



AUA

Association of University Anesthesiologists

Update

Summer 2003

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Congratulations, AUA! 50th Anniversary Meeting a Success



Congratulations are extended to John P. Kampine, M.D., Ph.D., and David F. Stowe, M.D., Ph.D., Medical College of Wisconsin, for hosting a tremendously successful AUA 50th Anniversary Meeting in the historic Pfister Hotel in Milwaukee, Wisconsin, on May 1-3, 2003. The 50th anniversary celebration was attended by 310 registrants, making this the largest AUA meeting in recent years.

The Association expresses its thanks to the Educational Advisory Board, chaired by Jonathan B. Mark, M.D., Durham, North Carolina, for arranging an interesting and thought-provoking program on anesthesia and perioperative medicine, the Accreditation Council for Graduate Medical Education (ACGME) Outcomes Project and anesthesiology education. Kudos are also extended to the Scientific Advisory Board, chaired by Jeffrey R. Balsler, M.D., Ph.D., Nashville, Tennessee, for arranging the oral and poster presentations. In all, 106 abstracts were submitted for presentation of which 10 were accepted for oral presentations, 13 for poster discussion presentations and 82 for poster presentations.

In honor of the Association's 50th anniversary, the Wood Library-Museum of Anesthesiology (WLM) created a unique display for the occasion. The display featured AUA archival records, equipment invented by leading AUA members and artifacts representing important developments in anesthesiology in the past 50 years. Among the inventors were B. Raymond Fink, M.D., M. Digby Leigh, M.D., John S. Lundy, M.D., Lucien E. Morris, M.D., E. S. Siker, M.D., C. Ronald Stephen, M.D., Perry Volpitto, M.D., and Ralph M. Waters, M.D. A special viewing room was connected to the WLM display where members could see a video montage of pioneers in anesthesiology, including such highly respected

anesthesiologists as Nicholas M. Greene, M.D. Emanuel "Manny" Papper, M.D., and Peter Safar, M.D. The Association is thankful to the Medical College of Wisconsin Department of Anesthesiology for sharing its visiting professors' video archives. In the registration area, meeting attendees were able to take a computer quiz on AUA's history and some of its prominent members.

The anniversary meeting began on Thursday evening, May 1, at the Milwaukee Art Museum followed by a welcoming reception for a private showing of the museum's treasures. In addition, and as in previous years, members were encouraged to register as many as two residents and/or fellows to attend the meeting, thus providing these younger people the opportunity to learn more about the role of university anesthesiologists and to network with their future peers. The chairs and their residents/fellows were treated to a private reception prior to the welcoming reception.

The first full-day's activities on Friday, May 2, began with a continental breakfast where members were able to network with one another as well as to renew old acquaintances and make new ones. Following breakfast, Dr.

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William K. Hamilton, M.D., speaks to attendees about the "Happy Growth of AUA" during a special luncheon at the 50th Anniversary Meeting

Congratulations AUA! 50th Anniversary Meeting a Success

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Kampine and Dr. Stowe welcomed the attendees to the meeting and read a letter of congratulations from the Honorable John O. Norquist, Milwaukee mayor. In his letter, Mayor Norquist commented, "Your work toward the advancement of anesthesiology through encouraging pursuit of original investigations in the clinic and laboratory as well as the development of teaching methods and the exchange of new ideas is admirable. Take



Vinod Malhotra, M.D., his wife Vidya, Paul M. Heerdt, M.D., Ph.D., and David F. Stowe, M.D., Ph.D., enjoy an evening at the Milwaukee Public Museum. After touring the museum, attendees visited an IMAX theater for a Coral Reef Adventure.

pride in your efforts to improve the modern methods of anesthesia across the country. Again, congratulations on past successes and best wishes for a successful convention."

Dr. Balsler moderated Part I of the Scientific Advisory Board (SAB) Program, which featured seven oral abstract presentations on new research by AUA members.

The afternoon session began with American Society of Anesthesiologists President James E. Cottrell, M.D., delivering an address that updated the attendees on current developments affecting ASA and its members. Dr. Cottrell's presentation was followed by the two-part Educational Advisory Board (EAB) Program (see AUA-EAB report on page 4).

