair Katie Chapmon, MS, RD</p> <p>Immediate Past Chair Pam Davis, RN, CBN, MBA</p> <p>IHEC Liaison Stephanie Sogg, PhD</p> <p>ASMBS Staff Liaison Martha Lindsey</p>	<p>Members</p> <p>Registered Dietitians Katie Chapmon, MS, RD, ACE-CPT Julie Parrott, MS, RD, ACE-CPT Carol Wolin-Riklin, MA, RD, LD Sue Benson-Davies, PhD DCN MPH RD FAND LN</p> <p>Behavioral Health Allison Grupski, PhD Jennifer Lauretti, PhD, ABPP Stephanie Sogg, PhD Kasey Goodpaster, PhD</p>	<p>Registered Nurses Ann Couch, RN, CBN, CPC Charmaine Gentles, RN Terry McKenzie, RN, CBN Debra Proulx, RN, BHS, MBA, CBN Sally Strange, PhD, RN, CBN</p> <p>Nurse Practitioner/Physician's Assistant Sue Benson-Davies, PhD, DCN MPH RD FAND LN Sandy McCoy RN, MSN, FNP-BC, CBN</p>	<p>Rachel Blind, NP-BC Nancy Browne, MS, PNP-BC, CBN Melissa Davis, MSN, APRN, BC, CNS, RNFAMichael Dougherty, PA-C Karen Flanders, MSN, ARNP, CBN Charmaine Gentles, ANP-BC, RNFA Pharmacist April Smith, PharmD, BCPS</p>
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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

Activities Still in Progress

- › Sensitivity Guidelines: Reviewed by IHEC late 2016; awaiting further review/revision
- › Toolkit Development: The IH Toolkit went live in June 2017
 - › Each bucket has an introductory section (landing page) and, where appropriate, folders for subsections
 - › Eight buckets (sections) are currently online (see below regarding the 9th bucket, Support Groups)
 - › Business Development; Clinical guidelines: 11 documents currently available; Facility Accommodations; Patient Education: 3 documents currently available; Program Models & Structure; Service Line Development; Staff Education; and Throughput
 - › A process has been established for IHCIG to provide new documents for IHEC to review for approval. As there are dozens of documents finalized and many more being edited and added,

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 by IHEC and other bodies whose approval are needed

- › Nine new documents were approved in early October and will be uploaded to toolkit by ObesityWeek 2017.
- › Five new documents are on the docket for review & approval for the late October IHEC ObesityWeek meeting
- › The IH Support Group committee is working with IHEC Patient Education Toolkit Subcommittee in developing content for this section of the Toolkit.
- › Some buckets are less robust than others due to committee members' varying areas of expertise. The project would benefit from more expertise in business development and program structure and administration. Pam Davis has graciously offered some assistance with this.
- › 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. The working group is finalizing a survey to be sent to membership; the idea is to create a paper, possibly for publication in SOARD, detailing member opinions on telepsychology evaluations and highlighting some of the pros/cons and concerns. Once the survey is finalized it will need to be approved by IHEC, EC, etc.
- › Standardized protocol for Developing Guidelines/Position Statements: 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. The working group is finalizing a survey to be sent to membership; the idea is to create a paper, possibly for publication in SOARD, detailing member opinions on telepsychology evaluations and highlighting some of the pros/cons and concerns. Once the survey is finalized it will need to be approved by IHEC, EC, etc.

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Specific Projects that Achieve Goals and Objectives

- › Psychosocial Recommendations Webinar held in 2017
- › Nutrition Guidelines Revision – published in *SOARD* in 2017
- › Nutrition Guidelines Webinar held in 2017

New Projects Started 2017

- › Nutrition Guidelines: Macronutrients: A working group has been formed, including some ad-hoc members who are not part of CIG. This group has created a preliminary outline and completed their literature review, and each member of this work group has started writing their sections
- › Nutrition Guidelines: Pregnancy: A two-person working group has been formed. A preliminary outline has been created and a list of literature review search terms has been given to Kara Kallies, who completed the literature search. 133 articles were identified. The working group is currently reviewing the literature, with an end date for this literature review of mid-November
- › Update of Gastric Banding Guidelines: A working group has been formed. One member of this group has been in contact with an industry rep for some input and has received some information. The committee is reviewing publications and online presentation. Very little new information is available. No training via vendor is readily available. The working group is moving forward with emphasis on experienced surgeons training their physician extenders and using their discretion. New guidelines are focusing on patient assessment for adjustment versus technique. With that established, this committee should be able to move at a faster pace
- › Advance Providers project: A working group has been formed. A conference call was held in May. It was decided that creating a formal guidelines document is premature; the necessary first step is to establish what the overall goals are for AP providers, and what Advanced Practice Providers do daily that leads to these goals. Currently the group is working to identify the specific scope of the various types of providers under the “advanced practice” designation

