

ASMBS | American Society for
Metabolic and Bariatric Surgery

2017-2018

Annual Report

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From Our President



Dear ASMBS Members,

It is hard to believe that my tenure as president is coming to an end, and what a whirlwind year it has been! We have made meaningful advances in many areas, including quality improvement projects, scientific discovery, public awareness, surgeon and integrated health education and training, inter-society collaboration

and robust gains in advocacy. These accomplishments could not have been realized without the countless hours and strident efforts that were vigorously volunteered by our engaged members. Coordinating and shepherding the numerous projects was our exemplary and tireless staff, under the guidance of our marvelous Executive Director, Georgeann Mallory. This annual report is a distillation of our efforts and represents a true reflection of how our society has been protecting and promoting the interests of our members, our profession, and our patients.

All of our 27 committees have been working on 56 projects, in every conceivable area of our professional, clinical, educational, training and advocacy interests. Our State Chapters, representing every state in the nation, continue their valiant efforts at tearing down barriers to life-saving treatments, and hold increasingly vibrant educational meetings that are well-attended by surgeons and integrated health members. The database of our venerable Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program is now the repository of data from over 1 million patients and has been the essential resource for numerous ground-breaking studies that have advanced our understanding of the outcomes of our operations and allowed the adoption of best-practice methodology. A quality improvement project that deserves special mention is ENERGY (Employing New Enhanced Recovery Goals to Bariatric Surgery) that my predecessor, Stacy Brethauer, MD conceived and supervised as Principal Investigator, has now come to fruition with spectacular results.

To further advance our mission, enrich our society and to better solidify our position as the undisputed leaders in providing the highest quality of care to patients with weight-related problems, we have expanded our membership to allow non-surgeon physicians to participate as full voting members of ASMBS. Including obesity medicine physicians, gastroenterologists, cardiologists, hepatologists, pulmonologists, and gynecologists will provide additional

dimensions and perspectives to the optimal treatment of our patients through the entire continuum of care. This will also allow us to share our values and lessons learned from managing these patents within structured bariatric programs.

To ensure that ASMBS maintains its recognition as a society that celebrates individuals from a variety of backgrounds and values their many contributions, we have created the Diversity and Inclusion Committee, with the charge of informing, recruiting, and promoting new and existing members of both genders and ethnic backgrounds.

This year, we have also seen advances in advocacy, which constitutes one of our essential pillars. Our Access to Care Committee has updated the ACC Toolkit with numerous resources and created an ACC Facebook Group to act as a networking and advisory forum. Pennsylvania has seen major wins in coverage for bariatric surgery, and we have seen more favorable policy changes from insurance carriers. To support our members with scholarly interests, our Research Committee has created an IRB Toolkit that includes IRB grant templates and research consents forms. Frankly, there are many more products and services that have been created for our members, but my space here is too limited for their inclusion.

ObesityWeek continues to grow, and at the time of drafting this letter, our registration is already up by 30% from last year. This is the first year in which we have implemented a theme for our meeting and launching this concept will be the “The Heart of the Matter”. As a result, we have received a large number of cardiac related abstracts and we will have numerous sessions that will help advance our collaborative efforts with our colleagues in cardiology. I can personally attest to the high scientific caliber of these events. I fully expect our meeting to be an astounding success!

In closing, I would like to thank you for this humbling opportunity to serve as your President. It has been an honor and a privilege to work with brilliant, ever-available, and hard-working colleagues in the Executive Council and you, the accomplished members of the most admired and most respected society in the world for metabolic surgeons and integrated health specialists.

Sincerely,

A handwritten signature in black ink, appearing to read "Samer Mattar".

Samer Mattar, MD, FASMBS
ASMBS President

Executive Council



President
Samer Mattar, MD,
FASMB



President-Elect
Eric DeMaria, MD,
FASMB



Secretary/Treasurer
Matthew Hutter, MD,
FASMB



Past President
Stacy Brethauer, MD,
FASMB



Senior Past President
Raul Rosenthal, MD,
FASMB



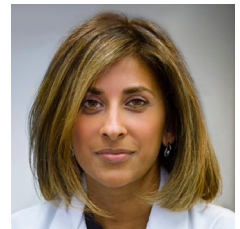
Councilperson-At-Large
Wayne English, MD,
FASMB



Councilperson-At-Large
Michel Gagner, MD



Councilperson-At-Large
Shanu Kothari, MD,
FASMB



Councilperson-At-Large
Marina Kurian, MD,
FASMB



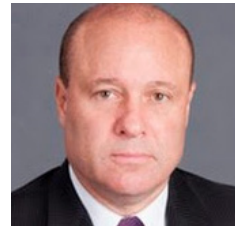
Councilperson-At-Large
Teresa LaMasters, MD



Councilperson-At-Large
Rachel Moore, MD,
FASMB



Councilperson-At-Large
Ranjan Sudan, MD,
FASMB



Councilperson-At-Large
Natan Zundel, MD



IH President
Karen Flanders, MSN,
ARNP, CBN



IH President-Elect
Lisa West-Smith, PhD,
LISW-S

Our ASMBS Staff

Georgeann Mallory

Executive Director

Kristie Kaufman

Director of Operations

Kim Carmichael

Financial Manager

Jennifer Wynn

Deputy Executive Director

Liaison to Executive Council

Meghan Johnson

CME Compliance & Grants Manager

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

Amie Buehler

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

Beth Pate

Surgeon and Integrated Health Membership Manager

Liaison to International Development, Corporate Council and Membership Committees

Susan Haury

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

Vanessa Govindan

Graphic Designer

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 FASMBS
C. Joe Northup, MD

Executive Council Liaison

Teresa LaMasters, MD FASMBS

OAC Liaisons

Chris Gallagher
Joseph Nadglowski

ASMBS Staff Liaison

Leslie Vinson

Members

Jawad Ali, MD
Nicholas Brown, MD FASMBS
Allen Browne, MD
Arthur M. Carlin, MD FASMBS
David L. Chengelis, MD
Christopher Daigle, MD FRSC
Pamela Davis, BSN MBA RN CBN
Wayne English, MD FASMBS,
Immediate Past Chair
Brandon Grover, DO FASMBS
Farah Husain, MD FASMBS
Tanyaradzwa Kajese, MD

Linden Karas, MD
Ashutosh Kaul, MD FASMBS
(Insurance Committee Co-Chair)
Robert B. Lim, MD FASMBS
Walter Lindstrom, Esq
John Morton, MD FASMBS
Rachel Moore, MD FASMBS
Fady Moustarah, MD MPH FRCS
Blake Movitz, MD
Joshua Pfeiffer, MD
Nancy Puzziferri, MD
Bridget Slusarek, RN
Lloyd Stegemann, MD FASMBS

Super STARS & STARS (State Access Representatives):

Super STARS

Matthew Hutter, MD MPH FASMBS (NWR)
Guilherme Campos, MD FASMBS (MAR)
Brandon Williams, MD FASMBS (SCR)
Luke Funk, MD FASMBS (UMR)
Richard Peterson, MD MPH FASMBS (LMR)
Valerie Halpin, MD FASMBS (NWR)
Ajay Upadhyay, MD FACS FRCS (SWR)

NC/SC — Ranjan Sudan, MD FASMBS
PA — Ann M. Rogers, MD FASMBS
VA/WV — Troy Glembot, MD FASMBS

Super STAR Southeast Central Region

AL — Todd Foreman, MD FASMBS
FL — Joseph Chebli, MD FASMBS
GA — Titus Duncan, MD
KY — Joshua Steiner, MD
OH — Joe Northup, MD
TN — Jenny Weaver, MD

Super STAR Upper Midwest Region

IA — Matthew Christopherson, MD
IL — Jayaraj Salimath, DO BSN
IN — Brenda Cacucci, MD FASMBS
KS — Robert Aragon, MD
MI — Matthew Weiner, MD
MN — Daniel A.P. Smith, MD
MO — Christopher Eagon, MD FASMBS
NE — Gary Anthonie, MD FASMBS
WI — Shanu Kothari, MD FASMBS & Kevin Wasco, MD FASMBS

Super STAR Lower Midwest Region

AR — John Baker, MD FASMBS

CO — Matthew Metz, MD
LA — William Richardson, MD FASMBS
MS — Jennifer O'Flarity, RN BSN
NM — Charles F. Bellows, MD
OK — Laure DeMattia, DO
TX — Robert Carpenter, MD MPH FASMBS

Super STAR Northwest Region

AK — Michael Todd, MD
ID — Open
MT — John Pender, MD
ND — Luis Garcia, MD FACS MBA
OR — Valerie Halpin, MD FASMBS
SD — Kristin Turek, CNP
WA — James Taggart, MD
WY — Kevin Helling, MD

Super STAR Southwest Region

AZ — Robert Berger, MD
CA — Ajay Upadhyay, MD FACS FRCS
HI — Steven Fowler, MD FASMBS
NV — Shawn Tsuda, MD
UT — Eric Volckman, MD

Industry Ad Hoc

Ethicon

Juthika Pal
Gary A. Richardson

Medtronic

Gina Baldo
Michael Morseon
Vincent Zeringue

Apollo Endosurgery

Michael Oberg
Industry Ad Hoc

TOS

W. Scott Butsch, MD MSc

Potomac Currents

Chris Gallagher

Reshape

Sharon Whalen

Super STAR Northeast Region

CT — Darren Tishler, MD FASMBS
MA — Sheila Partridge, MD FASMBS
ME — Jamie Loggins, MD
NH — Maureen Quigley, APRN
NY — Terence Clarke, MD FASMBS
RI — Siva Vithiananthan, MD FASMBS
VT — Patrick Forgione, MD

Super STAR Mid Atlantic Region

DE — Rahul Singh, MD
MD — David Von Rueden, MD
NJ — Alex Onopchenko, MD

Continue on following page ➔

COMMITTEE REPORTS

Committee Goals

Short-Term:

- › Utilize STAR and Super STAR Network more effectively, involving State Chapter Presidents
- › Access to Care Tool Kit Reorganization - Farah Hussain Lead
 - › Update reference publications and websites, sample letters, PowerPoints
- › OAC/Access to Care “One Sheet” for Patients – Joe Nadglowski, Chris Daigle and Josh Pfeiffer Leads
 - › Postcard that directs patients who have been denied to OAC website where they can automatically send letters to state legislature, congressman, insurance commissioner, and make social media post regarding discriminatory practices and unfair waiting periods
- › Access to Care Committee Facebook Closed Group for all ASMBS members
- › Support for “National Obesity Care Week” in conjunction with OAC/industry

Mid-Term:

- › ObesityWeek 2018 combined ASMBS and TOS Access to Care Symposium
- › Metrics on the OAC/Access to Care “One Sheet” for Patients

Long-Term:

- › Continue efforts with “Leave No States Behind” campaign
 - › Convert 27 “No” states to “Yes” states
 - › Monitor filed complaint
- › Medicaid Coverage in all 50 States: Only Montana remains
- › State employee coverage in all 50 states: SC, MT, ID, WI
 - › Monitor pilot programs
- › Medicaid Coverage in all 50 States: Only Montana remains
- › State employee coverage in all 50 states: PA, SC, MT, ID, WI
 - › Monitor pilot programs
- › Continue support of Treat and Reduce Obesity Act
- › Continue presence and response to healthcare changes that are coming
- › Future of Healthcare Reform in the wake of AHCA defeat
- › Advocacy Efforts Tracking

Specific Projects that Achieve Goals and Objectives

- › Dr. Scott, Chair, communicates with STARs and Super STARs prior to monthly meetings, regional reports during meetings
- › Access to Care “Fast Action Groups” created January 2018 to facilitate member projects: Tool Kit Reorganization, OAC/Access to Care “One Sheet” for Patients, and Facebook Closed Group (formerly Insurance Denial Database)
- › Prepared for ObesityWeek 2018 combined ASMBS and TOS Access to Care Symposium to be held Wednesday, November 14 from 8-10am
- › Postcards sent to all ASMBS surgeon members; will use OAC’s metrics from website to gauge usage
- › 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
- › 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
- › Advocacy Activity Summary - updated monthly per members’, STARs’, Super STARs’, Industry Ad Hoc Members’, OAC’s and Chris Gallagher’s reports of wins and losses in each state

Committee Objectives

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

Completed Projects

- › Support letter signed by Dr. Mattar and Dr. Northup, Access to Care Co-Chair, sent to Wisconsin Group Insurance Board c/o Board Liaison, Department of Employee Trust Funds regarding lack of state employee coverage for bariatric surgery
- › Access to Care “Fast Action Groups” projects complete
 - › Access to Care Tool Kit Reorganization – current Advocacy Resources, Presentations and Publications added; Key Membership Directories, Letters and Position Statements updated in June 2018
 - › OAC/Access to Care “One Sheet” Postcard for Patients – OAC Advocacy website created and postcards mailed to all surgeon members in late August 2018
 - › ASMBS Access to Care Committee Facebook Closed Group (formerly Insurance Denial Database) created; invitations sent to join
- › September 27, 2018 OAC Hill Day in D.C. in conjunction with OMA’s D.C. meeting - visited 60 senate offices and 40 house offices, highlighting NOCW and TROA



Bariatric Surgery Training

Keith Gersin, MD, FASMBS

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

Committee Members

Chair

Keith Gersin, MD FASMBS

Co-Chair

Matthew Martin, MD FASMBS

Executive Council Liaison

Ranjan Sudan, MD

Fellowship Council

Daniel Jones, MD FASMBS

ASMBS Staff Liaison

Meghan Johnson

Members

Ambar Banerjee, MD

Judy Chen, MD

Gregory Dakin, MD

Laura Fischer, MD

William Gourash, MSN CRNP

Brandon Grover, MD

Daniel Jones, MD

Emanuele Lo Menzo, MD

Carl Pesta, MD

Dana Portenier, MD

John Price, MD

Raul Rosenthal, MD

Michael Russo, MD

Bruce Schirmer, MD

John Gabrielsen, MD

Shaina Eckhouse, MD

Kunoor Jain-Spangler, MD

Chandra Hassan, MD

Scott Shikora, MD

Maher El Chaar, MD

Matthew Fourman, MD

Committee Goals

Short-Term

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

Mid-Term:

- Create a Competency Based Fellowship Curriculum for Broad Adoption

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 being reviewed
- Pilot curriculum participants- 15
- Traditional tract applicants- 55
- Specific Projects that Achieve Goals and Objectives:
 - Year 2 Pilot completed
 - Survey fellows and PD regarding content and evaluation tools- completed
 - Modify curriculum and evaluation tools for year 2.
 - 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
 - Dr. 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.
- Currently there are place holders within the EPA for endoscopy, there is a separate working group on flexible endoscopy. They are creating EPA to cover diagnostic and therapeutic endoscopy that we can probably use however we want to see the content before we commit for content such as dilations, stents, etc.

2018 Completed Projects:

- 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.
- Revised fellowship certificate application packet and instructions to include clarification of research requirement and supporting documentation.



