LEVERAGING THE AOA’S STRATEGIC PLAN: 2015 – 2017
How the AOA’s Strategic Plan is Promoting Leadership, Innovating Education, and Advancing the Future

FROM THE PRESIDENT:
As an elected membership of established leaders in orthopaedics, AOA Members, individually and collectively, influence our profession.

Striving to ensure that leadership is a core competency for every orthopaedic surgeon, the AOA is Promoting Leadership by expanding Leadership Development offerings. The AOA is Innovating Education as it explores new approaches to merging time and competency-based training as it works with accreditation bodies. The AOA is working to Advance the Future by exploring more effective ways to help shape and achieve value through teamwork.

The AOA continues to influence our specialty. The strategic directions we’ve laid out continue to guide our decisions, committee work, projects, and initiatives. In addition to these directions, AOA leadership has worked to find ways to facilitate more involvement and engagement between members. We hope you will enjoy seeing this report on AOA Leaders in Action.

SANFORD E. EMERY, MD, MBA
President, The American Orthopaedic Association
Chairman, West Virginia University, Department of Orthopaedics

THIS YEAR’S AOA UPDATE:
PAGES 2-4  PAGE 5  PAGES 6-19  BACK COVER
Strategic Directions  2015 Finances  2016 Achievements  A Look Forward - 2017
In March 2014, the AOA’s Executive Committee analyzed, discussed, and approved three strategic directions to help the AOA focus action on key areas, leveraging organizational and member strengths. These strategies guide how the AOA anticipates and facilitates solutions to the specialty’s most challenging, complex issues.

**LEADERSHIP DEVELOPMENT**
AOA will expand its audiences, scope, and programming so leadership is a core competency for every orthopaedic surgeon and other musculoskeletal physicians and providers.

**EDUCATION**
AOA will explore a dual track of surgical and non-surgical training, and work to merge time and competency-based training, as it works with accreditation bodies.

**HEALTH CARE REFORM**
AOA will address the critical issue of shifting models of care. We will develop and provide tools to membership to educate on how to shape and achieve value.

Read more about the AOA’s overarching strategies by logging in to the AOA Member Center Library at [WWW.AOASSN.ORG](http://WWW.AOASSN.ORG)
LEADERSHIP DEVELOPMENT
Under the guidance of the Leadership Development Committee, the AOA held its first two Regional Leadership and Networking Events, each with two concurrent tracks: one for AOA Members and Emerging Leaders and the other for residents and fellows. The first was held in Chicago and co-hosted by Douglas R. Dirschl, MD, Alexander J. Ghanayem, MD, and Joshua J. Jacobs, MD. The second was held in New York City and co-hosted by William N. Levine, MD and Joseph D. Zuckerman, MD. Both events featured a highly-rated leadership session with topic experts.

EDUCATION
The AOA’s CORD/Academics Committee has explored a dual track of surgical and non-surgical training. The AOA has extended invitations to non-members and other physician groups to engage in educational offerings. Through new liaison activities, the AOA will explore possible groups to work with, develop and implement programming strategies to provide leadership in musculoskeletal education. AOA Members and CORD Affiliates are playing key roles in the development of a US orthopaedic curriculum vis-à-vis the ABOS curriculum project.

HEALTH CARE REFORM:
EDUCATING ON SHIFTING MODELS IN CARE DELIVERY, TEAMWORK, AND PRODUCING “VALUE”
The Critical Issues and Leadership Development Committees explored different opportunities to assist in the training and education of Advanced Practice Providers (APP) involved in musculoskeletal care. Following the successful delivery of the 2015 symposium entitled, Musculoskeletal Workforce Needs: Are NPs and PAs the Answer?, partnership arrangements with APP organizations were considered to help address this critical issue. These opportunities were researched extensively and it was determined that a replacement strategy will be identified, which will more directly align with the needs of the membership and the overall objectives of the organization.
AOA UPDATE

ENGAGEMENT INITIATIVES

AOA AWARDS
In June at the Annual Meeting, the AOA announced its award winners: Distinguished Contributions to Orthopaedics Award - Richard H. Gelberman, MD and Distinguished Clinician Educator Award - Robert J. Neviaser, MD. Visit www.aoassn.org to view the Award Winner Hall of Fame and read about the achievements of the award winners.

AOA COMMITTEE RESTRUCTURING
In November of 2015, the AOA Executive Committee approved a governance restructure to more closely align activities with the AOA’s strategic priorities. The restructuring focuses the number of standing committees, linking key activity areas with Executive Committee representation. The restructuring helps meet member demand for more engagement opportunities through the use of more nimble Taskforces. This change will significantly increase the amount of short-term, project-oriented opportunities, allowing more members to be actively involved in the work of the organization.

NEW WEBSITE
The AOA’s new and more mobile friendly website launched in early spring 2016. The Member Center features AOA Member-only news and opportunities, archived issues of AOA News and AOA This Week. Not sure how to log-in? Contact the AOA Headquarters for assistance.