Activities Slated to Begin 2018

- › 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

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

IHEC Liaison

Nate Sann, FNP-BC, MSN

ASMBS Staff Liaison

Reba Liddy Hernandez

Members

Rachel Blind, NP-BC, CBN

Stephanie Cox

Teresa Fraker, MS, RN

Heidi Grap, MBSCR

Alison Olsen

Abigail Schroeder, PA-C

Cindy Hipszer RN MSN CNML

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

Completed Projects

- › Continued the Integrated Health webinar series to promote education and professional development
 - › January 2017: ASMBS IH Town Hall Webinar
 - › March 2017: ASMBS IH Nutritional Guidelines
 - › July 2017: ASMBS IH Town Hall Webinar
 - › September 2017: Psychosocial Evaluation Recommendations Webinar
- › Launched Integrated Health Toolkit portion of the ASMBS.org website, creating an area for IH professionals to find information, news, and resources

Specific Projects that Achieve Goals and Objective

- › Continue to build and improve online content for IH professionals, including a resource of online articles for professional development and to share with patients
- › Augment online resources with the IH Clinical Issues Committee to create a comprehensive “Toolkit” to guide IH membership through the various aspects of developing or enhancing a bariatric practice
- › Created a more prominent social media presence
- › Continue to work with ASMBS and TOS leadership to provide online resources from ObesityWeek & ASMBS Weekend.
- › Collaborate with the ASMBS Communication Committee for ongoing communication needs and collaborative efforts in addition to other societies
- › Working to find a practical and sustainable solution for the “Listserv” networking groups



IH Membership

Adam Dungey, BSN, RN

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

Adam Dungey, BSN, RN

Co-Chair

Collene Berg, FNP-C

Executive Council Liaison

Lynn Bolduc, MS, RD, LS, CDE

Immediate Past Chair

Lisa Luz, RN, MSN, CBN

ASMBS Staff Liaisons

Amie Buehler
Chantelle Morgan

Members

Heidi Bednarchuk, APRN CNS
Tammy Dodds, MPAS, PA-C
Kristin E. Kamprath, MPAS PA-C
Amy K. Pearce, RN, CBN
Chris Potito, RN, BSN, Med
Kathryn Cottell, RD MS CDN CDE

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

Activities Accomplished to Meet the Objectives

- > Updating the IH Membership Application
 - » Implementing specific job classifications for new applicants
 - » Allows for better understanding of members' work classification
- > Membership Survey
 - » Gathering information to better our membership offerings
 - » Inform members that the committee is listening to the results from the survey
- > Membership Survey
 - » Networking with other Integrated Health Professionals
 - » IH Town Hall meeting to discuss the benefits of ASMBS
 - » Discounts on Education Offerings
 - » Access to the Members Only documents, toolkit

Activities Still In Progress

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



IH Multidisciplinary Care

Michelle Lent, PhD

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

Michelle Lent, PhD

Executive Council Liaison

Sue Cummings, MS, RD

ASMBS Staff Liaison

Martha Lindsey

Members

Lynelle Diede, MS, RN-BC, CBN

Guilherme Campos, MD

Nicole Franklin PsyD

Brooke Doucet, RN, CBN

Amber Saucier, RD, LDN, MS

Cristine Seitz, MS, RD, LDN

Lora Grabow, LCSW

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

Committee Objectives

- › Define optimal multidisciplinary approach to surgical care
- › Evaluate current evidence and identify knowledge gaps regarding the impact of multidisciplinary approach on patient outcomes

Activities Accomplished to Meet the Objectives

- › Incorporated surgeon edits and prepared the multidisciplinary care survey data for publication (previously referred to as the “White Paper”); currently with Dr. Wittgrove/Tracy Martinez for final data clarifications
- › Administered the integrated health compensation survey via email to ASMBS membership (196 responses to date)

