

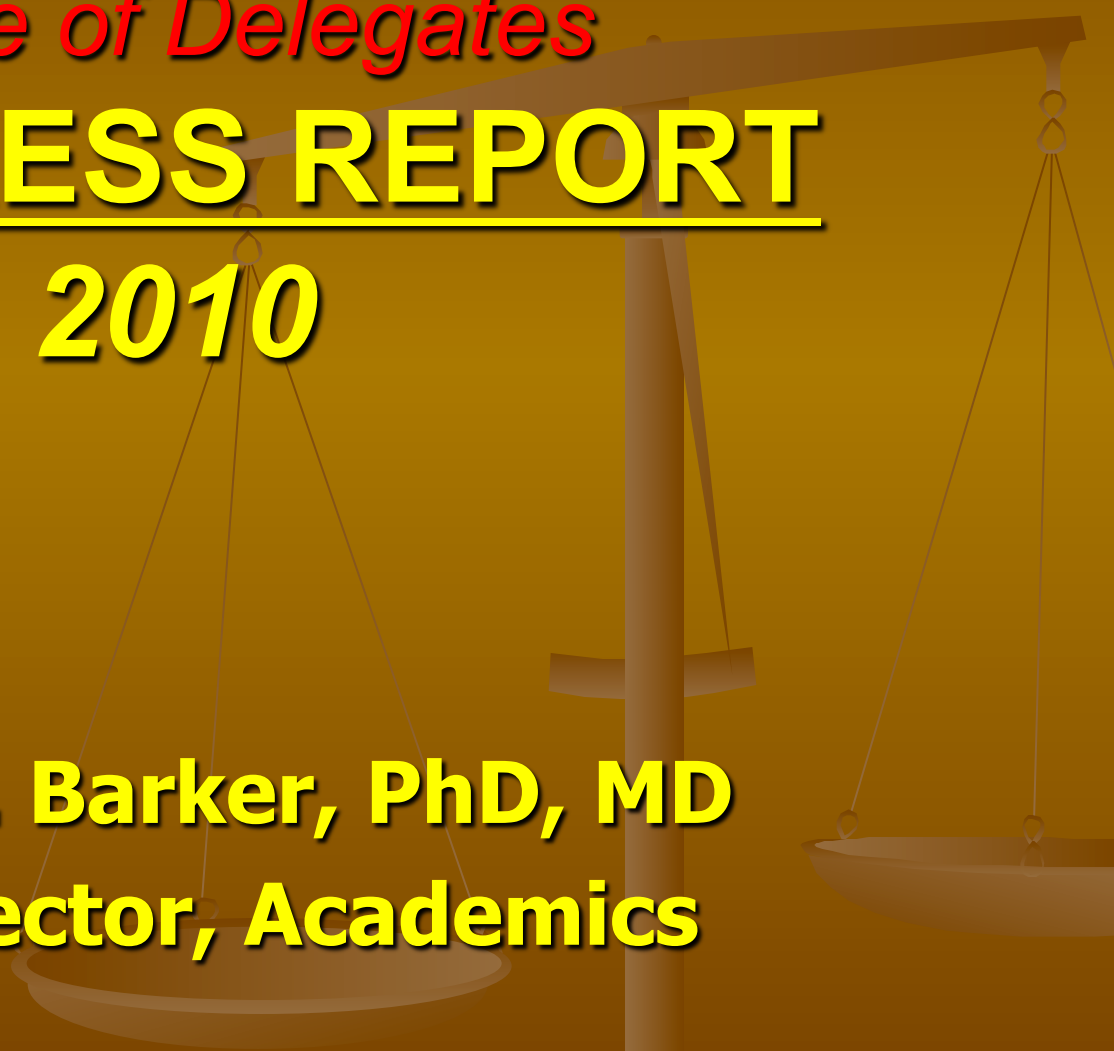
ASA

Board of Directors
House of Delegates

PROGRESS REPORT


2010

Steven J. Barker, PhD, MD
ASA Director, Academics



ASA Board of Directors & House of Delegates

Voting Members:



