

"The American College of Osteopathic Obstetricians and Gynecologists is committed to women's health through the Osteopathic and holistic practice of obstetrics and gynecology.."

Year of 2018

Inside This Issue

PRESIDENT S MESSAGE
Executive Vice President's Message
Strategic Plan 2017 - 2021
ACOOG 2018-2019 Board of Trustees 12
ACOOG Membership News
2018 New Fellows
HIGHLGHTS 85 th Annual Conference
CME ARTICLE: "SAFETY AND EFFICACY OF ABLATIVE FRACTIONAL ER: YAG LASER TREATMENT FOR VULVAR LICHEN SCLEROSUS: AN INTERIM 3-MONTH ANALYSIS"
Calendar of Events
Opportunities
2018 Fall Conference

American College

OF OSTEOPATHIC

Obstetricians

GYNECOLOGISTS

Summer Edition



Message from the President



Octavia M. Cannon, DO, FACOOG (Dist.)

Happy HOT summer greetings from North Carolina! ACOOG kicked things off with a successful Summer Ultrasound Course in Columbus, Ohio. Many thanks to our ACOOG staff, CME chair Catherine Bernadini, DO and the ultrasound course team for their hard work. Please be mindful of the October 3, 2018 EARLY BIRD REGISTRATION DEADLINE for the Fall Conference at the Renaissance Worthington in Fort Worth on October 25-28, 2018. There will be 17.5 CME credits in general session and 2.0 additional credits in OMM for your educational pleasure! MEFACOOG will also have a fundraiser. The Chili Cook Off reception on Thursday, October 25 from 5 to 7pm should be delicious!

Recently, I proudly represented ACOOG in Washington, DC at the ACOG Task Force meeting on Heart Disease and Pregnancy. Our mission is to review and update the current ACOG practice bulletin. This assignment is proving to be challenging and very interesting. I have a new appreciation on how the practice bulletin and committee opinions develop! Your President Elect, Thomas Dardarian, DO will represent us well at the AOA Annual Convention/House of Delegates on July 16-20, 2018! He will make sure that our voices are heard on the national level.

Kudos to the newest ACOOG committee-the Council of Postgraduates (COP). Its mission is to serve as the advocacy body for the candidate membership (residents and fellows). The committee has already shared its first webinar for the 3rd and 4th year residents; who are preparing to transition from resident to attending. The information provided on

work-life balance and ACOOG membership/ involvement and the AOBOG certification process was well-received. If you missed it, check out the ACOOG Communities page!

Be kind to yourselves and to others. Have a healthy Summer!

Don't be impressed by money, followers, degrees and titles.

Be impressed by KINDNESS, integrity, humility and generosity.

-SIMPLEREMINDERS.COM

Octavia M. lana Do.

Octavia M Cannon, DO, FACOOG (Dist) President 2018 - 2019

Message from the Executive Vice President



Michael J. Geria, DO, FACOOG, (Dist.)

It's hard to believe that 2018 is half over. Attendance at our annual convention in Orlando was incredible. As always, I extend my thanks to the program chairs James R. Lindemulder, DO, FACOOG(Dist) Cecilia W. Banga, DO, FACOOG. As always, many thanks to Dr. Catherine Bernardini and her ever-diligent members of the Continuing Medical Education Committee as well as the ACOOG staff.

Congratulations to our new president, Octavia Cannon, DO, FACOOG(Dist) and our newest member of the Executive Committee, Vice President Patrick Woodman, DO, FACOOG(Dist).

Welcome the new board members, Jennifer Nichols, DO, FACOOG, and Jennifer Papp, DO, FACOOG. Both Dr. Nichols and Dr. Papp have served the college well in the past and I am confident that they will continue to do so in their new role. A special thank you to our outgoing board members for their service to the college.

The Single GME Accreditation System application process is more than halfway completed. All of the Osteopathic OB/GYN programs have submitted their applications with very few exceptions. Many more programs have been granted initial accreditation. Congratulations to all of those that have made it past that hurdle. The five remaining programs are in continuing preaccreditation status. I will keep everyone posted as the process continues. This year marks a milestone in the process. Programs in

continuing pre-accreditation, which are three or more years in length, must obtain permission from the AOA in order to participate in the match for the 2019 academic year. Once again, I would like to stress the fact that ACGME residency accreditation is in no way attached to board certification. Osteopathic graduates of ACGME accredited OB/GYN residencies are able to take the AOBOG exam.

I would like to again take this opportunity to repeat some basic information regarding the single accreditation system. Once a program submits its application to the ACGME it automatically achieves pre-accreditation status. It is not an initial accreditation, and the program will still be accredited by the American Osteopathic Association. The program will still participate in the Osteopathic Match until the program receives initial accreditation. At that time, the program can participate in the Osteopathic match as well as the NRMP match and be able to accept nonosteopathic graduates into their programs. Programs can designate how many positions in each match. When a program submits their application for ACGME accreditation they must; however, follow ACGME guidelines that meet their standards even while in preaccreditation status. The AOA and ACGME have committed multiple resources to assist programs in achieving ACGME accreditation. The AOA has offered the services of outside consultants at AOA expense to assist programs in achieving ACGME accreditation. Boyd Buser, DO, continues to provide regular updates. For more information regarding the Single Accreditation System, please refer to both the ACGME and AOA websites.

The AOA Board of Trustees continues to work on new developments in membership and board certification issues. More details will be available following this summer's AOA Board of Trustees and House of Delegates meetings. Please remember that as members of the ACOOG you are represented by your specialty college at these meetings. If you have concerns regarding any AOA Board of Trustees or House of Delegates resolutions (they are published on the AOA website) Please feel free to contact me. As a reminder, Dr. Thomas Dardarian is the ACOOG delegate this year.

ACOOG is committed to maintaining an open dialogue with the ACOG and its leadership. A special note of thanks to ACOG president Lisa M. Hollier, MD, MPH, FACOG. Her presentation was extremely interesting and inspirational.

The ACOOG remains committed to be the primary resource in Osteopathic education for women's health. We will continue our visiting professor program as part of that commitment and dedication to educating our osteopathic students. The ACOOG will continue to work with the AOA for CME activities and other educational opportunities.

Have a wonderful and safe summer. I look forward to seeing all of you in Fort Worth at the ACOOG Fall Conference.

Sincerely,

Executive Vice President

Michael J. Geria, DO, MS, FACOOG (Dist.) CS

and John TO FACIOR

ACOOG Staff

Michael J. Geria, DO	Executive Vice President
William Bradford, DO	.Vice President of Evaluation
Valerie Bakies Lile, CAE.	Executive Director
Helen Oberbeck	Director of Administration
Martha Prud'homme	Program Manager
Jimmie L. Evans II	
Nnamdi Ibegbu	Membership Coordinator



AMERICANCOLLEGE OF OSTEOPATHIC OBSTETRICIANS GYNECOLOGISTS

Strategic Plan 2017-2021

MISSION

Committed to women's health through the Osteopathic and holistic practice of obstetrics and gynecology.

VISION

Providing an Osteopathic community for the support, fellowship, and engagement of women's healthcare professionals.

VALUES

Offering Member Support

- Member Driven
- Compassionate
- Accountable

Promoting Fellowship

- Lifelong Community
- Access to Member Network

Providing Engagement Opportunities

- Leadership Roles
- Teaching and Mentorship
- Scholarly Activity

GOALS



Membership Support

Focusing on relevance through growth, technology, engagement, and physician well-being.

Continuing Medical Education

Delivering excellence in medical education in varied formats, including distance learning and research.

Awareness and Advocacy

Representing and promoting the interests of Osteopathic obstetrics and gynecology with the public, governmental entities, and both public and private institutions.

Organizational Excellence

Maintaining and improving upon the leadership and sustainability exhibited by the College since 1934.

Your ACOOG DOSE:

Delivering Opportunities for Support and Engagement

In keeping with our VALUES, the ACOOG wants to provide a variety of opportunities for engagement and support your practice journey in as many ways as possible. Here are just a few of the ways you can get involved



entire membership without the service and dedication of our volunteers. COMMITTEES 112 individual volunteers averaging 9 hours each equates to over 1,000 hours annually. The ACOOG could not serve our

CME FACULTY Help us provide advanced continuing education for

rour peers by lecturing, teaching an interactive workshop, or writing an

online module.



RESEARCH Complete research in our focus areas or serve as a resident research mentor.



volunteering with ACODG and would like to do more, perhaps the Board BOARD OF TRUSTEES If you have some expensence



FOUNDATION The Medical Education Foundation of ACCODS supports a number of educational and research programs within the s for you. New skills and perspectives are always us Led.



profession. We welcome you to volunteer on the NEFACOOS Board or for a specific project.



entity, it is integral to the advancement of our MISSION. We appreciate the partnership we thare and encourage you in consider becoming an CERTIFICATION Atthough the cartifying board is a separate ADBOG examiner.



STUDENT/RESIDENT EDUCATION We conduct multiple faculty and mentor volunteers are always needed. Contact us if this is educaconal programs for medical students and residents each year. your passoon!



VISITING PROFESSOR visit a college of Cateoparthic Medicine to me nor roud-nits about chooling ONGYN as their specialty.



your patients and practice even if you can't attend a Hill event or serve on ADVOCACY You can be an active advacage on issues that impact the Covernment Affairs Contmittee. Follow key legislative alerts and answer our calls to action by contacting your representatives.