Following the afternoon session, members were treated to an exciting and educational evening at the Milwaukee Public Museum where attendees and their guests were able to stroll through a garden of butterflies that fluttered around them and occasionally landed on a shoulder or an extended hand. Members were given a private viewing of a replica of "Sue," the largest, most complete and best-preserved *Tyrannosaurus rex*



Burdett S. Dunbar, M.D., and his wife, Kathie, at the Saturday Gala Dinner event.

fossil yet discovered. The evening concluded with an exclusive viewing of the IMAX movie "Into the Deep," taking the audience on a spectacular three-dimensional exploration of the undersea world of coral reefs.

The final day of the meeting, Saturday, May 3, began with a continental breakfast and poster viewing followed by the Host Program, a greatly anticipated highlight of every AUA Annual Meeting. The Host Program allows the host institution to showcase programs, research projects and subjects of sci-



Jonathan B. Mark, M.D., right, moderated the EAB Session with, left to right, David C. Leach, M.D., Michael G. Richardson, M.D., M. Christine Stock, M.D., Judith S. Armbruster, Ph.D., and Rita M. Patel, M.D.

entific interest relating to the host institution or the immediate region. This year's program featured presentations on the "Medical College of Wisconsin: Mission, Facts and Growth" by Michael J. Dunn, M.D., Executive Vice-President and Dean, Medical College of Wisconsin; "Functional Brain Imaging: A Vision of Vision for Lab and Clinic" by Edgar A. DeYoe, Ph.D., Professor, Cell Biology, Neurobiology and Anatomy, Medical College of Wisconsin; and "Are We Really Headed for a Physician Shortage?" by Richard A. Cooper, M.D., Professor and Director, Health Services, Health Policy Institute, Medical College of Wisconsin.

Following a break for poster viewing and refreshments, Howard J. Jacob, Ph.D., Director, Human and Molecular Genetics Center, Medical College of Wisconsin, presented an impressive discussion on "Genetics, Genomics and Clinical Medicine." Concluding the Host Program was a thought-provoking presentation on "Water: Our Planet's Most Abundant Scarce Resource — Do We Have Enough?" by J. Val Klump, Ph.D., Senior Scientist, Center for Great Lakes Studies, and Adjunct Professor of Biological Sciences at the University of Wisconsin-Milwaukee.

To permit attendees an opportunity to network with one another, most AUA Annual Meetings do not include a luncheon speaker. However, the occasion of the 50th Anniversary Meeting prompted the luncheon, "The Happy Growth of AUA." William K. Hamilton, M.D., Professor Emeritus of Anesthesia, University of California-San Francisco, led the audience on a stroll down memory lane and AUA's "happy growth."



John P. Kampine, M.D., Ph.D., and his wife, Susan, at the Welcome Reception.



The Association toasts its 50 years of growth at the Gala Dinner Event.



Shirley A. Graves, M.D., left, Jerome H. Modell, M.D., and Terri G. Monk, M.D.

The Saturday afternoon segment of the program was devoted to the second part of the SAB program and featured four oral abstract presentations and a special presentation by Warren M. Zapol, M.D., called “Scientist-Clinician: Going to Extremes.”

Members and guests were able to take advantage of optional tours, including a Milwaukee tour of such hidden treasures as the Pabst Mansion, the Milwaukee Botanical Gardens and a tour of the Pfister Hotel’s art collection. It is rumored that the hotel’s art collection is more valuable than the hotel itself.

A gala dinner dance marked a perfect ending to this milestone occasion. Following a reception in the ballroom foyer, members and guests were welcomed into the dining hall with music by one of Milwaukee’s finest bands. A presentation of photographs taken during the meeting was shown with background music during dinner. Video congratulations from politicians and leaders in anesthesiology were played to the audience, prompting applause and many positive comments. Afterward, members toasted to the future success of AUA with champagne flutes engraved with the AUA 50th Anniversary logo. Attendees were surprised after dinner with a special chocolate that featured the Association’s anniversary logo.

Following dinner, attendees were treated to “A History of AUA Through Music.” The program looked at each of the six different decades in which the Association existed, recalling news events, television shows, movies and music of the

decades. Each chapter in the history concluded with the band performing two songs from the period for the audience’s dancing pleasure.