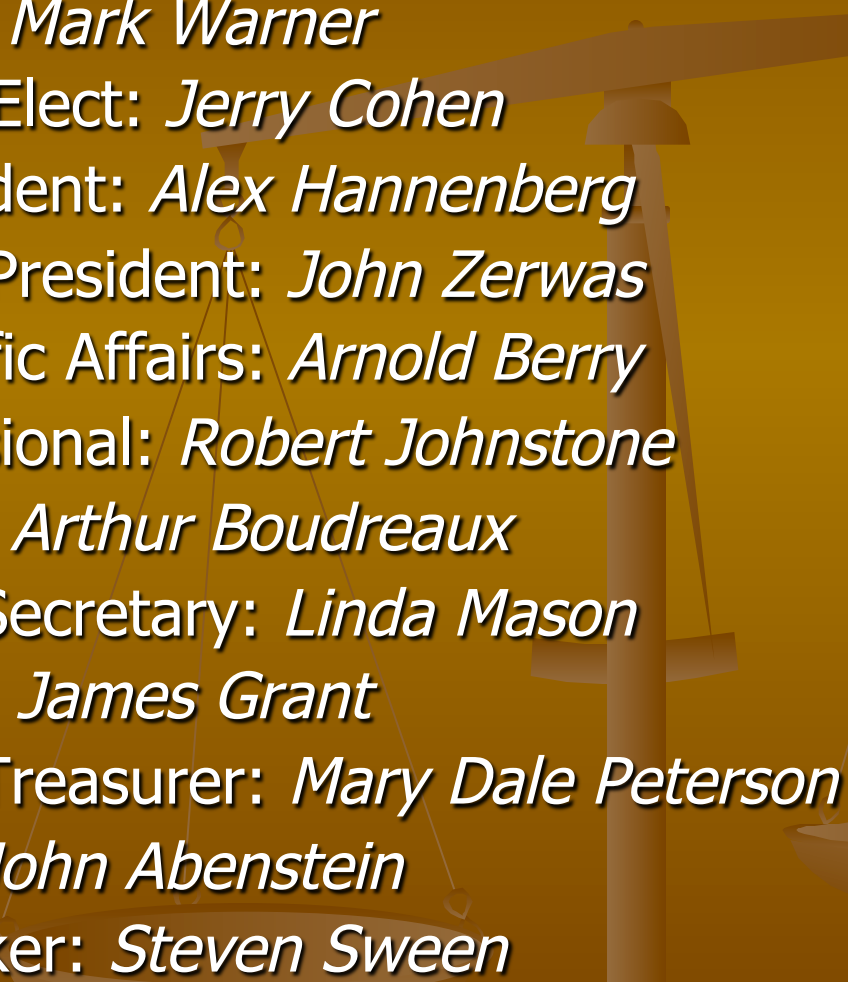
■ Officers:	10	<i>(12 total)</i>
■ States:	50	
■ D of C	1	
■ Puerto Rico	1	
■ Residents	1	
■ Military	1	
■ <i>Academic</i>	1	

Total: 65

HOD has 359 voting members:

- *Directors*
- *Delegates from states*
- *Affiliates (APSF, FAER)*

Officers: 2010-11

- President: *Mark Warner*
 - President-Elect: *Jerry Cohen*
 - Past-President: *Alex Hannenberg*
 - First Vice-President: *John Zerwas*
 - VP Scientific Affairs: *Arnold Berry*
 - VP Professional: *Robert Johnstone*
 - Secretary: *Arthur Boudreaux*
 - Assistant Secretary: *Linda Mason*
 - Treasurer: *James Grant*
 - Assistant Treasurer: *Mary Dale Peterson*
 - Speaker: *John Abenstein*
 - Vice Speaker: *Steven Sween*
- 

“Committees of the Board”

a.k.a.: REFERENCE COMMITTEES

- Administrative Affairs
- Professional Affairs
- Scientific Affairs
- Finance



ASA Committees of the Board

2011

■ Administrative Affairs

- Steven J. Barker, Ph.D., M.D.
- Norman A. Cohen, M.D.
- John F. Dombrowski, M.D.
- Steven J. Hattamer, M.D.
- Gerald A. Maccioli, M.D., FCCM

■ Finance

- Claude D. Brunson, M.D.
- Paul Clayton, M.D.
- Stephen P. Long, M.D.
- Kenneth I. Mirsky, M.D.
- Jeffrey S. Plagenhoef, M.D.

