



Florida Chapter

Governor's Newsletter



Jason M. Goldman, MD FACP, Governor
John G. Langdon, MD FACP, President/Governor

Summer 2017

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FROM THE GOVERNOR



Jason M. Goldman, MD FACP

As I reflect upon this past year, I am so proud of how much our chapter has accomplished. Our past scientific session has been one of the most successful; with tremendous attendance and excellent lectures. This was the first meeting to offer both CME and MOC credits for the attendees. The upcoming meeting promises to exceed previous expectations with a record number of CME and MOC credits, poster presentations and doctor's dilemma competitions. The medical students and residents have presented unique and interesting cases and our doctor's dilemma team performed well at nationals. We continue to advance members to fellowship and have had new masters, including our former Chapter Governor, Stu Himmelstein. Our chapter is active and our members continue to demonstrate the high ideals and commitment that best represent all that the Florida Chapter of the ACP has to offer.

Part of the Governors' role is to serve on the national Board of Governors and represent the interest of the Florida Chapter. We have been very successful this year in passing multiple resolutions that shape policy on a national level to improve patient care and assist the physician in the practice of medicine. Any idea can be turned into a potential resolution and it is always encouraged for any member to submit resolutions for consideration. This process is so important and necessary for the organization to understand the needs of the membership and it can only work if the membership participates. I appreciate the feedback from all the members and I do hope more resolutions will be submitted to facilitate the necessary changes in the organization.

While not strictly under education, it is also important to note that the Docs vs Glocks case has finally been settled and in our favor. This is an important ruling because the Supreme Court supports freedom of speech and the importance of physicians being able to communicate with their patients without government censorship in the exam room. You chapter provides for you in both your educational and advocacy needs. We are only as strong as our membership and I encourage everyone to talk to their nonmember colleagues and show them the importance of membership in the ACP. The college also has programs to provide benefits for those who recruit colleagues to membership as well.

I am looking forward to many more years of service to the ACP and to the membership. I hope to see greater involvement and participation in the future. As always, I have had open lines of communication and want to hear about any concerns, issues or ideas that anyone has to better improve our organization. Thank you for your dedication to our art and profession.

FROM THE PRESIDENT—The Power of Advocacy



John G. Langdon, MD FACP

More than ever the power of advocacy is proving what we can do together – the recent result in the case of Docs vs. Glocks is a shining example that we physicians **can speak openly and honestly and non-judgmentally about any and all issues that impinge upon our delivery of health care. kudos to Stu Himmelstein, MD who led the charge on this issue of national importance.**

The Florida Chapter scored a major victory in the courts when Governor Scott opted not to appeal the chapter's win in the Docs and Glocks case to the US supreme court. For the chapter this was never an issue about guns, but rather the ability of physicians to speak openly and honestly with their patients. The Eleventh circuit agreed with the chapter and ruled that restrictions on what a physician could talk about with patients violated the First Amendment.

The Florida ACP chapter (FLACP) has been a legislative leader since the merger of ASIM and ACP over 20 years ago and our commitment to bring advocacy down to the medical grass roots of our organization is manifest by our support of in training members being encouraged to go to Tallahassee and Washington DC. These young physicians are not there to watch; they are in the fore of our groups visiting legislators and making the case for improved funding for training, simplifying the paperwork hassles [Patients before Paper], advocating for health care/insurance reform in an environment often hostile to the right of all citizens to comprehensive health care and the list goes on.

In late May, the Chapter sent a delegation to Washington D.C. for the annual ACP Leadership day. After receiving briefings from ACP staff and congressional leaders on possible reforms to the affordable Care Act, the Florida Delegation visited with legislators in each of Florida's 27 congressional and senate offices, arguing that any final legislation must include coverage for preexisting conditions, affordable rates and income based assistance to those needing insurance.

We assure you the legislative process is ongoing in closed sessions in spite of the current and continuous distractions in Washington so please do not hesitate to call or write your own representatives and emphasize these simple points lest we all get a big surprise one day soon when a sudden vote occurs without the opportunity for public scrutiny.