Clinical Issues

Ann Rogers, 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 Ann Rogers, MD FASMBS</p> <p>Co-Chair Dan Eisenberg, MD</p> <p>Executive Council Liaison Shanu Kothari, MD, FASMBS</p> <p>IH Clinical Issues Committee Liaison Stephanie Sogg, PhD Katie Chapmon, MS RD</p> <p>Ad Hoc Literature Review Kara Kallies</p>	<p>ASMBS Staff Liaison Leslie Vinson</p> <p>Members Chegueva Afaneh, MD FASMBS Essa Aleasse, MD MBBS MSc Ali Aminian, MD Dan Azagury, MD T. Javier Birriel, MD Guilherme Campos, MD FASMBS Jonathan Carter, MD FASMBS Julietta Chang, MD Maher El Chaar, MD</p>	<p>Sofiane El Djouzi, MD MS Saber Ghiassi, MD MPH Brandon Grover, DO FASMBS Marcelo Hinojosa, MD FASMBS Anna Ibele, MD Jason Michael Johnson, DO Julie Kim, MD FASMBS – Immediate Past Chair Zhamak Khorgami, MD Ozanan R. Meireles, MD Fady Moustarah, MD MPH Abdelrahman Nimeri, MBBCh</p>	<p>Sabrena Noria, MD PhD FASMBS Pavlos Papasavas, MD FASMBS Manish Parikh, MD FASMBS Anthony Petrick, MD FASMBS Rana Pullatt, MD FASMBS Bruce Schirmer MD Harvey Sugerman, MD</p>
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Committee Goals

Short-Term

- > American Society for Metabolic and Bariatric Surgery Review of the Literature on One-Anastomosis Gastric Bypass
- > Updated Position Statement on Bariatric Surgery in Class I Obesity (BMI 30–35 kg/m²) (Low BMI)
- > Hernia Consensus Guideline on Bariatric Surgery and Hernia Surgery in collaboration with the American Hernia Society
- > Position Statement Medium- and Long-Term Durability of Weight Loss and Diabetic Outcomes After Conventional Stapled Bariatric Procedure

Mid-Term:

- > Bariatric Surgery and Cancer Statement
- > Weight Bias and Discrimination Statement
- > Sleep Apnea With AASM Statement

Long-Term:

- > Ongoing identification of issues to develop statements and provide topics for EC Review
- > Provide ongoing clarity on issues related to bariatric and metabolic surgery
- > Ongoing review/revision of all existing and new statements

Specific Projects that Achieve Goals and Objectives

- > Publish “American Society for Metabolic and Bariatric Surgery Review of the Literature on One-Anastomosis Gastric Bypass” literature review by writing group: Manish Parikh (Lead), Jason Johnson, Dan Eisenberg and Maher El Chaar – Published in *SOARD* September 2018
- > Publish Updated Position Statement on Bariatric Surgery in Class I Obesity (BMI 30–35 kg/m²) (Low BMI) endorsed by SAGES and supported by the ADA by writing group: Ali Aminian (Lead), Julietta Chang, Stacy Brethauer, and Julie J. Kim – Published in *SOARD* September 2018
- > Publish Hernia Consensus Guideline on Bariatric Surgery and

- Hernia Surgery in collaboration with the American Hernia Society by writing group: Emanuele Lo Menzo (Lead), Marcelo Hinojosa, Alfredo Carbonell, David Krpata, Jonathan Carter, Ann M. Rogers, Shanu N. Kothari – In Press July 2018 *SOARD*
- > Publish “Position Statement Medium- and Long-Term Durability of Weight Loss and Diabetic Outcomes After Conventional Stapled Bariatric Procedures” by writing group: Dan Azagury (lead), Pavlos Papasavas, Isam Hamdalla, Michele Gagner, and Julie Kim – In Press August 2018
- > Publish Obesity Bias & Discrimination Statement by writing group Dan Eisenberg (Lead), Brandon Grover, Sabrena Noria – in process
- > Sleep Apnea with AASM - Sleep Society Co-Endorsed Paper
- > Cancer & Bariatric Surgery Statement by writing group: Ann Rogers, Samer Mattar, Essa AlEassa, Jason Johnson, John Morton, T. Javier Birriel, Maher El Chaar, Fady Moustarah, Saber Ghiassi – in process

2018 Completed Projects

- > The following publications were published in *SOARD* in September 2018
 - » American Society for Metabolic and Bariatric Surgery Review of the Literature on One-Anastomosis Gastric Bypass
 - » Updated Position Statement on Bariatric Surgery in Class I Obesity (BMI 30–35 kg/m²) (Low BMI)
- > The following publications are online “In Press” on *SOARD*, awaiting printed version assignment:
 - » Hernia Consensus Guideline on Bariatric Surgery and Hernia Surgery in collaboration with the American Hernia Society
 - » Publish Position Statement Medium- and Long-Term Durability of Weight Loss and Diabetic Outcomes After Conventional Stapled Bariatric Procedure



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
Joshua B. Alley, MD
Matthew Dong, MD, MPH
Jonathan Finks, MD
Carlos Galvani, MD
Valerie Halpin, MD
Marcelo Hinojosa, MD
Marina Kurian, MD
Abdelrahman Nimeri, MBCh

Arghavan Salles, MD, PhD

Kevin Reavis, MD

Committee Objectives

- > Disseminate the Society's educational events, grant offers, and opportunities to members
- > Help provide the Society's information to consumers
- > Facilitate communication between members

Committee Goals

Short-Term

- > Update the ASMBS Website
- > Create an ASMBS Instagram account

Mid-Term

- > Re-vamp and resume ASMBS Surgeon Webinar series

Long-Term

- > Expand social media presence using and adding Instagram to the social media outreach
- > Develop and expand the ASMBS YouTube channel for both members and the public
- > Work to increase SOARD Journal Club to a monthly activity with consideration of potential CME

Specific Projects that Achieve Goals and Objectives

- > Review of the current content
- > Work to add SOARD Visual Abstracts to the main page
- > ASMBS Social Network Updates
 - » Facebook page – 6,102 likes as of 9/27/18
 - » Twitter – 21.4K followers as of 9/27/18
 - » LinkedIn Account – 479 followers as of 9/27/18
- > Institution of a subcommittee for Webinars
- > Work with program committee to identify “most attended or highest topics of interest” from annual meeting and ASMBS Weekend.

2018 Completed Projects

- > Visual Abstracts have become common place since the release of the first Visual Abstract at ObesityWeek 2017. We have created 22 finalized Visual Abstracts.
- > Increase in Twitter activity promoting both the ASMBS and SOARD. Consistently tweeting 1-2 tweets daily.
- > Increase in Facebook presence. Continued growth of SOARD Journal Club with international recognition. Growth of the ASMBS Members Active Facebook page. Addition of other Committee Facebook pages to include the Access to Care Facebook page. These venues are facilitating the rapid dissemination of information for our members.



Community/Independent Practice Committee

Rami Lutfi, MD FASMBS

The Community/Independent Practice Committee is composed of surgeons who work to serve their community, primarily focusing on the clinical aspects of bariatric surgery. The members are in private practice or are employed by community hospitals or nonacademic health care systems.

Committee Members

Chair

Rami Lutfi, MD FASMBS

Co-Chair

Marina Kurian, MD FASMBS

Executive Council Liaison

Rachel Moore, MD FASMBS

ASMBS Staff Liaison

Leslie Vinson

Members

Helmuth Billy, MD
Shawn Garber, MD
Joshua Pfeiffer, MD
Matthew Brengman, MD FASMBS
Makram Gedeon, MD FASMBS
Jaime Ponce, MD FASMBS
Paul Cirangle, MD
Margaret Inman, MD FASMBS
Robert Richard, MD

Daniel Cottam, MD
Paul Kemmeter, MD
Virginia Weaver, MD
Paul Enochs, MD FASMBS
Shanu Kothari, MD FASMBS
Tom White, MD FASMBS
Karen Flanders, MSN ARNP CBN
James Leithead, MD

Committee Objectives

- > **To represent the interests of the independent practitioners** in the field of metabolic and bariatric surgery
- > **To identify the challenges unique to independent practitioners** in the field of metabolic and bariatric surgery and provide practice based solutions to these challenges
- > **To address best practice guidelines in the contest of unique practice models**
- > **To screen for different trends in the practice of bariatric surgery or endoscopy** and communicate as needed with the Executive Board about patterns that may lead to major changes that need to be addressed in a timely manner
- > **To offer a course outlining best practices** and utilization of resources to maximize success of the practitioner

Committee Goals

Short-Term

- > ObesityWeek 2018 Practice Building Course
- > Cocktail Reception at ObesityWeek 2018 with 3-4 Industry Sponsors
- > [Private Practice Solutions Video Series](#) (Educational) – produced in grassroots format by committee members

Mid-Term

- > Insurance Denials, Letters of Necessity, Tips & Tricks on ASMBS Website as part of Private Practice Tool Kit

Long-Term

- > Increase engagement of large groups
- > Increase private practice membership at national and State Chapter level
- > Increase private practice attendance at ASMBS Weekend and ObesityWeek
- > Continue Educational videos by experts in field of business for all members, academic, private and community for practice building/optimization
- > Private Practice Tool Kit
- > Preceptorships through ASMBS

Specific Projects that Achieve Goals and Objectives

- > Planning ObesityWeek 2018 Practice Building Course
- > Planning ObesityWeek 2018 Cocktail Reception
- > Publish one Private Practice Solutions Video per month
 - » Introduction by Dr. Rami Lutfi, September 2017
 - » Social Media: Value and Impact on Practice by Dr. Richard Peterson, October 2017
 - » Growing your practice, How to increase volume, and When to hire surgeons and physician extenders by Dr. Paul Enochs, February 2018
 - » Hospital Employment: What to Look for in a Contract by Dr. Shanu Kothari, March 2018
 - » Weight Management Part 1: How to Introduce Medical Management Weight Loss Into Your Practice by Dr. Marina Kurian, May 2018
 - » Optimizing Your Practice by Dr. Makram Gedeon, June 2018
 - » Weight Management Part 2: How to Introduce Medical Management Weight Loss Into Your Practice by Dr. Marina Kurian, July 2018
 - » Introducing Balloon Into Your Practice by Dr. Jaime Ponce, September 2018
 - » Contracting by Dr. Rami Lutfi, October 2018
- > Collecting denial and letter examples from committee members and state chapters
- > Private Practice courses and cocktail receptions at ASMBS Weekend and ObesityWeek
- > Private Practice Tool Kit in progress

Completed Projects

- > Nine Private Practice Solutions Videos published
- > Directed ASMBS Weekend 2018 Practice Management Course, June 2018
- > Directed ObesityWeek 2018 Practice Building Course, November 2018
- > Hosted ObesityWeek 2018 Practice Building Reception, November 2018



Diversity and Inclusivity Committee

Farah Husain, MD

This committee is comprised of representative members from relevant ASMBS Committees in addition to members who represent young surgeons, women surgeons, and surgeons from diverse ethnic backgrounds.

Committee Members

Chair

Farah Husain, MD

Co-Chair

Monique Hassan, MD

Executive Council Liaison

Teresa LaMasters, MD

ASMBS Staff Liaison

Jennifer Wynn

Members

Andre Teixeira, MD

Arghavan Salles, MD

Abdelrahman Nimeri, MD

Diego Camacho, MD

Donn Spight, MD

Crystal Johnson-Mann, MD

Candace Shaw, MD

Jessica Smith, MD

Margaret Inman, MD

ASMBS Missions Met by the Committee

- › To study and support the educational and professional needs of under-represented members, promote the acquisition of members from all ages, genders, and ethnicities, and increase access to care for our diverse patient population.

Committee Goals

- › Create a session on diversity and inclusion for ASMBS Weekend 2019
- › Build relationships with community partners to outreach patient populations who traditionally under-utilize bariatric surgery
- › Liaise with Access to Care Committee to work on ensuring all patients have access to bariatric surgery
- › Liaise with Membership Committee on increasing the current 9% female membership
- › Work on initiatives (incorporating social media) to recruit young members for mentorship and support

Committee Objectives

- › Create a slate of members who reflect the target population of under-represented members and patients.
- › Identify gaps in addressing the needs of under-represented members and patients.
- › Create, design and implement projects that will support the mission of the DIC committee and of ASMBS



Emerging Technologies & Procedures

Erik 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 Natan Zundel, MD FASMBS</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 Donald Hess, MD Matthew Hutter, MD, MPH FASMBS</p>	<p>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 Alan Saber, MD</p>	<p>Kuldeep Singh, MD, MBA, FASMBS Konstantinos Spaniolas, MD</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

- > New Procedures Committee – ET&P Committee will be involved as part of a process for new procedures and technologies
- > Definition of Approved Procedures/Acceptable – EC evaluation around these definitions we created
- > More startups involved in Society; inform members on advisory boards committee able to give guidance

Mid-Term

- > Emerging Tech Lab at ObesityWeek 2018, Post Graduate Course
- > IRB Templates - create a Tool Box for New Procedures on ASMBS website; collect templates via committee members

Long-Term

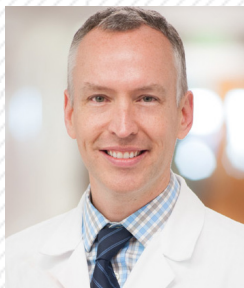
- > Early access to new technologies
- > Establish ASMBS as one of the main societies for reference and authority for new procedures especially endoscopic interventions
- > More emphasis and presence at our annual meetings

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

- > Voting member of the New Procedures Committee
- > Dr. Mikami reviewing Definition of Approved Procedures/Acceptable
- > Dr. Wilson to join Corporate Council meetings
- > Advertise Emerging Tech Lab at ObesityWeek 2018, Post Graduate Course to Corporate Council
- > Re-engage, or remove from committee goals, IRB Templates
- > Dedicated Innovation Summit
- > Continue to engage industry with form on website, other activities – increase awareness via website
- > Maintain the Clearing House, a list of contacts for all emerging technology industries using ASMBS faculty disclosure information
- > rtise Emerging Tech Lab at ObesityWeek 2018, Post Graduate Course to Corporate Council
- > Re-engage, or remove from committee goals, IRB Templates



Flexible Endoscopy

Matthew Kroh, MD

The mission of the Flexible Endoscopy Committee of ASMBS 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. Currently, the practice of endoscopy has important roles in the pre-operative evaluation and the diagnosis and management of post-operative complaints and complications. Additionally, new endoluminal procedures are being introduced to care for patients with obesity and metabolic diseases, both in the primary and revisional setting. There is a growing need for leadership within ASMBS to ensure that these techniques are used responsibly and safely, and that the membership of the ASMBS is kept abreast of the current state of endoscopic therapies to best care for our patients.