ACCEPT DOs AS MEMBERS
In August 2016, the proposed Bylaws Amendment to accept DOs as Active Members of the AOA passed with over 25% of the voting membership participating. Given the transition to a single accreditation system by 2020, the distinction between allopathic and osteopathic accredited program training requirements will essentially vanish. As an organization focused on leadership, critical issues, and education, the acceptance of established DO leaders as Active Members is a critical step in aligning AOA membership with the evolving health care environment.

MEMBERSHIP SURVEY
Every three years, the AOA conducts a survey of its Members to assess current member needs and interests, program evaluations, and more. This fall, the AOA sent the 2016 survey to AOA Members. In order to focus initiatives and programs to most effectively meet Member needs, survey data is compiled, analyzed, and shared with all committees and staff liaisons for use over the upcoming three years.
REFLECTING ON 2015: FINANCIAL OVERVIEW

While AOA remains fiscally viable with a healthy reserve fund, the volatile markets in 2015, particularly in the last quarter of the year, negatively impacted investment revenue as of December 31, 2015. As a result, total AOA Portfolio investment income at year-end was ($388,927) with a total value of $6,682,190. This compares to total investment income at 2014 year-end of $467,965. However, as of May 31, 2016, the AOA’s investment portfolio had recovered 4% of the value of the portfolio from this year-end snapshot. In addition, the OREF transferred Endowment asset ownership and management to the AOA in June 2015. The transfer was for AOA’s portion of the OREF Endowment fund, except for planned gifts where AOA is a partial beneficiary.

As of December 31, 2015, the Endowment value was $1,767,434 with net earnings of ($111,835). The AOA ended the 2015 year with $7,545,727 in total liabilities and net assets, calculated on an accrual basis.

Medical device companies have reduced the overall amount provided for charitable contributions. Despite the decline in orthopaedic device company support for medical association activities, in June 2015, the AOA secured $422,053 in support from Industry. Industry’s objectives are primarily focused on supporting clinical education, aligning directly with their product lines, and less on leadership programs.

AOA programs continue to increase in popularity and participation. The AOA received corporate support for a variety of its programs, offerings, and initiatives from: Amgen, Biomet, DePuy Synthes, Hospital Corporation of America, Journal of Bone & Joint Surgery, Lilly, Merck, Smith & Nephew, and Zimmer.

IMPLICATIONS FOR 2016 AND 2017

Given these changes, the AOA is striving to become a self-sustaining organization which operates and expands programs to meet member needs without reliance on industry support. Our organization and programs will grow and meet the demands of our members in a changing landscape of mergers, hospital-employment, shifts in residency training, and more.
PROMOTING LEADERSHIP: CULTIVATING THE NEXT GENERATION

C. MCCOLLISTER EVARTS RESIDENT LEADERSHIP FORUM

The 2016 Resident Leadership Forum marked its 14th anniversary with the highest number of nominees (197) since it began. Institutions may nominate up to two outstanding PGY4 residents to participate. A total of 186 PGY4 residents attended the 2016 program, a slight increase over 2015. On average, 70% of attendees take the next step in their leadership journey by joining the AOA’s Emerging Leaders Program.

For the second year, the Young Leaders Committee and the Council of Orthopaedic Residency Directors (CORD) Program Education Committee planned and implemented a solutions-focused collaboration between Resident Leadership Forum participants and CORD Affiliates. These PGY4 Residents worked in small groups with Program Director facilitators on topics such as Apathy, and Service and Education. A report-out session was held the following day at the Resident Leadership Forum, and a summary was circulated to all CORD Affiliates.

EMERGING LEADERS PROGRAM

Introduced in 2004 as a bridge between the Resident Leadership Forum and full AOA membership, the Emerging Leaders Program continues to recognize, develop, and shape future orthopaedic leaders. Most Emerging Leaders are in their 30’s, but since program eligibility has been extended to the 13th year of clinical practice, the number of individuals in their 40’s has increased.

INCREASING LEADERSHIP

- Select 24 Emerging Leaders from a variety of subspecialties to serve three-year terms for the JBJS Associate Editor Panel
- Participate on the AOA Abstract Review Taskforce
- Serve as ex-officio members of the Young Leaders Taskforce, which plans educational activities for members of the Emerging Leaders Program
- Assist with the development of AOA webinars
- Contribute articles to the Emerging Leaders Messenger
- Submit scientific posters for display at AOA’s Annual Leadership Meetings
- Attend the AOA Regional and Annual Meetings

THE EMERGING LEADERS FORUM

Each June, members of the AOA’s Emerging Leaders Program have the opportunity to participate in the Emerging Leaders Forum, which takes place during the AOA Annual Leadership Meetings. The AOA had record-breaking attendance at the 2016 Emerging Leaders Forum, with 101 participants.

It seems each year that this is single-handedly one of the best conferences of the year, and it only gets better.