In yet another effort to give medicine a voice, FLACP has supported several of our in training doctors to participate in extended legislative fellowships in Washington. They have done an amazing job and once home are great assets to our local legislative efforts.

I encourage all members to communicate with your legislators on the challenging issues before us.

Looking back over the past 20 years when I was the last full term President of the Florida Chapter of ASIM I am very proud of how the ASIM commitment to advocacy has matured under the ACP banner but it can only continue to flourish with the energy of each member pulling toward common goals.

The future of FL ACP is indeed secure in the near term with outstanding leadership rising through the ranks [C3 Governor Dr. Jason Goldman and Governor Elect Manning Hanline] but please consider contacting any of us if you are interested in stepping up your level of participation – there is plenty to do so don't be complacent. I assure you the forces working against us are not complacent.

Meanwhile, the Chapter scored a major victory in the courts when Governor Scott opted not to appeal the Chapter's win in the Docs and Glocks case to the U.S. Supreme Court. For the Chapter, this was never an issue about guns, but rather the ability of physicians to speak openly and honestly with their patients. The Eleventh Circuit agreed with the Chapter and ruled that restrictions on what a physician could talk about with patients violated the First Amendment.

RESIDENT PERSPECTIVES ON ADVOCACY



Paul W. Stevenson, MD
Internal Medicine, PGY-2
UF Health COM

The ACP and Florida Chapter provides an excellent opportunity for politically inclined physicians-in-training to get exposed in the healthcare policy making that helps to shape the future and current practice of internal medicine.

There are two key opportunities that were made available to me by the Florida Chapter, a trip to Tallahassee and a trip to Washington, DC. Both trips afforded me unique experiences on how the ACP can influence and drive legislation in a direction that benefits internists and protects our practice of medicine.

When I was in Tallahassee I had the opportunity to meet with representatives from across the state, including my own representatives from the district in Gainesville, FL. With my team of residents and practicing physicians, we were able to discuss policy issues directly with our representatives. We were able to tell our stories of how proposed legislation would affect our patient's lives, which allowed us to advocate for our patients and our colleagues who care for them.

In Washington, the residents were able to see how legislation can be affected at a national level by taking part in a concerted grassroots effort by all the ACP chapters across the country.

It was a marvelous experience to see so many involved physicians and residents advocating on behalf of fellow doctors aiming to protect patient rights to quality health care in the ongoing and critical healthcare debate that rages across the country, dominating present-day politics.

Being able to take part in these endeavors has left me impressed with how hard the ACP works to help our internists and has encouraged me to become more involved in the policy-making aspects of modern medicine in this country.

The FL Delegation enjoys dinner.



L-R Christopher L. Nuland, Esq., Dawn Moerings, Governor Jason M. Goldman, MD FACP, Michelle L. Rossi, MD FACP, Ankush Bansal, MD FACP, Julio Perez-Downes, DO, Leonalba Martinez, MD, Karina Jordan, MD, Governor John G. Langdon, MD FACP, Paul W. Stevenson, MD, Daniel Bendetowicz, MD FACP

ACP Leadership Day 2017

May 23 – 24, 2017

Washington, DC

The Florida Chapter delegation who participated at the annual ACP Leadership Day in Washington DC included Ankush Bansal MD FACP, Daniel Bendetowicz MD FACP, Governor Jason M. Goldman MD FACP, Karina Jordan MD, Governor John G. Langdon MD FACP, Leonalba Martinez MD, Dawn Moerings, Julio Perez-Downes DO, Michelle L. Rossi MD FACP, Paul W. Stevenson MD, and Christopher L. Nuland, Esq. The delegation met with legislators in all 27 Congressional and Senate offices