The AUA 50th Anniversary Meeting was a celebration of the growth and success of the organization over the last half century. It also celebrated the future growth and success of the organization. Members are encouraged to participate in the first meeting of the next half century as AUA gathers in Sacramento, California, on May 13-15, 2004, at the Sheraton Sacramento in Sacramento, California. The meeting will be hosted by the University of California-Davis. Joseph Antognini, M.D., program chair, is well on the way to assembling a highly informative program spiced with entertaining social events, including a private dinner reception at the California State Railroad Museum that will fascinate anyone who has “ridden the rails,” sat in a dinner car or dreamed of spending a night in a Pullman car. Mark your calendar now to attend what promises to be another successful meeting presented in the AUA tradition.

Editor’s Note: Many more photographs taken during the 50th Anniversary Celebration are available on the AUA Web site at < www.auahq.org >.



Pamela Flood, M.D., left, Richard M. Smiley, M.D., Ph.D., and Mathew Weinberger, M.D., discuss AUA research project presentations.



An AUA meeting attendee takes a stroll down memory lane while visiting the AUA/Wood Library-Museum Historical Display.



David A. Lubarsky, M.D., presented an award to Mrs. Patricia Papper for the late Dr. Papper’s faithful devotion to AUA and anesthesiology.

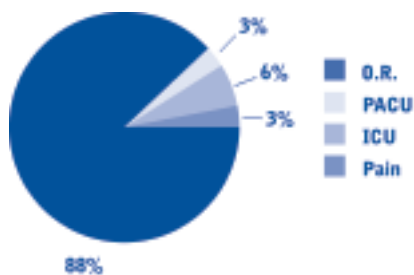
AUA-EAB Newsletter Report — Meeting Update

Jonathan B. Mark, M.D.
Durham, North Carolina

At this year's Annual Meeting in Milwaukee, Wisconsin, the AUA Educational Advisory Board (EAB) Program focused on two issues that strongly influence the future of residency training in anesthesiology. The first panel considered the topic "Anesthesia and Perioperative Medicine" and featured American Society of Anesthesiologists (ASA) President James E. Cottrell, M.D., and Mark A. Warner, M.D., of the American Board of Anesthesiology (ABA) Board of Directors, who offered ASA and ABA perspectives on this subject. Jonathan B. Mark, M.D., introduced the speakers and framed the current controversy. Although many anesthesiology departments have renamed themselves as departments of anesthesiology and perioperative medicine, current residency training programs do not reflect the changed emphasis in our specialty. As noted by Dr. Mark, current training guidelines in anesthesiology still require nearly 90 percent operating room anesthesia experiences.

Dr. Cottrell and Dr. Warner spoke to these issues and, among other points, described an effort to change the clinical base year in anesthesiology by incorporating it fully into the residency program, thereby controlling more completely the four training continuums. This would allow greater emphasis

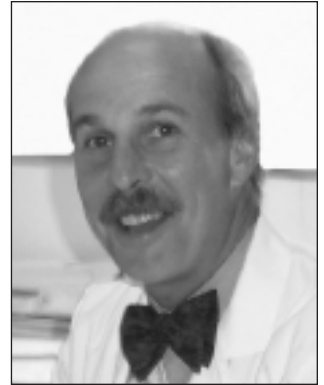
Anesthesiology Program Requirements ACGME and ABA 2002



on training in critical care medicine and other aspects of perioperative medical care that could be emphasized in the first postgraduate year. The spirited question-and-answer period that followed showed the importance of this issue and the challenges that surround this aspect of anesthesiology residency training.

The second EAB panel was called "The ACGME Outcomes Project and Anesthesiology Education." We were fortunate in having Accreditation Council on Graduate Medical Education (ACGME) Executive Director David Leach, M.D., as the opening keynote speaker. Dr. Leach discussed the origins of the

ACGME Outcomes Project. He touched on many broad topics of interest to academic physicians, including assessment of physician competency, medical professionalism, lifelong learning and the future of graduate medical education. He noted that the importance of program directors and faculty members in the success of training programs is receiving renewed recognition in the academic medical centers.