— 2016 Emerging Leader Forum attendee
PROMOTING LEADERSHIP: LEADERSHIP EDUCATION

In 2015-2016, the AOA offered Members and other AOA non-member affiliates the opportunity to take advantage of a continuum of learning by way of the following offerings:

AOA LEADERSHIP IMMERSION SERIES AT THE UNIVERSITY OF CHICAGO BOOTH SCHOOL OF BUSINESS

In September 2015, the AOA held its final module of the Leadership Immersion Series with Module Four: Leading High Performing Teams. Given that leadership education is offered at institutions across the country, orthopaedic surgeons have increased opportunities to gain skills locally. Therefore, the Leadership Development Committee ended this Chicago-based series in order to focus on more desired learning formats.

AOA REGIONAL MEETINGS

An educational grant by the Hospital Corporation of America supported the AOA’s launch of two successful regional leadership and networking meetings in Chicago and New York City for AOA Members and Emerging Leaders, in tandem with a resident leadership training session. By offering leadership events regionally, the AOA is better able to more effectively provide increased member networking and leverage the expertise of local leadership experts specifically targeted for our members. In Chicago, John G. Burrows, PhD of the University of Chicago Booth School of Business presented on Strategic Leadership. In New York, Ken Langone, co-founder of the Home Depot, shared Lessons in Leadership.

“I appreciated the opportunity to meet with my colleagues from around the area. I really enjoyed listening to a business/sociopsychological perspective on how our health care systems may operate.” — Chicago Regional Meeting participant

AOA WEBINARS

The AOA bolstered its offerings for live learning in the form of webinars. Leadership development webinars in 2015-2016 received positive reviews for: Keys to Facilitate Change, Clinical Teams, Understanding Financial Statements, Strategies for a Successful Academic Team, Asset Planning and Coaching. These webinars, offered live and then recorded for on-demand playback in the AOA’s e-Institute, contribute to a thoughtful portfolio of leadership courses available on the AOA’s website.

AOA e-INSTITUTE

The AOA e-Institute continues to expand its offerings of recorded webinars and symposia. A recent partnership with JBJS will enhance the value of offerings in providing CME for select recorded webinars. Through the e-Institute, members, non-member affiliates, and young orthopaedic leaders have 24/7 access to self-paced education to support their critical role in shaping the future of health care in a complex and ever-changing landscape.
INNOVATING EDUCATION:
ENRICHING DYNAMIC EDUCATORS

COUNCIL OF ORTHOPAEDIC RESIDENCY DIRECTORS (CORD)
CORD is one of the AOA’s most successful programs, with participation by more than 96% of US allopathic orthopaedic residency programs. Established in 2009, the AOA’s Council of Orthopaedic Residency Directors (CORD) program provides orthopaedic educators with a valuable network to exchange best practices and ideas with colleagues dealing with similar situations/issu. Osteopathic and Canadian programs are joining the AOA’s CORD program in ever-increasing numbers.

2016 CORD ACHIEVEMENTS
• As of September 2016, 161 institutional members are currently enrolled; including nine osteopathic programs and four Canadian programs
• 650+ affiliate members are engaging in CORD programming through their institutional membership
• CORD Affiliates receive regular communications via The CORD Report
• The online forum, The CORD Exchange, facilitates an active discussion of ideas/feedback between CORD Affiliates
• Following both the March and June CORD Conferences, attendees received access to a new resource or key takeaways
• CORD Leadership engaged in an extensive strategic planning exercise to prioritize activities

CORD has made me a more informed and stronger PD, for sure. — CORD Needs Assessment evaluation
CORD EDUCATION
CORD Affiliates gather twice annually for AOA’s CORD Conferences. A shorter spring conference held during the AAOS Annual Meeting tends to include more Residency Coordinators. The longer summer conference held at the AOA’s Annual Leadership Meeting draws significant attendance that includes AOA Members and Emerging Leaders.

SPRING CORD CONFERENCE
Brett R. Levine, MD and the CORD Education Committee developed the 2016 spring CORD Conference agenda. More than 254 participants attended the conference with an average of two CORD Affiliates from each of 115 of the 161 CORD institutions.

SUMMER CORD CONFERENCE
Scott E. Porter, MD and the CORD Education Committee developed the 2016 summer CORD Conference agenda centered around the theme of selecting the correct resident or talent. This concept of creating content around a theme in order to determine solutions for specific training areas was new in 2016. Over 85% of those completing evaluations indicated the new format met or exceeded their needs, with nearly 90% specifying that they would recommend the conference to a colleague. As a result of conference discussions, a sample standard letter of recommendation was developed and is now available for CORD Member programs.

CORD WEBINARS
Following the successful 2015 CORD four-part webinar series, the AOA’s 2016 CORD webinar series provides timely, critical content for those involved in training residents and fellows. All CORD webinars are recorded and available through the AOA’s e-Institute for on-demand learning.

DEPARTMENT LEADERSHIP FORUMS
Held at the AOA Annual Leadership Meetings, the two Department Leadership Forums are quite popular sessions for academic orthopaedists. Planned by a committee of academicians to address challenges and issues facing Department Chairs and other academic leaders, participants value the open discussions, specific examples, high-level and concrete suggestions, and points for improvement.