- › Conducted teleconference with the ACS representative to discuss the potential for additional IH data capture within MBSAQIP
- › Identified several IH-related outcomes for potential data capture in future iterations of the MBSAQIP (substance use, physical activity, dietary intake, vomiting/bowel) and committee members conducted literature searches on these topics

Activities Still in Progress

- › Multidisciplinary care manuscript (“White Paper”) to be re-submitted to ASMBS leadership for final review
- › Additional IH compensation survey data to be collected onsite at ObesityWeek2017; will be available in the IH Lounge
- › MBSAQIP IH data literature searches to be discussed in-person at ObesityWeek and 1-2 questions per discipline to be developed for potential data capture inclusion; memo to be drafted to ASMBS leadership
- › Continue to search for two additional committee members representing Pharmacy and Fitness/Physical Activity



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, ASMBS Weekend 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

Activities Accomplished to Meet the Objectives:

- > Filled vacancies including two physician assistants
- > Abstract Committee meeting in June, 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

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

Paul Davidson, PhD

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

Paul Davidson, PhD

Co-Chair

Francine Broder, PsyD

IHEC Liaison

Laura Andromalos, MS, RD, LDN, CDE

ASMBS Staff Liaison

Reba Liddy Hernandez

Members

Kellie Armstrong, MS, RN, CBN

Vicky Blackard, RN, BBA, CBN

Lauren Carey, RD

Lillian Craggs-Dino, DHA, RDN, LDN, CLT

Nina Crowley, PhD, RD, LDN

Lori Nevins, LCSW

Ninoska Peterson, PhD

Jeanne Sanders, RN, BSN, CBN;

Nina Boulard, PhD

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

Activities Accomplished to Meet the Objectives

- > Created and utilize email listserv for support group facilitators to communicate and share ideas and documents
- > Moderated support group facilitator networking session at ObesityWeek
- > Led first preconference training in bariatric support groups at ObesityWeek
- > Conducted support group facilitator roundtable at Obesity Week-End
- > Conducted support group training at ASMBS Weekend
- > Presented at the first IH Town Hall meeting

- > Populating support group facilitator toolkit
- > Review, refine, and provide guidance for MBSAQIP support group standards
- > Develop an ASMBS Community Standard for program support group facilitators
- > Survey to be developed for dissemination to patients to determine what they seek in support groups
- > Develop ASMBS policies and protocols for evidence-based and best practice with regard to the development and facilitation of bariatric surgery support groups
- > Conducting a literature review of bariatric support group research for eventual publication
- > Writing several support group columns for the Bariatric Times
- > Helping to create the first IH Distinguished Behavioral Health Provider Award
- > Presenting a preconference workshop in bariatric support groups at ObesityWeek
- > Moderating a support group facilitator networking session at ObesityWeek
- > Conducting a training on Practical Strategies for Facilitating Support Groups during the scientific session of ObesityWeek
- > Coordinating with National PCORI study group to advance support group education and practice nationwide

Activities Still in Progress

2016 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.

2016 Recipient

Alex Micheals, MD

Post-Bariatric Surgery Hypoglycemia: Our Thirty Year Experience

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.

2016 Recipients

First Place

Rebecca Deal, MD

Intestinal Glucose Transporters GLUT-1 And GLUT-5 Expression In Obese And Non-Obese Subjects And Potential Impact On Type 2 Diabetes Remission Following Bariatric Surgery

Second Place

Matthew Pergamo

Gastric Band Conversion To Roux-En-Y Gastric Bypass Shows Greater Weight Loss Than Conversion To Longitudinal Sleeve Gastrectomy: Two Year Follow-Up

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.

2016 Recipient

Subhash Reddy, MD

Laparoscopic Whipple in Roux en Y Gastric Bypass Anatomy

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 ASMBS 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.

2016 Recipients

Lauren Bradley, PhD

The Investigation of a Remotely Delivered Behavioral Intervention for Postoperative Weight Regain

Amount Awarded \$25,000

Tammy Kindel, MD, PhD

The Effect of Sleeve Gastrectomy on Obesity Induced Heart Failure in Rats

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.

2016 Recipients

First Place

Sarah Sabrudin, MD

Prescribed Opioid and Non-Opioid Analgesic Medication Use Before and After Bariatric Surgery: 7 Year Follow-up

Second Place

Megan McVay, PhD

Bariatric Surgery in Patients With Bipolar Disorders: Selection Factors And Long-Term Surgical Outcomes

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.

2016 Recipient

Bruce M. Wolfe, MD, FACS, Oregon Health and Science University

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.