Jonathan B. Mark, M.D.

Judith S. Armbruster, Ph.D., Executive Director of the ACGME Residency Review Committee (RRC), followed Dr. Leach and spoke briefly about the implementation of the ACGME Outcomes Project in anesthesiology training programs. Following incorporation of the six core competencies into residency curricula, current emphasis is now being placed on assessment of resident achievement in these core areas. Dr. Armbruster introduced M. Christine Stock, M.D., Northwestern University, Chicago, Illinois, and Rita M. Patel, M.D., University of Pittsburgh, Pennsylvania, who presented additional perspectives on competency instruction and assessment.

Dr. Stock described a survey she recently completed focusing on the extent of implementation of these new residency program changes across the country. The RRC requests help from the academic anesthesiology community in engaging in an iterative process to help define how programs should satisfy the new competencies. Dr. Patel related her experiences in Pittsburgh working with faculty to provide training and development in these areas to prepare them more effectively as the teachers of the future.

The last panelist was Michael G. Richardson, M.D., Vanderbilt University, Nashville, Tennessee. Dr. Richardson described how the ACGME Outcomes Project could serve as a promising area for

Anesthesiology 2003

Are we practicing perioperative medicine?

NOT MUCH!

Are we training our residents in perioperative medicine?

NOT ENOUGH!

Who will fill the void in perioperative medicine?

- Anesthesiologists
- HOSPITALISTS

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AUA Treasurer's Report 2003

The Association is in good financial health with assets totaling \$319,764 invested in "bank CDs" at 2.8 percent and 1.9 percent interest in a checking account at the Northern Trust Bank of Illinois [Figures 1 and 2]. Almost 40 percent of AUA's assets, \$130,000, reflect corporate donations received since the policy to accept such donations in support of AUA's educational mission was implemented three years ago. The AUA Annual Meeting continues to essentially "break even" on its operations [Figure 3] with a profit of \$16,534 from the meeting in Nashville, Tennessee, last year.

finances have been consolidated with all expenses now handled by AUA management.

Check-writing controls also continue with approval of invoices by the President and Treasurer followed by the issuance of a check by AUA management. The President and Treasurer also receive monthly financial statements of accounts, income, expenses and disbursements.

A \$25,000 donation to the Foundation for Anesthesia Education and Research is recommended for the current fiscal year.



Lydia A. Conlay, M.D.,
Ph.D., M.B.A

Respectfully submitted,
Lydia A. Conlay, M.D., Ph.D, M.B.A.
AUA Treasurer

Figure 1: Total Assets

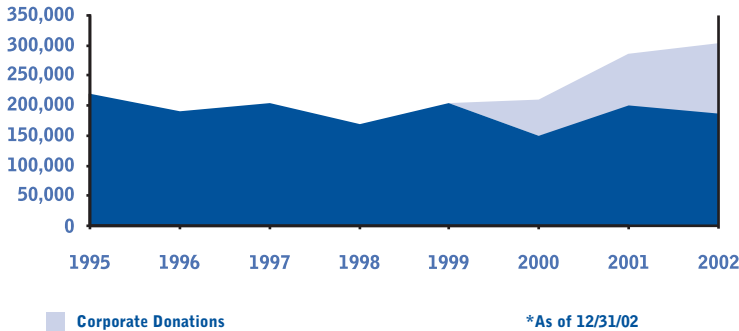
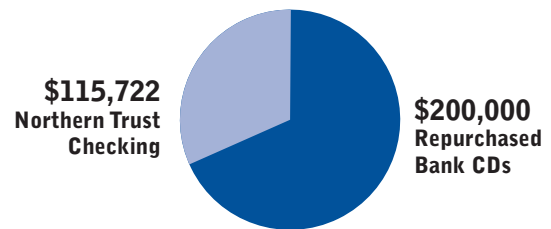