In 2016, the two topics were Leadership Development from Within Your Department, moderated by Steven M. Theiss, MD, and Maintaining an Academic Focus in the Face of Expanding Health Care Networks, moderated by Claude E. Nichols, MD.
INNOVATING EDUCATION

TRAVELING FELLOWSHIPS
Based on the success of the NATF leadership component, the Leadership/Fellowships Committee will work to incorporate a leadership component into all future AOA Traveling Fellowships.

AMERICAN-BRITISH-CANADIAN (ABC)
2016 TOUR
AOA members and their institutions hosted seven ABC Fellows from Australia, Great Britain, New Zealand and South Africa as they traveled through the Midwestern United States and Canada, concluding their trip at the AOA’s Annual Leadership Meetings in Seattle, Washington.

AUSTRIAN-SWISS-GERMAN (ASG)
2016 TOUR
Two fellows from the United States, one fellow from Canada, and one fellow from the United Kingdom traveled to Austria, Switzerland, and Germany from April 3, 2016 through May 1, 2016. The ASG fellows toured science labs and hospitals, viewed interesting cases in operating rooms, gained insights on leadership roles from department heads, exchanged many ideas, and presented their talks.

ASSOCIATION OF SOUTHEAST ASIAN NATIONS (ASEAN)
2016 TOUR
AOA Members and their institutions hosted six fellows representing Thailand, Indonesia, Malaysia, Myanmar, Vietnam, and the Philippines as they traveled through the Western United States, concluding their tour at the AOA’s Annual Leadership Meetings in Seattle, Washington.

JAPANESE ORTHOPAEDIC ASSOCIATION (JOA)
2016 TOUR
Four JOA Fellows from the United States traveled to orthopaedic programs across Japan in May, where they observed surgeries, delivered presentations, met surgeons/researchers, and discussed Japanese and American health care systems.
AOA ANNUAL MEETING

AOA ANNUAL LEADERSHIP MEETING
2016 evaluation results indicated that the AOA membership continues to value AOA Annual Meetings for the networking and discussions of critical issues facing our specialty.

The 2016 program included a new Wealth Management Session for members and guests. Members were strongly encouraged to invite non-member colleagues to experience AOA’s premier event in order to raise the AOA’s visibility within the orthopaedic community. Consistent with years past and given the majority of AOA members residing on the east coast, overall registration decreased with a west coast destination. However, the AOA remains committed to balancing meeting locations in order to offer accessibility and convenience for members across the US and Canada.

LEADERSHIP INSTITUTE
In 2015, the AOA implemented the first Leadership Institute, held at the Annual Meeting in Providence, RI with University of Chicago Booth School of Business faculty Gregory Bunch at the helm. The topic was Strategic Thinking and Decision-Making with a registration of 88.

During the 2016 Annual Leadership Meeting, 61 members and orthopaedic faculty participated in the Leadership Institute. This year’s topic was Strategies and Models for Leading Change in the Orthopaedic Environment led by Kurt C. O’Brien, MHROD, University of Washington.

COMOC: MEETING OF THE COMBINED ORTHOPAEDIC ASSOCIATIONS
In April 2016, the AOA participated in the 13th Meeting of the Combined Orthopaedic Associations in Cape Town, South Africa. This international meeting is held every six years. Peter M. Murray, MD chaired the AOA portion of the program, Developing Orthopaedics and the Super Specialist, which included a:

- Plenary lecture on Certification of Competency Throughout an Orthopaedic Surgeon’s Career given by Terrance D. Peabody, MD
- Medicolegal session on US Healthcare in the New Era: Consolidate, Integrate, Perpetuate presented by Khaled J. Saleh, MD, MSc, FRCSC, MHCM
- Symposium on Orthopaedic Workforce Needs: Challenges in a Changing Environment moderated by Peter M. Murray, MD
- Symposium on Interdisciplinary Alliances: Forging Synergistic Partnerships to Enhance Patient Care moderated by Stuart L. Weinstein, MD
OWN THE BONE: ADDRESSING CRITICAL ISSUE

The AOA’s national quality improvement program, Own the Bone, continues to engage and support orthopaedists and their teams in screening and treating fragility fracture patients for their underlying bone health.

2016 OWN THE BONE MILESTONES

- The program has now recruited participating centers in all 50 states and the District of Columbia

- Registry documentation of bone health management of fragility fracture patients by participating centers surpassed over 49,000 initial screening and follow up patient encounters

- The number of society partnerships grew to 18 through the Own the Bone Organizational Alliance, and include the AAOS, OTA, NAON, PAOS, and NASS

- The AOA, the American Joint Replacement Registry (AJRR) Orthopaedic Quality Resource Center, and AAHKS formed a new collaboration to provide:
  - A unified reporting platform
  - 2016 Qualified Clinical Data Registry (QCDR) for CMS quality reporting for Physician Quality Reporting System (PQRS)
ADVANCING THE FUTURE: ORTHOPAEDIC LEADERSHIP IN THE CARE OF OLDER ADULTS WITH FRAGILITY FRACTURES

SUPPORTING A GREATER MISSION

By 2025, American orthopaedic surgeons are projected to see three million fragility fractures patients per year, a 50% increase over 2005. Care of the geriatric hip fracture was the third most expensive musculoskeletal diagnosis for CMS in 2011, and up to 25% of hip fracture patients die within a year of injury.