Committee Members

<p>Chair Matthew Kroh, MD</p> <p>Co-Chairs Dean Mikami, MD</p> <p>Immediate Past Chair Bipan Chand, MD</p> <p>Executive Council Liaison Stacy Brethauer, MD</p>	<p>ASMBS Staff Liaison Jennifer Wynn</p> <p>Members Aaron Carr, MD Afaneh Cheguevara, MD Brooke Henson, RN, BSN, CBN Leena Khaitan, MD FASMBS Shanu Kothari, MD FASMBS Eric Marcotte, MD</p>	<p>Corrigan McBride, MD FASMBS Erin Moran-Atkin, MD John Morton, MD FASMBS Ninh Nguyen, MD FASMBS Sabrina Noria, MD Jaime Ponce, MD FASMBS Aurora Pryor, MD FASMBS Kevin Reavis, MD John Rodriguez, MD</p>	<p>Nabil Tariq, MD FASMBS Kevin Wasco, MD FASMBS Erik Wilson, MD FASMBS 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 a highly valued specialty society that serves the educational professional needs of its diverse membership

Committee Goals

Short-Term

- > Ensure consistent delivery of BE-SAFE program at Obesity Week, ASMBS Weekend
- > Promote increased visibility of program, offerings at institution-specific programs and SAGES meeting
- > Expanded educational and training offerings to members through hands-on and didactics

Mid-Term

- > Continue to evaluate low stakes exam, following video curriculum outline
- > Enhance hands-on curriculum for the lab from feedback received from participants

Long-Term

- > Identify “training centers” for the hands-on and train the trainer
- > Dissemination of endoscopy educational curriculum among trainees, vetted and approved by ASMBS

- > Promote bariatric endoscopy through the BE-SAFE program as a formal curriculum for ASMBS members
- > Develop guidelines with the other ASMBS committees when using endoscopy in the management of obesity, especially Emerging Technologies and Procedures (all phases)
- > Provide high-quality, data-driven educational courses (didactic and hands-on) in flexible endoscopy in the obese and bariatric patient at Obesity Week, ASMBS weekend, and with SAGES to promote BE-SAFE

Specific Projects that Achieve Goals and Objectives

- > Electronic video Database established to house content (completed)
- > BE-SAFE course at ASMBS Weekend and ObesityWeek 2018 (in process)
- > Train the trainers expansion to allow for more widespread BE-SAFE programs
- > Specific Projects that Achieve Goals and Objectives:
- > Expansion of BE-SAFE website
- > More content of website to support BE-SAFE and endoscopy education
- > BE-SAFE hands-on labs during Obesity Week, SAGES, and individual centers

2018 Completed Projects

- > Roll out of BE-SAFE program
- > Developed BE-SAFE Oversight Committee
- > Increased visibility of endoscopy in educational programs



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 Amie Buehler</p>	<p>Members Sergio Bardaro, MD FASMBS Arunkumar Baskara, MD Adam Beall, MD Miguel Burch, MD FASMBS Diego Camacho, MD Shaun Daly, MD Patrick Domkowski, MD FASMBS Maher El Chaar, MD Sofiane El Djouzi, MD</p>	<p>Neil Floch, MD Karen Gibbs, MD FASMBS Anthony Gonzalez, MD Matthew Hubbard, MD Colleen Kennedy, MD FASMBS Adolfo Leyva-Alvizo, MD Emanuele Lo Menzo, MD FASMBS Alexander Onopchenko, MD John Romanelli, MD William Rupp, MD</p>	<p>Hazem Shamseddeen, MD FASMBS Ian Soriano, MD FASMBS Andre Teixeira, MD FASMBS Michael Tyner, MD FASMBS James Wooldridge, MD FASMBS</p>
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Committee Goals

- > 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

Short-Term

- > Distribution of Foregut and General Surgery Member Survey
- > Committee approval of Preoperative Evaluation of GERD in Bariatric Patients literature review and manuscript v1.0
- > Committee approval of Evaluation and Management of Biliary Disease in patients undergoing Bariatric Surgery v1.0

Mid-Term:

- > 2019 General Surgery and Foregut Course: ASMBS Weekend and/or Obesity Week
- > Data Analysis of Foregut and General Surgery Member Survey Results
- > Preoperative Evaluation of GERD in Bariatric Patients literature review and manuscript v2.0
- > Clinical issues liaison review
- > EC review
- > Evaluation and Management of Biliary Disease in patients undergoing Bariatric Surgery v1.0
- > Clinical issues liaison review
- > EC review
- > Release of GERD custom data fields with MBSAQIP standards 3.0

Long-Term:

- > Publication of Foregut and General Surgery Member Survey Results
- > Use Survey results to direct long-term goals
- > Future papers
- > Evidence-based guidelines for Sleeve Gastrectomy in patients with GERD
- > Management of gallbladder disease after bariatric surgery
- > Management of GERD after bariatric surgery
- > Surgical options for gastroparesis
- >

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 (EC approval pending)
- > Foregut and General Surgery Member Survey (EC approval)
- > MBSAQIP Custom Data Fields: Reflux symptoms after bariatric surgery (expected to be available with Standards v3.0)
- > Preoperative Evaluation of GERD in Bariatric Patients literature review and manuscript v1.0
- > Evaluation and Management of Biliary Disease in patients undergoing Bariatric Surgery v1.0
- > Approval of survey
- > Development of MBSAQIP GERD Custom Data Fields
- > Version 1.0 of GERD and Biliary papers

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

2018 Completed Projects

- > Completion of General Surgery and Foregut Survey
- > Literature library for GERD and Biliary Papers
- > 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

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|---|---|--|--|
| <p>Chair
Helmuth Billy, MD</p> <p>Co-Chair
Ashutosh Kaul, MD, FASMBS</p> <p>Immediate Past Chair
Matthew Brengman, MD, FASMBS</p> <p>Access to Care Committee Co-Chair
Joe Northup</p> <p>Access to Care Committee Co-Chair
Teresa LaMasters</p> | <p>Executive Council Liaison
Wayne English, MD, FASMBS</p> <p>ASMBS Staff Liaison
Leslie Vinson</p> <p>Members
Yijun Chen, MD
Ann Couch, RN, CBN, CPC
Todd Foreman, MD, FASMBS
Ben Kocaj, MBA
Peter LePort, MD, FASMBS</p> | <p>Walter Lindstrom Jr., Esq.
Mario Morales, MD
Alexander Onopchenko, MD
Jaime Ponce, MD FASMBS
Don Jay Selzer, MD
Nova Szoka, MD
Mary Lou Walen</p> | <p>Industry AD HOC Appointed
Natalie Heidrich, Ethicon
Chris Gallagher, Potomac Currents
Nicole Gier, Ethicon</p> |
|---|---|--|--|

Committee Goals

Short-Term

- > Supervised program for mandatory weight loss holds – come up with reasonable plan like Kaiser’s model using structured curriculum for patients; leverage with MBSAQIP
- > Develop probationary program for centers who are terminated by Blue Cross based on SAR data; a compromise, period of reassessment
- > Communicate with State Chapters and Access to Care Committees to identify local & national insurance concerns with respect to insurance issues that affect access to care with policy plan changes and other restrictions affecting bariatric surgery; current and ongoing issues include:
 - » Medicaid and private insurance bundled payment proposals
 - » Blue Cross, United Healthcare, and other insurances nationwide 3, 6, 9 and 12-month medically supervised preoperative weight management
 - » 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
 - » Regional discrepancies regarding access to care and Medicare guidelines secondary to apparent “crosswalk” issues as they arise
 - » Insurance policy changes - maintain communication between insurance carriers’ Medical Directors and ASMBS State Chapter Presidents
- > “How to Survive a RAC Audit” checklist - develop a resource to educate members regarding RAC (Recovery Audit Programs): How to understand the audit process, how documentation affects outcome of an audit – draft submitted for online publication, will 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

Mid-Term:

- > Coordinate with Program Committee on updating insurance coding educational courses at ObesityWeek 2018
- > Monitor AMA CPT or RUC issues that would involve bariatric surgery: continue to develop and pursue need for CPT Codes for bariatric issues as they arise and approach AMA CPT panel as required

Long-Term:

- > Achieve leadership on insurance issues
- > Pursue and negotiate with major carriers a plan to implement exceptions to 6-month medically supervised weight management criteria or once in a lifetime bariatric surgery restrictions based on evidence based medicine
- > Prepare for bariatric CPT codes review when notified
- > Be a resource to and expand the utilization of the insurance committee to ASMBS State Chapters, Access, Membership and their staff, i.e., continue communication process with State Chapters and Access on local and national Insurance issues
- > 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 1. designing a study to evaluate discriminatory insurance benefit design in bariatric surgery, and 2. negotiations between ASMBS and major carriers to modify overly restrictive plan language in current benefit language
- > Maintain and Update the Re-Operative Tool Kit as needed

Continue on following page ➤

COMMITTEE REPORTS

- › Regularly evaluate and update the CPT and ICD-10 Codes for Bariatric Surgery for the website; develop communication/alerts to inform members about new codes
- › Respond to member inquiries via insurance@asmbs.org “hotline” regarding insurance issues; update Insurance FAQs and online information for the website
- › 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

- › Frequent and timely responses to insurance inquiries via the coding hotline – committee discusses and responds to approximately five member inquiries per month via insurance@asmbs.org
- › Developing course content with Program Committee for an insurance coding educational course for ObesityWeek 2018
- › Access to Care Chair and Co-Chair added to committee; Insurance Co-Chair added to Access to Care Committee
- › Draft RAC audit checklist and submitted to EC; need to complete development of a web-based toolkit resource
- › Review of CMS changes affecting membership and the associated impact on access to care

ASMBS Mission(s) Met by the Committee

- › To advocate for the health care policy that ensures patient access to high quality prevention and treatment of obesity
- › To be a highly valued specialty society that serves the educational and professional needs of its diverse membership

Committee Objectives

- › Increase reimbursement for bariatric and metabolic surgery
- › Educate on appropriate CPT coding
- › Provide clarity on insurance issues to members
- › Be a resource to ASMBS State Chapters, Access, and Membership Committees

Establish and disseminate guidelines and protocols for the management of general surgical and foregut problems before and after metabolic and bariatric surgery



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 Natan Zundel, 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>Ad Hoc Member Stefanie D'Arco</p> <p>ASMBS Staff Liaison Beth Pate</p> <p>Members Abdelrahman Nimeri, MD John Dixon, MD, PhD Ahmed Ahmed, MD</p>	<p>Dan Azagury, MD Peng Zhang, MD Minyoung Cho, MD Alan Saber, MD Guilherme Campos, MD Ramzi Alami, MD FACS Yitka Graham, Researcher Diego Camacho, MD Pablo Omelanzuck, MD Michel Gagner, MD Estuardo J. Behrens, MD Sanjay Agrawal, MD Ian Soriano, MD Evelyn Dorado, MD</p>	<p>Moataz Bashah, MBChB, FACS, MSc, MRCS-I, MRCPs-G, DULP, PhD, FEBS Mousa Khoursheed, 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.
- > Develop the criteria for US sites that will host visiting international surgeons and create a listing of these programs on our website

Mid-Term

- > Diversifying the committee with new committee members from other Countries
- > Increase attendance at OW18 with more attendance from other countries
- > Conduct co-sponsored international courses
- > Go to the Latin America Meeting or other international meetings for membership boost

Long-Term

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

- > Changing the membership prices depending on the country/currency
- > Increasing membership - IFASMBS by 20% (40 people)

Committee Objectives

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

Specific Projects that Achieve Goals and Objectives

- > Increase, constantly evaluate and maintain relationships with other societies
- > Closer contact with our International members
- > Possibly have our meeting before the international reception
- > Diversification of the International members of the Committee
- > Co-sponsored courses



Membership

Keith Scharf, DO, 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

Keith Scharf, DO, FASMBS

Co-Chair

Vafa Shayani, MD, FASMBS

Executive Council Liaison

Raul Rosenthal, MD FASMBS

Immediate Past Chair

Anthony Petrick, MD, FASMBS

IH Liaison

Adam L. Dungey, BSN RN

ASMBS Staff Liaison

Beth Pate

Members

Darrell Doucette, MD, FASMBS

Christopher DuCoin, MD

Stephanie Dunkle-Blatter, MD

Andre Teixeira, MD, FASMBS

Keith Kreitz, MD

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 physicians who are not bariatric surgeons (GI, anesthesia, endocrinology, etc.) Proposal given to EC and membership survey sent out

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



Military

Eric Ahnfeldt, DO FACS 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

<p>Chair Eric Ahnfeldt, DO FACS FASMBS</p> <p>Co-Chair Gordon Wisbach, MD MBA FACS FASMBS</p> <p>Executive Council Liaison Stacy Brethauer, MD FACS FASMBS</p> <p>ASMBS Staff Liaison Leslie Vinson</p>	<p>Members Joel Brockmeyer, MD Matt Martin, MD FASMBS Jamie Carr, BSN RN CBN Mike Mulcahy, MD Yong Choi, MD FASMBS Robert O'Rourke, MD (VA) Susan Clark, MD Carl Pesta, DO FASMBS Daniel Eisenberg, MD (VA)</p>	<p>Richard Peterson, MD MPH FASMBS Byron Faler, MD FACS Michael Logan Rawlins, MD Kyle Gadohis, MD Angel Reyes, MD FASMBS Marty Harnisch, MD Vivian Sanchez, MD (VA) Robert Lim, MD FASMBS John Paul Sanders, MD</p>	<p>Henry Lin, MD Robert Wilcox, MD Kevan Mann, MD Tamara Worlton, MD Christopher Yheulon, MD</p>
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ASMBS Mission Met by the Committee

- > To advocate for the health care policy that ensures patient access to high quality prevention and treatment of obesity
- > To foster communication between health professionals on obesity and related conditions
- > To advocate for the health care policy that ensures patient access to high quality prevention and treatment of obesity
- > To be a highly valued specialty society that serves the educational and professional needs of its diverse membership

Committee Goals

Short-Term

- > Assist ASMBS VA members with bariatric surgery access issues

Mid-Term

- > Uniform pathways between military facilities - participate in the ASMBS Quality Improvement Initiative Initial project: Sleeve Gastrectomy Care Path; implement in MTFs when available
- > Create a DHA (Defense Health Agency) policy statement that answers the needs for follow up after bariatric surgery
- > Military Research Collaboration
- > Create centralized, standardized best practices for all military institutions' bariatric programs
- > Improve access to care for various new bariatric procedures

Long-Term

- > DHA centralized funding and support for Bariatric Centers of Excellence distinction in the Military
- > Continue to discover ways to offer CME to deployed ASMBS military members
- > ObesityWeek at no cost to ASMBS active military members
- > MBSAQIP accreditation for all major MTFs utilizing a Clinical Reviewer as data collection administrator for multiple centers
- > Military members to become ASMBS Fellows and MBSAQIP Verified
- > Maintain the updatable document of emails/locations of military bariatric surgeons
- > Utilize Military secret Facebook page/repository for shared military documents

Specific Projects that Achieve Goals and Objectives

- > Dissolved Access to Care VA Task Force; added 2 VA lead members to this committee
- > Made contact with Association of VA Surgeons for support in VA centers becoming accredited MBSAQIP centers
- > Implementation of ASMBS Sleeve Care Pathway at military facilities - could interface with MBSAQIP data
- > Continue to obtain updates from committee members assigned to other

- committees in order to "cross-talk" to participate/achieve goals/prepare MTFs to participate in the ASMBS Quality Improvement Initiative when organized
- > Continue Military Research Task Force utilizing Bariatric Research Resident secured at Beaumont and Eisenhower Army Medical Center to be used at all centers
- > Drafting of IRB registry for innovative bariatric procedures in the Military
- > Interval evaluation at ObesityWeek 2018 where the committee will physically meet and evaluate for common pathways
- > Naval Medical Center San Diego started a program for Reshape intragastric balloons and is reaching out to Madigan Army Medical Center and Brooke Army Medical Center to start similar programs
- > Met with DHA May 2, 2018; action items: Drafted a DHA centralized funding memo and letter of necessity, i.e. the "White Paper"
- > Drafted a minimal follow up requirement list and a standard EFMP enrollment policy for centers performing bariatric surgery
- > Chairman Dr. Elster of ACS Excelsior Society to share with Dr. Hoyt, Executive Director of ACS, that DHA strongly supports their funding of all MTF's participation in MBSAQIP
- > Using ASMBS, SOARD primarily online, and hard copies where internet is deficient, and webinars, when deployed to receive CME; possible use of ObesityWeek On Demand for free
- > Ongoing maintenance of the Military Bariatric Network document; quarterly queries to committee members regarding information on their centers
- > Continued use of private Facebook page – adding members, documents, and discussions
- >