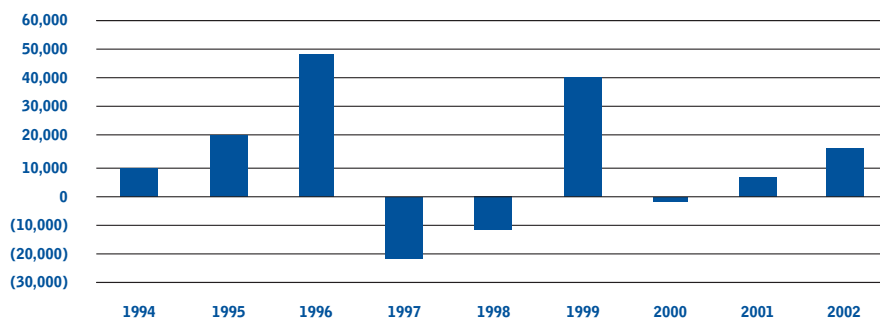
Figure 2: Asset Allocation



There have been no additional changes in budgetary and accounting practices; however, the procedures put in place over the past several years have been continued. For the fourth year in a row, an annual budget has been submitted to council for its approval.

Fiscal Year 2002 ended with a \$38,877 profit. (Please note that the corporate donations for that year totaled \$37,500.) Accounting procedures have continued on an accrual basis for the second year, and the Association's

Figure 3: Annual Meeting P/L
(Excludes Corporate Donations)



Inventor of the Year Award Goes to AUA Member Warren M. Zapol, M.D.

AUA member Warren M. Zapol, M.D., Chief of Anesthesia and Critical Care at Massachusetts General Hospital, Boston, Massachusetts, and Claes Frostell, M.D., who received postdoctoral training at Massachusetts General and is currently head of the Karolinska Institutet, Danderyd Hospital, Danderyd, Sweden, were named recipients of the 30th Annual National Inventor of the Year Award. They received the honor for invention of a groundbreaking treatment for patients suffering from respiratory failure associated with pulmonary hypertension. The treatment invented by Dr. Zapol and Dr. Frostell consists of a method and device for safely delivering nitric oxide to the lungs of patients in the form of an inhaled gas. The treatment has been approved by the Food and Drug Administration (FDA) for use in the treatment of hypoxic respiratory failure in infants, which affects approximately 30,000 babies each year.

The award is given annually by the Intellectual Property Owners Association (IPO) of Washington, D.C. To be eligible for the Inventor of the Year Award, the work of Dr. Zapol and Dr. Frostell needed to be patented or first marketed within the past four years. A prominent past Inventor of the Year Award recipient in the field of medicine was Robert K. Jarvik, M.D., who won in 1983 for the Jarvik -7 Artificial Heart.



Warren M. Zapol, M.D.

In presenting the award to Dr. Zapol and Dr. Frostell, IPO Executive Director Herbert C. Wamsley said that “Drs. Zapol and Frostell have done extraordinary work and have certainly earned our recognition and praise as Inventor[s] of the Year.”

Dennis Smith, CEO of INO Therapeutics, the licensee of the Zapol/Frostell invention marketed as INOmax®, said, “We are delighted that this invention allows us to provide an innovative treatment for parents seeking treatment for their newborns.” The FDA approved nitric oxide as a treatment for infants suffering from hypoxic respiratory failure in December 1999. It is the first nonanesthetic gaseous pharmaceutical ever to be approved.

In learning of the award, Dr. Zapol stated, “As a physician-scientist, there is no greater thrill than bringing your invention from the laboratory to the bedside and watching it save lives. It makes the long years of study and testing extraordinarily worthwhile.”

Editor's Note: Please send me a note at <kofkea@uphs.upenn.edu> when similar newsworthy events occur in your institution that involve AUA members or that promote academic anesthesiology.

New Penn Anesthesia Research Laboratories Dedicated — Now the David E. Longnecker Anesthesia Research Facility

After three years of planning and more than a year of renovations, the new Department of Anesthesia Research Laboratories at the University of Pennsylvania in Philadelphia opened its doors for operations in December 2002. Rapidly filled to overflowing, it is now the hub of the department's investigative activities with a sophisticated infrastructure for molecular biophysics and pharmacology, protein chemistry, cell biology, molecular biology and animal physiology and behavior.

This 8,000-square-foot facility is located on the third floor of the historic John Morgan Building, so named for the founder of the medical school at the University of Pennsylvania.