In the US:

• 8.2 million women and 2 million men age 50 and over have osteoporosis
• 51.4 million women and 35 million men have low bone mass and are at a higher risk of fracture

All low trauma fractures are associated with increased mortality risk for 5-10 years after the fracture. Own the Bone is responding to this medical, societal, and economic challenge by promoting the initiation of orthopaedic care coordination to ensure evaluation and treatment to prevent subsequent fractures to reduce fracture risk in our aging population.

TOOLS AND EDUCATION FOR ORTHOPAEDISTS AND THEIR TEAMS

Own the Bone supports clinicians at participating centers to implement best practices in secondary fracture prevention for patients who present with a fragility fracture. The program has expanded clinician and patient education through clinician user groups, live education and symposia, and a CME-accredited webinar series. Its patient registry is helping to track important process measures for appropriate post-fracture delivery of care and care coordination.

FOLLOW US

AOA members and others are invited to follow

@owntheboneAOA to receive tweets about hot topics in bone health, program news, and upcoming Own the Bone symposia and webinar events

linkedin.com for program news, updates, opportunities, and more
DEAR COLLEAGUE,

Over the past 50 years, participating in the many activities of the AOA has been an important part of my orthopaedic life. With its unique focus on leadership, the AOA addresses critical issues facing our specialty.

The AOA provides access to knowledge and relationships that translate into better opportunities for us. Please consider joining me in supporting the organization that provides so many special recognition as “Founders” of the 1887 Circle.

The 1887 Circle is a premium leadership giving alliance directly to the AOA, payable within five years, will receive special recognition as “Founders” of the 1887 Circle. Donors who make new contributions of $50,000 or more will be recognized as “Founders” of the 1887 Circle. Your gift will provide a resilient foundation for adapting to continuous change, provide a resilient foundation for adapting to continuous change, expand opportunities for established and aspiring leaders, enhance signature programs, and forge new territory in career development skills—including leadership, collaboration, and education.

A FIVE-YEAR FUNDRAISING CAMPAIGN

During the 2016 Annual Leadership Meeting in Seattle, the AOA’s Executive and Development Committees launched a five-year comprehensive giving campaign: the Campaign for Tomorrow. The Campaign goal is to reinforce and expand the AOA’s mission as it helps nurture and educate leaders at every step along the orthopaedic career path: cultivating the next generation; enriching dynamic educators; and fostering role models.

HOW FUNDS ARE INVESTED AND USED

100% of your contribution will be invested and directed to support the AOA signature program(s) of your choice. Donations continue to be invested into a restricted fund separated from all other AOA investments. These donor-designated funds are maintained and used at 5% annually, only for the programs specified by each donor.

PROMOTE LEADERSHIP

• Resident Leader Activities
• Emerging Leaders Program

INNOVATE EDUCATION

• Council of Orthopaedic Residency Directors (CORD) Program and Academic Leadership
• Traveling Fellowships (general)
• American-British-Canadian Traveling Fellowship
• North American Traveling Fellowship
• Austrian-Swiss-German Traveling Fellowship
• Japanese Orthopaedic Association Traveling Fellowship
• Carousel/Presidential Activities

ADVANCE THE FUTURE

• Leadership Development (general)
• Own the Bone Quality Improvement Program
• Mission Critical Education

Please visit the www.aoassn.org or contact the AOA at (847) 318-7330 to learn more about ways to give, recognition, and tax benefits.

Bernard F. Morrey, MD
AOA President, 2003

I find myself either starting or ending with the privilege I have had at the AOA to work with such exceptionally talented individuals.

When I’m asked to reflect on my career, I find myself either starting or ending with the privilege I have had at the AOA to work with such exceptionally talented individuals.

Chair, Development Committee
C. McCollister Evarts, MD

HOW FUNDS ARE INVESTED AND USED

100% of your contribution will be invested and directed to support the AOA signature program(s) of your choice. Donations continue to be invested into a restricted fund separated from all other AOA investments. These donor-designated funds are maintained and used at 5% annually, only for the programs specified by each donor.

PROMOTE LEADERSHIP

• Resident Leader Activities
• Emerging Leaders Program

INNOVATE EDUCATION

• Council of Orthopaedic Residency Directors (CORD) Program and Academic Leadership
• Traveling Fellowships (general)
• American-British-Canadian Traveling Fellowship
• North American Traveling Fellowship
• Austrian-Swiss-German Traveling Fellowship
• Japanese Orthopaedic Association Traveling Fellowship
• Carousel/Presidential Activities

ADVANCE THE FUTURE

• Leadership Development (general)
• Own the Bone Quality Improvement Program
• Mission Critical Education

Please visit the www.aoassn.org or contact the AOA at (847) 318-7330 to learn more about ways to give, recognition, and tax benefits.