2016 Recipient

Wendy King, PhD

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.

2016 Recipient

Carlos Zerrweck, MD

Laparoscopic Sleeve Gastrectomy: Results at 10 years

2016 Recipients

Nawaf Alkhalifah

Laparoscopic Conversion to Sleeve Gastrectomy for Failed Gastric Bypass: Report Of 50 Cases

2017 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.

2017 Recipient

Michael C Morell, MD

Weight Recidivism After Bariatric Surgery

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.

2017 Recipients

First Place

Renuka Subramaniam, MD

Gastric Bypass Surgery Reverses Type 2 Diabetes by Altering Intestinal Glucose And Lipid Metabolism

Second Place

Tom Augustin, MD

Realization of Cost Savings with Implementation of Enhanced Recovery in Bariatric Surgery is Immediate

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.

2017 Recipients

Pearl Ma, MD

Nissen Fundoplication Over Nondivided Roux-En-Y Gastric Bypass for Intractable Reflux

Raul Rosenthal, MD

Laparoscopic Management of a Staple Line Leak Following a Sleeve Gastrectomy with Conversion to a Roux En Y Gastric

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 ASMBS 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.

2017 Recipients

Matthew Fourman, MD, FACS

Surface Electromyography (EMG) as a Measure of Surgeon Muscle Fatigue During Robotic and Laparoscopic Bariatric Surgical Procedures

Amount Awarded \$25,000

Michel Murr, MD, FACS

RYGB Improves Insulin Resistance via Sirt-1 and Gas5

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.

2017 Recipients

First Place

Molly Orcutt, DO

Associations Between Childhood Trauma and Psychopathology in Female Bariatric Surgery Candidates

Second Place

William Gourash, PhD

Bariatric Nursing Practice Analysis

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.

2017 Recipient

John Morton, MD, MPH, FACS, FASMBS, Stanford School of Medicine

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.

2017 Recipient

Dale Bond, PhD

Distinguished Behavioral Health Provider Award (New)

The ASMBS Integrated Health Awards committee recognizes an ASMBS Integrated Health behavioral health member who has made an extraordinary effort to promote the values of behavioral health: Clinical Excellence, Advocacy, Research, and Education. The awardee serves as a role model in the four core areas and promotes the values of metabolic and bariatric behavioral health with other colleagues, hospital administrators, and other organizations.

2017 Recipient

Stephanie Sogg, PhD

Distinguished Advanced Practice Provider Award (New)

The ASMBS Integrated Health Awards committee recognizes that advanced practice providers practicing in the field of metabolic and bariatric surgery deserve recognition for the dedication, commitment, care and expertise they provide to patients, families, the community and colleagues every day. This award is given to a deserving provider who has made an effort to promote and further the practice of advanced health care in the specialty of metabolic and bariatric surgery beyond the role in the multidisciplinary team/program.

2017 Recipient

William Gourash, PhD

Continue on following page 

2017 Awards and Honors

International Awards

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2017 Recipient

Stephan Axer, MD

Predictive Factors for Complications in Revisional Gastric Bypass Surgery
- Results from the Scandinavian Obesity Surgery Registry

2017 Recipient

Yan Gu, MD, PhD

Effects of Bariatric Surgery on Change of Brown Adipocyte Tissue and Energy Metabolism in Obese Mice

Financial Report

ASMBS Finance Committee

Samer Mattar, MD

Eric DeMaria, MD

Matthew Hutter, MD

Georgeann Mallory, RD

Overview

ASMBS remains a fiscally healthy organization with net assets of just under \$8.9M at the end of 2017. ASMBS educational meetings and membership dues continue to show strength and remain the cornerstones of the revenue from which the many ASMBS projects are funded. On December 31, 2017, the ASMBS had a balance in its investment accounts of just over \$7.1M.

Education

ASMBS holds 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 year's meeting resulted in net earnings for the ASMBS of \$984,000. We are looking forward to the 2018 ObesityWeek to be held in Nashville and expect the same success as seen in the previous five years.

The ASMBS also hosts a smaller meeting in June of each year, ASMBS Weekend. In 2017, the ASMBS Weekend was held in New York City and resulted in net earnings of just under \$50,000. We are excited to watch and see the future growth and 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. 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. They also support the ASMBS educational activities and projects. Since its inception the Foundation has given over \$2M towards these programs. 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, 2017 and 2016.