FL Chapter Delegation meets with Congresswoman Kathy Castor at ACP briefing



FL Chapter Delegation meets with Congressman Neal Dunn, MD



FL Chapter Delegation meets with Congresswoman Stephanie Murphy



FL Chapter Delegation meets with Congressman John Rutherford

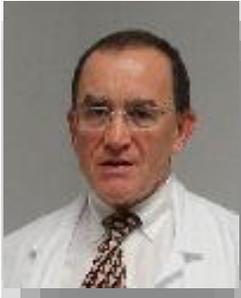


FL Chapter Delegation meets with Congressman Darren Soto



FL Chapter Delegation meets with Congressman Ted Yoho

FROM THE GOVERNOR-ELECT



Manning H. Hanline,
MD FACP

As I reflect over my 35 years of independent solo practice in Internal Medicine, one morning before sunrise as I walk my dog Fred it dawned on me that only someone who had been walking in darkness for years could fail to see that the proportion of internists who have chosen independent private practice has declined, and there are increased intrusions into the physician-patient relationship and disruption of our daily practice by outsiders whose interests are mainly financial.

The development of these two trends over the same period of time may not be merely an unrelated coincidence. Perhaps our economic dependence has created an environment in which internists must surrender the ancient ethic of using their professional judgement for the benefit of patients. At first we are chafed by new strictures, but, after a while, we get used to them and accept them as part of modern medical practice.

I believe that economic independence is a prerequisite to professional independence. If the option of independent private practice is not kept alive for internists, then our specialty may be in danger of becoming nothing more than a group of highly paid providers of cost-effective “quality” care, rather than a learned profession guided by ethics and standards.

THE THIRD LEG OF HIGH-VALUE CARE



Ankush K. Bansal, MD,
FACP, SFHM

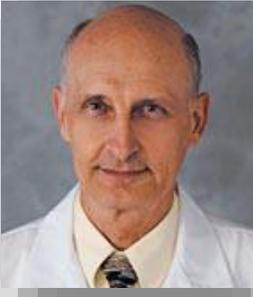
We are taught in medical school to always provide the best, most compassionate, most competent care to every patient, every time. However, as we learned in the past couple decades from the National Academy of Medicine (formerly the Institute of Medicine) in their landmark reports *To Err is Human: Building a Safer Health System* (2000) and *Crossing the Quality Chasm: A New Health System for the 21st Century* (2001), there was much to improve to meet that original goal we learned in medical school and from the Oath we took (Hippocrates or Maimonides). There has been enormous development in research on reducing errors (safety aka **misuse**) and ensuring the proper diagnostics and treatments are offered to our patients (quality aka **underuse**). However, with this comes a third leg of high-value care and fostering patient-centered medicine – reducing **overuse** of diagnostics and treatments.

Antibiotic stewardship is an early example of reducing overuse of care. There were multiple reasons for this initiative and included: reduce bacterial resistance, reduce patient side effects, reduce cost and utilization of resources, practice evidence-based medicine, and improve communication between the patient and physician. Similarly, evidence does not support antibiotic treatment for urinalyses suggestive of infection in most asymptomatic, non-pregnant women nor does it support drawing troponins in the emergency department without cardiac symptoms or prior ischemic cardiac history.

Research into overuse has been going on for a few years now through organizations like the British Medical Journal, the Choosing Wisely Campaigns in the U.S. and Canada, and our own ACP’s High Value Care initiative. However, many of these initiatives miss one important piece of high-value care: the patient (or patient advocate) voice. What we as physicians and our nurse colleagues valued as important for patients were not prioritized the same way by patients. The issue of sleep and alarms are prime examples. Because of this disconnect, there is now research, collaboration, and implementation of strategies through conferences and groups involving all stakeholders. For example, the Preventing Overdiagnosis Conference and the BMJ’s International Forum on Quality and Safety in Healthcare are addressing overuse through innovative posters from all over the world including Florida. The Lown Institute’s Right Care Alliance, a healthcare think tank, has already started tackling this

See Third Leg Continued on Page 10

INVITATION TO ACP MEMBERS IN FLORIDA



George Everett MD MS FACP
Scientific Chair, Florida ACP

We are living in exciting times in Florida!!!