ACOOG 2018-2019 Board of Trustees



Octavia Cannon, DO, FACOOG (Dist) President



Thomas Dardarian, DO, FACOOG (Dist) President-Elect



Patrick Woodman, DO, FACOOG (Dist) Vice President



Jeannine McMahon, DO, FACOOG (Dist) Secretary-Treasurer



David J. Boes, DO, FACOOG (Dist) Immediate Past President



Catherine Bernardini, DO, FACOOG (Dist) Trustee



Sherman Dunn, DO, FACOOG *Trustee*



W. Ashley Hood, DO, FACOOG (Dist) Trustee



David Jaspan, DO, FACOOG (Dist)
Trustee

(Continued on Page 13)



Mark LeDuc, DO, FACOOG (Dist) Trustee



Jennifer L Nichols, DO, FACOOG (Dist) Trustee



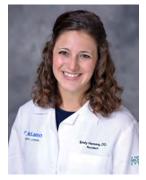
Jennifer L Papp, DO, FACOOG Trustee



Takeko Takeshige, DO, FACOOG Trustee



Gregory S Willis, DO, FACOOG Trustee



Emily Henning, DO Resident Representative



Shruti Iyer, OMS-III Student Representative



William Bradford, DO, FACOOG (Dist) Vice President for Evaluation



Michael J Geria, DO, FACOOG (Dist) Executive Vice President



Valerie Bakies Lile, CAE, FACOOG (Hon) Executive Director

ACOOG Membership News

New Members

Welcome new members! The Board of Trustees approved the following new members at the 85th Annual Conference in April 2018 meeting in Orlando, Florida.

New Regular Members

Laterica Barton, DO Ronald Brunnabend, DO Maria Cayabyab, DO Jessica Cewe, DO Jennifer Choi, DO Heidi DiSalvo, DO, FACOOG Roderick Doss, DO, FACOOG Kerra Doyle, DO

Angelique Ellison, DO

John Franchina, DO, FACOOG

Carlos Guevara, DO

Landon Krautkramer, DO

Rose Laignel, DO

Julia Lange, DO, FACOOG

Brandon Longenecker, DO

Jenna Madsen, DO

Robert Malsby, DO, FACOOG

Jason Meade, DO, FACOOG

Michael Morphet, DO

Kathryn Murphy, DO, FACOOG

Daniel Oraee, DO

Neil Ponder, DO, FACOOG

Natasha Phillips, DO

Rachael Rayburn, DO

Ivonne Reynolds, DO, FACOOG

Jessica Rogers, DO, FACOOG

Derrick Sanderson, DO

Meike Schuster, DO, FACOOG

Steven Sheng, DO

Peter Sterbutzel, DO

Meredith Townsend, DO

Christopher Van Orsdoll, DO, FACOOG

Rabiah Zafar, DO

Life Membership

William Anderson, DO Ronald Librizzi, DO Thomas Zima, DO

Affiliate Membership

Nathalie McKenzie, MD Chad Strittmatter, MD

New Fellows 2018

April 8-13, 2018

Waldorf Astoria Bonnet Creek - Orlando, FL



Front row left to right:

Jason Meade, DO; Jessica Rogers, DO; Tracy Wurm, DO; Jessica Chandler, DO, Jennifer Enman-Bourgon, DO; Kellen Patten, DO

Neely Elisha, DO; Rachael Fockler, DO; Renee Stevens, DO; Lena Carr, DO; Maria Luksch, DO; Wayland Billings, DO; Ashley Perkins, DO

Jennifer Schlies, DO; Amy Keurentjes, DO; Kristen Witham, DO; Stephanie Rajchel, DO; Helen Yang, DO; Sarah Hellmann, DO

Sandy Bui DO; Laura Falkowski, DO; Lena Weinman, DO; Megan Forshee, DO; Kara Totonchi, DO; Stephanie Sammons, DO; Marissa Magid, DO; Maanasi Silk, DO; Amanda Walker, DO

Kelly Anne Shedd-Hartman, DO; Karen Lee, DO; Meghan Cox-Pedota, DO; Maria Kronlage, DO; Ashley Dupuis, DO; Hodon Mohamed, DO; Erin Grey, DO; Kristen Pomeroy, DO; Jennifer Salter, DO; David Russell, DO; Alicia Russell, DO; Emily Ermis, DO; Bradley Logston, DO

Malisa Moss, DO; Heidi DiSalvo, DO; Emmanuel Nwogu, DO; Donald Menya, DO

Highlights 85th Annual Conference

April 8-13, 2018

Waldorf Astoria Bonnet Creek - Orlando, FL



Catherine Bernardini, DO presents the ACOOG Distinguished Fellow Honorary Lecture Award to Mark Levine, MD.



Octavia M. Cannon, DO presents the ACOOG Barbara Hawkes Honorary Lecturer Award to Saundra Wall Williams, EdD.



Octavia M. Cannon, DO presents the MEFACOOG Distinguished Lecture Award to Tifany Lowe-Payne, DO.



David Boes, DO presents the ACOOG Distinguished Service Award to Thomas L. Alderson, DO, FACOOG (Dist).

CONGRATULATIONS TO:

ACOOG SERVICE AWARD TO 2017 FALL CONFERENCE CHAIRS:
SUSAN JANECZEK, DO, FACOOG AND
DAVID M. JASPAN, DO, FACOOG (DIST)
(No photo available)

ACOOG RESEARCH PRESENTATION WINNER: Claire Templin, DO Metro Health Hospital Grand Rapids, MI (No photo available)

MEFACOOG COMMENDATION AWARD TO JENNIFER A. RONCONE, DO, FACOOG (No photo available)



David Boes, DO presents the ACOOG Service Award for Program Chair for 85th Annual Conference to Cecilia W. Banga, DO, FACOOG.



David Boes, DO presents the ACOOG Service Award for Program Chair for 85th Annual Conference to James R. Lindemulder, DO, FACOOG (Dist)



Kimberlee Perkins, DO presents the MEFACOOG Commendation to Thomas L. Alderson, DO, FACOOG (Dist).

(Continued on Page 17)



David Boes, DO presents the ACOOG Board of Trustees Service Award 2007-2018 to James Perez, DO, FACOOG (Dist).



David Boes, DO presents the ACOOG Board of Trustees Service Award 2012-2018 to Marydonna Ravasio, DO, FACOOG (Dist).



Thomas Alderson, DO presents the Outstanding Resident of the Year to Bryan R. Sweeney, DO. Dr Teresa Hubka and Dr David Boes accepting the award with Dr. Sweeney.

2018 Distinguished Fellows



Dr. Steve P. Buchanan presented the medallion to Glenn E. Bigsby, IV, DO.



Drs. Dardarian and Hubka presented the medallion to William Ashley Hood, DO.



Dr. Patrick J. Woodman presented the medallion to Betsy A.B. Greenleaf, DO.



Dr. Thomas L. Alderson presented the medallion to Jennifer Nichols, DO.



Dr. Jeffrey D. Postlewaite presented the medallion to Jeannine McMahon, DO.

(Continued on Page 18)

2018 New Distinguished Fellows



W. Ashley Hood, DO | Jennifer Nichols, DO | Jeannine McMahon, DO | Betsy A.B. Greenleaf, DO | Glenn E. Bigsby, IV, DO

2018 President - Dr. Octavia Cannon



Presentation of ACOOG Past President's plaque to David Boes, DO by incoming President, Octavia Cannon, DO.





Safety and Efficacy of Ablative Fractional Er: YAG Laser Treatment for Vulvar Lichen Sclerosus: An Interim 3-Month Analysis

By Michael Coyle, DO FACOOG, FPMRS

Introduction

One of the more complex skin disorders is vulvar lichen sclerosus (VLS), as it is influenced by genetic, physiologic, and environmental factors. Increasing evidence suggests autoimmune mechanisms may play a pathogenic role as well. This disease commonly affects anogenital skin, with the vulva the most common lesion site in women.^{1,2} VLS is characterized by marked inflammation, epithelial thinning, and distinct dermal alteration; after an initial inflammatory phase, there is chronic scarring and skin atrophy. ^{3,4} This relapsing disease has the potential for malignancy — pruritis commonly develops with almost all lesions, 4,5 and VLS has been associated with vulvar cancer. 2,6 There is currently no diagnostic tool to help clinicians differentiate between benign vs. malignant VLS or VLS that will evolve into squamous cell carcinoma. ² The microscopic features of lichen sclerosus include hyperkeratosis, epithelial thickening with flattening of the rete pegs, cytoplasmic vacuolization of the basal layer of cells, and follicular plugging. ²

The overall incidence and prevalence remain unknown, but Leibovitz and colleagues reported 1 in 30 women in nursing home settings were affected. ⁷ Others have reported a much lower prevalence of 0.1-1.7%, and a reported prevalence in males of 0.0014%. ⁶

As the disease progresses, the delineation between the labia majora and minora is somewhat lost and the clitoris can be buried under a fused prepuce. ³ Left untreated and uncontrolled, the vulva will become pale and can be completely fused in the midline, with only a pinhole vaginal orifice. Chronic

scratching, edema caused by inflammation, purpural lesions, and ecchymosis are all common in latter stages. ³

Vulvar itching is a hallmark of disease, and can be severe enough to interfere with sleep. Further, sexual dysfunction is common in women with this disorder as a result of architectural changes that occur.^{8,9} The negative impact on overall quality of life should not be underestimated or ignored. ^{3,8} Dermatologists, gynecologists, urologists, histopathologists, surgeons, pediatricians, and general practitioners will all likely have patients in their practices with VLS, and comanagement is common.

