

MINUTES of the SAGA MEETING OCTOBER 26, 2015

The annual SAGA meeting was held in conjunction with the ASA Annual Meeting, at the Meze Restaurant in San Diego. The meeting was attended by approximately 40 US and international members. After a social hour, the meeting commenced with President Michael Lewis thanking everybody for coming, followed by announcements.

Dr. Lewis announced that the ASA has now formed a geriatric educational track for the annual ASA meeting. He also spoke to the possibility of the IARS establishing a geriatric anesthesia section of Anesthesia & Analgesia, and that the IARS is considering a formal affiliation with SAGA. Lastly, the ASA is asking for educational programs on delirium and POCD for the 2016 meeting.

Although not news to anyone, the loss of Jeff Silverstein was announced. A number of people spoke about the significance of Jeff's contributions to geriatric anesthesia, including

1. A member of the ASA Committee on Geriatric Anesthesia for more than 20 years.
2. Long-time liaison from the ASA to the American Geriatrics Society. Jeff was instrumental in guiding the many funded projects by the AGS toward enhancing geriatric education and research among non-medical specialties, mostly notably the Jahnigan award and its incorporation in the NIH GEMSSTAR award. Jeff's participation culminated as Chair of the AGS' Council for the Section for Enhancing Geriatric Understanding and Expertise among Surgical and Medical Specialists (SEGUE).
3. NIH funded researcher.
4. Mentor to many, including Stacie Deiner, his wife and colleague.
5. Innumerable panel presentations to multiple societies.
6. Editor of the second edition of Geriatric Anesthesiology

In addition, Jeff had a larger than life personality and was a wonderful friend to many of us. We will miss his knowledge and insight.

In tribute, SAGA hopes to establish an endowed fund in Jeff's name that will support a talk at the annual SAGA meeting.

A Treasurer's report was provided by Alec Rooke. Dues garnered SAGA just over \$3800. Expected expenses for the year include \$13 in WA registration and bank fees, an annual \$2000 donation to FAER to support research and education in geriatric anesthesia, and approximately \$3000 for the meeting costs. This will leave approximately \$11,800 in cash accounts, only slightly down from \$12,727.09 at the start of the year. SAGA membership totaled 53 for the year, plus some non-dues paying residents and medical students.

During our wonderful Greek food dinner, three people were elected as SAGA Board of Directors: Drs. Stacie Deiner, Rod Eckenhoff and Shamsuddin Akhtar to serve for 2016 and 2017.

After dinner, two talks were given with the first by Lis Evered. Lis spoke about the need to adopt terminology for the cognitive impairment and decline associated with anesthesia and surgery that is consistent with other medical disciplines including neurology, psychiatry and gerontology. If perioperative neurocognitive disorders are defined and classified in accordance with DSM-5 and NIA-AA criteria, then it will be possible to track the problem in a broader healthcare context, as well as encourage diagnosis and referral, identify high-risk patients, facilitate research and inter-disciplinary communication, and ultimately lead to improved perioperative outcomes for elderly individuals.

Next, Mark Neuman spoke initially of the progress being made by surgical specialties in geriatric care. He cited the ACS/Hartford Coalition for Quality in Geriatric Surgery which hopes to set standards and quality measures, the recently published ACS-NSQIP/AGS Guidelines, and the AAOS Hip Fracture Guidelines. The ACS-NSQIP project will add new variables to their nationwide data collection project in order to better examine factors influencing outcomes in older patients. A similar project, in conjunction with AAOS, will examine hip fracture outcomes. Dr. Neuman went on to describe ongoing research, specifically the REGAIN study which is a randomized study of spinal versus general anesthesia for hip fracture surgery. He concluded with the observation that anesthesiology as a specialty is behind these other specialties in working to providing scientific data on how anesthesia can affect patient centered outcomes.

The meeting was adjourned at approximately 9:30 PM.

Respectfully submitted,

Alec Rooke,

SAGA Treasurer

Mark Neuman,

SAGA Secretary

MINUTES of the SAGA MEETING OCTOBER 15, 2014

The annual SAGA meeting was held in conjunction with the ASA Annual Meeting, at the Hoshun Restaurant in New Orleans. The meeting was attended by approximately 40 US and international members. The meeting commenced with President Zhongcong Xie, thanking everybody for coming, and special appreciation to Tuoren Medical for their continued financial support of SAGA. SAGA Leadership was then handed over to President-Elect, Dr. Michael C. Lewis, Professor and Chair, Department of Anesthesiology, University of Florida Jacksonville. Dr. Lewis accepted the presidency of SAGA and elaborated on his vision for the SAGA in collaboration with international partners and ASA Geriatric Committee.