■ Professional Affairs

- Gerard T. Costello, M.D.
- Peter J. Dunbar, M.D.
- Jane C.K. Fitch, M.D.
- Brian P. McGlinch, M.D.
- Michael P. Schweitzer, M.D.

■ Scientific Affairs

- Murray A. Kalish, M.D.
- John R. Moyers, M.D.
- J. Michael Vollers, M.D.
- James M. West, M.D.
- John Wills, M.D.



THEY'RE HAPPY
Because they eat
LARD



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***Standards
change
with time!***

ASA NEWSLETTER

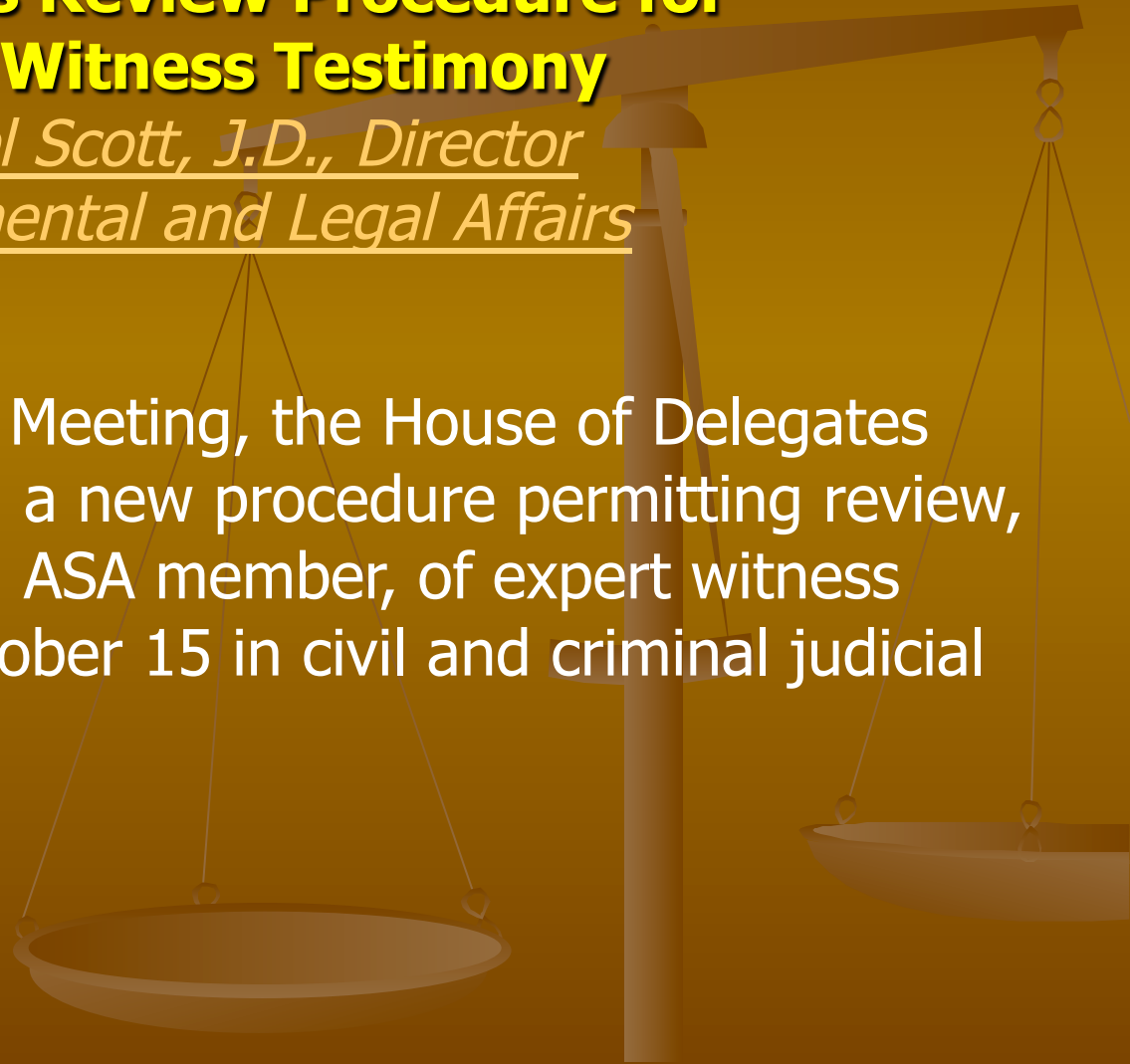
December 2003

Volume 67, Number 12

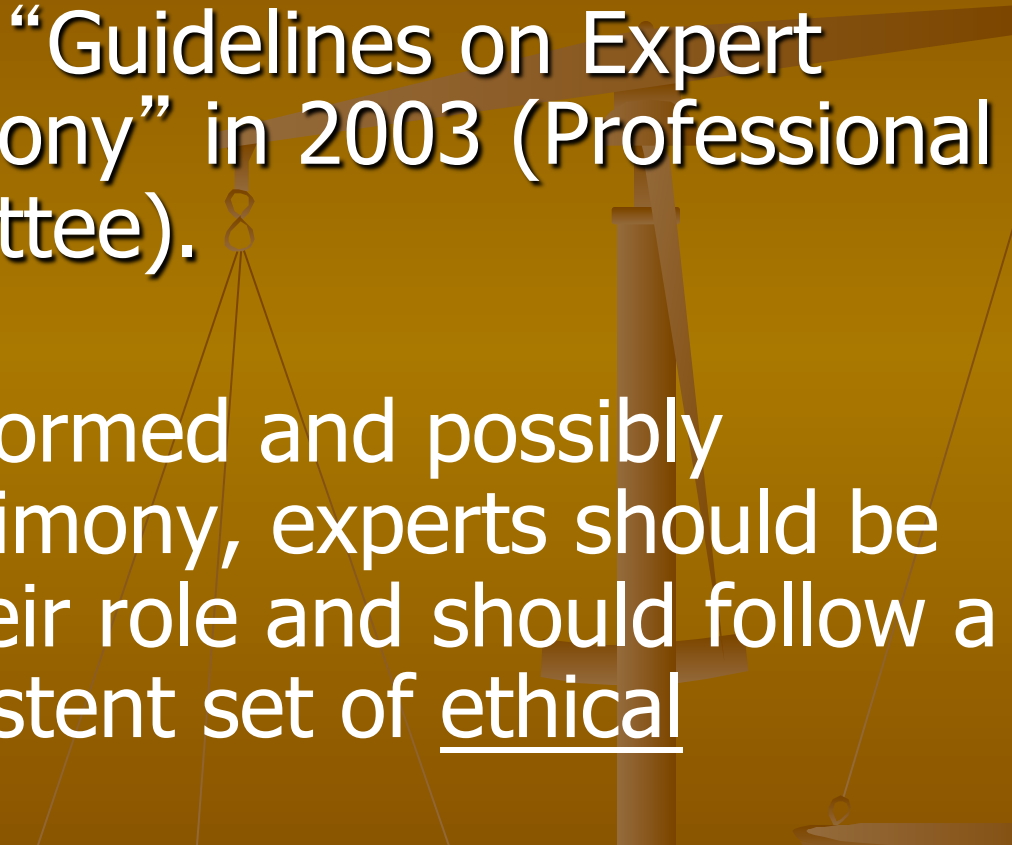
ASA Adopts Review Procedure for Expert Witness Testimony