Bernard F. Morrey, MD
AOA President, 2003

I find myself either starting or ending with the privilege I have had at the AOA to work with such exceptionally talented individuals.

When I’m asked to reflect on my career, I find myself either starting or ending with the privilege I have had at the AOA to work with such exceptionally talented individuals.

Chair, Development Committee
C. McCollister Evarts, MD
ADVANCING THE FUTURE

CAMPAIGN GOAL PROGRESS
Nearly $2.5 million raised toward the Campaign for Tomorrow goal of $8 million (as of October 1, 2016)

GIFTS OF ALL SIZES ARE APPRECIATED
New gifts of cash and/or stock made by the fifth year of the Campaign for Tomorrow will allow AOA leadership to support programs more immediately, addressing current and near-future needs and developments.

Blended gifts, which include a planned gift component, with cash or stock, are also welcome, and will provide a more substantial gift over an extended time frame.

RECOGNITION LEVELS

CASH
- up to $999: Friends
- $1,000-$4,999: Patrons
- $5,000-$9,999: Sustainers
- $10,000-$19,999: Partners
- $20,000-$29,999: Leader
- $30,000-$49,999: Diplomat

STOCK
- $50,000-$99,999: Ambassador
- $100,000-$249,999: Innovator
- $250,000-$499,999: Visionary
- $500,000-$999,999: Transformaional
- $1,000,000+: Virgil P. Gibney Society

WAYS TO GIVE

BLENDED GIFTS

WITH YOUR SUPPORT
The future of the AOA will sustain its commitments to promoting, innovating and advancing major leadership and educational initiatives. Together, as the AOA, we can discover opportunities, and create solutions to the systemic issues facing our profession.
THANKING OUR 2016 SUPPORTERS (as of October 1, 2016)

We gratefully acknowledge the following individuals for 2016 received contributions, which directly benefit signature AOA programs. With such a select membership, each member’s contributions to the specialty and to the AOA make a significant difference. All gifts beginning June 22, 2016 are recognized as contributions to the Campaign for Tomorrow.

### ADVANCING THE FUTURE: DONOR RECOGNITION

#### INNOVATOR ($100,000 - $249,999)
- C. McCollister Evarts, MD

#### AMBASSADOR ($50,000 - $99,999)
- Todd J. Albert, MD

#### DIPLOMAT ($30,000 - $49,999)
- None at this level

#### LEADER ($20,000 - $29,999)
- Michael A. Simon, MD

#### PARTNERS ($10,000 - $19,999)
- Louis U. Bigliani, MD
- Dr. Michael & Elizabeth Chapman
- Gregory J. Della Rocca, MD, PhD, FACS
- Dr. Alexander & Patrice Ghanayem
- Alan S. Hiliibrand, MD
- Stephen L. Kates, MD
- Vincent D. Pellegrini, Jr., MD
- Harry E. Rubash, MD
- Thomas P. Sculco, MD
- Dan M. Spengler, MD

#### SUSTAINERS ($5,000 - $9,999)
- Howard S. An, MD
- April D. Armstrong, MD, FRCSC
- & Mark Hubbard
- Dr. John & Elizabeth Heiner
- John G. Heller, MD
- Dr. Bernard & Carla Morrey

#### PATRONS ($1,000 - $4,999)
- S. Elizabeth Ames, MD
- Dr. Paul & Veronica Anderson, MD
- Dr. David & Claudia Attarian
- Scott F.M. Duncan, MD, MPH, MBA
- James R. Ficke, MD
- Gary E. Friedlaender, MD
- Kevin L. Garvin, MD
- Rex C. Haydon, MD, PhD
- Dr. William & Eileen Henriksen
- James H. Herndon, MD
- Dr. James & Sandra Hill
- Richard Iorio, MD
- Kyle J. Jeroy, MD
- Donald B. Kettelkamp, MD
- William N. Levine, MD
- Dr. J. Lawrence & Linda Marsh
- Simon C. Mears, MD, PhD
- Mark Mighell, MD
- Vasilios Moutzouros, MD
- Ahmad N. Nassr, MD
- Theodore W. Parsons, III, MD, FACS
- Terrance D. Peabody, MD
- Dr. Raoul & Mari Rodriguez
- Brian T. Smith, MHA, BEE
- Robert S. Sterling, MD
- Stephen M. Theiss, MD
- Kristy L. Weber, MD
- Dr. Frank & Ann Wilson
- Jennifer Moriatis Wolf, MD
- Dr. Michael & Karen Yaszewski