Traditional treatment and management has incorporated topical steroid medications, immunomodulators, and supportive therapy.⁵ Topical corticosteroids have been cited to provide complete relief of symptoms in about 70% of those affected, with complete remission in about 20%. ⁶ However, not all patients are able to tolerate corticosteroids, and there are no randomized clinical trials to provide guidelines on how often, for how long, and in what potency corticosteroids can best be used to treat this disease. In 2010 outside the U.S., the British Association of Dermatologists issued guidelines that proposed a detailed regimen. ¹⁰

More recently, laser therapy has been shown to be a viable treatment modality for this condition.⁴ Lee et al 11 described the use of a CO2 laser on five female patients with hyperkeratotic VLS refractory to topical steroid treatment. The first patient was treated with an ablative CO₂ laser, and experienced noticeable pain for the first 2 weeks postop; the remaining

(Continued from Page 19)

women were treated with fractional CO₂ laser. Of note, all five women showed significant improvements and were able to use topical steroid medications as maintenance therapy.

The purpose of this study was to determine the safety and efficacy of the ablative fractional Er:YAG laser treatment for vulvar lichen sclerosus. The secondary outcome measure was patient satisfaction.

Methods

This was a non-randomized, open-label, single-center case series study. Inclusion criteria was as follows: female >18 years of age; biopsy-proven active VLS; gynecological examination findings of characteristic changes of VLS; was experiencing at least one of these symptoms at presentation — dryness, itching, burning, bleeding, blistering, soreness, easily bruises, easily tears, ulcerated lesions, or painful intercourse. All potential subjects must have tested negative for the following: urine pregnancy test if of childbearing age, fungi or relevant bacterial culture, sexually transmitted infection pathogens (i.e., chlamydia, gonorrhea, genital mycoplasma, and trichomonas). Subjects were excluded if (among other criteria) they were receiving systemic immunosuppressant medication (e.g. corticosteroids) within the previous 4 weeks; were using topical vulvar steroid-containing creams on the affected area within the previous 4 weeks; were immunocompromised; had a history of uncontrolled malignant disease; or had an active urinary tract infection, vulvar fungal or bacterial infection.

The primary endpoints were the safety of the procedure as determined by adverse events and/or serious adverse events; subject symptom and quality of life improvement using the Vulvovaginal Symptom Questionnaire (VSQ) at follow-up months 1, 3, and 6 post-procedure. Subject-reported symptom severity improvement using a 7-point

global overall scale at follow-up months 1, 3, and 6 post-procedure (see Appendix). Objective primary endpoints included improvement in VLS as determined by photography and biopsy. Secondary endpoints included subject satisfaction with the treatment using a patient satisfaction questionnaire at the 6-month post- treatment follow-up visit.

Patients underwent three treatments (each treatment about 4 weeks apart), with follow-up at months 1, 3, and 6 post-treatment. Biopsies were collected from all subjects at baseline and 3 month follow-up visit to determine the depth of VLS disease and depth of inflammation. Subjects were asked to complete 2 questionnaires (VSQ and Vulvar Atrophy Global Overall Symptom Scale [VAGOSS]) at all treatment and follow-up visits.

Questionnaire data were tabulated, and a Student t-test was performed to analyze statistical significance.

The ProFractional Er: YAG Fractional Ablative Laser Handpiece

ProFractional (Sciton, USA) ablates narrowdiameter channels into the skin, covering a fraction of the total treatment area. This action initiates the wound healing response, while leaving the surrounding tissue intact for rapid healing.

The device uses a 430 μ m spot size to deliver energy to selectable levels determined by the user from 25 μ m to 1.5 mm depth. It has a choice of area coverage as well as providing options for density at 5.5%, 11%, 22% and 26%. Additionally, it also provides the user the ability for selectable tissue coagulation for enhanced collagen remodeling.

The handpiece creates clean, micro-ablated channels in the skin, which activate fibroblast production. The result is increased turgor and thickness to the skin. Leaving surrounding

(Continued from Page 20)

Table 1. Vulvovaginal Symptoms Questionnaire Condition and Percent Improvement from Baseline

Condition	1 month follow-up (n=14)	3 months follow-up (n=12)			
Symptoms	70%	51%			
Emotions	56%	41%			
Life Impact	55%	73%			
Sexual Impact	44%	52%			

tissue intact helps promote rapid healing due to presence of stem cells and melanocytes in the papillary dermis.

Treatment protocol

All enrolled subjects had topical lidocaine anesthetic applied for 30 minutes to the treatment

area, which was then wiped clean and dry of moisture. Based on biopsy results, the ablation depth was input and an 11% density chosen. The physician (M.C.) delivered pass 1 of the fractional laser over the symptomatic area. If pinpoint or punctate bleeding was observed, the handpiece was rotated 45 degrees and treatment was continued with pass 2. If there was no bleeding after pass 1, the depth was increased by 50 µm before rotating the orientation of the handpiece 45 degrees and delivering pass 2.

Results

A total of 15 subjects were enrolled; average age was 63 ± 10 years. Fourteen (14) subjects completed 1-month follow-up, 13 subjects completed 3 months, and 2 subjects withdrew.

VSQ Domains

Table 1 illustrates the percent improvement in VSQ domains at 1 and 3 months compared to baseline.

Symptoms, emotions and life impact data were statistically significant (p<0.05) at 1 and 3

months whereas sexual impact had p<0.05 at 1-month follow-up only (see Figure 1).

The percent improvement in VAGOSS data at 1 and 3-month follow-up compared to baseline is shown in Table 2.

Itching, burning, soreness, and easily tears showed statistical improvement (p<0.05) at 1 month, and dryness, itching, soreness, and easily tear sub-domain data showed statistical improvement (p<0.05) at 3 months compared to baseline (see Figure 2).

At 3 months, biopsy results showed 7 subjects (58.3%) had no VLS. Compared to baseline, 5 subjects (41.6%) showed 36-80% improvement in VLS symptoms at 3 months. Figure 3 illustrates anatomic outcomes at baseline, after a single treatment, and after two treatments. Figure 4 shows same patient's anatomic outcomes at baseline and 1 month after third treatment. Figure 5 shows the same patient's biopsy results at baseline and 3 months after third treatment.

Discussion

VLS is a chronic, relapsing condition with no known curative treatment. Once symptoms resolve after initial presentation, maintenance therapy is warranted. Some therapies are successful only in a particular age group and in some cases may be ineffectual. Some patients, regardless of medication compliance training and education, may overuse topical steroids. ³

(Continued from Page 21)

FIGURE 1. VULVOVAGINAL SYMPTOMS QUESTIONNAIRE

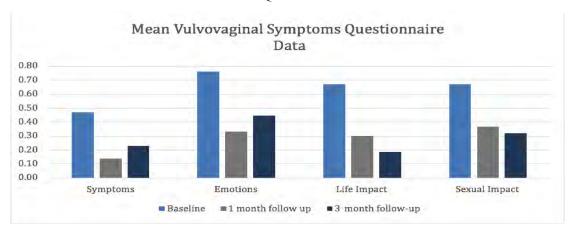
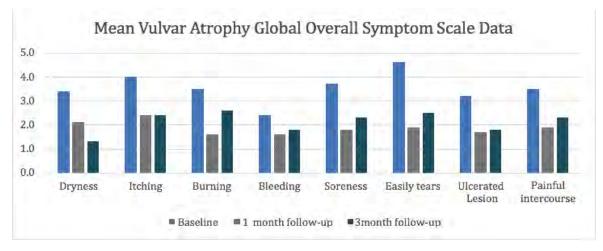


TABLE 2. VULVAR ATROPHY GLOBAL OVERALL SYMPTOM SCALE AND PERCENT IMPROVEMENT FROM BASELINE

Condition	1 month follow-up (n=14)	3 months follow-up (n=12)
Dryness	38%	62%
Itching	40%	40%
Burning	54%	25%
Bleeding	33%	25%
Soreness	38%	38%
Easily Tears	58%	45%
Ulcerated lesions	46%	44%
Painful intercourse	45%	34%

FIGURE 2. VULVAR ATROPHY GLOBAL OVERALL SYMPTOM SCALE IMPROVEMENT



(Continued from Page 22)

FIGURE 3. IMAGES BEFORE AND AFTER TREATMENT FOR VULVAR LICHEN SCLEROSUS



Photos Courtesy of Michael Cayle, DO, Urogynecologist, Cayle Institute

FIGURE 4. IMAGES BEFORE AND AFTER TREATMENT FOR VULVAR LICHEN SCLEROSUS



(Continued on Page 24)

(Continued from Page 23)

FIGURE 5. BIOPSY RESULTS, BEFORE AND AFTER TREATMENT



Equally important for patients are the sexual dysfunction components of this disease. Haefner et al. showed women with VLS have less frequent sexual activity and less satisfying sexual activity than those without VLS, ¹² acknowledging this disease can adversely affect quality of life.

In this study, 15 subjects underwent fractionated laser therapy treatment for VLS with follow-up over 3 months; one subject was lost to follow-up before the 1-month time point, second subject withdrew before first treatment. This interim analysis showed improvement in VLS symptoms based on biopsies and questionnaires at the 3-month mark.

There has been some suggestion in the literature that laser therapy may be beneficial, 11,13,14 but data has been limited to small case series. Photodynamic therapy has shown some success in attenuating symptom intensity, but with limited success and an

unknown effect on antinuclear antibodies in those with confirmed autoimmune disorders. ¹⁵ Nd:YAG laser has been associated with VLS, albeit in a single case. ¹⁶ Although our study was also small, it also confirms the benefits of ablative fractional Er:YAG laser treatment for this chronic condition as was supported by both objective biopsy and subjective questionnaire results, and there were no

reported adverse events. To the author's knowledge, this was the first study to look into the depth of disease and use an ablative fractional laser to treat deeper than the biopsy proven depth.