*Michael Scott, J.D., Director
Governmental and Legal Affairs*

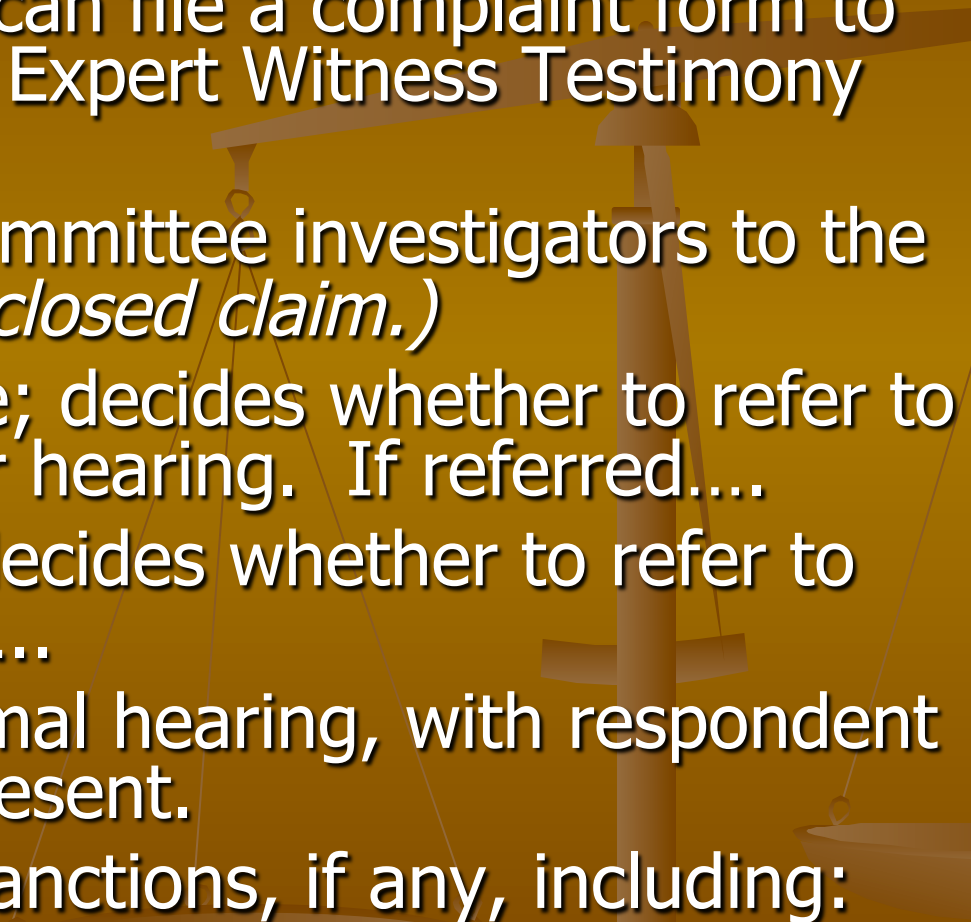
“At the 2003 ASA Annual Meeting, the House of Delegates overwhelmingly approved a new procedure permitting review, following complaint by an ASA member, of expert witness testimony given after October 15 in civil and criminal judicial proceedings.”



Expert Witness Testimony

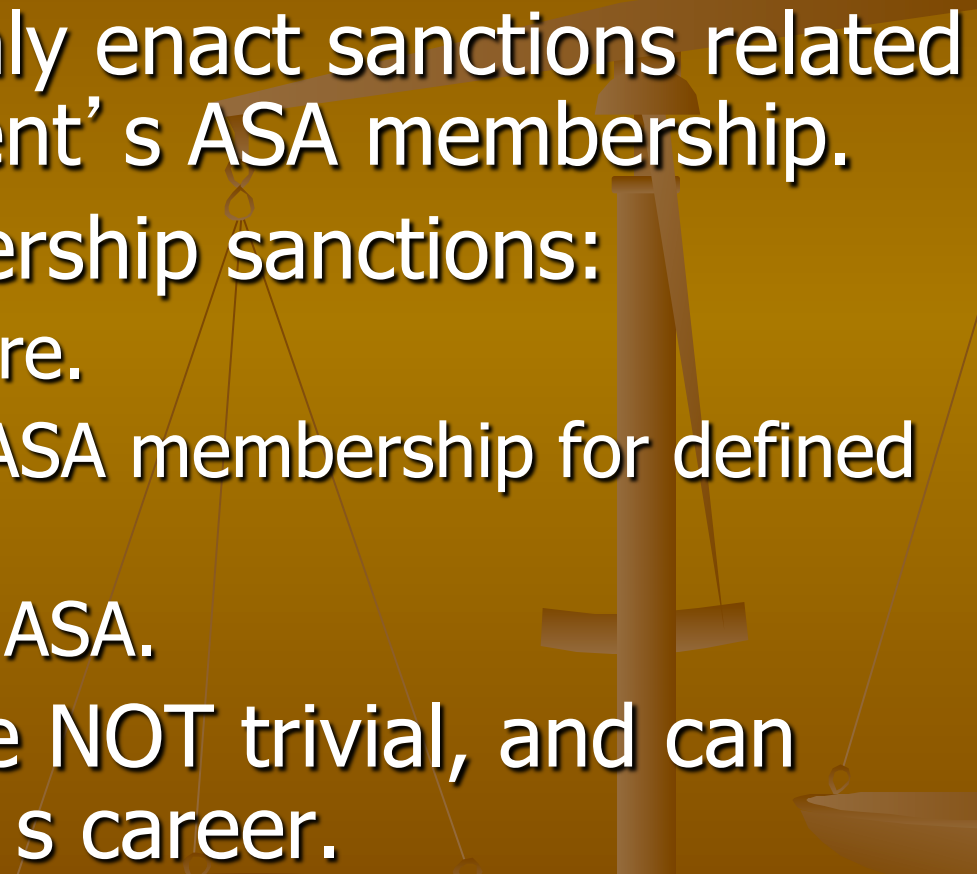
- HOD approved “Guidelines on Expert Witness Testimony” in 2003 (Professional Liability Committee).
 - “To limit uninformed and possibly misleading testimony, experts should be qualified for their role and should follow a clear and consistent set of ethical guidelines.”
- 