#### TRIBUTE GIFTS
- The AOA is pleased to recognize tribute gifts made in honor or in memory of colleagues and friends.

#### IN HONOR OF
- C. McCollister Evarts, MD
- - Sanford E. Emery, MD, MBA
- - Edward N. Hanley, Jr., MD
- - Gary E. Friedlaender, MD
- - Dr. John & Elizabeth Heiner

#### IN MEMORY OF
- Albert B. Ferguson, MD
- - Dr. John & Elizabeth Heiner
- - J. Leonard Goldner, MD
- - David E. Attarian, MD, FACS

We apologize for any errors or omissions, and we ask that you bring them to our attention: e-mail donations@aoassn.org

### LIFETIME GIVING DONORS (as of October 1, 2016)

This special set of donors have made combined contributions of $30,000 or more already received by the AOA. Future pledge installments are not recognized under this category. Thank you to these individuals who have unflaggingly demonstrated financial commitment to the AOA and its programs, year in and year out.

#### CHAMPION ($250,000 - $499,999)
- C. McCollister Evarts, MD

#### INNOVATOR ($100,000 - $249,999)
- None at this level

#### AMBASSADORS ($50,000 - $99,999)
- Todd J. Albert, MD
- John J. Callaghan, MD
- Alan S. Hiliibrand, MD
- Michael A. Simon, MD

#### DIPLOMATS ($30,000 - $49,999)
- Dr. Scott & Mary Boden
- Dr. Alexander & Patrice Ghanayem
- Regis J. O’Keefe, MD, PhD
- Vincent D. Pellegrini, Jr., MD
- Dan M. Spengler, MD
- Marc F. Swiontkowski, MD
- Joseph D. Zuckerman, MD

We apologize for any errors or omissions, and we ask that you bring them to our attention: e-mail donations@aoassn.org
ADVANCING THE FUTURE: 
DONOR RECOGNITION

THANKING OUR 2015 SUPPORTERS (January - December 2015)

AMBASSADOR ($50,000 - $99,999)
C. McCollister Evarts, MD

DIPLOMAT ($30,000 - $49,999)
None at this level

LEADER ($20,000 - $29,999)
Sanford E. Emery, MD, MBA

PARTNERS ($10,000 - $19,999)
Kevin P. Black, MD
William H. Harris, MD
Alan S. Hiliibrand, MD
Terry R. Light, MD
Regis J. O’Keefe, MD, PhD
Peter J. Stern, MD
James R. Urbaniaik, MD
Rick W. Wright, MD

SUSTAINERS ($5,000 - $9,999)
Howard S. An, MD
Nitin M. Bhatia, MD
Charles R. Clark, MD
Kenneth A. Egol, MD
Serena S. Hu, MD
L. Scott Levin, MD, FACS
Vincent D. Pellegrini, Jr., MD
Marc F. Swiontkowski, MD
Arnold-Peter C. Weiss, MD
Joseph D. Zuckerman, MD

PATRONS ($1,000-$4,999)
S. Elizabeth Ames, MD
D. Greg Anderson, MD
April D. Armstrong, MD, FRCS
Robert E. Atkinson, MD
David E. Attarian, MD, FACS
David C. Ayers, MD
William L. Bargor, MD
Wayne S. Berberian, MD, MBA
Joseph Bernstein, MD
B. Hudson Berrey, Jr., MD
Scott D. Boden, MD
Andrew D. Bunta, MD
David L. Cannon, MD, MBA
James E. Carpenter, MD
Henry R. Cowell, MD, PhD
Gregory J. Della Rocca, MD, PhD
John R. Denton, MD
James R. Ficke, MD
Alexander J. Ghanayem, MD
John R. Green, MD
Christopher D. Harner, MD
Robert A. Hart, MD

IN HONOR OF
Sawyer Alexandra
- Alan P. Friedman, MD
- C. McCollister Evarts, MD
- Sanford E. Emery, MD, MBA
& Gwen A. Emery, MD
Louise Soslowsky, MD
in honor of the mentorship award
- Joseph Bernstein, MD
James R. Urbaniaik, MD
- L. Scott Levin, MD, FACS
Stuart L. Weinstein, MD
- Robert A. Hart, MD

IN MEMORY OF
Hugh P. Chandler, MD
in memory of her beloved husband of 42 years
- Elizabeth K. McCombs
Frederick N. Meyer, MD
- S. Elizabeth Ames, MD
- David Hakbum Kim, MD
J. Leonard Goldner, MD
- L. Scott Levin, MD, FACS
Stuart L. Weinstein, MD
- Robert A. Hart, MD

FRIENDS (Up to $999)
Jaimo Ahn, MD
Daniel T. Altman, MD
William C. Andrews, Jr., MD
Mathias P.G. Bostrom, MD
Jonathan P. Broman, MD
Laura Marie Bruse Gehrig, MD
Charles Cassidy, MD
Norman B. Chutkan, MD
Joseph C. DeFiore, Jr., MD
Kenneth E. DeHaven, MD
Gregory L. DeSilva, MD
Joshua Scott Dines, MD
Alan P. Friedman, MD
Charles A. Goldfarb, MD
James A. Goulet, MD
James T. Guille, MD
John E. Handelsman, MD
FRCS, MCh Orth
William J. Hopkinson, MD

We apologize for any errors or omissions, and we ask that you bring them to our attention; e-mail donations@aoassn.org
ADVANCING THE FUTURE:
1887 CIRCLE FOUNDERS

The 1887 Circle is a premium leadership giving alliance helping shape the future of the AOA and orthopaedics. These donors have made direct pledges of $50,000+ over five years to the Campaign for Tomorrow.