Completed Projects

- > Successful participation of WBAMC in MBSAQIP as template for implementation of MBSAQIP participation of all major MTFs participation through Defense Healthcare Agency directive
- > Clinical reviewers secured at the following centers: Madigan, Beaumont, Evans Army Community Hospital, Fort Hood, and Naval Medical Center San Diego
- > Private ASMBS Military Committee Facebook page created and in use
- > Madigan is now an accredited MBSAQIP center
- > DHA's legal review of MBSAQIP contract completed



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

<p>Chairs Kirk Reichard, MD Janey Pratt, MD, FASMBS</p> <p>Co-Chair Bradley Linden, MD, FASMBS</p> <p>Executive Council Liaison Teresa LaMasters, MD FASMBS</p> <p>ASMBS Staff Liaison Leslie Vinson</p>	<p>Members Jeremy Aidlen, MD Karen Bailey, MD Kathryn Bass, MD Mary Brandt, MD Allen Browne, MD Nancy Tkacz Browne, MS PPCNP-BC FAANP CBN Matias Bruzoni, MD</p>	<p>Judy Chen, MD FASMBS Joy Collins, MD Anita Courcoulas, MD MPH Robert Cywes, MD, PhD Ashish P. Desai, MBBS Daniel DeUgarte, MD Thomas Inge, MD PhD Lori Lynch, MSN APRN CPNP CBN Marc Michalsky, MD FASMBS</p>	<p>Ann O'Connor, MD David Podkameni, MD Elizabeth Renaud, MD Nancy Thompson, MS RN CPNP CBN Mark Wulkan, MD Meg Zeller, PhD Jeffrey Zitsman, MD</p>
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Committee Goals

Short-Term

- > To create a Resource Toolkit - bariatric handouts and resources for pediatric patients that can assist with developing a pediatric program
- > More engagement with Pediatricians to improve referral patterns to bariatric surgery
- > Continue to work with the Access to Care committee and prevention committee addressing pediatric/adolescent bariatric issues
- > Develop relationship with the TOS pediatric committee
- > Several articles in press a few published this year

Mid-Term

- > Develop pediatrics content/education for ObesityWeek 2019: "Pediatrics" tag to help identify pediatric topics, incorporate pediatric programming and scheduling aligned with TOS pediatric tracks, pediatrics grouped into early or late conference, coordinate with TOS
- > 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
- > Push Pediatric Bariatric Surgery in the Pediatric literature

Specific Projects that Achieve Goals and Objectives

- > Development of a repository of nutrition handbooks, consent/assent forms, templates, protocols for surgery, anesthesia, preop evaluation, etc.
- > Assure that we are represented on the Access to Care committee as well as the Obesity Prevention committee
- > Aim for more facetime at pediatric national conferences.
- > Ask TOS for liaison to pediatric committee and vice versa
- > Ongoing collaboration with MBSAQIP committee to refine pediatric standards
- > Get a member representative on the Program Committee for 2019
- > Develop recommendations for pediatricians for follow-up of bariatric surgery patients
- > Members of the committee now continue to work with the Academy of Pediatrics
- > Developing list of specific research questions that are difficult to answer but important in pediatrics

Completed Projects

- >> ASMBS Pediatric Metabolic and Bariatric Surgery Guidelines published in *SOARD*



Program

Shanu Kothari, 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

Shanu Kothari, MD

Co-Chair

Richard M. Peterson, MD

Immediate Past Chair

Michel Gagner, MD

Executive Council Liaison

Shanu Kothari, MD

Staff Liaison

Amie Buehler

Poster Subcommittee

Chair Monali Misra, MD

Jason Johnson, DO

Peter Hallowell, MD

Emerging Technology and Concepts Subcommittee

Chair: Ann Rogers, MD

Matthew Kroh, MD

Mehran Anvari, MD

Dean Mikami, MD

Scientific Papers Subcommittee

Chair: Brandon Williams, MD

Wayne English, MD

David Podkameni, MD

Corrigan McBride, MD

John Scott, MD

Ranjan Sudan, MD

Subcommittee Chair

Shawn Tsuda, MD

Jeremy T. Aidlen, 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 Vithianathan, 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 2018.
 - » Scientific Sessions
 - » Quickshots
 - » Current Controversies
 - » Revisional Surgery
 - » Video based teaching
 - » IH – MBSAQIP Clinical Reviewers Course
 - » Balloon/Endolumenal therapy
 - » Practice Management Building
 - » Continuation of the Partner sessions
- > 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 2017.
- > 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
- > Develop leaders and succession planning for future program chairs/co-chairs

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

Specific Projects that Achieve Goals and Objectives

- > Great program for both ObesityWeek and ASBMS Weekend
- > Excellent reviews and attendance at ASMBS Weekend
- > Selected dates and venues for ObesityWeek through 2020

Completed Projects

- > ASMBS Weekend 2018 – New York, NY – Attendance: 325
- > ObesityWeek 2018 – Nashville, TN – Attendance: TBD



Public Education

Valerie J. Halpin, MD, FASMBS

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

Committee Members

Chair, Executive Council Liaison

Valerie J. Halpin, MD, FASMBS

Co-Chair

Walter S. Medlin, MD

Executive Council Liaison

Marina Kurian, MD, FASMBS

Immediate Past Chair

Joshua Alley, MD

Liaisons to Obesity Action Coalition

Joe Nadglowski

James Zervios

ASMBS Staff Liaison

Reba Liddy Hernandez

Members

Richard Peterson, MD FASMBS

Joshua B. Alley, MD

Adam Beall, MD

Joy Collins, MD

Elizabeth A. Dovec, MD

Timothy B. Ehrlich, MD

Carl Pesta, DO FASMBS

Christopher J. Northup, MD

Michael Seger, MD FASMBS

Irene Lo, MD

Franchell Richard-Hamilton, MD FASMBS

Joanne Prentice, RN BSN

Flavia Soto, MD FACS FASMBS

Colleen Cook

Ad Hoc

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 Objectives

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

Committee Goals

Short-Term

- > Revising patient learning center articles to ensure up-to-date content
 - » Bariatric Surgery Misconceptions
 - » Medical Tourism
- > Complete editing of ObesityWeek filming to video library to serve as a means of communication for the ASMBS to the public about metabolic and bariatric surgery.

Mid-Term

- > Develop slide deck for patient seminar for general use by the ASMBS membership
- > Further develop the Public Education Committee web page
- > Translate articles in the Patient Learning Center into Spanish

Long-Term

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

Completed Projects

- > Updated the following learning center articles
 - » Disease of Obesity
 - » Surgery for Diabetes
 - » Life after Bariatric Surgery
- > Completed time coding and of best of show for ObesityWeek video content
- > Promoted the section with Twitter (ongoing)

Specific Projects that Achieve Goals and Objectives

- > Currently revising Bariatric Surgery misconceptions to get to 6th grade reading level
- > “Medical tourism top 5 know before you go” draft submitted to EC
- > Complete You tube posting of ObesityWeek best of show film library.
- > Patient seminar slide deck draft in progress with support by Gore grant for editing/graphic design
- > Reviewing Public Ed web page articles to get to 6th grade reading level
- > Will translate articles to Spanish once at the 6th grade reading level
- > Develop communication strategy to utilize ASMBS Facebook and Twitter handles to update members on new committee products
- > Review and update at least 3 learning center articles annually
- > Develop 2 learning center articles annually.



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

Co-Chair

Saniea F. Majid MD, FASMBS

Executive Council Liaison

Raul Rosenthal, MD FASMBS

ASMBS Staff Liaison

Leslie Vinson

Members

Naif Alenazi, MD MHM FASMBS

Christine Bauer, RN MSN CBN

Vanessa Cobarrubia, RD LD

Anthony Gonzalez, MD

Brandon Grover, DO FASMBS

Leslie Heinberg, PhD

David Podkameni, MD

Ann Rogers, MD FASMBS

Christopher Still, DO

Ranjan Sudan, MD FASMBS

Tiffany Tanner

David Voellinger, MD

Robert Woodbury, MD FASMBS

Ad Hoc Members

Michael Morrell, MD

Craig Wood, MS

ASMBS Mission Met by the Committee

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

Committee Objectives

- › Prevention of Weight Regain or Recurrence of Obesity after Surgery - Goal is to successfully present the poster based on the data from the survey and publish the paper. We will complete the pathway for prevention of weight regain and submit the paper.
- › Obesity Prevention in MBSAQIP - We suggest that the committee with the MBSAQIP committee on formalizing prevention projects to be part of the accreditation process. If/when this becomes a part of accreditation we would help programs formulate projects with example programs and ideas.
- › Statements about unsafe foods - Publication of the position paper on sugar sweetened beverages.
- › Committee Structure - Members are quickly assigned to an objective and conference calls are smaller to accommodate work on an objective with either the chair or co-chair facilitating. Writing groups are focused and we have a strong link to the Executive Council (EC).

Committee Goals

Short-Term

- › Objective 1: Finalize paper on weight regain. This is in the hands of the Executive Council. We are not sure who is reviewing it prior to submission. We are also intimately involved in the weight regain course at ObesityWeek 2018.
- › Objective 2: Present the updated goal to the EC and gain approval to move ahead with obesity project as part of accreditation. This could either be in addition to or in place of the quality requirement. We favor in addition to.
- › Objective 3: The chair of the OPC needs clarity from the EC on this objective.

Mid-Term

- › Objective 1: Publish the pathway during the year prior to ObesityWeek 2018.
- › Objective 2: Work with MBSAQIP committee to formulate the requirement. Get input from stakeholders. Will need input from the EC.
- › Objective 3: Defined structure for statements from the OPC on relevant topics. Such as the look of these papers, whether it be a short white paper or papers with full literature search.
- › Objective 4: Study families of patients who have bariatric surgery with interventions targeted to prevent obesity in family members, using the patient as the portal for the education.

Long-Term

- › Objective 1: Lead the weight regain course next year and use the course to introduce the pathway, based on the published paper. Integrate with Integrated Health (IH) and
- › The Obesity Society (TOS) on the multidisciplinary model to prevent weight regain.
- › Objective 2: Present to the EC at ObesityWeek 2019 the completed requirement and move ahead with implementation of the requirement and education of the membership. Publicize this remarkable prevention endeavor of the society.
- › Objective 3: Recruitment of other societies to join our statements on topics of interest and present these at Obesity Summit. We want to make these statements available to relevant outlets such as the press.
- › Study halo effects in other areas such as maternal weight gain and working with obstetricians, for example, to prevent obesity in every child by preventing too much weight gain in the mother.

Specific Projects that Achieve Goals and Objectives

- › Widespread education effort and implementation of pathways that are studied in an ongoing fashion and research supporting multidisciplinary approach to prevention of recurrence of obesity after surgery. The committee would like to pursue industry partners to help fund these studies.
- › Continue to work toward prevention as an accreditation element.
- › Persistently assimilate the willing societies to help make more impactful statements.

Completed Projects

- › Reorganization of the committee with smaller groups working on specific projects. Dr. Majid ascended to Co-Chair and Dr. Woodbury moving to regular member.
- › Survey about weight regain sent to all members. Data analyzed and paper completed, awaiting final revisions.
- › Abstract submitted to ObesityWeek about the weight regain survey. It was accepted as a poster. Dr. Podkameni and his fellows are completing that.
- › Drs. Archer and Majid asked to co-chair a weight regain course at ObesityWeek.
- › Initial draft of paper on Sugar Sweetened beverages submitted to the EC. Currently working on revisions.



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

Chair

Dana Telem, MD

Co-Chair

Jon Gould, MD

Executive Council Liaison

Eric DeMaria, MD

Immediate Past Chair

Eric DeMaria, MD

ASMBS Office Liaison

Leslie Vinson

Members

John W. Baker, MD, FASMBS

Katherine Meister, MD

Sue Bunnell, BSHW, RN, CHC
CHSP, CBN

Bradley Needleman, MD, FASMBS

Arthur M. Carlin, MD, FASMBS

Sabrena Noria, MD, PhD, FRCSC

Michael Edwards, MD

Nabeel Obied, MD

Luke Funk, MD, MPH, FASMBS

Philip A. Omotosho, MD

Rama Rao Ganga, MBBS, MS,
MRCS

Carl Pesta, MD, FASMBS

Jacob Greenberg, MD, EdM

Anthony T. Petrick, MD, FASMBS

Caitlin A. Halbert, DO, MS

John Pilcher, Jr., MD

Daniel B. Jones, MD, MS,
FASMBS

Kinga A. Powers, MD, PhD

Tammy Kindel, MD, PhD

Konstantinos Spaniolas, MD

Shauna Levy, MD, MS

William A. Sweet, MD

Henry Lin, MD

Andre F. Teixeira, MD, FASMBS

Saniea F. Majid, MD, FASMBS

Oliver Varban, MD

Michael A. Malvesti, PharmD

Eric Volckmann, MD

Sara Martin Del Campo, MD, MS

Clark Warden, MD, FASMBS

Tracy Martinez, BSN, RN, CBN

Noel N. Williams, MD FASMBS

Committee Goals

Short-Term

- > VTE survey administration

Mid-Term

- > ASMBS endorsed clinical pathway for bariatric surgery Gastric Bypass Pathway
- > Intervention to Reduce VTE Rates to Promote Patient Safety
- > Establish a preoperative pathway for bariatric surgery (possible collaboration with insurers)
- > Pursue alternate publication/online discussion options for Patient Safety/Malpractice Vignettes with Invited Discussion commentary
- > Utilize sleeve pathway to identify research initiatives and priorities

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
- > Partner with insurers to establish a national presurgical pathway
- > CQI projects with sleeve pathway (possible joint venture with Research Committee)

- > 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

Committee Objectives

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

Specific Projects that Achieve Goals and Objectives

- > Administration of VTE survey (once approved by Executive Council) to membership at ObesityWeek 2018
- > Committee members assigned to all projects
- > QI Practice Gaps Survey sent to committee
- > Development of a Preoperative RYGB Pathway in first draft form November 2018, then expand to intra and postoperative pathways
- > Task force for preoperative patient requirement recommendations
- > Intervention to Reduce VTE Rates to Promote Patient Safety member survey created, reviewed by EC, edited, in second review with EC September 2018

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COMMITTEE REPORTS

- › Continual literature review to update sleeve pathway as necessary
- › Closed Claims data collected 2016-2017
- › We will develop these projects in the future; currently we are focusing on the three main projects detailed above in the Mid-Term goals (#s 1, 2 and 3)