Expert Witness: ASA Procedures

- Any ASA member can file a complaint form to the Committee on Expert Witness Testimony Review (CEWTR).
 - CEWTR assigns committee investigators to the case. *(Must be a closed claim.)*
 - CEWTR hears case; decides whether to refer to Judicial Council for hearing. If referred....
 - JC reviews case; decides whether to refer to BOD. If referred.....
 - BOD conducts formal hearing, with respondent and his counsel present.
 - BOD determines sanctions, if any, including:
- 

Expert Witness:

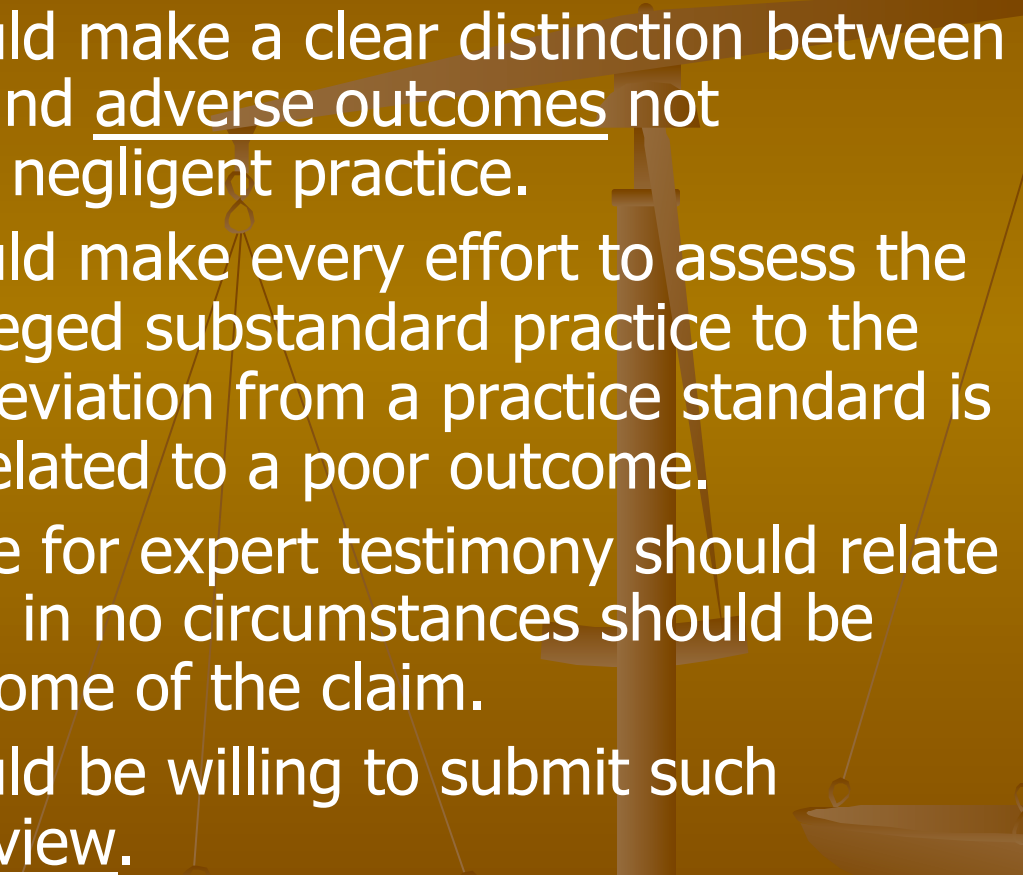
Possible Sanctions by BOD

- The ASA can only enact sanctions related to the respondent's ASA membership.
 - Possible membership sanctions:
 - Warning/Censure.
 - Suspension of ASA membership for defined time period.
 - Expulsion from ASA.