We gratefully acknowledge the first AOA Members to join the 1887 Circle Founders, and recognize them for their pledges, which will greatly impact the future of the AOA, orthopaedics, and the musculoskeletal community. (as of October 1, 2016)

TRANSFORMATIONAL
VIRGIL P. GIBNEY SOCIETY
($1,000,000+)
C. McCollister Evarts, MD

VISIONARY
($500,000-$999,999)
None at this level

CHAMPION
($250,000-$499,999)
None at this level

INNOVATOR
($100,000-$249,999)
Michael A. Simon, MD

AMBASSADORS
($50,000-$99,999)
Todd J. Albert, MD
Louis U. Bigliani, MD
Kevin P. Black, MD
Dr. Scott & Mary Boden
Dr. Michael & Elizabeth Chapman
Gregory J. Della Rocca, MD, PhD, FACS
Sanford E. Emery, MD, MBA
& Gwen A. Emery, MD
Richard J. Friedman, MD, FRCSC
Dr. Alexander & Patrice Ghanayem
Edward N. Hanley, Jr., MD
Alan S. Hilibrand, MD
Stephen L. Kates, MD
William N. Levine, MD
Terry R. Light, MD
Dr. J. Lawrence & Linda Marsh
Dr. Bernard & Carla Morrey
Regis J. O’Keefe, MD, PhD
Vincent D. Pellegrini, Jr., MD
Harry E. Rubash, MD
Thomas P. Sculco, MD
Dan M. Spengler, MD
Peter J. Stern, MD
Marc F. Swiontkowski, MD
James R. Urbaniak, MD
Dr. Rick & Lana Wright
ADVANCING THE FUTURE:
TRANSFORMATIONAL VIRGIL P. GIBNEY SOCIETY

The highest giving level of the 1887 Circle is the Transformational Virgil P. Gibney Society recognizing individuals who give at the $1,000,000 level or higher. Dr. Gibney played an essential role in the AOA's founding, and is the only President to have served in the role twice: once in 1887 as the AOA’s first President, and then again, in 1912 as the 26th President.

ABOUT VIRGIL P. GIBNEY, MD

Dr. Gibney was a leader and influencer of his time—as are the members who join the Transformational Virgil P. Gibney Society. A giant in orthopaedics and a highly-influential AOA Member, we named this highest giving level after him.

ANNOUNCING THE FIRST MEMBER:
RECOGNIZING THE LEADERSHIP OF
C. MCCOLLISTER EVARTS, MD

We are pleased to announce that C. McCollister Evarts, MD has made a transformational gift of one million dollars to the AOA’s Campaign for Tomorrow. This gift comes from Dr. Evarts’ significant commitment to the AOA. We cannot thank him enough for his vision, drive, and dedication. Dr. Evarts’ exceptional generosity to the AOA with this financial gift is not one he has given lightly, but one which will help ensure the AOA’s unique leadership focus and influence within orthopaedics.

In recognition of Dr. Evarts’ transformational gift, the Executive Committee has chosen to honor him by renaming the Resident Leadership Forum as the C. McCollister Evarts’ Resident Leadership Forum.

ABOUT C. MCCOLLISTER EVARTS, MD

Dr. Evarts’ impact on orthopaedics has been significant. Among his many achievements, he has co-authored more than 200 articles, edited a number of publications, held a wide range of visiting professorships and appointments, and participated on innumerable committees. He has served as Chair of two Orthopaedic Departments, CEO and Dean of two academic health centers, and has been the recipient of many honors and awards, including the AOA’s Distinguished Contributions to Orthopaedics Award in 2006. Dr. Evarts has served as President not only for the AOA, but also for the AAHC, Hip Society, AAOC, ABOS, and OMeGA Medical Grants Association. He is a member of the Institute of Medicine. His proudest accomplishment, however, is his family. Father of three, dedicated “GPa” to 11. He frankly states that without the support of family and friends, all other achievements are diminished.
2017: LOOKING TO TOMORROW

VISION FOR 2017
As health care delivery transforms and evolves, the AOA community of leaders will be working to influence the broader orthopaedic community. The AOA is forging ahead to promote leadership, innovate education, and advance the future.

We create achievements together-addressing critical issues through dynamic programs that transcend subspecialty and clinical practice.

AMPLIFY YOUR INFLUENCE:
Be a part of the promise to our community’s future.

The AOA Community of Leaders in Action.