No, I don't mean the political environment. I'm talking about something much more important: the incredible transformation of the state of Florida in terms of medical education and research. As always, Internal Medicine is leading the way in this remake and the ACP is the key leadership organization of Internal Medicine.

Take a look at these facts. In 1985 when I arrived in Florida from the great state of Iowa, there were 3 medical schools and 6 Internal Medicine residencies. Florida State University added a medical school in 2000, followed by 3 more new MD medical schools subsequently. In the 2017 National Residency Matching Program, there were 23 Internal Medicine residencies in Florida with 27 programs expected in the 2018 match. Let's not forget our brothers and sisters in Osteopathic Medicine. There are now 6 Osteopathic Internal Medicine residencies and 2 Osteopathic medical schools in Florida. The sum of all this expansion is that we now have 9 medical schools and 29-going-to-33 Internal Medicine residencies in Florida compared to only 1/3 of that number 17 years ago. How's that for change?

The MD and DO worlds are converging nationally. The Accreditation Council on Graduate Medical Education (ACGME) which regulates MD residencies and the American Osteopathic Association (AOA) which regulates DO residencies are merging into a single accrediting agency.

What does this mean for the ACP in Florida? First, it means there is great potential for new members forever into the future. Second, it energizes the meetings we are having now with new research findings, exciting case discussions, and the "friendly" competition of our Doctor's Dilemma statewide finals.

Please join us for the 2017 Scientific Meeting to be held September 8-10. There will be outstanding speakers coming from multiple medical centers in Florida who will be giving talks on topics in General Medicine, Hospital Medicine and every one of the major subspecialties of our great discipline of Internal Medicine. You can meet the medical students, residents, faculty and practicing physicians from across the state while educating yourself on the latest medical developments and receiving CME credits along the way.

Register Now for the FL Chapter ACP 2017 Annual Scientific Meeting

Convenient Online Registration is available at <http://bit.ly/2rfVgT4>

Early Bird Registration Rates End July 24

**PGA National Resort & Spa
1000 Avenue of the Champions**

**Please make your room reservation now by calling
(877) 476-1427 and requesting the FL Chapter ACP room rate - \$129 S/D**

Room rate Cutoff August 20, 2017



Florida Chapter 2017 Annual Scientific Meeting

REGISTER NOW!



PGA National Resort & Spa ~ Palm Beach Gardens, Florida

Online
Registration
Now Open

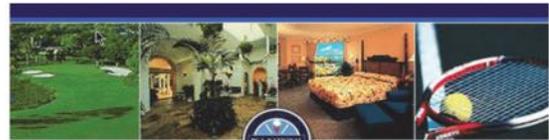
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Sept 8—10, 2017



21.5 CME Hours & 21.50 MOC Points

- Updates in Internal Medicine
- State Mandated Courses on:
 - Domestic Violence & Prevention of Medical Errors
 - 6th Annual Humanism in Medicine Lecture
 - Advancement to Fellowship
 - Women's Mentoring
 - Residents & Medical Students Program
- Formal Residents & Medical Students Poster Competition
- Doctors Dilemma Finals Competition



PGA NATIONAL RESORT & SPA



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Please make your room reservations by calling (877) 476-1427 and request the FL Chapter Group Rate \$129 S/D
Room Rate Cutoff 8/20/2017



Scan the code to add the 2017 Annual Scientific Meeting to your calendar



Florida Chapter

Florida Chapter American College of Physicians
1000 Riverside Ave, STE 220 • Jacksonville, FL 32204
(904) 355-0800 • flacp@comcast.net

Council of Resident/Fellow Members



Julio Perez-Downes, DO
Chair - Council of
Resident/Fellow
Members

The ACP Council of Residents/Fellows and Medical Students section had a successful 2016-2017 year. Our biannual meetings in Key Largo, FL (Scientific meeting) as well as Orlando, FL (Resident and Medical Student meeting) were a tremendous success this year. Many residents and medical students from across the state participated in abstract/poster competitions, and our medical jeopardy/doctor's dilemma once again fostered healthy competition among residents. We are currently finalizing the agenda for our upcoming chapter meeting in Palm Beach Gardens, FL from September 8 through the 10th. We hope to see you there!