 - The last two are NOT trivial, and can affect a person's career.
- 

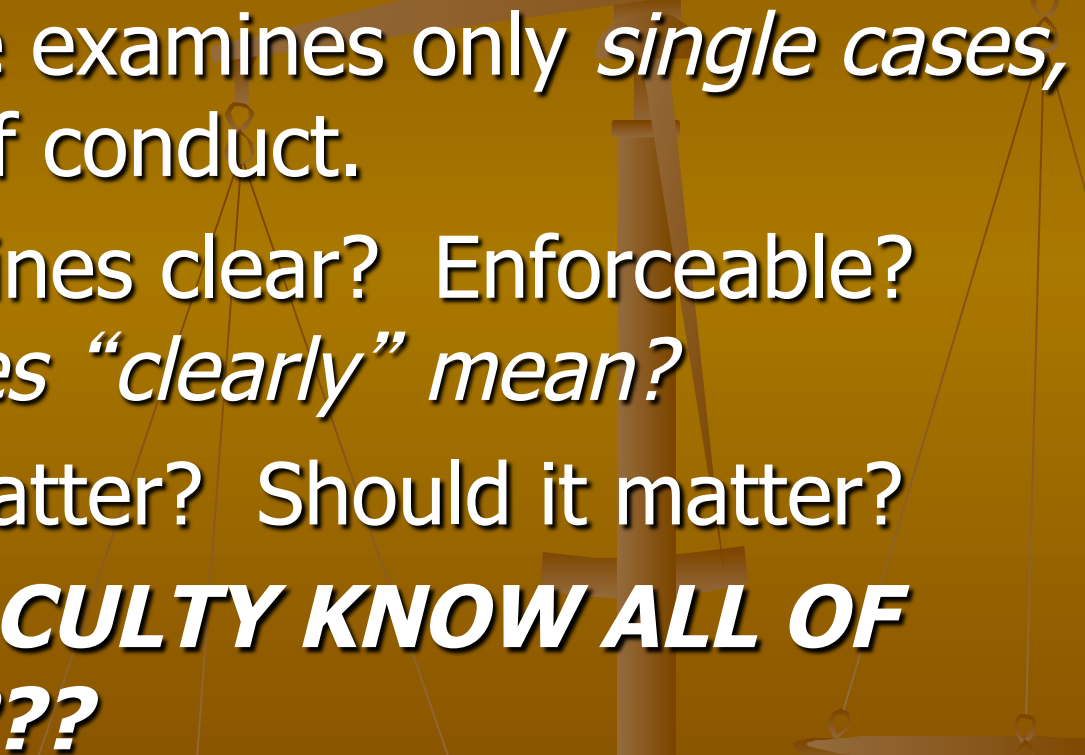
The Guidelines

- 1. The physician's review of the medical facts should be truthful, thorough and impartial and should not exclude any relevant information to create a view favoring either the plaintiff or the defendant. The ultimate test for accuracy and impartiality is a willingness to prepare testimony that could be presented unchanged for use by either the plaintiff or defendant.
- 2. The physician's testimony should reflect an evaluation of performance in light of generally accepted standards, reflected in relevant literature, neither condemning performance that clearly falls within generally accepted practice standards nor endorsing or condoning performance that clearly falls outside accepted medical practice.

