

# PROGRESS NEWSLETTER

An official publication of the AACMFS

July 2016, Volume 4 Number 1

### **AACMFS PRESIDENT'S MESSAGE**



Bernard J. Costello DMD, MD, FACS

Today's academic health care environment is complex, ever-changing, and providing some very different challenges and opportunities. As health care enterprises merge, gain market share, and redefine a focus on quality and cost-savings, we experience an increased emphasis on revenue generation with the commensurate decrease in available opportunity for scholarly activity and teaching. Groups like ours, and our partners, are in a position to provide the solutions to these challenges and push our specialty forward. For most of us, we are embedded within smaller enterprises than other surgical departments, and with less resources. Despite that fact, we cover many areas in

For most of us, we are embedded within smaller enterprises than other surgical departments, and with less resources. Despite that fact, we cover many areas in academic medicine and dentistry for numerous stakeholders. While we tend to do this at a high level of technical proficiency, it is recognized by many that we are far behind our colleagues in developing research enterprises. As a specialty, we must facilitate more research-based innovation.

Innovation rarely involves a sentinel "eureka" moment. It occurs as a systematic assimilation of experiences, data, ideas, and thought until an individual or group builds upon that work to provide a new concept, perspective, or technology that transforms. It is a process by which invention and discovery often grow out of unsuspected or newly observed phenomena. This process was described by Kuhn as one in which observation occurs, conceptualization happens, assimilation to theory transforms, and discovery arises. The cumulative occurrences then lead to a change in paradigm that happens as a result of deliberate, but not necessarily long, conceptual assimilation. Often, acceptance of the advancement occurs by violating deeply entrenched expectations (e.g. the world is flat). As a result, considerable debate typically surrounds transformative advances.

Important then is the conceptual linking of the need for high-level evidence with the introduction of new technologies. Does the innovative thought process or procedure improve the outcome for the patient? Is it the outcome that the patient cares about? How do we assess this question clearly and completely with data? Does a new technology offer a better recovery or improved long-term measurable results? These are questions that can only be completely and definitively answered by Level I evidence and careful evaluation of outcomes.

Gone are the days when surgical giants merely suggested a treatment philosophy or procedure with its almost immediate acceptance. Surgeons, patients, and even payers in today's health care environment are demanding high levels of evidence to justify clinical choices and validate those concepts we have held dear for decades. When standards are pushed higher, patient care is improved.

The work of our group has the potential to be an important platform for the process of assimilation of thought for some of the brightest minds in our specialty. Our surgeons have unique skills that not only include surgical excellence in CMF surgery, but also represent exceptional surgical thinkers with an ability to transform ideas into new surgical principles. A considerable amount of excitement has surrounded our meetings. The AACMFS can be the crucible for that critical conceptual integration of new thought. Please give some thought of your own to bringing *your* best ideas to our next meeting. I look forward to being a part of that excitement with you in Pittsburgh in the Spring of 2017.

#### HONORS AND AWARDS

The Committee on Honors and Awards consisting of Drs. Costello, Kaban and Ward presented their suggestions to the members at the 2015 Annual Meeting and are now ready to release the criteria for consideration by members. The Honors of the Academy: Life Time Achievement Award and the Distinguished Service Award for Innovation in Craniomaxillofacial Surgery eligibility criteria and nomination form can be found on <a href="https://www.aacmfs.org">www.aacmfs.org</a> website under Honors and Awards.

The Honors of the Academy: Life Time Achievement Award: The Honors of the Academy shall represent the highest expression of respect and gratitude the Academy can bestow and shall be granted to those individuals whose lifetime of research, health care delivery, or leadership has advanced, significantly and uniquely, the amelioration of physical, behavioral or social handicapping conditions of patients with conditions of the craniomaxillofacial region.

Distinguished Service Award for Innovation in Craniomaxillofacial Surgery: The Distinguished Service Award shall be given to an individual, member or non-member, who has demonstrated exceptional service and contribution to the AACMFS.

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John F. Helfrick, DDS, MS Executive Director



Julie Kneedler, RN, EdD Executive Secretary



# **AACMFS**

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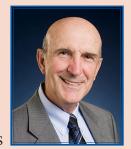
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Brent Ward, DDS, MD

# **ANNUAL MEETING HIGHLIGHTS**

*Dr. Brent Ward*, President, welcomed the members attending and provided an overview of the morning session which was presented by Dr. Robert Quinn. The focus was on CHANGE.