We would like to congratulate all of the graduating residents and medical students of the class of 2017. We wish you success in your future endeavors, and hope that you will continue to remain involved with your local ACP chapter as you continue to advance in your career.

Call for Nominations ACP Florida Council Resident/Fellow Medical Student Members

The Council of Resident/Fellow Medical Student Members (FL CRMS) is recruiting leadership candidates for terms beginning July 2017. Leadership candidates will serve as representatives of their respective Internal Medicine programs/internal medicine interest group in the Florida Chapter of the ACP. As part of the Council of Resident/Fellow members, you will be invited to:

- Participate in the biannual council meetings- which take place during our fall and spring chapter meetings
- Participate in health policy programs, such as the advocacy movement by the ACP. This involves traveling to Tallahassee as well as Washington, DC to meet with legislators to discuss current healthcare policy issues.

Responsibilities:

- Represent your respective Internal Medicine program/Internal medicine Interest group and promote the ACP in your institution by delivering a biannual presentation to your colleagues with information regarding the Florida ACP chapter updates.
- Attend our biannual council meetings, which take place during our fall and spring conferences.
- Encourage residents in your institution to become involved in scholastic activity by submitting abstracts for presentation to our biannual meetings.

Perks:

- Great resume builder: as it demonstrates leadership and initiative.
- Chance to meet many of the Internal Medicine leaders across our state and country.
- Chance to make an impact in your residency program/medical school by encouraging academic/scholarship activities.
- Chance to impact healthcare policy which affects the way we practice medicine

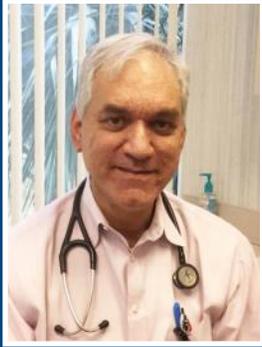
Requirements:

- Submit your CV, along with a statement discussing your interest in participating as representative of your IM program/Medical School in the Florida Chapter of the ACP
- Letter of recommendation from a faculty member in your institution speaking of your interest and qualifications to serve as representative of your program
- You must be an ACP member in good academic standing in order to qualify.
- Qualified candidates will serve in their leadership roles for a minimum term length of 1 year.

Email your curriculum vitae and leadership statement to floridachapteracp@comcast.net
Letter of recommendation from faculty members must be emailed by the faculty author to floridachapteracp@comcast.net

Thank you to all the fellow council members, faculty and ACP leaders who make our section of the chapter possible. We look forward to continued success and an outstanding 2017-2018 academic year.

Congratulations to New Florida Masters



Stuart B. Himmelstein, MD MACP

Dr. Himmelstein's service to Internal Medicine began over 18 years ago when his involvement in organized medicine began with the Florida Society of Internal Medicine and continued during his terms as a Counselor, Membership Chair, and an active advocate for the Chapter legislative program.

Not content to confine himself only to the ACP, Dr. Himmelstein continues to serve his County Medical Society and ultimately was elected by his county peers as President of the Palm Beach Medical Society. He continues to serve in many roles, including most recently as a member of Credentialing and Rules for the Florida Medical Association.

He has served in many roles on his hospital medical staffs, including Secretary, Member-at-Large, and Credentials Committee. Following he served as Chapter Treasurer and ultimately as Governor of the Florida Chapter of ACP.

His commitment to leadership and exemplary service to the Chapter was recognized by ACP, and during his 4-year Governorship the Chapter has received annual Chapter Excellence Awards from the College.

At present, he serves as a Board member of the ACP Services PAC.