The Guidelines (2)

- 3. The physician should make a clear distinction between medical malpractice and adverse outcomes not necessarily related to negligent practice.
 - 4. The physician should make every effort to assess the relationship of the alleged substandard practice to the patient's outcome. Deviation from a practice standard is not always causally related to a poor outcome.
 - 5. The physician's fee for expert testimony should relate to the time spent and in no circumstances should be contingent upon outcome of the claim.
 - 6. The physician should be willing to submit such testimony for peer review.
- 

Questions/Comments

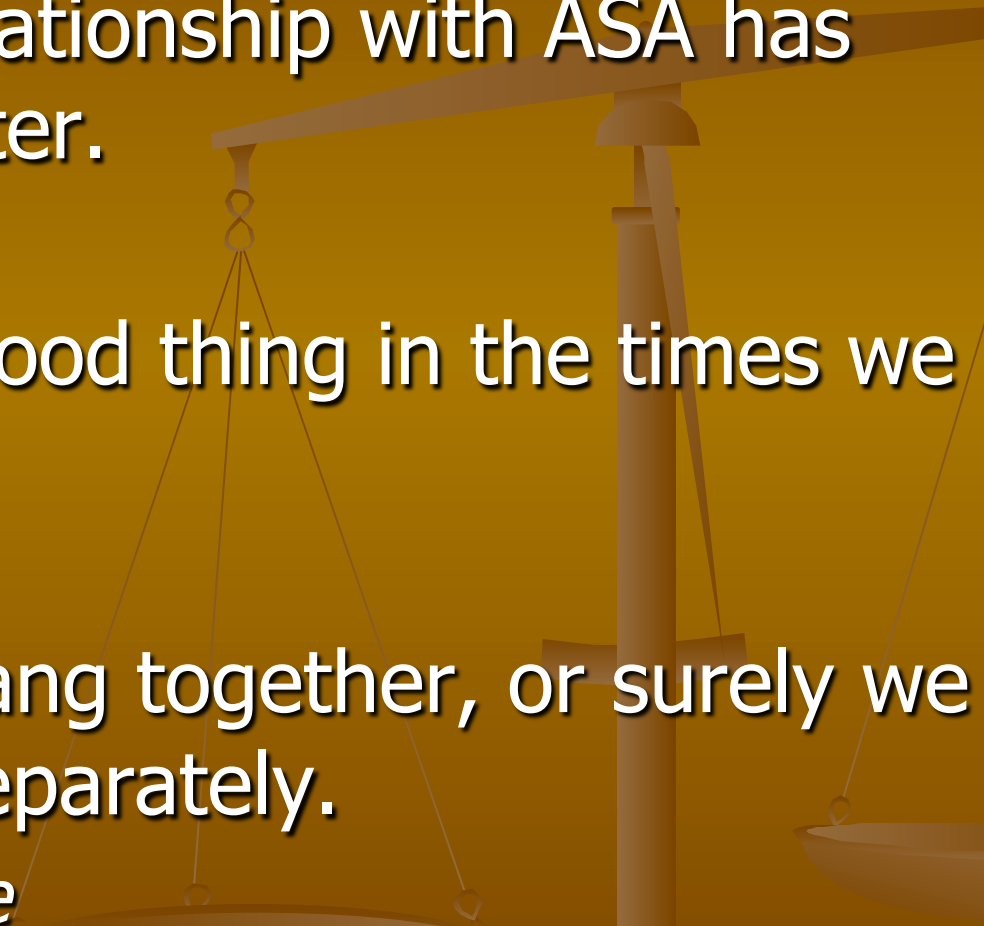
- The procedure examines only *single cases*, not patterns of conduct.
 - Are the guidelines clear? Enforceable? *E.g., what does “clearly” mean?*
 - Does intent matter? Should it matter?
 - ***DO YOUR FACULTY KNOW ALL OF THE ABOVE???***
- 

One more reason to join and support the ASA-PAC!



Do one brave thing today... then run like hell!

CONCLUSION

- Our working relationship with ASA has never been better.
 - That's a very good thing in the times we live in today!
 - “We must all hang together, or surely we shall all hang separately.”
 - --*Thomas Paine*
- 

THE END

Thank You!