Dr. Robert Quinn facilitated a dynamic session on "Positive Change in Individuals, Organizations and the Specialty." He challenged the members to look to the future of the AACMFS and the potential of the organization. Dr. Rui Fernandes and Robert Ord responded by outlining issues facing the AACMFS as an organization and the need for change to advance the mission and vision of the AACMFS. These issues and challenges were addressed by three breakout groups – Membership, Scientific Priorities and Strategic Priorities. Each group reported their ideas and suggestions for change. Suggestions included



Robert E. Quinn, PhD

making membership in the AACMFS easier and attempting to be more inclusive. This suggestion resulted in a bylaws change at the business meeting. Instead of a potential member waiting for five years after taking the ABOMS they now can be nominated after two years. Another suggestion was to develop and implement a mentorship program, structure multicenter research in areas of interest to members and continuing with strategic planning to advance the AACMFS and expand beyond just an annual meeting.

An essential component of the Annual Meeting is the presentation of abstracts by the members. This year we had 35 presentations. Members are invited to submit abstracts for presentation in five areas which include Head and Neck Oncology, Pediatric Craniofacial and Orthognathic Surgery, Craniomaxillofacial Trauma, Craniomaxillofacial Reconstructive Surgery and Education, Training and Research. This year there were 16 in the area of oncology and 15 in Pediatric Craniofacial and Orthognathic Surgery.



# AACMFS BOARD OF DIRECTORS (2016-2017)

#### **Executive Committee**

B. J. Costello, DMD, MD - President
Brent Ward, DDS, MD - Immediate Past-President
Eric Dierks, DMD, MD - President Elect
Edward Ellis, III, DDS, MS - Treasurer
David Kim, DDS, MD - Secretary

### Trustees

Ramon L. Ruiz, DMD, MD Robert Ord, MB, BCh, BDS Timothy Turvey, DDS Rui P. Fernandes, DMD, MD

Members At Large
Martin Steed, DDS
Bonnie L. Padwa, DMD, MD

## **AACMFS MEMBERSHIP**

Dr. Ellis presented the latest information on the members of the AACMFS. Currently there are 136 Fellows and 12 Post Graduate Members for a total of 148. This year there were five Fellows nominated, three Honorary Fellows and 12 Post Graduate Members.

#### AMERICAN ACADEMY OF CRANIOMAXILLOFACIAL SURGIONS

# WE NEED FELLOWS!

Send your nominations today to julie@aacmfs.org

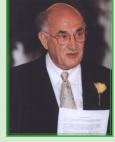
The goal of the AACMFS is to grow the membership to at least 300. We are half way there but need the help of you, one of the 148 members to make this happen. Dr. David Kim is driving membership this year and he wants to remind you that the AACMFS is an organization of primarily Oral and Maxillofacial Surgeons whose clinical focus is on major, hospital-based surgery. Our mission is to improve patient care through the advancement of knowledge in craniomaxillofacial surgery. Currently, this organization plans to achieve this goal is by providing an arena for presentation and spirited discussion of advancements in surgery, mentoring of young surgeons and promoting research and education.

Bylaws Changes regarding Nominations

Please note the change made in the bylaws regarding qualifications for active members.

Active Fellows. Candidates for Active Fellowship must be certified by the American Board of Oral and Maxillofacial Surgery or by the Canadian equivalent. Active Fellows shall have engaged in the practice of oral and maxillofacial surgery for two years following residency training and must be Board Certified. A substantial component of this practice shall have been major hospital-based craniomaxillofacial surgery as interpreted by the Membership Committee.

Applications and Election Process. A completed application for membership, including a letter of nomination by the sponsor of the individual(s) proposed for membership, must be submitted to the principal office of the Academy by October 1 of any year for consideration by the Executive Committee and Board of Directors. The Executive Committee reviews all applications and forwards their recommendations to the Board of Directors for their review and approval prior to the December BOD meeting. The President will distribute to the general membership a list of received applications for their comments prior to the Board meeting. The decision of the Board shall be final.



William H. Bell, DDS

**Dr. William Harrison Bell,** 89, died June 1 of natural causes at his home in Stowe, Vermont, where he had lived for 10 years.

In 1954, Dr. Bell graduated from dental school at St. Louis University, a Jesuit institution where he had also received much of his early schooling. The Jesuit influence set him on a lifetime commitment to serve others. Dr. Bell was trained in oral and maxillofacial surgery at Memorial Hospital in New York and the University of Texas Health Science Center in Houston. He graduated in 1956 and worked as an oral surgeon for five years before being drawn to research.

"He was the first teaching fellow at M.D. Anderson," his son said. Dr. Bell also developed a research laboratory to study various aspects of blood flow and wound healing associated with surgery of the upper and lower jaws.