The management of VLS varies among experts and geographic location, with no uniform consensus.¹⁷ A recent survey of members of the International Society for the Study of Vulvovaginal Disease¹⁷ found most physicians (59%) start all patients with VLS on drug therapy at an initial visit, regardless

(Continued from Page 24)

of symptoms, and that dermatologists are more likely to treat these patients. The survey also noted U.S.-based physicians are more likely to treat with maintenance therapy, but no consensus emerged about long-term management of the disorder.

Fat grafting has also been suggested for women who are refractive to first-line therapy or where sexual function and quality of life are still hampered.¹⁸ Brauer et al found women with VLS may opt for surgery as a means to identify as "normal" to their sexual partners and to reduce symptom effect on quality of life, although outcomes are not uniform.^{19,20} In our study, both sexual function and quality of life were substantially improved with the fractionated laser. Further, all of our subjects reported improvement in all quality of life measures at 3 months. Our data supports the use of fractionated laser for the treatment of VLS

Since the time of this study, an international Delphi consensus panel ²¹ has developed an adult vulvar lichen sclerosus severity scale; we applaud the initiative. The group has not yet developed a consensus regarding method of measurement for any of the symptoms and signs that reached consensus for inclusion, but further work is ongoing.

This study has several strengths, among them the combination of objective and subjective responses. Further, to the author's knowledge, this is the first study to evaluate the use of ablative fractional Er:YAG lasers for the treatment of VLS. ²²

There are some limitations to this study: as this is an interim analysis, we support longer-term study beyond our planned 6-month follow-up.

However, based on our current analysis and 3-month follow-up data, we believe the

Er:YAG laser can be an effective treatment option for people with VLS. Objective results (biopsy) and subjective results (subject questionnaires) confirm the overall benefit of this laser treatment for VLS.

References:

- Murphy R. Lichen sclerosus. Dermatol Clin. 2010;28(4):707-715.
- Mathews CA, Walker JL. Preinvasive Disease of the Vagina and Vulva and Related Disorders. Clinical Gynecologic Oncology2018:20-37.e23.
- 3. Vyas A. Genital Lichen Sclerosus and its Mimics. Obstet Gynecol Clin North Am. 2017;44(3):389-406.
- LaRosa C, Chiaravalloti A, Jinna S, Berger W, Finch J. Laser treatment of medical skin disease in women. Int J Womens Dermatol. 2017;3(3):131-139.
- Shahriari M, Makkar H, Finch J. Laser therapy in dermatology: Kids are not just little people. Clin Dermatol. 2015;33(6):681-686.
- Fistarol SK, Itin PH. Diagnosis and treatment of lichen sclerosus: an update. Am J Clin Dermatol. 2013;14(1):27-47.
- Leibovitz A, Kaplun VV, Saposhnicov N, Habot B. Vulvovaginal examinations in elderly nursing home women residents. Arch Gerontol Geriatr. 2000;31(1):1-4.
- Dalziel KL. Effect of lichen sclerosus on sexual function and parturition. J Reprod Med. 1995;40(5):351-354.
- Van de Nieuwenhof HP, Meeuwis KA, Nieboer TE, Vergeer MC, Massuger LF, De Hullu JA. The effect of vulvar lichen sclerosus on quality of life and sexual functioning. J Psychosom Obstet Gynaecol. 2010;31(4):279-284.
- Neill SM, Lewis FM, Tatnall FM, Cox NH, British Association of D. British Association of Dermatologists' guidelines for the management of lichen sclerosus 2010. Br J Dermatol. 2010;163(4):672-682.
- 11. Lee A, Lim A, Fischer G. Fractional carbon dioxide

(Continued from Page 25)

- laser in recalcitrant vulval lichen sclerosus. Australas J Dermatol. 2016;57(1):39-43.
- Haefner HK, Aldrich NZ, Dalton VK, et al. The impact of vulvar lichen sclerosus on sexual dysfunction. J Womens Health (Larchmt). 2014;23(9):765-770.
- Mendieta-Eckert M, Ocerin-Guerra I, Landa-Gundin N. Lichen sclerosus et atrophicus in a surgical scar treated with fractional laser. J Cosmet Laser Ther. 2017;19(2):106-108.
- Peterson CM, Lane JE, Ratz JL. Successful carbon dioxide laser therapy for refractory anogenital lichen sclerosus. Dermatol Surg. 2004;30(8):1148-1151.
- Olejek A, Gabriel I, Bilska-Janosik A, Kozak-Darmas I, Kawczyk-Krupka A. ALA- Photodynamic treatment in Lichen sclerosus-clinical and immunological outcome focusing on the assessment of antinuclear antibodies. Photodiagnosis Photodyn Ther. 2017;18:128-132.
- Bostanci S, Akay BN, Ertop P, Vural S, Okcu Heper A. Lichen sclerosus associated with Nd:YAG laser therapy. J Cosmet Laser Ther. 2018:1-2.
- Selk A. A Survey of Experts Regarding the Treatment of Adult Vulvar Lichen Sclerosus. J Low Genit Tract Dis. 2015;19(3):244-247.
- 18. Boero V, Brambilla M, Sipio E, et al. Vulvar lichen sclerosus: A new regenerative approach through fat grafting. Gynecol Oncol. 2015;139(3):471-475.
- Brauer M, van Lunsen R, Burger M, Laan E. Motives for Vulvar Surgery of Women with Lichen Sclerosus. J Sex Med. 2015;12(12):2462-2473.
- Brauer M, van Lunsen RH, Laan ET, Burger MP. A
 Qualitative Study on Experiences After Vulvar Surgery
 in Women With Lichen Sclerosus and Sexual Pain. J Sex
 Med. 2016;13(7):1080-1090.
- Sheinis M, Selk A. Development of the Adult Vulvar Lichen Sclerosus Severity Scale-A Delphi Consensus Exercise for Item Generation. J Low Genit Tract Dis. 2018;22(1):66-73.
- Coyle M. 065 The Safety and Efficacy of Ablative Fractional Er:YAG Laser Treatment for Vulvar Lichen Sclerosus. The Journal of Sexual Medicine. 2018;15(6).

ACOOG Calendar of Events & AOBOG News

ACOOG CME

Calendar of Events



2018 Fall Conference October 25-28, 2018 Renaissance Worthington Fort Worth, TX



86th Annual Conference March 24-29, 2019 Hilton Riverside New Orleans, LA



2019 Fall Conference October 3-6, 2019 Hyatt Regency Downtown Columbus, OH



87th Annual Conference March 29-April 2, 2020 Hilton La Jolla Torrey Pines San Diego, CA

(Continued on Page 28)



AOBOG News

Check Out Our New Website!

AOBOG recently launched a new website: certification.osteopathic.org/obstetrics-gynecology/ It has an updated layout and user-friendly navigation.

OCC Changes

Beginning January 1, 2017, the requirement for OCC Component 4 – Practice Performance Assessment (PPA Modules) has changed to **2 PPA modules** per 6-year OCC cycle (previous requirement was 5 PPA modules). Additional PPA module topics are being written and approved. Visit certification.osteopathic.org/obstetrics-gynecology/ regularly for new topics and PPA modules.

If you are doing a quality improvement (QI) project through your hospital, employer, etc., you may now attest to QI projects to count for PPA Module credit. The online attestation form can be found at physician portal osteopathic org under the heading "Component 4 Attestation."

Additional changes will be coming to OCC – look for an announcement later this year for changes that will take effect in 2019!

Become an AOBOG Examiner!

The AOBOG continues to recruit certified generalists (actively practicing both OB and GYN), and subspecialist OB/GYN physicians to participate in Board activities, which include test development and the administration of oral exams. The Board and examiners meet twice a year for exams, with training provided to new examiners. Go above and beyond by committing to the future of osteopathic OB/GYN. You'll earn CME,

contribute to your own lifelong learning, and become part of a great group of OB/GYN leaders! For more information or to apply, please visit certification.osteopathic.org/ obstetrics-gynecology/ or email us at aobog@ osteopathic.org.

2018-2019 Examination Schedule

Fall 2018 Exam Dates and Deadlines: (Applications currently available)

- September 24-29, 2018 Primary OCC Exam – Pearson VUE Testing Centers across the U.S. (final deadline to apply is August 13, 2018)
- October 19-20, 2018 Primary Oral Exam – Rosemont, IL (final deadline to apply is July 16, 2018 or when the cap on candidates has been reached)
- October 19-20, 2018 Subspecialty Certification and OCC Exams – Rosemont, IL (final deadline to apply is June 25, 2018)

Spring 2019 Exam Dates and Deadlines: (Applications available beginning September 1, 2018)

- April 12-13, 2019 Primary Oral Exam
 Rosemont, IL (final deadline to apply is January 14, 2019)
- April 12-13, 2019 Subspecialty Certification Exams – Rosemont, IL (final deadline to apply is December 17, 2018)
- April 29 May 4, 2019 Primary Written Exam – Pearson VUE Testing Centers across the U.S. (final deadline to apply is March 11, 2019)

(Continued on Page 29)

Fall 2019 Exam Dates and Deadlines:

(Applications available beginning March 1, 2019)

- September 20-21, 2019 Primary Oral Exam Rosemont, IL (final deadline to apply is June 24, 2019 or when the cap on candidates has been reached)
- September 20-21, 2019 Subspecialty Certification and OCC Exams – Rosemont, IL (final deadline to apply is June 3, 2019)

All examination applications are exclusively available on the AOBOG website.