Completed Projects

- › VTE Survey
- › Preoperative RYGB



Research

Mohamed Ali, MD, FASMBS

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

Committee Members

Chair

Mohamed Ali, MD, FASMBS

Co-Chair

Ali Aminian, MD, FASMBS

Executive Council Liaison

Michel Gagner, MD

Immediate Past Chair

Matthew Hutter, MD, FASMBS

ASMBS Office Liaison

Susan Hauray

Members

Peter Benotti, MD
 Scott Cunneen, MD, FASMBS
 Ramsey Dallal, MD
 Byron Faler, MD
 Jonathan Finks, MD
 R. Armour Forse, MD
 Luke Funk, MD, FASMBS
 Luis Garcia, MD, FASMBS
 Dawn Garcia, APRN
 William Gourash, RN, CRNP, PhD
 Donald Hess, MD

Jill Hurley, OTRL
 Tammy Kindel, MD, PhD, FASMBS
 Wendy King, PhD
 Subhash. Kini, MD
 Michael Lee, MD, FASMBS
 Emanuele Lo Menzo, MD FASMBS
 Peter Lopez, MD
 Corrigan McBride, MD FASMBS
 Robert O'Rourke, MD
 Nancy Puzifferri, MD
 Malcolm Robinson, MD, FASMBS
 Isaac Samuel, MD

Michael Schweitzer, MD FASMBS
 Vadim Sherman, MD
 Eric Sheu, MD
 Kimberley E. Steele, MD, PhD, FASMBS
 Dimitrios Stefanidis, MD, FASMBS
 Gladys Strain, PhD
 Dana Telem, MD FASMBS
 Mark Wulkan, MD

Committee Goals

Short-Term

- > Promote bariatric surgery research through grant awards
- > Promote education regarding the conduct of bariatric surgery research
- > Identify the research priorities of ASMBS members

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
- > Assist members to begin and maintain research protocols

Long-Term

- > Increase availability of research support funds for members
- > Set society research agenda for priority research topics
- > 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 2018 Research Grant Process
- > Promote new robotic surgery research funding opportunities
- > Completed DELPHI survey of member research priorities
- > Funding secured for grants in 2018 from ASMBS Foundation
- > Secure funding for grants in 2019 from ASMBS Foundation
- > Analyze DELPHI results to build ASMBS research priority topics
- > Develop IRB toolkit for member use
- > Work with ASMBS Foundation and others to increase available funding and work to identify other potential funding sources
- > Form research teams from research committee members and ASMBS members to address specific topics in the identified research priorities
- > Investigate the potential to create mechanisms for multi-institutional studies through collaboration by ASMBS members

Completed Projects

- > Completed the 2018 Research Grant Review Process
 - » Two grants were awarded
- > DELPHI survey completed with data analysis to follow
- > IRB toolkit close to completion

COMMITTEE REPORTS



Rural

Luis Garcia, MD MBA FASMBS

The Rural Committee is composed of surgeons and integrated health professionals who provide care to bariatric patients in a rural or isolated setting.

Committee Members

Chair

Luis Garcia, MD MBA FASMBS

Co-Chair

Kevin Helling, MD

Executive Council Liaison

Wayne English, MD FASMBS

ASMBS Office Liaison

Leslie Vinson

Members

Bree Dewing, MD

John Pender, MD

Frank Felts, MD FASMBS

Walter Pories, MD

Tammy Fouse, DO

Raza Shariff, MD

Brandon Helbling, MD FASMBS

Jessica Smith, MD

Linden Karas, MD

Andrew Van Osdel, MD

Howard McCollister, MD

Ellen Vogels, DO

Curtis Peery, MD FASMBS

Kashif Zuberi, MD

Committee Goals

Short-Term

- › Continue to grow committee membership
- › Define inclusion criteria, what constitutes a rural bariatric surgery practice (using ACS model)
- › Determine barriers for MBSAQIP accreditation

Mid-Term

- › Mentorship program for new rural program (Tool Kit, site visits)
- › Mentorship for quality improvement (proctoring opportunities, advice hotline)
- › Follow-up tool kit for non-surgeons in rural setting (IH task force already working on this)

Long-Term

- › Help develop rural practice accreditation standards (if it is determined that they need to be different than current standards)
- › Participation of all rural practices in MBSAQIP and ASMBS
- › Mentorship pathway for committee members into ASMBS leadership/EC
- › Tracking of outcomes data for Rural Centers
- › Rural Symposium at ASMBS Weekend 2019
- › Develop a Rural Collaborative, i.e., network of rural programs

Committee Objectives

- › To identify rural bariatric surgical practices
- › To represent the interests of metabolic and bariatric surgery in a rural setting
- › To identify the challenges unique to rural practitioners in the field of metabolic and bariatric surgery
- › To provide a template of collaboration to improve the care of the bariatric patient in the rural setting
- › To provide practice- or evidence-based solutions to these challenges
- › To define best practice guidelines and best standards of care in rural

environments

- › To offer advice and support in recruitment, retention, mentoring, and post-residency/fellowship education to assure quality surgical care for rural bariatric patients
- › To address financial and business challenges of rural practitioners
- › To advocate for and support the accreditation of bariatric centers in rural America
- › To develop and maintain resources for existing rural accredited centers that provide care for bariatric patients
- › To improve access to care for the Bariatric patient in rural settings

Specific Projects that Achieve Goals and Objectives

- › Committee highlighted in connect's "Join a Committee" campaign in February 2018; two new members were added
- › Continued discussion of definition of inclusion criteria for potential members of the committee
- › Ongoing discussions to develop a "tool kit" for the use of Telemedicine for care of patients located in remote areas
- › Continue identification of potential Rural Programs across the nation to be included in the Rural Collaborative
- › Continued participation of rural committee members in committees of broader reach; Dr. Garcia is a member of the Access to Care Committee
- › Continued research of rural practices, ongoing committee meetings and discussions with members to determine rural practice/patient needs
- › Conversations taking place to develop a Rural Surgery Outcome Collaborative
- › In planning process of a Rural Surgery Symposium for Spring Meeting in 2019

Completed Projects

- › Committee highlighted in connect's "Join a Committee" campaign in February 2018; new members added



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

<p>Chair Rachel Moore, MD</p> <p>Co-Chair Teresa LaMasters, MD FASMBS Carl Pesta, DO FASMBS</p> <p>Executive Council Liaison Rachel Moore, MD FASMBS</p> <p>Immediate Past Chair Christopher Joyce, MD</p> <p>ASMBS Office Liaison Leslie Vinson</p>	<p>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) Brian Wong, MD (HI)</p>	<p>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) David Chengelis, MD (MI) Todd Kellogg, MD (MN) Norbert Richardson, MD (MO) David Carroll, MD (MS) Rana Pullatt, MD, (NC/SC) Thomas White, MD (NE) Jamie Loggins, MD (ME)</p>	<p>Naveen Ballem, MD (NJ) Shawn Tsuda, MD (NV) William O'Malley, MD (NY) Matthew Hutter, MD, New England Adrian Dan, MD, (OH) Hamilton Le, MD (OK) Catherine Boulay, MD (OR) Fernando Bonanni, MD (PA) Christopher Sanborn, MD (TN) Robert Carpenter, MD MPH (TX) Guilherme Campos, MD (VA/WV) Alana Chock, MD FASMBS (WA) Brandon Grover, DO FASMBS (WI)</p>
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Committee Goals

Short-Term

- > Propose to the Executive Council that the state chapters be utilized during the next election as the turnout gains that were made last year were lost again
- > Create campaign for state chapters to increase more engagement, activity:
- > Identify local challenges and performers and outliers via email survey to State Chapter Presidents
- > Project that will increase value for them, i.e., local quality meetings

Mid-Term

- > Strengthen existing chapters
- > Increase regional collaboration within and between states to foster best practices and improve quality outcomes
- > Collegial state chapter event in addition to individual state chapter meetings at ObesityWeek 2018

Long-Term

- > Maintain webpages on ASMBS site for chapters, i.e., leadership updates, meeting and event announcements
- > Promote positive relations and ongoing communication between members and national ASMBS
- > Increase membership of practicing bariatric surgeons in ASMBS
- > Provide each ASMBS member with chapter membership
- > Utilizing the state chapter system to encourage participation in the most important voting initiatives of the year as identified by the Executive Council
- > Continue to host Annual Chapter Presidents' Summit to train chapter leaders and facilitate dialogue among them

Committee Objectives

- > Improve communication between individual members and the ASMBS leadership
- > Promote collegiality among colleagues and programs in the chapter

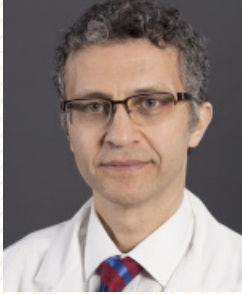
- > Encourage participation of practicing metabolic and bariatric surgeons in ASMBS
- > Offer joint sponsorship to provide CME credits during chapter meetings
- > Provide accounting and tax filing assistance for the chapters
- > Help implement projects from other committees as they roll out to the general ASMBS membership

Specific Projects that Achieve Goals and Objectives

- > Update chapter webpages with new President, meetings, and news as per chapter communication with ASMBS Staff 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
- > Collect state chapter dues (for all but a few states) and distribute dues reports and member lists to chapter Presidents to assist with communication
- > Continue ASMBS state chapter spotlight column in Bariatric Times in order to highlight achievements and disseminate knowledge about chapter activities
- > Provide ASMBS-sponsored CME for state chapter meetings
- > Continue chapter presence and support in all 50 states
- > Planning agenda and activities for State Chapter Presidents event at ObesityWeek 2018
- > Work with Dr. Robert Carpenter and the Texas chapter to create an Ethics session that would meet state licensing requirements; offer to state chapter presidents to use it as a template for creating similar sessions at their own meetings as this would be a value add for members

Completed Projects

- > Updated new Chapter Presidents and their State Chapter websites accordingly
- > Collected 1st, 2nd and 3rd Quarter Dues for all participating chapters (GA, HI, NJ, New England, and TN collect their own)
- > Hosted the 6th Annual State Chapter Presidents' Summit at ASMBS Weekend 2018 in New York on June 14th



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

Shanu Kothari, MD

ASMBS Office Liaison

Meghan Johnson

Members

Mustafa Aman, MD

Kennedy Colleen, MD

Adrian Dan, 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

Stuart Verseman, MD

Committee Goals

Short-Term

- › Encourage the ASMBS members to submit video of unique cases. The cases will be reviewed by the committee members and selected video case will be posted on the website and included in our video library under spectacular case of the month.

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 (in progress)

Long-Term

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

Committee Objectives

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

Specific Projects that Achieve Goals and Objectives

- › Spectacular Case of the Month
- › Review submitted videos for presentation at ObesityWeek

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

From Our Integrated Health President

As I complete my second 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 Stephanie Sogg for stepping up to serve an additional year as chair of the IH Clinical Issues and Guidelines Committee. The dedication and commitment you have contributed to further the IH Science Section does not go unrecognized or unappreciated. Thank you.

Additionally, I would like to take this opportunity to again welcome Lisa West-Smith, PhD, LISW-S as the IH President-Elect. Dr. West-Smith was elected earlier this year in a special election, and has many, many years of experience in the field of metabolic and bariatric surgery. Her expertise will be a tremendous asset to the Integrated Health Science Section, and as your future IH President.

On the same note, congratulations to the newly elected IH Executive Council members: Nate Sann, CRNP – IH Secretary; as well as member-at-large positions -- Heidi Bednarchuk, MSN, ARNP, CNS, CBN, Paul Davidson, PhD and Nina Crowley, PhD, RD, LD. And a huge thank you to the outgoing council members Christa Trigilio-Black, PA-C and Laura Andromalos, MS, RD, LDN. Your contributions have been numerous and much appreciated.

As you may remember, this year will be the start of a new rotation in the IH leadership. The newly elected IH Secretary will rotate to the IH President-Elect position next year and then to IH President the year after. Each of these leadership terms will be for a one-year term, rather than the previous 2-year term.

And congratulations goes out to the IH award recipients this year – Leslie Heinberg, PhD for the Circle of Excellence and Behavioral Health Provider awards; Maureen Quigley, ARNP for the Advanced Practice Provider award; Jane Sylvestre, RD for the Excellence in Nutrition award; and Cheryl Holsworth, RN for the Certified Bariatric Nurse award. Your colleagues commend you and congratulate you.

Here are just a few of the many the accomplishments of 2018 which are a result of the many hours of dedication and commitment from the committee members (please see the committee report for more detailed information):



- › **Advanced Healthcare Providers Taskforce** - The AHP task force continues to explore credentialing options for advanced healthcare providers for ASMBS members. A survey was just completed regarding interest in certification options for advanced healthcare providers. Stay tuned for the results, and the next steps moving forward.
- › **Awards Committee** - The committee is responsible for providing transparency and resolving any conflict of interest with nominees. This year committee voted on the nominees for the second presentation of the Advanced Practice Provider and Behavioral Health awards.
- › **CBN Committee** - The Certified Bariatric Nurse committee celebrated their 10-year anniversary last year – many congratulations to the committee, subcommittees, committee members and chairs. Additionally, the CBN committee has launched Learningbuilder, a platform to simplify the recertification process and continues to work on accreditation through professional organizations.
- › **Clinical Issues and Guidelines Committee** - The IH Tool Kit continues to grow with new documents being added to the “buckets” for membership use. Ongoing projects for the CIG include: Nutrition Guidelines for Macronutrients, Nutrition Guidelines for Pregnancy, and revision of Adjustable Gastric Band Guidelines.
- › **Communication Committee** - The IH Communication Committee has been instrumental with the promotion of education and professional development with webinars, offering credit(s) to attendees. Future webinars will include Pharmacology updates to be offered in December, 2018 and other hot topics in 2019. The committee has also been actively involved with a new Facebook section for ASMBS IH members only – the IH group has almost 250 members and is growing. The group has had lots of discussion around various issues... if you're not a member, consider joining.
- › **Multidisciplinary Care Committee** - The MDC committee has researched and recommended IH related metrics for inclusion on the MBSAQIP survey. In addition, the MDC committee submitted an article to the Bariatric Times on the compensation survey.