Phillip E. Hoffsten, MD MACP

Dr. Hoffsten was an Assistant Professor at Washington University School of Medicine in the Nephrology Division, during which time he had more than 20 publications and authored several book chapters.

In 1979, he moved South Dakota, where he began a 35-year private practice career as a board-certified physician in Internal Medicine, Nephrology, and Critical Care Medicine.

He was a servant-leader and treated his patients to monthly lectures for community groups on the merits of smoking cessation, daily exercise, weight control, and stress release.

He helped start the first dialysis unit in Pierre so patients could remain close to home.

He is a Fellow of the ACP and developed the very popular "Have I Got a Case for You," which has become an integral part of the South Dakota annual meeting.

He was widely recognized as an outstanding physician by his patients and his peers and awarded the South Dakota Chapter Laureate Award in 2002.



Congratulations

The Florida Chapter Congratulates the following new Fellows who participated in the 2017 Convocation Ceremony

Amal E Hanna-Awad, MD FACP	Kellee L Oller, MD FACP
Amalia M Landa-Galindez, MD FACP	Kristen L Hagar, MD FACP
Amareshwar Podugu, MD FACP	Kumar Ilangovan, MD FACP
Andy Somesan, MD FACP	Marlow B Hernandez, DO FACP
Carlo Torralba Palarca, MD FACP	Mohammad Afzal Choudhry, MD FACP
Cheryl L Holder, MD FACP	Monisola O Oni, MD FACP
Edet A Elensi, MD FACP	Nagy Elsayyad, MBBch FACP
Frances R. Martinez, DO FACP	Natalia Solenkova, MD, PhD FACP
Howard A Grossman, MD FACP	Philip R Oranburg, MD FACP
Velamakanni Krishnamurty, MD FACP	

Third Leg Continued from Page 5

problem by reviewing the evidence and working with patient advocates to devise a list of Top “Do’s and Don’ts”.

All of us can think and work on this now. Yes, we still need to address quality and safety issues but also think about overuse. Why are you ordering that test? Is a BMP really necessary every morning in this patient just because they’re in the hospital? Does every syncope (or near syncope) patient need a CT of the brain right from the start with the added cost and radiation exposure or is starting with orthostatics more appropriate? Can we devote 2 minutes to patient education on antibiotic appropriateness for “sinusitis” or a “sore throat” just because the patient insists?

Something to think about for our patients but also for our own career satisfaction and sustainability.

Disclaimer: Dr. Bansal is a member of the Lown Institute, is collaborating on a manuscript addressing overuse, and is a reviewer for BMJ Open Quality.



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http://www.acponline.org/about_acp/chapters/fl/



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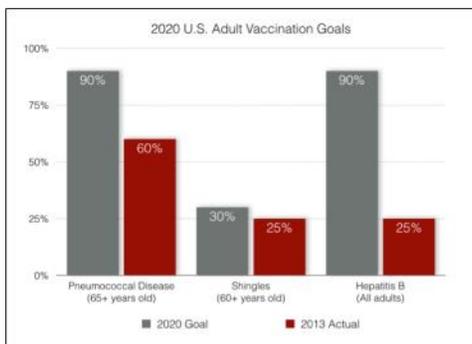


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TURNING THE TIDE ON ADULT VACCINATION RATES

In 2010, the U.S. Department of Health and Human Services set their sights on improved vaccination rates by 2020 as part of a far-reaching campaign “Healthy People 2020.” Yet, early metrics confirmed immunizations among adults are lagging behind schedule. As a result, the National Vaccine Program Office (NVPO) proposed a five-year plan to turn the tide.