American Society for Metabolic and Bariatric Surgery, Inc.		
Statements of Assets, Liabilities and Net Assets – Accrual Basis		
December 31, 2017 and 2016		
	2017	2016
Total Assets	\$9,520,477	\$8,315,564
Total Liabilities	\$630,665	\$702,474
Net Assets	\$8,889,812	\$7,613,090

American Society for Metabolic and Bariatric Surgery, Inc.		
Statements of Revenues and Expenses – Accrual Basis		
December 31, 2017 and 2016		
	2017	2016
REVENUES		
Annual Meeting (net of expense)	\$984,299	\$1,064,423
Other Meetings & Educational Programs	\$609,853	\$651,482
Membership Dues/Journals	\$1,030,229	\$979,083
Royalties—SOARD Journal	\$147,132	\$143,356
Other Revenues	\$207,282	\$220,927
TOTAL REVENUES	\$2,978,795	\$3,059,271
EXPENSES		
Meetings & Educational Programs	\$587,361	\$594,433
Supporting Services/Management & General	\$2,119,454	\$2,135,529
TOTAL EXPENSES	\$2,706,815	\$2,729,962
NET OPERATING INCOME	\$271,980	\$329,309
INVESTMENT INCOME (LOSS)	\$1,004,742	\$272,002
CHANGE IN NET ASSETS	\$1,276,722	\$601,311
NET ASSETS AT BEGINNING OF YEAR	\$7,613,090	\$6,646,280
NET ASSETS AT END OF YEAR	\$8,889,812	\$7,613,090

Media Outreach and Public Relations

2016-2017

The American Society for Metabolic and Bariatric Surgery (ASMBS) continues to shape the public and professional discourse around obesity and metabolic and bariatric surgery through strategic and proactive communications activities to the news media and other important stakeholders.

Working with its longtime strategic partner, Communication Partners & Associates, the ASMBS has become an authoritative voice and a reliable resource to the national media on topics including obesity, the safety, effectiveness and durability of bariatric and metabolic surgery, Type 2 diabetes and other obesity-related diseases and conditions, adolescent obesity and bariatric surgery, patient access to care and emerging treatments such as gastric balloons.

Media relations conducted on behalf of ASMBS has resulted in coverage in major news outlets including, *The New York Times*, *ABC News*, *NBC News*, *CNN*, *Reuters*, *The Los Angeles Times*, *CNBC*, *U.S. News and World Report*, *Medscape*, *MedPage Today*, *HealthDay*, as well as publications directed at health professionals including, *Endocrine Today*, *General Surgery News*, *Modern Healthcare*, *Healio* and *Outpatient Surgery*. *The New York Times* story entitled, “**Why Weight Loss Surgery Works When Diets Don’t**,” described bariatric surgery as “the most effective intervention we have in health care,” and that the surgery is “vastly underutilized to the detriment of patients’ health and the nation’s health care costs.”

ASMBS leadership and members have also been featured in news coverage of obesity and bariatric surgery studies that were published in *Journal of the American Medical Association*, *The New England Journal of Medicine* and *Annals of Surgery*. Stories have been seen, heard or read by tens of millions of consumers and health professionals.

Recognition also continues to build for ObesityWeek as the premier scientific obesity meeting of the year. Each year our communications interviews study authors and develops several news releases and fact sheets for dissemination to news media, and then secures interviews with reporters from both consumer and medical professional news outlets. The ASMBS also maintains a press room at ObesityWeek for attending journalists.

connect: The official news magazine of ASMBS continues to a regular read for members getting a range of 2,500 to 3,000 sessions each month. *connect* features original articles, committee spotlights, presidential messages, study-roundups, news & notes and a summary of media stories about obesity and bariatric surgery. Stories this year included surgery for patients with lower-BMIs, the obesity epidemic, obesity, cancer and bariatric surgery, and “doctoring” in the age of social media, among many others.

ASMBS continues to develop its strategic communications plan for 2017-2018 and is working on generating media coverage for ObesityWeek 2017 and beyond.

SOARD Annual Report

Since its inception in 2004, the journal has been published every other month for a total of six issues per year. In 2016 there were 10 issues with combined months of April and May, September and October. This was a result of an increased number of submissions and accepted original manuscripts. In 2017 SOARD has been published monthly for a total of 12 issues per year. The 2017 Impact Factor rose more than 1 point from 3.1 to 4.49, almost a full point above Obesity Surgery, a remarkable number placing us 11 of 165 surgical journals.