- > **Membership Committee** - The Membership committee has been busy updating the current application to help ASMBS to better track our Integrated Health members and ensure compliance with any ASMBS policies. The committee is also responsible for reviewing new applicants to the organization, and more recently have worked with the IH Communication Committee to develop a YouTube video promoting the benefits of membership.
- > **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. Randy Seeley, a renowned researcher whose recent work has included efforts on identifying the molecular underpinnings of the potent effects of bariatric surgery on weight and metabolism has been invited as the keynote speaker for Obesity Week, 2018. Be sure to attend his presentation on Tuesday, 11/13/18.
- > **Support Group Committee** - The Support Group committee will once again have educational offerings during Obesity Week. Other projects include updating the Support Group Manual (stay tuned for the updated version in the very near future) and a literature search regarding bariatric support groups.
- >

What a great year we have had. As we move forward into my third 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 primary 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
Lisa West-Smith, PhD,
LISW-S



Secretary
Sue Cummings, MS, RD



Past President
Christine Bauer, MSN,
RN, CBN



Senior Past President
Karen Schulz, MSN, CNS,
CBN



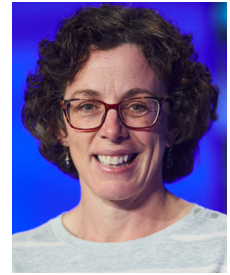
Executive Council Liason
Eric DeMaria, MD,
FASMBS



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



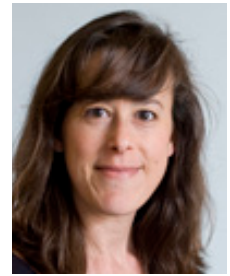
Member-At-Large
Laura Andromalos, MS,
RD, LDN



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
Susan Haury

Accreditation
James D. Meyer
Sharon Hillgartner

Practice Analysis
Susan Dugan (leader)
Teresa Fraker

Marketing
Narelle Story

Policy and Procedures
Ann Couch (leader)

Examination Development
Ruth Davis (leader)
Cheryl Holsworth

Maureen Quigley
Mara Berman
Alice Jackson

Examination Preparation
Bobbie Lou Price (Leader)
Christine Bauer
Barb Lawrence

Finance
William Gourash (leader)
Tracy Martinez
Bobbie Lou Price
Jessie Moore

Recertification
Carrie Norcutt
Wanda Szymanski
Ron Permenter

Other Discipline Credentialing
William Gourash
Jessie Moore

International (new)

Integrated Health Missions Met by the Committee

- > Primary
 - » Cultivate and support a knowledgeable, skilled and empowered membership
- > Secondary
 - » 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

- > 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.
- > Communicate the value of this credential to the public and other key constituencies.
- > Administer a fiscally responsible certification program while allocating appropriate resources for growth.
- > Extend the availability of the CBN examination/certification to international registered nurses.
- > Support the credentialing interest and efforts for all Integrated Health Professionals.

Completed Projects

- > Launch of LearningBuilder, a “user-friendly”, interactive, “professional development focused”, web-based platform for CBN Recertification. This required extensive investigation, re-organization, collaboration, planning and execution.

- > Updating and presentation of the 3 CBN review courses over the last year. Presentation venues included ASMBS Weekend, ObesityWeek, and especially notable is the one at the Texas Chapter of ASMBS in February 2018. This state chapter prototype program was developed into a format that will be available to other ASMBS state chapters in 2019.
- > Invitation, recruitment, training and initial mentoring of a new group of Item-writers for the CBN examination.
- > Submission of the Certified Bariatric Nurse (CBN) Practice Analysis (PA) manuscript to SOARD which will take place before the end of this year. Additionally, the survey process and results were compiled into an abstract, submitted to ASMBS for OW 2017 which was accepted and won 2nd place in the in the IH 2017 abstract session.
- > Participated in the development and analysis of the PA, NP, and CNS survey exploring certification, certificate and credentialing options.
- > We Thank the 5 committee members who have retired this year for their service and hard work: Sally Strange, Trudy Ivins, Vanessa Shay, Sandy Tomkins, and Megan Daniels.

Short and Mid-Term Activities

- > **Overall Committee**
 - » Fill in the subcommittee member vacancies and special focus on the marketing, accreditation, policy and procedures.
 - » Foster subcommittee and entire committee communications and regular meetings
 - » Goal for 2 webinar full committee meetings in addition to the OW and regular subcommittee teleconference calls.
 - » Utilization of the LearningBuilder communications and data reporting features to assess program quality and identify barriers to recertification with the goal of achieving a goal of recertification by certificants at 50% or greater (January 2020)
 - » Develop marketing strategies to increase the examination candidates by 25% (275/year by 2020) with development and implementation of strategies from marketing subcommittee.

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- » 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
- » Implementation of the item writing campaign initiated in 2018 to update and fill in any thin areas in the examination item bank and to explore and recruit new candidates for examination development activities
- » Foster the review of old committee policies and the development of a comprehensive policy structure
- » Develop a strategy and plan to increase the international presence of the CBN certification
- » Further support the credentialing options exploration by all of the IH disciplines of the ASMBS
- » **Marketing Subcommittee**
 - » Add members (3)
 - » Continue and further develop the annual marketing activities: Newsletter publication, CBN Award process, Nursing Certification Day celebration, and ObesityWeek and ASMBS Weekend events.
 - » Explore and implement “special incentives”: organizational discounts, hospital Certification packages, support for those re-taking the examination
 - » Continue to develop and implement a “retired” CBN Nurse program
 - » Explore, develop and implement strategies to increase the CBN presence in ASMBS state chapters.
 - » Review and update of the CBN web presence on the ASMBS website
 - » Explore and develop a plan to increase the International CBN certification interest
- » **Accreditation**
 - » Add 1-2 members
 - » Re-educate (with regard to new accreditation standards) members of subcommittee
 - » Develop platform with which to house accreditation submission materials
 - » Explore and implement consultation with consultant (Sea Crest and AMP) (initiated)
 - » Develop strategy and time-line for submission for ABNS and/or NCCA accreditation
 - » Carry out the recommendations of the consultation.
 - » Plan timeline for submission for accreditation
- » **Practice Analysis**
 - » Completion of the Practice Analysis manuscript submission process (SOARD) (in progress)
 - » Development of activities and timeline for the next practice analysis
- » **Policy and Procedure**
 - » Add additional members (2)
 - » Candidate eligibility and audit implementation
 - » Review and 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).
 - » Implementation of the item writing campaign initiated in 2018 to update and fill in any thin areas in the examination item bank and to explore and recruit new candidates for examination development activities
- » Review of all examination policies
- » Reevaluate subcommittee membership
- » **Examination Preparation**
 - » Plan and implement 2018 and 2019 ObesityWeek Review courses
 - » Continue to develop the “state chapter” review course curriculum and process options
 - » Implement 1 or 2 “state chapter” review courses
 - » Utilization of “state chapter” review course presenters in the ObesityWeek Review courses.
 - » Review the utilization of the “on-line” review course
 - » Review the “on-line” course content and develop a timeline for update
 - » Explore and implement a strategy to develop a bank of practice questions for candidates.
 - » Explore other examination preparation strategies
 - » Add 1 additional member
- » **Financial**
 - » Finalization of the 2019 Budget
 - » Annual Review of the financial standing of the CBN program with ASMBS leadership (e.g. IH President and President elect and EC leadership)
 - » Development and discussion of 2020 budget
 - » Draft of a 3-year financial strategic plan
- » **Recertification**
 - » Implementation of the LearningBuilder interactive, web-based recertification management platform
 - » Launched 10-1-2018
 - » Initial updating of processes, communications, and management
 - » CBN Manager to attend yearly LearningBuilder conference
 - » Further education of recertificants to the LearningBuilder process (CEU to points basis)
 - » Develop strategies and rollout update of recertification criteria in collaboration with the marketing subcommittee
 - » Eligibility and audit implementation, review and annual update to recertification section of CBN Handbook
 - » Continue the development of the Retired CBN proposal and the precepting option guidelines
 - » Add 1-2 additional member for the subcommittee
- » **Other Disciplines Credentialing**
 - » Continue to participate as member of IH Credentialing Task Force by sharing certification, certificate and other credentialing strategies
 - » Continue to explore relevant professional organizations (e.g. AANP, OMA, AAPA) with committee members
 - » Monitor credentialing efforts in all bariatric disciplines within the ASMBS
 - » Assist the APP Task Force in dissemination of the results of the 2nd survey of APPs in Bariatric Surgery and in identifying a credentialing strategy
- » **Management**
 - » Shore up membership in all of the subcommittees
 - » To place extra focus on the Accreditation, Policy and Procedures and Marketing Efforts
 - » Implement calendar of formal regular communication calls for each of the subcommittees
 - » Foster relationship with the American Board of Nursing Specialties (ABNS) and the Institute for Credentialing Excellence (ICE)



IH Clinical Issues and Guidelines

Stephanie Sogg, PhD

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

Committee Members

Chair & IHEC Liaison

Stephanie Sogg, PhD

Co-Chair

Katie Chapmon, MS, RD

Immediate Past Chair

Allison Grupski, PhD

ASMBS Staff Liaison

Leslie Vinson

Clinical Issues Surgeon Representative

Ann Rogers, MD, FASMBS

Members

Registered Dietitians

Katie Chapmon, MS, RD

Sue Benson-Davies, PhD, DCN, MPH, RD, FAND, LN

Julie Parrott, MS, RD, ACE-CPT

Carol Wolin-Riklin, MA, RD, LD

Behavioral Health

Kasey Goodpaster, PhD

Allison Grupski, PhD

Jennifer Lauretti, PhD, ABPP

Stephanie Sogg, PhD

Registered Nurses

Gwendolyn Crispell, MSN, RN, CBN

Debra Proulx, RN, BHS, MBA, CBN

Sally Strange, PhD, RN, CBN

Nurse Practitioner/Physician's Assistant

Nancy Browne, MS, PPNP-BC, FAANP CBN

Michael Dougherty, PA-C

Karen Flanders, MSN, ARNP, CBN

Charmaine Gentles, ANP-BC, RNFA

Pharmacist

April Smith, PharmD, BCPS

Clinical Issues Surgeon Representative

Ann Rogers, MD FASMBS

Clinical Issues Surgeon Representative

Rachel Blind, NP-BC

Laura Campisi, MA

Pamela Davis, RN, MBA, CBN

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

Committee Goals

Short-Term

- > IH Tool Kit Development

Mid-Term

- > Sensitivity Guidelines/Statement/Resource
- > Online Psychosocial Evaluations
- > Standardized protocol for Developing Guidelines/Position Statements
- > Update of Gastric Banding Guidelines
- > IH collaboration with CIC on Weight Bias and Discrimination Statement and Telemedicine in Post-Op Management

Long-Term

- > Nutrition Guidelines: Macronutrients
- > Nutrition Guidelines: Pregnancy

Specific Projects that Achieve Goals and Objectives

- > The IH Toolkit went live in June 2017 and a number of resources have been published; approved documents will continue to be added
 - » Each bucket has an introductory section (landing page) and, where appropriate, folders for subsections
 - » Five buckets (sections) are currently online (see below regarding the 6th bucket, Support Groups)
 - i. Business Development & Service Line, Program Models & Structure, and Throughput were combined in August 2018
 - ii. Clinical Guidelines
 - iii. Facility Accommodations
 - iv. Patient Education
 - v. Staff Education
 - vi. Support Group - the IH Support Group committee is working with IHEC Patient Education Tool Kit Subcommittee in developing content for the Support Group section of the Tool Kit
- > 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 Tool Kit as they are finalized and approved by IHEC and other bodies whose approval are needed.
- > 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, and we have recruited an ad-hoc member to help as well.
- > Sensitivity Guidelines reviewed by IHEC late 2016; awaiting further

Continue on following page ➤

IH COMMITTEE REPORTS

review/revision; project stalled as not enough research to create a “statement/guideline” but possibly a resource regarding sensitivity training

- › Online Psychosocial Evaluations: Status 4/2018 - 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 has created a survey to be sent to membership to learn more about members’ opinions and concerns regarding this practice. 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. The surgeons’ EC had some concerns about the survey, which we are working on learning more about the nature of their concerns and addressing them; one step we have taken is to enlist the collaboration of a member of the surgeons’ CIC to review and modify the survey; we are now waiting to hear more from surgeons’ EC.; see also collaboration project with surgeon CIC “Telemedicine in Post-Op Management”
- › Standardized protocol for Developing Guidelines/Position Statements: The Guideline for Developing Guidelines is in final draft and almost ready for full IH Clinical Issues and Guidelines Committee review and approval (this will likely occur just before Obesity Week). This document describes the recommended phases to be considered and/or used when developing clinical guidelines related to integrated disciplines. These Guidelines represent a comprehensive synthesis of currently existing guideline development guides or models, spanning multiple disciplines. A detailed description of a Position Statement, along with suggestions for creating Position Statements, is also included. Future work and next steps include providing examples for each of the guideline development phases to include brief instructions on executing each particular example.
- › 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 will likely focus on patient assessment for adjustment versus technique. Because the scope of this project has shifted from a simple update of the previous document, we have involved Dr. Rogers, the chair of the surgeons’ CIC, in discussions about next steps. We have reached out to surgeons’ EC to make sure that they endorse this project. It may be that this project gets “spun off” to a dedicated task force, rather than staying within the umbrella of IH or surgeons’ CICs.
- › IH Collaboration on some surgeon CIC projects – Stephanie, Katie and Kasey had a conference call with the surgeons’ CIG chair and co-chair, to discuss the projects that the 2 committees are working on and determine areas in which IH CIG might assist with or take on various projects that fall within the purview of IH.
 - › Weight Bias and Discrimination Project: Kasey has a special interest in this topic and has volunteered to work with the members of surgeons CIC who are working on this project. She has participated in one conference call to date. Authors from the surgeon CIC have begun working on a draft of the main points and will be sending them to Kasey in the coming weeks.
 - › Telemedicine in Post-Op Management: Surgeons’ CIC is considering a project looking at using telemedicine for bariatric team members to follow their own patients after surgery; this is a slightly different topic from the one being looked at by the “Online Psych Evaluations” working group, but the two topics

might be able to be addressed in one document. This will be followed up as we learn more about how we will be progressing with the “online psych eval” project.

- › 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 three-person working group has been formed, one member of whom is ad hoc. A preliminary outline has been created and a preliminary literature review. 133 articles were identified. The working group created PICO questions and reviewed the literature. The issue they have run into is that there is very little published evidence available; they have discussed with Julie Parrot and Karen Flanders, and the guidance they have been given is that instead of guidelines, they will instead do a “recommendations” paper (akin to what was done for psych). They expect the second lit review to be done by the end of September (getting help from Kara Kallies) and target date for completion is Q22019.

2018 Completed Projects

- › The IH Toolkit went live in June 2017 – several modifications were made and many resources were added throughout 2018. Resources will continue to be added to the Toolkit as they are approved by IHEC and EC.



IH Communications

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

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

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

Co-Chair

Abigail Schroeder, PA-C

IHEC Liaison

Nate Sann, FNP-BC, MSN

ASMBS Staff Liaison

Reba Liddy Hernandez

Members

Stephanie Cox, PhD

Teresa Fraker, MS, RN

Cindy Hipszer RN MSN CNML

Connie Miller, RN BSN

Sarah Muntel, RD

Marie Sundberg, RN

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

Committee Goals

Short-Term

- > Work with ASMBS and TOS leadership to provide online resources from ObesityWeek & ASMBS Weekend
- > Use IH OW Marketing Budget to promote IH Initiatives and ASMBS IH Membership
- > Recruit IH Leaders into ASMBS IH Committees to promote the objectives of ASMBS organization
- > Create a poster promoting the culture of ASMBS in programs and surgeon's office across the country

Mid-Term

- > Continue with the IH webinar series to promote education and professional development
- > Continue to promote Facebook site "Active IH Members" as a

practical and sustainable solution as a communication tool for active IH members

- > Continue to work with the Membership committee to develop a YouTube Video highlighting the value of the Integrated Health Membership
- > Collaborate with additional committees within Integrated Health to develop quarterly Webinars to promote education and professional development
- > Continue document review of public education pages on ASMBS.org, based on current documented evidenced based research

Long-Term

- > 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 a comprehensive "Toolkit" to guide IH membership through the various aspects of developing or enhancing a bariatric practice
- > Collaborate with the ASMBS Communication Committee for ongoing communication needs and collaborative efforts with other professional societies

Completed Projects

- > Three successful IH webinar series that offer CEUs
- > Developed and promote Facebook site "Active IH Members" by recruiting membership from unofficial "ASMBS" groups & "Listserves"
- > Document review of public education pages including the FAQs and Bariatric Surgery Misconceptions on the ASMBS.org website
- > Reviewed the option of blogging for IH, it was determined not to be a viable option



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

Beth Pate

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

Megan Bennett, RD

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

Completed Projects

- > Increase accessibility of membership by allowing associate members to write letters of recommendation
 - » Both renewals and new memberships have increased. Please see below, the percentages of members that renewed in the previous years.
 - » 79% IH members renewed from 2016 in 2017.
 - » 323 IH members paid 2016 dues but not 2017.
 - » 1,552 IH members paid 2016 dues.
 - » 1,591 IH members paid 2017 dues.
 - » +39 IH paying members 2016 to 2017.