In February, the NVPO drafted a [five-year plan](#) with the goal of improving infrastructure, access, and demand for adult immunizations. Beyond supporting the use of all recommended adult vaccines, this plan is particularly designed to help the U.S. play catch-up on [vaccination goals](#) that were set in 2010 for use of pneumococcal disease or pneumococcal pneumonia, shingles, hepatitis B, and the flu. According to data from 2013, significant progress is needed, particularly in vaccinations against pneumococcal disease and hepatitis B, as illustrated in the chart below:



The need for improvement among adult immunizations was further supported by instances of infection that could be prevented by vaccines. For instance, the Centers for Disease Control and Prevention (CDC) estimates that there are approximately 40,000 cases and 4,000 deaths as a result of invasive pneumococcal disease, 3,000 cases of hepatitis B, and roughly one million cases of shingles each year. In addition, influenza is responsible for more than 225,000 hospitalizations and thousands of deaths annually—the majority of which occurring among adults above the age of 65.

While a wide range of stakeholders is being called on by the NVPO to reach its goals outlined in the plan, those providing care to adults will likely have the largest impact.

Today’s low immunization rates among adults are a result of a number of factors including an overall lack of knowledge and a reduced emphasis as a preventative care measure. Preventative care has neglected vaccines for too long. As one of the best ways to keep your patients safe from preventable diseases, consider consistently providing Pneumococcal, Influenza, Shingles, Tetanus/Pertussis, and Hepatitis A and B vaccines when recommended and medically appropriate.

By building awareness and making vaccines a priority in preventative care, we will be in a better position to not only meet our collective health goals, but also keep patients protected and healthy.

For Further information contact: Atlantic Health Partners 800.741.2044; info@atlantichealthpartners.com - www.atlantichealthpartners.com



WHY SPEND THOUSANDS OF DOLLARS ON YOUR HIPAA COMPLIANCE TRAINING?



Every medical office must now have a HIPAA Compliance Program and Employee Training, but you **CAN** comply without disrupting your office or your cash flow.

For only **\$149.00**, the Florida Chapter provides a comprehensive HIPAA Compliance package that includes

The mandatory employee training video;

A complete Corporate Compliance Manual, complete with forms that include:
Privacy Notices ☑ HIPAA Consents ☑ Policies and Procedures
Business Associate Agreements ☑ Training Materials ☑ Self-Assessment Tools

For more information, or to order your HIPAA Compliance Package today,
Contact Dawn Moerings at Floridachapteracp@comcast.net



DEADLINE FOR CHAPTER AWARD NOMINATIONS JULY 26, 2017

Florida Chapter Laureate Award

Laureate Award is the most prestigious award given by the Chapter. It honors Fellows or Masters of ACP who have demonstrated by their example and conduct an abiding commitment to excellence in medical care, education, or research, and in service to their community, and their chapter of the American College of Physicians. A candidate must be long-standing and loyal supporter of the College who have rendered distinguished service to the Florida Chapter and have upheld the high ideals and professional standards for which the College is known. A candidate must be a Fellow or Master of the College for at least ten to fifteen years. The Laureate winner presentation is scheduled during the Florida Chapter Annual Award Reception.

Florida Chapter Internist of the Year

A physician who has demonstrated outstanding leadership and dedication to the clinical practice of internal medicine.

Florida Chapter Outstanding Teacher of the Year

A physician who has demonstrated outstanding leadership and dedication to medical education.

Florida Chapter Community-Based Teacher

A physician who has demonstrated outstanding leadership and who has contributed to the education of medical students, residents, and fellows as an office-based internist.

Florida Chapter Volunteerism Award:

A physician, who has distinguished themselves in voluntary service in the area of medicine like a commitment to continuing education, which is an established tradition for internists and the College. The College considers volunteerism so important that it is a major criterion for advancing to Fellowship. Recognize a colleague who actively participates in community service and volunteerism.



Congratulations to the Florida Chapter for receiving the 2016 Chapter Excellence Award! The award recognizes chapters which successfully meet the standards for managing a chapter.

In order to achieve the Chapter Excellence Award, chapters must meet all basic criteria and seven optional criteria. Criteria include such activities as formulating an effective Governor's Council and committees, communicating frequently with membership, providing educational opportunities, recruiting and advancing members and celebrating membership through local awards. Special thanks is extended to those chapter members who assisted in all of these endeavors! For their hard work and dedication, we received this award.



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