View the entire calendar of upcoming exams at certification.osteopathic.org/obstetrics-gynecology/. Visit the AOBOG website for up-to-date information about certification, examinations, applications and Osteopathic Continuous Certification (OCC).

AOA Board Certification Marketing

Marketing for AOA board certification is in full swing! Banner ads touting its value are rotating on all AOA channels, emails to graduating students and residents were sent, and all of the specialty websites have been updated to represent a consistent look and feel. Thank you to those who helped bring this over the finish line!



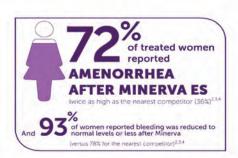
INNOVATION THAT DELIVERS WHAT SHE WANTS

In nationwide surveys, **over 1200 women** between the ages of 30 to 50 were asked to **share their thoughts about reducing or eliminating** their heavy menstrual bleeding.

48% of women were interested in

A 3-4 MINUTE TREATMENT TO REDUCE OR ELIMINATE THEIR HEAVY BLEEDING¹

90% of women interested in ENDOMETRIAL ABLATION WANT ZERO BLEEDING





FOR THE BEST PERIOD OF HER LIFE

L in nationwide surveys of over 1.200 women between the ages of 50 and 50. Of the 578 interested in endometrial abilition to reduce bleeding or poly preferred amenorfries. Data on file. Minery Surgical, Inc. 2017. 2. Minery Endometrial Abilition System (Diperailor): Manuall Redwood City. CA: Minery Surgical, Inc.; 2017. 3. NovaSure Impedance Controlled Endometrial Abilition System (Instructions For Use and Controlled Controlled Endometrial Abilition System (Instructions For Use and Controlled Controlled Endometrial Abilition System (Instructions For Use and Controlled Controlled System).

Manual) Manborough, MA. Hologic. Inc., 2014. 4. Not pased on head-to-head study.

2 2018 All rights reserved. Minerva is a registered trademark of Minerva Surgical, Inc. Minerva ES is a trademark of Minerva Surgical, Inc.

K0012 Re









EMBRACE THE BABY BUMP



BabyBrace® is a medical grade back brace available by prescription only that is designed to offer your back comfort and support during the stresses of pregnancy.

Around 80% of pregnant women report back discomfort during their pregnancy.

BabyBrace® is designed to provide bi-modal orthotic support for gestational use.

2 in 1 Brace F

Custom-Fitted Designed to relieve back pain & maximize comfort

PH: **813.513.2919** I Email: info@babybrace.com www.babybrace.com

Ask your provider about BabyBrace® for your back pain relief.

FDA approved back brace for gestational & post natal back pain relief.

Accepted by most insurance plans.

LET'S DISCUSS HOW THIS CAN CHANGE EVERYTHING FOR YOUR PRACTICE

BioTE® is searching for the best practices to join our 2700+ national network of trusted, certified providers.

PATIENT BENEFITS INCLUDE:



Increased Energy, Strength, and Weight Loss



Restored Libido and Improved Relationships



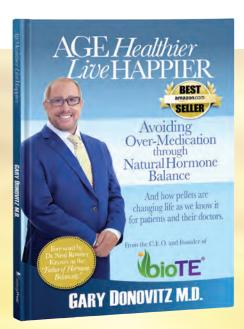
Feeling Younger, Healthier and Happier



Better Moods, Memory, and Mental Clarity

WE ARE SEARCHING FOR PRACTICES INTERESTED IN:

- Providing the highest quality of care for patients
- · Increased Revenue with 100% business integration
- Increased marketing exposure and advertising support
- Age-related illness protection
- Unmatched training by physicians
- A nutraceutical product line
- State-of-the-art training facility
- Minimal start up costs





If I Could SHOW YOU A WAY TO OPTIMIZE YOUR PATIENT'S **HEALTH** and **CASH REVENUE** with a **SINGLE SOLUTION**,



Is there ANY REASON you wouldn't find out HOW?

Gary Donovitz M.D. is the founder and chairman of BioTE® Medical, LLC, and has been a leading innovator in bioidentical hormone replacement therapy for over 20 years. Having personally performed more than 60,000 pellet insertions, he is an expert and international lecturer on sub-cutaneous hormone pellet therapy.

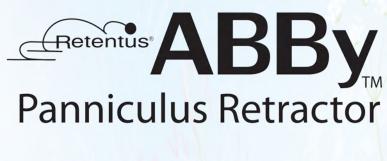
- GARY S. DONOVITZ, M.D.



Founder and Chairman







Helps prevent SSIs

Aids healing

Worn *continuously* 10 days . . . or more even in the shower!



For the high BMI C-Section and
Hysterectomy patient

Keeps the panniculus off the incision



OB/GYN Opportunities in Wisconsin



Seeking OB/GYN physicians in central Wisconsin:

Aspirus Stevens Point Clinic - Stevens Point, Wisconsin

- 2 OB/GYN Physicians
- Deliveries and surgeries occur at nearby Aspirus Riverview Hospital in Wisconsin Rapids
- Call is 1:5 at this time, shared with the group in WI Rapids
- Aspirus Riverview Hospital averages 500 deliveries per year
- 15-20 patients per day on clinic days

Aspirus Doctors Clinic/Aspirus Riverview Hospital – Wisconsin Rapids, Wisconsin

- 5 OB/GYN Physicians
- Deliveries and surgeries in town at Aspirus Riverview Hospital
- Call is 1:5
- Aspirus Riverview Hospital averages 500 deliveries per year
- New OB unit is being constructed at Aspirus Riverview Hospital, with state of the art technology
- 15-20 patients per day when in clinic all day

Aspirus Medford Hospital and Clinics - Medford, Wisconsin

- Join another experienced OB/GYN physician
- Call is 1:3
- OB/GYN physician is responsible for their own patient's births
- Averages 285 births per year
- 15-20 patients per day

Details at AspirusProviderOpps.org

Contact Karen.Lindstrum@aspirus.org or call 1-800-792-8728



Practice Opportunities

OB GYN OPPORTUNITY IN DAVIS, CA

Seeking full time OB/GYN BC/BE for a position in a successful collaborative practice with CNMs in Davis, CA as part of a large multispecialty group. You will serve a diverse population and practice full scope OB/GYN. Davis is a bicycle friendly college town with easy access to Tahoe, the Bay area, Sacramento without the traffic and hassles. Excellent public schools and cultural activities.

Sutter Medical Group is a successful, 800+ member multi-specialty group offering physicians the opportunity to build their practices within a progressive, financially sound and collaborative organization. SMG is recognized as a Top Performing Physician Group by the Integrated Healthcare Association. Our members are dedicated to providing the highest quality and most complete health care possible to the people in the communities we serve in the greater Sacramento Sierra Region of Amador, Placer, Sacramento, Solano and Yolo Counties.

Join us and enjoy:

- Income guarantee with shareholder track
- Generous compensation and benefits, including 401(k)
- Advanced practice technology, including Electronic Medical Records
- A positive work-life balance and Northern California's natural beauty and lifestyle

Community Information:

Davis is a close-knit, friendly community and home to the University of California at Davis, a world-class university recognized for its School of Medicine, School of Law and its PhD program in biological sciences. Davis offers numerous intellectual, recreational and cultural activities serving a wide variety of interests. The city is also known as the "Bicycle Capital of America" and is committed

to environmental awareness. Davis is a unique, academic, progressive, vibrant and family-oriented city. The Davis Joint Unified School District is one of the best in California. It's location in Northern California offers residents close proximity to the legendary recreation and leisure centers of Lake Tahoe, the Napa Valley wine country, national parks and seashores.

Contact Information: Michelle Pedler Physician Recruiter (800) 650-0625 Phone (916) 503-6831 Fax Email: develops@sutterhealth.org

MERCY HEALTH IS LOOKING FOR AN EXCEPTIONAL BE/BC PHYSICIAN TO JOIN THE OB/GYN TEAM IN NW OHIO!!

Expert, compassionate patient care starts with you. Your efforts are valued and supported professionally and personally.

The Mercy Health Defiance practice highlights include:

- Full time employment in an established practice
- Experienced staff include experienced family medicine NP and CNM
- Shared call with 3 additional providers, 1 physician and 2 CNM (The OB/GYN physician and 1 CNM are in a different practice located in Napoleon, Ohio)
- Primary call is limited to 10 days per month. Additional call time is available and compensated.
- Deliveries take place Henry County Hospital in Napoleon, Ohio about 20 minutes from the Mercy Health Defiance Clinic.
- Surgery suite for GYN cases is located

(Continued on Page 31)

on the same campus as Mercy Health Defiance Clinic creating efficient work flow

- Clinic includes support staff with designated MA and private office space
- Radiology procedures are performed in the radiology department with direct access to the clinic
- CarePATH, Mercy Health's customized EPIC electronic health record is used for both ambulatory and inpatients

Offer Details:

- FT 36 patient care hours with 4 administrative hours
- Competitive salary and benefits
- Relocation and Student Loan assistance
- Professional growth opportunities through leadership training

Why choose Mercy Health?