The building also was the site of a more recent dedication. In recognition for his passionate support for the concept of physician-scientists in perioperative medicine, his resolve to keep the facility on



David E. Longnecker, M.D., at the University of Pennsylvania laboratories that will carry his name.

campus to promote collaboration and finally for his strategy to ensure funding of the necessary renovations, Dripps Professor David E. Longnecker, M.D., was honored on June 6, 2003, by the School of Medicine in its dedication of the gleaming new laboratories in his name.

In the dedication ceremony, Dean Arthur Rubenstein referred to Dr. Longnecker's leadership as exemplary and stated that he had never before seen an anesthesiology department with such outstanding clinician investigators. Roderic G. Eckenhoff, M.D., the department's research director, ended his comments by saying that he could think of no more fitting moniker for the facility than the David E. Longnecker Anesthesia Research Facility, by which it shall henceforth be known.

Contributed by Roderic G. Eckenhoff, M.D.

Call for Abstracts

Deadline: Friday, November 3, 2003

The Scientific Advisory Board (SAB), chaired by Charles M. Crowder, M.D., Ph.D., Ladue, Missouri, invites you to submit an original research abstract for presentation at the AUA 51st Annual Meeting to be held May 13-15, 2004, at the Sheraton Grand Sacramento in Sacramento, California. As was the case for the 50th Anniversary Meeting, all submitted abstracts will be accepted. However, open acceptance could result in more abstracts than available space. Only one abstract per member (authored or sponsored) will be accepted.

SAB peer review will assign abstracts to oral, poster discussion and poster sessions. Individuals whose abstracts are selected for oral presentation will be asked not to be overly technical in their presentations and to provide adequate background and context for their work. Oral presentations are not intended for postdoctoral fellows or senior faculty. To maintain the traditional high quality of abstract submissions, it is essential that member authors and sponsors critically review their submissions. If, in the opinion of the membership, this new process results in a diminished quality of abstract, the SAB will return to peer review for acceptance of abstracts. Members are encouraged to consider submission of clinically oriented abstracts as it is felt that there has been a decline in the numbers of such submissions for recent meetings.

Two copies of each abstract are needed. The copy of highest quality should be on top of the submissions as this copy

will be set aside for “camera-ready” reproduction into the program booklet.

New to this year’s abstract submission process is that each package must include a diskette of your abstract submission in Microsoft Word® format.

Abstract packages may not be sent as a facsimile. All abstract packages must arrive at the AUA office by 5 p.m. (Central Standard Time) Friday, November 3, 2003. Abstracts arriving after Friday, November 3, 2003, will be considered late and may not be accepted.

An abstract submission form is required for each abstract. The submission form provides the SAB with information regarding authors and membership, institutional and corporate affiliations, notification of prior or other presentation(s) of the

research and the need for conflict-of-interest disclaimers. A disclosure form also is required for each abstract and must be submitted should there exist relationships of a personal or professional nature that are relevant to the research conducted. Abstract submission and author disclosure forms as well as the specifications for abstract submissions may be found on the AUA Web site at <www.auahq.org> by clicking on the “Annual Meeting” link.

Abstracts selected for publication at the AUA 51st Annual Meeting will not be published, allowing members to submit essentially the same abstract to the American Society of Anesthesiologists 2004 Annual Meeting.

See <www.auahq.org> and click on “Annual Meeting” for complete abstract information

AUA-EAB Newsletter Report — Meeting Update

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research and an opportunity for our specialty to assume a national leadership role in this area.

Plans are ongoing for next year’s meeting in Sacramento, California. Preliminary discussions at the annual EAB lunch meeting identified the following potential topics for 2004:

- *Evaluating clinical performance, residency and beyond*
- *Dealing with marginal or incompetent residents*
- *Continuing medical education and lifelong learning*
- *Medical student recruitment into anesthesiology*

The EAB welcomes AUA member input, and we are trying to organize a program that will best meet your needs and interests. Please offer your suggestions for EAB panel topics, program format or speakers by contacting any EAB member or Jonathan B. Mark, M.D., Chair, AUA Educational Advisory Board <jonathan.mark@duke.edu> .