Our journal submissions of original articles increased from 437 as of December 31, 2016 and as of June 30 this year was 234, so we should have around 470 this year. We published 57 Paired Editorials and have a 47 so far this year. The rejection rate for original articles is currently 46% which is the same as last year. 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.

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. However, because many of these journals promoted industrial items, there were there were it was decided that we would no longer participate.

Our top reviewers for this year have been Matt Martin, Michel Gagner, Guilherme Campos, Robin Blackstone and Sayeed Ikraudin.

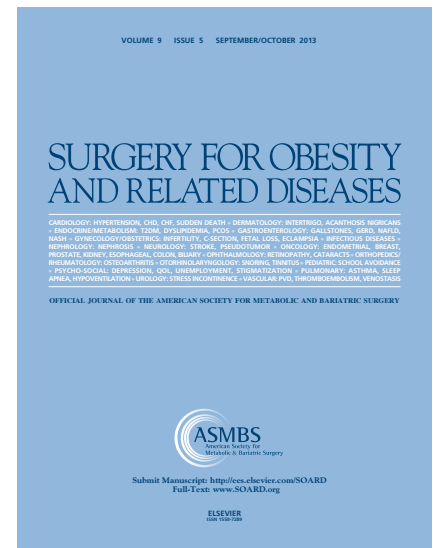
Since initiating a \$750 submission fee for open access case reports, there has been an appropriate decrease in the number of accepted case reports, which is managed by Dr. Michel Murr. This has produced approximately \$10,000 in income for the journal which is shared by the Society. The Continuing Medical Education program for both readers of the journal and reviewers of manuscripts has been quite successful, led by Dr. Samer Mattar. There were 3500 hours of CME awarded to 288 individuals in 1916 and to date we have 1900 hrs. of CME. We only had 452 hours of CME awarded to reviewers last year. 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 sessions have been quite popular with a rapidly growing registration. Dr. Peterson has been

made an Associate Editor for the wonderful work he has done.

We are in our third 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 will be 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 galley. 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. It has been a life saver.



Advocacy Update

SUMMARY OF ADVOCACY EFFORTS IN 2016

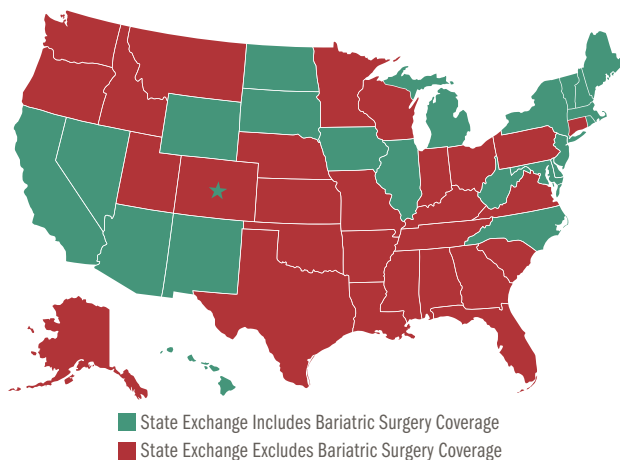
Essential Health Benefits

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.

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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.

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For full details of the goals and future projects of the Corporate Council visit ASMBS.org

The ASMBS would like to acknowledge and extend gratitude to the Corporate Council for supporting the production of the 2017 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 30 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.

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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.

Congratulations to the Communications Committee

Committee of the Year



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Congratulations

to the

IH Clinical Issues and Guidelines Committee

IH Committee of the Year

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Charmaine Gentles, ANP-BC,
RNFA

Pharmacists

April Smith, PharmD, BCPS



Stephanie Sogg, PhD
CHAIR

A tall, modern skyscraper with a blue glass facade and a white top section featuring the AT&T logo. The building is set against a blue sky with white clouds.

SAVE THE DATE!

The logo for ObesityWeek 2018. It features a stylized green figure with a pulse line and a gear, followed by the text 'obesityweek' in purple and green, and '2018' in yellow with a gear icon inside the zero.

obesityweekSM2018

Nashville, Tennessee

November 11 - 15

A street-level view of Nashville, Tennessee, featuring the Nashville Government Center building with a green roof and a sign that reads 'Nashville Government Center'. The street is busy with cars and buildings in the background under a blue sky with clouds.