He was a professor and researcher at UT Health Science Center until 1972, when he joined the faculty of what is now UT Southwestern Medical Center. In 1992, he became a professor at what is now the Texas A&M University Baylor College of Dentistry in Dallas. He retired from the Dallas dental school in 2002, but continued to practice as a Plano oral surgeon until he was 78. His curiosity for research led him to help develop procedures to correct facial deformities. A passionate clinician and teacher, the oral surgeon shared his laboratory advances with generations of students at medical and dental schools in Houston and Dallas, as well as with colleagues around the world.

"He wasn't satisfied with the status quo," said his son Dr. R. Bryan Bell, a Portland, Oregon, oral surgeon. "He was never interested in things that had been done ... he was more interested in making things better and improving the human condition for patients."

Dr. Bell was one of the first to use a reconstructive technique to make a jaw grow to proper size, using an apparatus to lengthen a short jawbone 1 millimeter a day.

He made countless trips to Latin America, where he performed surgery and led clinics to train local surgeons. His international teaching missions included many visits to China.

Memorials may be made to the Oral and Maxillofacial Surgery Foundation at omsfoundation.org.

#### **Fellows 2016:**

Shelly Abramowicz Brian Alpert Kevin Arce Sharon Aronovich Leon Assael Shahid Aziz Shahrokh Bagheri Jonathan Bailey Brian Bast Dale Baur R. Bryan Bell James Bertz George Blakey Gary Bouloux Nicholas Bournias Vishtash Broumand Daniel Buchbinder Tuan Bui Kamal Busaidy John Caccamese Jr. Ron Caloss Vincent Carrao Allen Cheng Radhika Chigurupati Sung-Kiang Chuang Joseph Cillo, Jr. Bernard Costello Larry Cunningham William Curtis Alessandro Cusano Angelo Cuzalina Nagi Demian Eric Dierks Jasjit Dillon Thomas Dodson Bruce Donoff Stephanie J. Drew Sean Edwards

Edward Ellis III

Mark Engelstad Steven Evelhoch Tirbod Fattahi Rui Fernandes Phillip Freeman Jamie Gateno Raj Gutta Issa Hanna John Helfrick Joseph Helman Alan Herford David Hirsch Jon Holmes Bruce Horswell Gregg A. Jacob Michael Jaskolka Thomas Jeter Jerry Lewis Jones Leonard Kaban Deepak Kademani Steven Kaltman David Kang Gerard Kearns Beomjune Kim David Kim Antonia Kolokythas Deepak Krishnan George Kushner Edward Lahev Zahid Lalani Melanie S. Lang Janice Lee Benn Lieberman Patrick Louis Joshua Lubek Nicholas Makhoul Jose M. Marchena Robert Marx Joseph McCain Shawn McClure



Daniel J. Meara Pushkar Mehra James Melville Roger Mever Brett Miles Michael Miloro Wai Pong Ng Robert Ord Timothy Osborn Bonnie Padwa Ashish Patel Zachary Peacock Vincent Perciaccante Daniel Perez Osorio David Perrott Joseph Piecuch Phillip Pirgousis Tony Pogrel Jeffrey Posnick

Bryce Potter David Powers Faisal Quereshy Likith Reddy Cory Resnick Pat Ricalde Gerardo Romeo Steven Roser Ramon Ruiz Andrew Salama Steven Schendel Brian Schmidt Harry Schwartz Jonathan Shum Kevin Smith Mary Frances Stavropoulos Martin Steed Derek Steinbacher

Barry Steinberg Steven Sullivan James Swift Daniel Taub Tinerfe Tejera Paul Tiwana Jeffrey S. Topf Maria Troulis Harold Tu Michael Turner Timothy Turvey Scott Urban Luis Vega Peter Waite Gary Warburton Brent Ward Favette Williams James Wilson Larry Wolford

Mark Wong Simon Young John Zuniga

#### **Honorary:**

Charles Bertolami John N. Kent Bruce MacIntosh Jeffrey Moses

#### **Emeritus:**

William H. Bell Walter Guralnick James Johnson John Kelly Paul Lambert Daniel Laskin

### CORPORATE PARTNERS

The AACMFS appreciates the commitment and support provided by our corporate sponsors. The AACMFS Annual Meeting would not be possible without their dedication.

Again, this year at the Annual Board of Directors Meeting held in Ann Arbor, Michigan, a special session was held with the corporate sponsors. Discussion points included OMS trends and questioned if industry has marketing data that indicates decline or growth and is there education being provided by industry that might be beneficial to the AACMFS Fellows. The corporate sponsors expressed that they receive value by being able to attend the educational sessions as well as the social activities where they can interact with the members. It was suggested that perhaps a pre-conference meeting where the corporate sponsors would present might create additional value.













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