Council Elections

*W. Andrew Kofke, M.D., AUA Update Editor
Philadelphia, Pennsylvania*

During the recently convened Annual Membership Meeting in Milwaukee, Wisconsin, members were called upon to elect a President-Elect, Secretary and Councilor-at-Large to serve on the Council. Elected were David L. Brown, M.D., Iowa City, Iowa, President-Elect; Steven J. Barker, Ph.D., M.D., Tucson, Arizona, Secretary; and Jeffrey R. Balser, M.D., Ph.D., Nashville, Tennessee, Councilor-at-Large. The current composition of the Council follows:

President

Donald S. Prough, M.D., Galveston, Texas

President-Elect

David L. Brown, M.D., Iowa City, Iowa

Secretary

Steven J. Barker, Ph.D., M.D., Tucson, Arizona

Treasurer

Lydia A. Conlay, M.D., Ph.D., Houston, Texas

Councilors-at-Large

Debra A. Schwinn, M.D., Durham, North Carolina
Ronald G. Pearl, M.D., Ph.D., Palo Alto, California
Jeffrey R. Balser, M.D., Ph.D., Nashville, Tennessee

In addition to the elections, Jonathan B. Mark, M.D., Durham, North Carolina, has been reappointed to chair the AUA Educational Advisory Board. Charles M. Crowder, M.D., Ph.D., Ladue, Missouri, is the new chair of the Scientific Advisory Board.

Appointed by Dr. Prough to serve with Dr. Mark on the Educational Advisory Board are:

Lois L. Bready, M.D., San Antonio, Texas
Randall C. Cork, M.D., Ph.D., Shreveport, Louisiana
W. Andrew Kofke, M.D., Philadelphia, Pennsylvania
Philip D. Lumb, M.B., Pasadena, California
David J. Murray, M.D., St. Louis, Missouri
Peter Rock, M.D., Chapel Hill, North Carolina
Charles W. Whitten, M.D., Dallas, Texas

Appointed to the Scientific Advisory Board along with Dr. Crowder are:

Dan E. Bekowitz, M.D., Baltimore, Maryland
Clifford S. Deutschman, M.D., Philadelphia, Pennsylvania
Charles W. Emala, M.D., Woodcliff Lake, New Jersey
Rona G. Giffard, M.D., Ph.D., Palo Alto, California
Hugh C. Hemmings, M.D., Ph.D., New York, New York
Mark F. Newman, M.D., Chapel Hill, North Carolina
Peter J. Pronovost, M.D., Ph.D., Reisterstown, Maryland
David C. Warltier, M.D., Ph.D., Milwaukee, Wisconsin

Election of New Members

The Association welcomes the following individuals who were elected to membership during the AUA Annual Membership Meeting held on May 3, 2003, at the Pfister Hotel in Milwaukee, Wisconsin, during the AUA 50th Anniversary Meeting celebration:

Amr E. Abouleish, M.D.
Houston, Texas

David Amar, M.D.
New York, New York

George T. Blike, M.D.
Lebanon, New Hampshire

Nauder Faraday, M.D.
Baltimore, Maryland

Timothy B. Gilbert, M.D.
Baltimore, Maryland

Philip E. Greilich, M.D.
Dallas, Texas

Michael A. Gropper, M.D., Ph.D.
San Francisco, California

Gregg S. Hartman, M.D.
Lebanon, New Hampshire

Fumito Ichinose, M.D.
Boston, Massachusetts

Michael F. O'Connor, M.D.
Wilmette, Illinois

William J. Perkins, M.D.
Oklahoma City, Oklahoma

Christine S. Rinder, M.D.
Durham, Connecticut

Keith J. Ruskin, M.D.
Westport, Connecticut

Mark A. Schumacher, M.D., Ph.D.
San Francisco, California

Christopher L. Wu, M.D.
Clarksville, Maryland

Zhiyi Zuo, M.D., Ph.D.
Charlottesville, Virginia

The above individuals have been forwarded initial dues statements so that they may activate their AUA memberships. Individuals interested in nominating candidates for AUA membership are asked to visit the AUA Web site at < www.auahq.org > and click on "Membership Process" in the homepage directory. The "Membership Process" provides complete information for making a new member nomination. The deadline for 2004 new member nominations is February 2.