- » 861 IH members paid 2016 and 2018 dues.
- » 857 IH members paid 2016, 2017, and 2018 dues.
- » 372 IH members paid 2016, and 2017 dues but not 2018 dues.

- » 91% of MD members renewed from 2016 to 2017.
- » 197 MD members paid 2016 dues but not 2017.
- » 2,231 MD members paid 2016 dues.
- » 2,251 MD members paid 2017 dues.
- » +20 MD paying members 2016 to 2017.

- » 1,680 MD members paid 2016 and 2018 dues.
- » 1,670 MD members paid 2016, 2017, and 2018 dues.
- » 368 MD members paid 2016, and 2017 dues but not 2018 dues.
- > Develop outreach tools to encourage surgeon members and administrators to promote IH membership
- > Integrated Health group discount

Activities Still In Progress

- > Promote membership value through website and social media
 - » YouTube Channel Project
- > 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 includes representatives from disciplines that comprise the integrated team; behavioral health, nursing, nutrition, physical activity, surgery and obesity medicine. The goal of the committee is to investigate the extant literature 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

Co-Chair:

Genna Hymowitz, PhD

Executive Council Liaison

Sue Cummings, MS, RD

ASMBS Staff Liaison

Leslie Vinson

Members

Guilherme Campos, MD

Lynelle Diede, MS RN-BC CBN

Brooke Doucet, RN CBN

Nicole Franklin, PsyD

Lora Grabow, LCSW

Nicole Nguyen, PharmD BCPS

Amber Saucier, RD LDN MS

Cristine Seitz, MS RD LDN

Catherine Tuppo, PT MS CLT-LANA

Christy Davis, MSN FNP-C CSOWM CBN

Ad Hoc Member

Laura Campisi, MA

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
- > Develop and conduct research projects aimed at addressing gaps in the multidisciplinary care literature
- > Disseminate findings related to multidisciplinary patient care to appropriate audiences
- >

Short-Term Goals:

- > Gain understanding of the content of, and assessment strategies used, in bariatric surgery candidate behavioral evaluations
- > Select a project surrounding opioid use in bariatric surgery

Mid-Term Goals:

- > Analyze the findings of Behavioral Health Survey
- > Select opioid use disorder project and submit for approval to the EC
- > Develop Walk from Obesity Newsletter Content
- > Publish "White Paper" survey findings

Long-Term Goals:

- > Publish the findings of Behavioral Health Survey in collaboration with U Penn in a peer-reviewed journal
- > Conduct opioid use disorder project

Specific Projects that Achieve Goals and Objectives:

- > Collect data using the U Penn IH Behavioral Health Survey at Obesity Week 2018
- > Work with U Penn to analyze and interpret study findings
- > Share literature review and develop subcommittee to lead the opioid use disorder project selected
- > Work with Leslie Galloway to develop and publish newsletter content
- > Finalize the publication strategy for the multidisciplinary care survey data (previously referred to as the "White Paper"); currently with Tracy Martinez for a final decision
- > Disseminate Behavioral Health survey findings to relevant audiences, including ASMBS membership and the larger provider community
- > Publish opioid use disorder project findings
- > (Masters in Behavioral Health I, II and III Courses) and distribute survey via email to Behavioral health membership
- > Sent to EC for review July 2018
- > Developed an MDC subcommittee with behavioral expertise to lead this project (Genna Hymowitz, PhD and Lora Grabow, LCSW)
- > Conduct a literature review of opioid use in bariatric populations for presentation and discussion at the upcoming Obesity Week 2018 committee meeting

2018 Completed Projects

- > Authored and published the results of the Integrated Health Compensation Survey in the May 2018 issue of Bariatric Times (survey was administered to ASMBS members in 2017)
- > Dr. Lent participated as a panelist in the March 2018 ASMBS Town Hall Webinar to share MDC projects with the larger ASMBS community
- > Several MDC members authored nutrition-related content for the Walk from Obesity newsletter for 2018-2019
- > Recruited a Co-Chair, Dr. Genna Hymowitz, in June 2018, and 3 new members (pharmacy, advanced practice and exercise/physical medicine specialist)
- > MDC Committee recommendations for MBSAQIP integrated health metrics data capture sent to ASMBS leadership (via memorandum)
- > Conducted teleconference with ACS representatives to discuss the potential for additional IH data capture within MBSAQIP



IH Program and Professional Education

Leslie Heinberg, PhD

The mission of the Integrated Health (IH) Program and Professional Education Committee is to promote and support the development of accredited post-professional education programs to improve the care and treatment of people with obesity and related diseases; to advance the science and understanding of metabolic and bariatric surgery; and to be a resource for the educational and professional needs of our diverse membership.

Committee Members

Chair & IHEC Liaison

Leslie Heinberg, PhD

Co-Chair

Hilary Blackwood, MSN RN ACNP

Executive Council Liaison

Karen Flanders, MSN CBN NP-C

ASMBS Staff Liaison

Sue Haury

Members

Leslie Heinberg, PhD
 Hilary Blackwood, MSN, RN ACNP
 Kelli Friedman, PhD
 Connie Klein, NP
 Laura Andromalos, MS RD LDN
 Christa Trigilio-Black, PA-C
 Karen Flanders, MS NP-C
 William F. Gourash, MSN CRNP

Dale Bond, PhD
 Maureen Quigley, MSN APRN

Abstract

Maureen Quigley, APRN
 Dory Ferraro, DNP
 Kelli Friedman, PhD
 Rachel Goldman, PhD
 Laura Andromalos, MS RD LDN
 Wendy King, PhD
 Kellie Armstrong, RN MS CBN
 Tammy Dodds, MPAS PA-C

Behavioral Health

Janelle Coughlin, PhD
 Karen Grothe, PhD
 Dale Bond, PhD
 Kelli Friedman, PhD

Kristine Steffen, PharmD PhD
 Ryan Marek, PhD

Multidisciplinary

Kristine Steffen, PharmD PhD
 Dale Bond, PhD

Nutrition

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

Post-Graduate

Connie Klein, NP
 Paul Lorentz, MS RN RD BBA Christa Trigilio-Black, PA-C
 April Smith, PharmD

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 all subcommittees
- > 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 Integrated Health 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

Short-Term

- > Suggest areas of focus for member submissions; identify subject area gaps and plan new sessions for ASMBS Weekend and ObesityWeek 2018.
 - » MBSAQIP Clinical Reviewers Course
 - » Burnout
 - » IH Practice Management: Building and Maintaining an Effective Bariatric Practice
 - » Shared Medical Appointments
 - » Cultural Competence
 - » Bariatric Mythbusters
 - » Changes in Reproductive Functioning and Fertility after Bariatric Surgery

- » Advances in Medication Management During and After Bariatric Surgery: Non Opioid Anesthetics, Pain Management, Contraception and Weight Regain
- > 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.

Mid-Term

- > Establish educational activity targets for each year
- > Develop leaders and succession planning for future program chairs/co-chairs

Long-Term Goals:

- > 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

Specific Projects that Achieve Goals and Objectives:

- > Great program for both ObesityWeek and ASBMS Weekend
- > Excellent reviews and attendance at ASMBS Weekend

Completed Projects

- > ASMBS Weekend 2018 – New York, NY
 - » Attendance: 325
- > ObesityWeek 2018 – Nashville, TN
 - » Attendance: TBD



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

Vicky Blackard, RN, BBA, CBN

Nina Boulard, PhD

Lauren Carey, RD

Pam Davis, MBA, BSN, CBN

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

Lori Nevins, LCSW

Ninoska Peterson, PhD

LaToiah Williams, BSN, RN

Andrea Rigby, Psy.D

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

Committee Goals

Short-Term

- > Writing several columns about support groups for the *Bariatric Times* and *Your Weight Matters*
- > Developing a support group training at ASMBS Weekend 2019
- > Presenting a pre-conference workshop in bariatric support groups at ObesityWeek 2019
- > Moderating a support group facilitator networking session at ObesityWeek 2019

Mid-Term

- > Developing an ASMBS Community Standard for program support group facilitators
- > Developing 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

Long-Term

- > Populating support group facilitator toolkit
- > Working towards the implementation of a support group facilitator certificate training program

Completed Projects

- > Maintained email listserv for support group facilitators to communicate and share ideas and documents
- > Conducted the first IH Support Group webinar for the IH ASMBS community, January 2018
- > Researched and provide guidance for MBSAQIP support group standards, February 2018
- > Developed survey for patients to determine what they seek in support groups, April 2018
- > Updated the IH Support Group Manual, May 2018
- > Created a Facebook group for IH ASMBS members
- > Wrote a support group article for the Weight Management DPG Newsletter, 2018
- > Conducted a roundtable discussion on Support Groups during the scientific session of ObesityWeek 2018
- > Ran support group facilitator networking session at ObesityWeek 2018
- > Led pre-conference training in bariatric support groups at ObesityWeek 2018

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

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.

2017 Recipient

Stephan Axer, MD

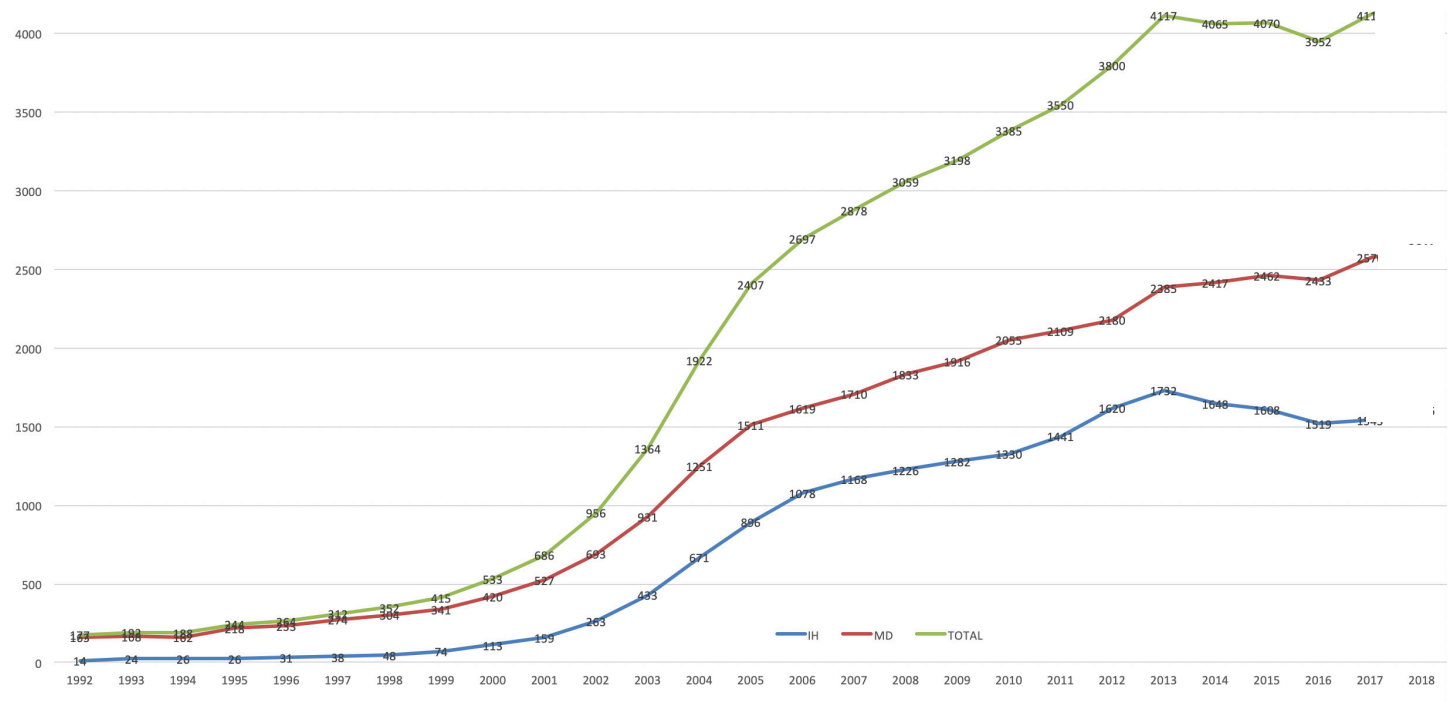
Predictive Factors for Complications in Revisional Gastric Bypass Surgery - Results from the Scandinavian Obesity Surgery Registry

2017 Recipient

Yan Gu, MD, PhD

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

Membership Growth

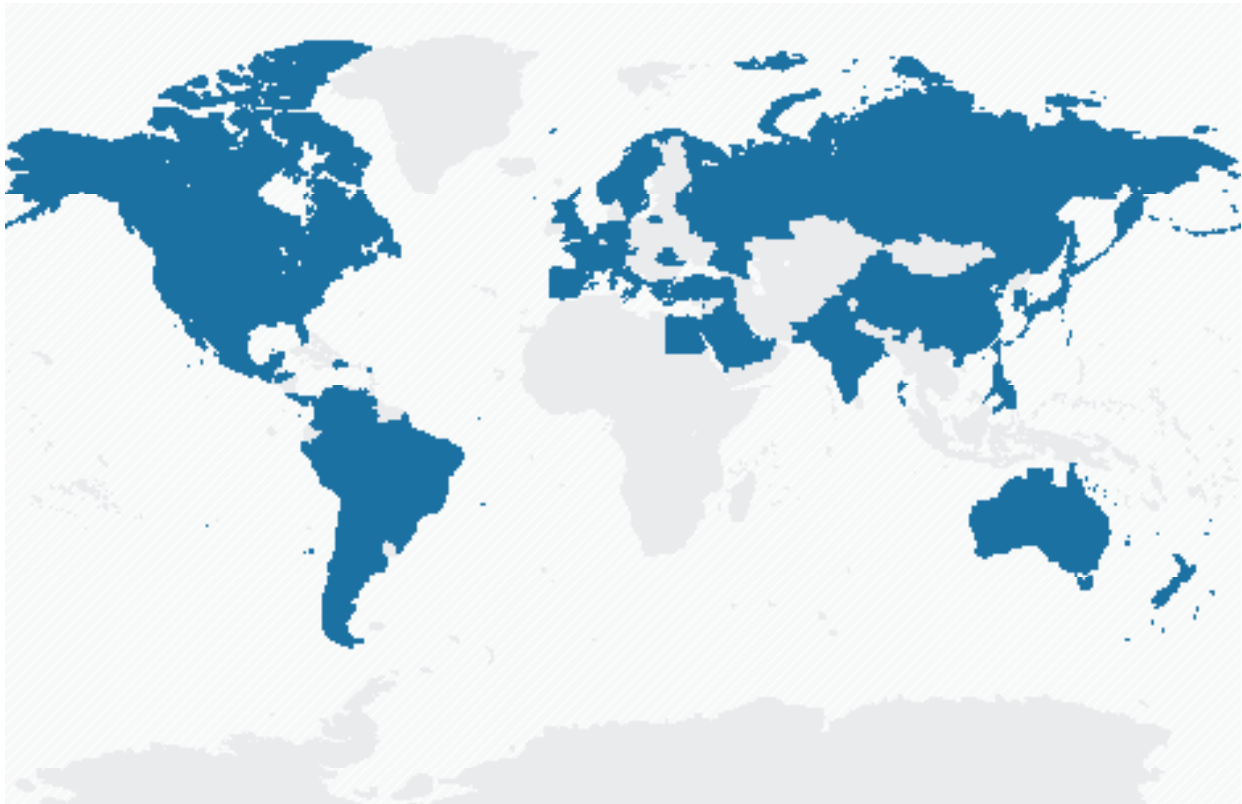


The very essence of the ASMBS is its membership. Our members represent surgeons and professionals from a wide variety of specializations throughout the world—all of which play crucial roles in the care of bariatric patients. Since 1983, our multidisciplinary society has grown to include over 2,500 surgeons and physicians, and over 1,500 integrated health professionals.