Mercy Health is a mission-driven organization committed to making every patient's life better – mind, body and spirit. Mercy Health is:

- The largest health system and the fourth largest employer in Ohio
- One of the largest nonprofit healthcare ministries in the United States
- Ranked nationally in the top 20% of health systems in the nation for quality and efficiency
- Meeting the healthcare needs of people in Ohio and Kentucky through more than 500 points of care

Interested candidates please contact:

Sheila Buurma Manager, Medical Staff Recruitment Mercy Health - Willard, Tiffin and Defiance Hospitals

1100 Neal Zick Rd. Willard, Ohio 44890

Office Phone: 419.964.5791 Cell Phone: 567.224.1324

Email: Sheila Buurma@mercy.com

OB/GYN OPPORTUNITIES IN NORTHERN CALIFORNIA

We currently have various OB/GYN opportunities throughout Northern California at the following locations:

- Yuba City with Sutter North Medical Foundation
- Sacramento with Sutter Independent Physicians
- Davis with Sutter Medical Group

Sutter North Medical Group is a 100+ member multispecialty medical group where primary and specialty physicians and staff provide personalized care in offices throughout Yuba-Sutter in Northern California. Affiliation with not-for-profit Sutter Health provides Sutter North Medical Group physicians access to a network of health care professionals, services and facilities, enabling them to care for patients of all ages with any medical condition.

Sutter Independent Physicians is an independent practice association (IPA) of primary care and specialists physicians affiliated with Sutter Health. SIP's more than 500 physicians serve 100,000-plus patients in the Placer, Sacramento, Solano and Yolo counties. Sutter Independent Physicians' mission is to promote an efficient practice environment for independent physicians to deliver excellent health care to their patients and communities.

Sutter Medical Group is a successful, 800+ member multi-specialty group offering physicians the opportunity to build their practices within a progressive, financially sound and collaborative organization. SMG is recognized as a Top Performing Physician Group by the Integrated Healthcare Association. Our members are dedicated to providing the highest quality and most complete health care possible to the people in the communities we serve in the greater Sacramento Sierra Region of Amador, Placer, Sacramento, Solano and Yolo Counties.

Join us and enjoy:

- Income guarantee with shareholder track
- Generous compensation and benefits
- Advanced practice technology, including Electronic Medical Records
- A positive work-life balance and Northern California's natural beauty and lifestyle

Contact Information: Michelle Pedler Physician Recruiter (800) 650-0625 Phone (916) 503-6831 Fax Email:develops@sutterhealth.org

CHAIR, DEPARTMENT OF OBSTETRICS AND GYNECOLOGY ROWAN UNIVERSITY SCHOOL OF OSTEOPATHIC MEDICINE STRATFORD, NEW JERSEY

Rowan University School of Osteopathic Medicine (RowanSOM), located in Stratford, New Jersey, is dedicated to providing excellence in both undergraduate and graduate medical education, research, and health care for New Jersey and the nation. An emphasis on primary health care and community health services reflects the School's osteopathic philosophy, with specialty care and centers of excellence demonstrating our commitment to innovation and quality in all endeavors. RowanSOM seeks to develop clinically skillful, compassionate and culturally competent physicians from diverse backgrounds, who are prepared to become leaders in their communities.

RowanSOM clinical campus is located in South Jersey, approximately 8 miles from Philadelphia, 1 hour from the Atlantic Ocean and 2 hours from New York City.

Rowan University School of Osteopathic Medicine is seeking a Chair for the Department of Obstetrics and Gynecology. In support of the mission, vision and values of RowanSOM the candidate will provide leadership, direction and development to all

teaching, clinical, research, community, and support activities within the Department of Obstetrics and Gynecology. Reporting directly to the Dean of RowanSOM, the Chair will work closely with the Associate Dean for Clinical Affairs, the Senior Associate Dean for Academic Affairs, the Senior Associate Dean for Research, and other members of the Dean's Cabinet to fulfill his/her role. Essential Duties will include:

Leadership

- Effectively leads the Department toward excellence in the conduct of teaching, research, patient care delivery, administrative services and community activities.
- Communicates the mission, vision and values of the University, School and Department to faculty and staff through personal example and commitment.
- Has an understanding of the growing health needs of the community of which the School is a part of and develops ways to meet them.
- Understands the needs and requirements of the department and effectively communicates and advocates for those with the Dean and Associate Dean for Clinical Affairs.
- Motivates and develops faculty and staff by accurately assessing and addressing their strengths, weaknesses and developmental needs. Clearly defines expectations and provides specific and regular feedback on performance and personal development.
- Demonstrating principled leadership and sound professional, academic and business ethics, creates an environment of cooperation and trust. Champions new initiatives, assuming the risk and responsibility for the Department. Builds and maintains effective relationships with clinical and academic partners.

Clinical

 Oversees the provisions of outstanding patient care that is of the highest quality meeting all requirements of local, state and Practice Opportunities . . . (Continued from Page 32)

federal accrediting agencies.

- Provide and manage direct patient care at one or more of our outpatient clinical offices located in the Southern New Jersey area
- Works closely with other Department Chairs of the School to achieve common goals that improve the Faculty Practice Plan's quality, service delivery and financial performance.
- Develops and grows clinical services of the Department, in coordination with the Faculty Practice Plan to meet the needs of the changing consumer market.
- Ensures timely, customer-focused communication with physicians and hospital staff to support and enhance patient care.

Academic

- Ensures adequate faculty effort, oversight, and support for programs of undergraduate and graduate medical education.
- Takes appropriate steps to maintain full accreditation of residency program and works to extend the residency and fellowship programs as appropriate.
- Responsible for the clinical education and training of students, interns and residents, and oversees their interaction with and treatment of patients.
- Supports faculty pursuit of research and scholarly activity, consistent with their other duties.
- Provides a departmental vision and environment to promote research and research funding.
- Promotes cross departmental and cross school research projects.

Planning

- Works with the Dean and Dean's cabinet to implement a comprehensive plan that prepares the School and its affiliated hospital partners for medical excellence in the 21st century through appropriate strategic partnerships.
- Identifies the needs of the University, School and hospital constituents (students, faculty, patients, staff, affiliates, and communities) and takes decisive action

- to meet them, continually searching for ways to increase satisfaction among these constituents.
- Considers a broad range of internal and external factors when making decisions, including information about the community, the market and competitors.
- Demonstrating flexibility, adjusts to shifting priorities, ambiguity and rapid change.

Administrative

- Develops appropriate budget for the Department and manages the budget to ensure the attainment of fiscal targets.
- Directs and facilitates the recruitment, retention and professional development of high quality faculty and staff and deploys them strategically to meet the needs of our community and affiliated partners.
- Serves, as appointed, on key committees and task forces within the School, University, affiliated hospitals and other groups.
- Supports diversity in the employment, education and development of faculty and staff, making decisions based on the principles of Affirmative Action and Equal Employment Opportunity.
- Acts professionally and responsibly at all times, within and outside of the University, contributing to a positive image of the Department, the School and the University. When appropriate, serves as a spokesperson for the School and affiliated partners to promote clinical care, research and teaching programs.
- Performs other duties as may be assigned by the Dean.

Qualifications:

Candidates must hold a D.O. or M.D. degree and be either AOA or ABMS Board Certified in Obstetrics and Gynecology, and have five years of professional experience, including prior experiences in management role. Considered candidates must have the academic and professional experience necessary to qualify at the rank of Professor (preferred) or Associate Professor and must

(Continued on Page 34)

be able to demonstrate and provide examples of leadership (i.e. previous departmental leadership positions, involvement in regional/national organizations etc.), teambuilding (i.e. previous successes, experience, interpersonal skills), academic strength (i.e. teaching experience, research experience, publications), clinical strength (peer recognition, reputation, patient satisfaction) and management strength (coaching, type and quality of management experience, advanced degree with experience).

Salary and Benefits:

We offer a competitive salary commensurate with experience, and a comprehensive benefits package that includes:

- Generous paid time off
- APB retirement benefit plan with employer contribution up to 8% of base salary (state regulations apply)
- Malpractice insurance that provides coverage to clinical faculty
- State Health Benefit program that includes medical, dental and prescriptions
- Life insurance and option to apply for long term disability insurance
- Employee Housing Incentive reimbursement (\$1500/year for up to ten years)
- Family relocation reimbursement (in accordance with IRS guidelines-Publication 521)
- Undergraduate tuition scholarship program for dependent(s), spouse, domestic or civil union partner

Further details about our benefits package are available at: http://www.rowan.edu/som/hr/index.html

Qualified candidates are invited to apply online on the Rowan University job site at: http://jobs.rowan.edu/cw/en-us/job/492320/chair-of-the-department-of-obstetrics-and-gynecology Rowan University values diversity and is committed to equal opportunity in employment. All positions are contingent upon budget appropriations. The Stratford, New Jersey campus is a Tobacco-free workplace.

OB/GYN PHYSICIANS IN SOUTHWEST INDIANA

Two Osteopathic Ob/Gyn physicians in Southwest Indiana are seeking a third colleague to assist in our growing practice. This individual will join a well-equipped office and highly trained staff in a family friendly community. The Heartland Ob/Gyn team delivers 500 babies annually at one local hospital (Daviess Community Hospital, Washington, IN).

The position can be an employed position with great benefits or a generous income guarantee with partnership track. Relocation allowance given. Student loan repayment is available. Sign-on bonus available.

PERMANENT GYNECOLOGY (GYN) PHYSICIAN JOB IN ARTESIA, NEW MEXICO (NM)

Artesia General Hospital in Artesia, New Mexico (NM) is a 49-bed hospital that serves the entire southeastern corner of New Mexico (NM). Artesia General Hospital is looking for a skilled Gynecologist to join their reputable practice. Located in an idyllic mid-sized town, in close proximity to many world-famous attractions, Artesia is the perfect place to call home.