International Growth

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

(see map below)



Media Outreach and Public Relations

2017-2018

The American Society for Metabolic and Bariatric Surgery (ASMBS) continues to be a leading voice in the news media and beyond on issues and topics related to obesity and metabolic and bariatric surgery. The society also continues its partnership with Communication Partners & Associates to develop strategic communications programs, proactively engage with the news media, and to raise awareness of the role and impact of bariatric and metabolic surgery on obesity and related diseases.

ASMBS has helped to shine a spotlight on a range of issues including the safety and effectiveness of bariatric and metabolic surgery, its impact on obesity, diabetes, heart disease, and high blood pressure, patient access, barriers to care, bariatric surgery methods, intragastric balloons and other devices, and the long-term effectiveness of metabolic surgery.

Communications programs throughout 2018 built on the success of years of public awareness and education efforts that have bolstered and defined the role of metabolic and bariatric surgery in the continuum of care in obesity treatment. Programs included strategic message development, media training, ObesityWeek media management, media kit and press room, news release and fact sheet development, the ASMBS Obesity Summit and national and local consumer and professional media relations.

Areas of focus for the ASMBS in the news media have been on clearly establishing bariatric surgery as the standard of care for severe obesity, its impact on diabetes and hypertension, improving access to care, and the dangers of bariatric surgery medical tourism, where ASMBS leadership provided powerful background and commentary to both CBS News and NBC News. The ASMBS also provided perspective on the lack of evidence surrounding insurance mandated pre-operative weight loss, the rise of sleeve gastrectomy, the safety and effectiveness of bariatric surgery in older adults, advice for consumers in deciding on bariatric surgery, excess skin removal and the basic science of obesity.

This year alone, ASMBS perspectives have been featured in NBC News, CBS News, Reuters, VOX, Reader's Digest, The Atlantic, Medscape, MedPage Today, US News & World Report, HUFFPOST, MD News, Diabetes Forecast, Bariatric Times, Indianapolis Star, General Surgery News and many others. The ASMBS/NORC Obesity Poll, that elicited nationally projectable opinions of obesity and its treatment

from 1,500 Americans in 2017, continues to be featured in news stories one year after its publication.

The ASMBS also issued news releases when intragastric balloons became one of the society's approved devices and procedures and when Pennsylvania agreed to cover certain state workers for bariatric surgery.

Finally, recognition and awareness of ObesityWeek as the premier conference on obesity and its treatment continues to rise. Each year, the ASMBS identifies five to seven studies to highlight to the news media, develops news releases and conducts outreach to secure interviews with ASMBS members. These studies consistently garner national headlines and helps to contribute to greater understanding of bariatric and metabolic surgery and the disease of obesity.

SOARD Annual Report

Since its inception in 2004, the journal was 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 (IF) rose more than 1 point from 4.4 to 4.5, almost a full point above Obesity Surgery,¹ a remarkable number placing us #11 of 165 surgical journals. However, this year it dropped to 3.9 placing SOARD at #16 of all surgical journals. The IF is calculated by dividing the # of references two and three years ago by the number of publications in the current year. Since we significantly increased the number of articles in the past year, we anticipated a decrease in IF, which might fall slightly more next year.

Our journal submissions of original articles decreased from 437 as of December 31, 2016 and as of June 30 this year was 184, so we should have around 370 this year. We published 396 original manuscripts last year with 184 as of June this year and 63 Paired Editorials with 54 as of June, which may bring us over 100 for the year. 66 manuscripts were rejected without review and, so far this year there have been 18. The rejection rate for original articles last year was 46%, which has risen slightly to 51% so far this 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 has decreased from 14.5 days to 9.5 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.

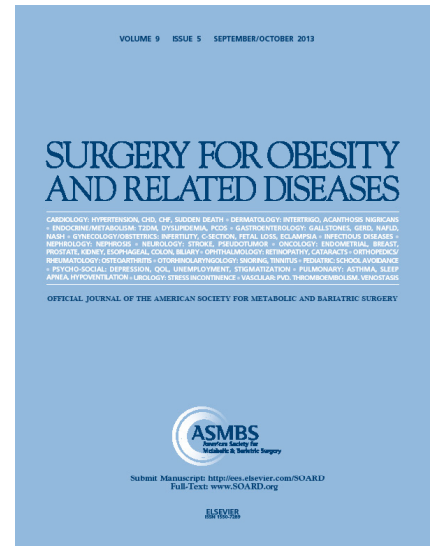
We received 44% of our manuscripts from North America, 34% from Europe and 10% from Asia, with a similar distribution as previous years. In 2015, a special Chinese addition was published with 1000 copies. However, because many of these journals promoted industrial items,, it was decided that we would no longer participate.

Our top reviewers for this year have been Matt Martin (again), Michel Gagner, Preston Carter, and Phillippe Topart.

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 3,671 hours of CME awarded to 278 readers in 1917 and 472 hours of CME to our reviewers.

I thank the ASMBS for letting me be co- editor-in-chief, as we enter our 14th year of publication.



Advocacy Update

SUMMARY OF ADVOCACY EFFORTS IN 2018

Essential Health Benefits

2018 Mid-Term Elections

Democrats will retake control of the House of Representatives and Republicans will increase their majority in the Senate beginning in January when the 116th Congress convenes. It is important to note that Representative Erik Paulsen (R-MN) – lead Republican sponsor of the Treat and Reduce Obesity Act -- lost his re-election bid on November 6th, which means that the obesity community will need to find a new GOP champion for TROA on the House side. There will also be new Chairs of House healthcare committees next year that will need to be educated about ASMBS advocacy priorities.

ONGOING NATIONAL ADVOCACY PROJECTS

Treat and Reduce Obesity Act

ASMBS and the Obesity Care Advocacy Network (OCAN) continue to strongly support S. 830/HR1953, the Treat and Reduce Obesity Act of 2017 (TROA), which was reintroduced in Congress on April 5, 2017 by Senators Bill Cassidy (R-LA) and Tom Carper (D-DE) and Representatives Erik Paulsen (R-MN) and Ron Kind (D-WI), respectively. Specifically, TROA will provide the Centers for Medicare & Medicaid Services (CMS) with the authority to expand the Medicare benefit for intensive behavioral counseling by allowing additional types of healthcare providers to offer these services. The legislation would also allow CMS to expand Medicare Part D to provide coverage of FDA-approved prescription drugs for chronic weight management. At the time of this report, S. 830 had 10 Senate cosponsors and HR 1953 had 163 cosponsors. For up-to-date information on TROA cosponsors, please see the following links:

S. 830 Cosponsors: <https://www.congress.gov/bill/115th-congress/senate-bill/830/cosponsors>

HR 1953 Cosponsors: <https://www.congress.gov/bill/115th-congress/house-bill/1953/cosponsors>

Status & Prospects: Odds of TROA passage are around 30/70. On the positive side, the development of the budget impact analysis paper by Wayne Su and IHS Markit has been useful in demonstrating the significant potential savings to the Medicare program (\$19-21 billion) over ten years should Congress pass TROA. However, passage of the Government Accountability Office (GAO) study on obesity drugs is affording many legislators cover to not take action on TROA until the findings of the GAO study come out in August 2019.

National Obesity Care Week 2018 (October 7-13)

The Obesity Action Coalition (OAC), The Obesity Society (TOS), the STOP Obesity Alliance, the Obesity Medicine Association (OMA), and the American Society for Metabolic and Bariatric Surgery (ASMBS) have launched NOCW with a

vision to create a society that understands, respects and accepts the complexities of obesity and values science-based care. NOCW will achieve this vision to change the way we care about obesity by: elevating societal awareness of the disease of obesity, those affected by it, its science-based treatment and weight bias; building a fact-based understanding of obesity among individuals impacted by the disease, healthcare professionals, medical societies, policy makers, payers, and other stakeholders; and by facilitating a shift to science-based treatments for those living with obesity.

Status: NOCW postcards were included with the leave behind materials for congressional staff during the OCAN September 27th Advocacy Day. NOCW 2018 also featured a specific day during the week that focused on bariatric surgery.

Obesity Care Advocacy Network Efforts

ASMBS continues to actively participate in the Obesity Care Advocacy Network (OCAN), which now has a membership of 19 organizations, including the American Academy of Physician Assistants, Academy of Nutrition and Dietetics, American Association of Clinical Endocrinologists, American Association of Nurse Practitioners, American Council on Exercise, American Society for Metabolic and Bariatric Surgery, AMGA, Black Women's Health Imperative, Healthcare Leadership Council, National Alliance for Healthcare Purchaser Coalitions, Novo Nordisk, Inc., Obesity Action Coalition, Obesity Medicine Association, SECA, The American Gastroenterological Association, The Endocrine Society, The Obesity Society, Weight Watchers, and the YMCA of the USA. 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.

During the summer, OCAN established 3 new workgroups to develop policy positions and identify opportunities for promoting better patient access to and coverage of obesity treatment services. The Congressional Advocacy Priorities & Strategies (CAPS) Workgroup focuses primarily on legislative avenues for promoting obesity treatment. The Regulatory Affairs Workgroup is targeting federal agencies such as CMS and HHS to persuade them to implement the provisions of TROA through administrative means. Finally, the Military Readiness Workgroup is working to educate the military regarding the major impact that obesity is having on the physical and mental health of our armed forces – and subsequent fitness of these affected individuals to remain in the military.

September 27, 2018 OCAN Advocacy Day

On September 27, 2018, more than 60 obesity advocates descended on Capitol Hill as part of the Obesity Care Advocacy Network's Fall Advocacy Day. The Obesity Medicine Association (OMA) served as the host organization for the Day on the Hill as OMA provided the majority of advocates who were already in Washington, DC for the association's Overcoming Obesity 2018 Conference.

ANNUAL ADVOCACY UPDATE

In total, OCAN advocates visited 55 Senate and a dozen House offices — urging legislators to support the Treat and Reduce Obesity Act (TROA) and take action to promote National Obesity Care Week during the week of October 7th-13th, 2018. Senate and House members from 39 states across the country were called on to elevate the dialogue regarding those affected by obesity and address critical coverage gaps in treatment such as those under the Medicare program that prohibit Medicare beneficiary access to FDA-approved obesity drugs and the full array of qualified healthcare professionals regarding intensive behavioral therapy.

STATE & REGIONAL ADVOCACY PRIORITIES

State Advocacy Representative (STAR) Program

At the beginning of 2018, OMA and TOS announced that their respective groups would be establishing State Advocacy Representative (STAR) Programs – modeled after the ASMBS STAR program. Both TOS and OMA are hopeful that they will have a STAR in every state by the end of 2019. OAC is also formulating plans for regional OAC STARs. At the time of this report, plans were underway to establish an Obesity Care Continuum STAR Program to link these programs across AND, TOS, OMA, OAC and ASMBS.

During the summer, we developed an online Handbook for STARs to help them better access state and federal policy statements supporting obesity treatment as well as state specific contact information for key state policymakers such as State Insurance Commissioners, Governors, Lieutenant Governors, State Legislature Healthcare Committee Chairs and state medical society legislative affairs staff.

[Link to STAR Handbook: https://asmbs.org/app/uploads/2018/10/0918-OCC-STAR-Handbook.pdf](https://asmbs.org/app/uploads/2018/10/0918-OCC-STAR-Handbook.pdf)

Major Advocacy Accomplishments in 2018

AMA Adopts Policy to Break Down Barriers to Obesity Care

On June 12, 2018, the American Medical Association's (AMA) House of Delegates (HOD) approved a resolution drafted by OMA, entitled "Removing Barriers to Obesity Treatment." The resolution was supported by ASMBS as well as a number of other groups, including the Colorado delegation, the Minority Affairs Section, the American Association of Clinical Endocrinologists, the Endocrine Society, American College of Surgeons and the American Gastroenterological Association -- which helped the resolution pass without any opposition.

The new policy states that "AMA work with state and specialty societies to identify states in which physicians are restricted from providing the current standard of care with regards to obesity treatment... and that AMA actively lobby with state medical societies and other interested stakeholders to remove out-of-date restrictions at the state and federal level prohibiting healthcare providers from providing the current standard of care to patients affected

by obesity."

Lieutenant Governors Adopt Policy Supporting Obesity Treatment

OMA and other OCAN member groups were instrumental in securing passage of a critical policy resolution that supports treatment and prevention of obesity, which was approved by the National Lieutenant Governors Association (NLGA) during its June 27-29, 2018 Annual Meeting. The resolution, which was introduced by Lieutenant Governors Fairfax (D-VA), Gregg (R-IA), Nungesser (R-LA), Wyman (D-CT) and Zuckerman (D-VT) will help: reduce obesity stigma; establish statewide obesity councils and taskforces; support additional training for current and future healthcare professionals; and support access to obesity treatment options for state employees and in other publicly funded healthcare programs.

Passage of the new NLGA policy on obesity builds on policy statements that have been issued by a number of groups throughout the past few years in the wake of the American Medical Association classifying obesity as a disease in 2013.

To view the language of the entire NLGA obesity resolution, please click on the following link: <http://www.nlga.us/wp-content/uploads/2018-Resolution-in-Support-of-the-Prevention-and-Treatment-of-Obesity-2.pdf>

USP Finalizes New USP-Drug Classification 2018

On February 28, 2018, the United States Pharmacopeia finalized its new Drug Classification (USP-DC) — an independent drug classification system, which is designed to address stakeholder needs emerging from the extended use of the USP Medicare Model Guidelines (USP MMG) beyond the Medicare Part D benefit. OMA was extremely pleased that the final version of the USP-DC includes a new class for anti-obesity agents as well as recognition of new combination agents (Naltrexone/Bupropion: Contrave and Phentermine/Topiramate: Qsymia) which were incorporated in the last draft of the USP-DC.

In discussions with the USP during the development of the drug classification, USP indicated that the Obesity Care Continuum's 2013 comment letter regarding Medicare's Model Guidelines was the catalyst behind creation of the new anti-obesity agent class.

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 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 2018 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
- › Deliciously Healthy, Recipes from Around the Country™ Cookbook



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.



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