Practice Specifics:

- 100% gynecology, procedures required
- Flexible schedule
- Adjunct professorship available
- Dedicated day for procedures
- 18-22 patients per day
- Will acquire whatever staff and machinery the provider feels necessary, open to purchasing robot
- Wide array of on-site specialists including, but not limited to Cardiopulmonary, ENT, Emergency, Gastroenterology, Hospitalist Services, Radiology, Urology, and Women's Services

Compensation Details:

- Two-year guarantee starting at \$230.000
- Sign-on bonus of up to \$20,000
- Relocation assistance of up to \$10,000

(Continued on Page 35)

- First year package of up to \$260,000
- Ability to bonus immediately
- Open to retention bonuses and student loan repayment
- Comprehensive benefits package
- Package negotiable

Location Highlights:

- Located in the heart of the Pecos Valley
- In close proximity to
- Roswell, site of the infamous UFO wreck (https://seeroswell.com/)
- Carlsbad Caverns (https://www.nps.gov/ cave/index.htm)
- Lincoln National Forest (https://www. fs.usda.gov/attmain/lincoln/specialplaces)
- White Sands National Monument (https:// www.nps.gov/whsa/index.htm)
- Mild, temperate climate Summer average temperature of 88°F, Winter daily average temperature of 64°F

Interested candidates contact:
Megan Dominick
Office: 314-236-4575
mdominick@cejkasearch.com
Please reference position ID 161082 when responding.

PERMANENT OBSTETRICS & GYNECOLOGY POSITION

At Patrlow, Harbin & Poist OBGYN, M.D., P.C., our employee culture combines a friendly and collegial work environment with high performance standards. We are actively seeking a BE/BC Obstetrics & Gynecology Physician to join our team! In addition to excellent compensation, the incoming provider can expect to be a part of a busy practice with opportunity for partnership after 3 years.

Practice Highlights:

- 1 and 6 call covering 1 Hospital, Level 3 Nursery
- Da Vinci Robotics Available
- Excellent Support staff model
- No Visa Sponsorship

Tuscaloosa, Alabama Highlights:

- Home to top ranked University of Alabama
- Vast array of festivals and cuisines
- Mild weather for year round outdoor fun
- Culturally diverse communities
- Thriving metro area full of southern charm

Interested candidates please contact: Kelly Hargrove

314-236-4454

khargrove@cejkasearch.com

Please reference Position ID 161241 when responding.

MFM-FELLOWSHIP LECOM

Wellspan Health/Lake Erie College of Osteopathic Medicine are proud to announce the availability of a first year fellowship opening in Maternal-Fetal Medicine at York Hospital with a position start date of July 1st, 2019. Our fellowship program is an affiliation of Lake Erie College of Osteopathic medicine and York Hospital/Wellspan Health, and is accredited through the American Osteopathic Association. We are currently in pre-accreditation with ACGME. It is a threeyear program involving direct patient care and a combination of didactic education and clinical research leading to board eligibility in Maternal-Fetal Medicine. Each program year is currently filled, and this is the next available slot.

Our program includes complete maternal and fetal risk assessment and management of pre-conceptual, prenatal, intrapartum, and postpartum complications. We provide a full range of fetal diagnostic ultrasound and antenatal testing, with accreditation through the AIUM. The fetal echocardiography lab is directed by MFM and is independently accredited through the ICAL. Invasive maternal and fetal diagnostic and therapeutic procedures include amniocentesis, CVS, fetal vesicocentesis/thoracentesis, cordocentesis, and fetal transfusion medicine. Surgical training in the placement of both elective and emergent/rescue cerclage and prophylactic

(Continued on Page 36)

cervico-isthmic permanent cerclage is included in the program. The perinatal center staff includes eight MFM physicians, certified perinatal sonographers, genetic counselors, two perinatal nurse practitioner, antenatal testing staff and perinatal diabetes education/ nutrition.

Maternal high-risk transports are via ambulance and helicopter and we are a regional center for the management of diabetes in pregnancy. York Hospital is a 558 bed institution located in York, PA and is the largest obstetrical care provider in south central Pennsylvania with approximately 3400 deliveries; it is the main teaching hospital and trauma center for our region. The NICU has 38 bassinets and 24-hour coverage by 6 full time neonatologists, as well as neonatal nurse practitioners. Full time research support is available at the main campus through the Emig Research Center.

Program inquiries and requests for applications can be sent to Kit Pifer, Program Coordinator at 717-851-3811 or kpifer2@wellspan.org. More information regarding our program, York Hospital, and Southcentral Pennsylvania is available via our medical education website: http://www.yorkhospital.edu/. The Program Director is Dr. James Hole, DO.

FELLOWSHIP IN FPMRS

Advanced Urogynecology of Michigan P.C. along with Beaumont Health is now a fully accredited site for Female Pelvic Medicine and Reconstructive Surgery fellowship by the ACOOG/AOA. This is a 3-year fellowship program.

Dr. Salil Khandwala is the fellowship director and the director of Urogynecology and FPMRS at Beaumont Health - Oakwood Campus. Dr. Khandwala has extensive experience in the field of FPMRS and was part of the first group to be board certified in this field. Dr. Khandwala is part of the UITN (Urinary Incontinence Treatment Network) and also the PFDN (Pelvic Floor Disorders Network), both under the auspices of the NIH.

The fellowship allows extensive clinical, research and teaching opportunities. Our program provides comprehensive exposure to urogynecologic issues, colorectal issues and pertinent urology issues with the focus being on innovation and outcomes improvement.

You will be provided with a full range of educational opportunities involving the bladder (incontinence, pain, and fistula), vagina (prolapse, pain), and bowel (fecal incontinence, constipation, and IBS). Additional faculty members are Dr. Craig Glines (osteopathic education), Dr. Richard Sarle (urology) and Dr. Ganesh Deshmukh (colorectal). Program inquiries should be directed to

Ms. Amanda Henry at admin@augm.org (preferable) or ontact us at 313-982-0200.

Please also visit our website at www.augm.org

Recruiting ads can be submitted to ACOOG by fax 817-377-0439, mail at 201 Main Street, 6th Floor Fort Worth, TX 76102 or by email to newsletter@acoog.org Subject: Opportunity Ad



Program Chairs:

Joseph Bottalico, DO Becky Graham, DO

JOIN US!

It is our pleasure to invite you to the 2018 Fall Conference of the American College of Osteopathic Obstetricians and Gynecologists. This conference has been carefully designed to meet the unique educational needs of ACOOG members, offering thorough scientific assessment of a variety of clinical topics and controversial issues that OB/GYNs face today.

In addition to cutting-edge presentations and debates, this year's schedule provides an opportunity to participate in an OMM workshop.

We hope you will join us for the 2018 Fall Conference.

RENAISSANCE WORTHINGTON FORT WORTH, TX

OCTOBER 25-28, 2018



CME:

- General Session 17.25 CME Credits of AOA Category 1-A.
- OMM Workshop 2.00 CME Credits of AOA Category 1-A.

COURSE OBJECTIVES:

Those participating in this activity will receive information that will allow them to...

- Enhance the skills needed to diagnose and manage common and uncommon clinical challenges faced in a modern OB/GYN practice.
- Address current and future OB/ GYN practice issues.
- Apply advances in technology and therapeutics to facilitate improved patient care and outcomes.



FORT WORTH, TX

OCTOBER 25-28, 2018



LOCATION & LODGING The Worthington Renaissance Fort Worth Hotel

200 Main St

Fort Worth, TX 76102

Rate \$169 Single/Double* Book by Oct 3, 2018 Click Here for Group Reservations OR Reserve by Phone at (817) 870-1000 **Group Code: ACOOG**

The Worthington Renaissance hotel is one of the most sophisticated hotels located in downtown Fort Worth. The Worthington Renaissance hotel is located in the heart of downtown with 500 sizable guest rooms and nearly 60,000 square feet of event space. The hotel's stunning indoor pool and deck, its terrace overlooking Fort Worth, and the authentic Southern fare served up at in-house restaurant Vidalias will make every quest feel at home during their Texan sojourn. Our friendly local Navigator can point you in the direction of the best Dallas/Fort Worth attractions.

TRANSPORTATION INFO - LINKS

- To get around downtown visit Molly The Trolley for more information and map
 - Molly The Trolley System: http://www.fwta.org/services/molly-the-trolley/

https://www.fortworth.com/about/transportation/ molly-the-trolley/

ACCREDITATION / CREDIT STATEMENTS

The American College of Osteopathic Obstetricians & Gynecologists is accredited by the American Osteopathic Association to award continuing medical education to physicians. This activity has been planned and implemented in accordance with the Policies of the Council on Continuing Medical Education of the American Osteopathic Association.

The ACOOG designates this program for a maximum of 17.25 of AOA Category 1-A credits and will report CME and specialty credits commensurate with the extent of the physician's participation in this activity.

PRINTED SYLLABUS

In continued effort to go green, ACOOG will have a digital syllabus. Check the ACOOG website one week prior to the conference to download the digital syllabus. However, if you would like to order a printed copy of the syllabus make sure to indicate on the registration form. The cost is \$45 and must be pre-ordered with your registration. Printed copies will NOT be available on site.

SOCIAL EVENT

Please join us on Saturday, October 27, 2018 for our social event. More details coming soon.

PHOTOGRAPHY DISCLAIMER

Registration and attendance at, or participation in ACOOG meetings and other non-CME activities constitutes an agreement by the registrant to ACOOG's use and distribution of the registrant's or attendee's image or voice in photographs, videotapes, electronic reproductions and audiotapes of such activities.



FORT WORTH, TX

OCTOBER 25-28, 2018



Things to do in Downtown-Fort Worth, TX

Downtown Fort Worth

Sundance Square Restaurant and Shops

- Comedy Club:

Four Day Weekend website: http://fourdayweekend.com/

Hyena's Comedy Night Club http://www.hyenascomedynightclub.com/

- Theater:

Bass Performance Hall https://www.basshall.com/

Jubilee Theatre http://www.jubileetheatre.org/

- Museum:

Sid Williams Richardson https://www.sidrichardsonmuseum.org/

- Night Life:

Pete's Dueling Piano Bar https://www.petesduelingpianobar.com/

Scat Jazz Lounge http://www.scatjazzlounge.com/

and more webiste https://www.dfwi.org/

Things to do Outside of Downtown Fort Worth

Fort Worth Cultural District:

3.1 mi

Amon Carter Museum of American Art National Cowgirl Museum Hall of Fame Fort Worth Museum of Science & History Kimbell Art Museum Modern Art Museum

West 7th District:

1.6 mi

Restaurants
Movie Tavern
Lucky Strike
Shops and Night Life
https://www.fwculture.com/

Fort Worth Stockyards:

2.8 mi.

Billy Bob's Texas
Sam's Saloon
Shopps and Restaurant
http://www.fortworthstockyards.org/home/

TopGolf

1.2 mi.

https://topgolf.com/us/fort-worth/

Black Eyed Distilling Co.

1.4 mi.

http://www.blackeyed.vodka/our-vodka/

Magnolia District:

2.5 mi.

https://www.fortworth.com/restaurants-near-southside/

Botanical Gardens Fort Worth

3.5 mi

http://www.fwbg.org/

Fort Worth Zoo

3.5 mi.

https://www.fortworthzoo.org/



FORT WORTH, TX

PRELIMINARY AGENDA

Thursday, October 25, 2018

12:00 - 3:00pm Residency Research Seminar

3:00 - 5:00 pm **OMM Workshop**

David Mason, DO

MEETINGS/EVENTS:

9:00-9:45am

8:00am - 12:00pm Board of Trustees 1:00-4:00pm PESC Meeting

5:00-7:00pm MEFACOOG Fundraiser Chili Cook-Off

Friday, October 26, 2018

7:00-7:30am Breakfast / Exhibitors

7:30-8:15am Past Presidents Honorary Lecture

TBD

8:15-9:00am Multifetal gestations, Fetal Complications,

Diagnosis and Treatment

Anthony Johnson, DO Break with Exhibitors

9:45-10:30am Prevention and Treatment of Fetal RBC

Alloimmunization

Kenneth J Moise, MD

10:30-11:15am Cardiac Disease in Pregnancy

Robert Debbs, DO

11:15-12:00pm OB Simulation Drills

David Jaspan, DO

12:00-1:15pm Lunch with Exhibitors

1:15-2:00pm Menorrhagia Diagnosis and Treatment

David Jaspan, DO

2:00-2:45pm **GYN ONCO**

Howard Saul, DO

Break with Exhibitors

3:15-4:00pm Genetic Screening Update

Allan Donnenfeld, MD

4:00-4:45pm **GYN ONCO**

Howard Saul, DO

MEETINGS/ EVENTS:

2:45-3:15pm

1:00-3:30pm Council of Postgraduates

3:30 - 5:00pm CMEC Meeting

2:00 -4:00pm Program Director 1:1 Meetings with

ACGME RC Reps

5:30-7:00pm Residency Fair/NSS Mixer



OCTOBER 25-28, 2018

Saturday, October 27, 2018

7:00-7:30am Breakfast / Exhibitors

7:30-8:15am Morbidly Adherent Placenta

Greg Willis, DO

8:15-9:00am The Dreaded Antenatal Consult for

Obesity

Eric Carlson, DO

9:00-9:45am The Cognitive Psychology of

Prediction & Judgement

Brad Irving, DO

9:45-10:30am Break with Exhibitors

10:30-11:15am Trauma in Pregnancy

Stephanie Martin, DO

11:15-12:00pm Diabetes and Pregnancy;

Current Developments

Tracy Papa, DO

12:00-1:30pm Lunch Symposium

1:30-2:15pm Long Term Follow-up Recommendations

for Women With a History of Gynecologic

Cancer/Dysplasia

Greg Willis, DO

2:15-3:00pm The Hormonal Roller Coaster of

Perimenopause: Risks and Benefits

of Hormone Therapy

Patricia Sulak, MD

3:00-3:45pm Weird sites for Endometriosis

Jennifer Nichols, DO

3:45-4:30pm **Death in America: Startling Statistics**

Patricia Sulak, MD



MEETINGS/EVENTS:

8:00am - 11:00am Medical Student Educational Program
1:30pm - 3:00pm National Student Society (NSS-ACOOG)
3:00pm - 4:30pm Membership and Promotion Committee

6:00pm -10:00pm Social Event

FORT WORTH, TX

PRELIMINARY AGENDA

OCTOBER 25-28, 2018

Sunday, October 28, 2018

7:30-8:00am Breakfast

8:00-8:45am Ethics in Medicine

Elizabeth Heitman, PhD

8:45-9:30am Professional Responsibility

Elizabeth Heitman, PhD

9:30-9:45am Break

9:45-10:30am Choosing the Right EMR for Your Office

Sheryl Bushman, DO

10:30-11:15 **EMR Pitfalls**

Sheryl Bushman, DO

11:15-12:00pm Patient Safety

Wiiliam Bradford, DO

12:00pm - Adjourn









FORT WORTH, TX

OCTOBER 25-28, 2018

ACOOG Mission

The American College of Osteopathic Obstetricians and Gynecologists is committed to women's health through the Osteopathic and holistic practice of obstetrics and gynecology.

ACOOG Vision

The American College of Osteopathic Obstetricians and Gynecologists will provide an Osteopathic Community for the support, fellowship and engagement of women's healthcare professionals.



ACOOG Values

ACOOG Offers Member Support:

- Member driven
- Compassionate
- Accountable

ACOOG Promotes Fellowship:

- Lifelong Community
- Access to Member Network

ACOOG Provides Opportunities for Engagement:

- Leadership Roles
- Teaching and Mentorship
- Scholarly Activity.





ACOOG 2018 FALL CONFERENCE

REGISTRATION FORM

PLEASE PRINT	T										
First Name*										MI	
Last Name*											
AOA#*											
Degree*	DO	MD	Other								
Address*											
Apt. or Suite											
City*											
State*										Zip*	
Contact Tel*											
E-mail *											
Guest Badge **									Ple	ease pri	nt name for guest badge (Adults only)
Please list any d	lietary re	strictio	ns / ADA	complia	nt accor	mmodat	tions.				

Refund Policy: Written cancellation of registration by October 3, 2018 will be subject to a \$50 processing fee. No refunds will be given after this date.

Special Needs: In accordance with the Americans with Disabilities Act, every effort has been made to make this conference accessible to people of all capabilities.

$\sqrt{}$	GENERAL SESSION	Early-Registration (payment received by October 3, 2018	Late Registration (payment received after October 3, 2018)
	Physician Member	\$ 650	\$ 750
	Non-Member Physician	\$ 800	\$ 900
	Life Member	\$ 400	\$ 500
	Affiliate Member	\$ 400	\$ 500
	Resident	\$ 400	\$ 500
	Non-Member Resident	\$ 500	\$ 600
	Student Member	\$ 0	\$ 0
	Non-Member Student	\$ 150	\$ 250
1	For Daily registration rate please contact the ACOOG office at 817-377-0421 or visit our web site www.acoog.org		

Pre-registrations will be accepted until October 15, 2018. Registrations received after October 15, 2018 will be accepted on site at the registration desk only. Payment must be received in full to process registration. Faxed registrations without payment information will not be processed.

٦	SUPPLEMENTAL SESSIONS	SUPPLEMENTAL SESSIONS Day Time		СМЕ	Limit	Fee	Residents	
	OMM Wokshop	Oct 25, 2018	3:00pm - 5:00pm	2.0	100	\$100	free	

OMM fee is included with resident registration and attendance is mandatory for second year residents

Workshops and supplemental sessions are space limited. Your registration will be returned if a session has reached maximum capacity. Medical students may audit workshops free of charge if space is available.

 ADDITIONAL EVENT	Day	Time	Cost Per Ticket	Quantity
Chili Cook-Off MEFACOOG Fundraiser Tasting Ticket	Oct. 25, 2018	5:00-7:00 PM	\$25.00	
Social Event - (Saturday) includes: dinner, entertainment and cocktail tickets.	Oct. 27, 2018	6:00-10:00 PM	\$75.00	
DONATION - Social Event ticket(s) for Resident or Student	Oct. 27, 2018	6:00-10:00 PM	\$75.00	

 MISCELLANEOUS	Amount	Quantity
Black and white printed syllabus (PRE ORDER ONLY - available for pickup on-site at the registration desk)	\$ 45	

PAYMENT & POLICY									
Total Due	\$ Payment Method ☐ Check (payable to ACOOG) ☐ Credit Card (complete below)								
Card Type	□ Visa □ MasterCard	□ Amex	Name on 0	Card					
Card #						Exp. Date:		CCV:	

^{*} Required ** Adults only; includes entrance to Exhibit Hall only, daily meals not included. Please call the ACOOG office for meal ticket prices.

The American College of Osteopathic Obstetricians and Gynecologists

ACOOG CME Quiz: This CME is available to ACOOG MEMBERS ONLY.

The ACOOG, accredited by the American Osteopathic Association, anticipates up to 0.5 hours CME credit pending AOA approval. CME will be submitted to the AOA office quarterly. Visit our website at www.acoog.org . Newsletter CME will remain on the ACOOG website for 12 months to provide the opportunity to complete each quarterly issue.

Click here to access the quiz.

ACOOG

201 Main Street, 6th Floor, Fort Worth, TX 76102