This was followed by the Treasurer's report from Dr. Alec Rooke. Dues garnered SAGA just over \$2600, plus the \$3000 donation from Tuoren Medical. Expected expenses for the year include \$28 in WA registration and bank fees, our annual \$2000 donation to FAER as voted by the membership at the meeting, and approximately \$1600 for the meeting costs. This will leave approximately \$12,700 in cash accounts, up from \$10,762.63 at the beginning of the year.

The meeting was then followed by two excellent presentations by Dr. Eckenhoff and Dr. Stacie Diener. Dr. Eckenhoff presented a detailed review of the first meeting of the International Delirium Society. All research presented at the meeting was succinctly summarized and recent clinical, translational and basic science developments were shared with the SAGA membership. Following Dr. Eckenhoff's presentation, Dr. Diener presented the collaborative work and challenges related to the development of the AGS/ACS "Delirium Guidelines", which will be available soon.

After a sumptuous meal of a variety of Chinese dishes, the new President-Elect, Secretary and three new Board members were elected. The President-Elect is Dr. Azocar Ruben, Secretary is Dr. Mark Neuman, and Dr. Rooke was re-elected Treasurer. Lastly, three new Members at Large were elected: Dr. John Mitchell (second term), Dr. Marek Brezinski and Dr. Tian-Long Wang. Meeting was adjourned at 10 PM.

Respectfully submitted,
Shamsuddin Akhtar,
SAGA Secretary

SAGA Annual Meeting: October 14, 2013

San Francisco Hilton, San Francisco, CA

Presidents Report – Zhongcong Xie

Meeting started with opening remarks from the SAGA President. He presented the accomplishments of the past year especially participation of international members was discussed. The possibility of establishing Geriatric Education Award and Geriatric Research Award was also discussed. These issues will be addressed further by the Board and SAGA leadership.

Treasurer's Report – Alec Rooke

Treasurer of SAGA presented the financial report. Before the current meeting there was \$18,000 in the account. Some \$6000 will be spent on the current meeting. SAGA will likely make a \$2000 donation to FAER as is typically done annually to support geriatric anesthesia research and education. A \$3,000 contribution to SAGA was received from industry funding (Tuoren Medical). More funding from industry or possibility of industry support for the meeting was discussed.

Venue and time for the next meeting

Board was to discuss venue and place for the next meeting. Since international groups have shown significant interest in SAGA, possibility of changing the venue and timing of the annual meeting was brought up. A suggestion of aligning the meeting with the IARS was discussed. Board to discuss and finalize the venue of the next meeting.

Increasing SAGA membership:

Need to increase society's membership was discussed. All active members were encouraged to reach out to other colleagues. Use of social media in promoting SAGA and in increasing SAGA membership was also proposed.

Establishment of Geriatric Track at the ASA was proposed. Similarly PBLD related to geriatric patients, as part of the ambulatory/ geriatric track was advocated.

Website:

The website needs to be updated and John Mitchell was appointed the new Webmaster.

Elections:

Martin Dauber, Stacie Diener and Roderic Eckenhoff were elected to serve as at-large Board members for 2014 and 2015.

IAPOCD Division

Formation of “International Anesthesia Perioperative cognitive dysfunction (IAPOCD)” as a division of SAGA was proposed and accepted by the membership. The purpose of this division “will be to collect and disseminate information, patient and physician education, do research collaboration and potentially offer CMEs. The Division will have a Chair and Secretary. Further addition will be made as necessary.

The business meeting was adjourned followed by presentation from Canadian, British and Australian representatives.

SAGA 2012 Annual Business Meeting

Date: Monday, October 15, 2012

Time: 5:45pm-6:15pm

Location: Renaissance Hotel, Washington, DC

1. The following individuals were elected to SAGA Board positions for the 2013-2014 years:
 - a. President-Elect: Michael Lewis
 - b. Secretary: Shamsuddin Akhtar
 - c. Treasurer: Alec Rooke
 - d. At-large Board Members: Gwen Boyd, John Mitchell, Mary Ann Vann
 - e. In addition, Zhongcong Xie assumes SAGA presidency and Frederick Sieber joins the Board as Immediate Past President.

2. Treasurer's report: As of just prior to the meeting, SAGA has \$17114 in the bank. Expenses for the year are projected to be approximately \$1300 for the website, \$40 for miscellaneous, \$2000 for FAER and \$5000 for the meeting. This would leave us with at least \$8700 at the end of the year (a good \$1000 higher than we started). In addition, Baxter is expected to donate \$2500 before the end of the year.

The SAGA website is moving to Network Solutions. That company is already our server, but they will now also be our website host. John Mitchell has volunteered to create the SAGA website on Network Solutions.

3. Activities at ASA 2013 meeting—two panels proposed so far for ASA 2013; deadline for further proposals December 4, 2012.

4. Proposed future SAGA initiatives
 - a. Development and proposal of quality measures for geriatric anesthesia care—Neuman and Barnett to follow up.
 - b. Development of CME offerings through SAGA focused on hot topics, including POCD and Medicare payment issues.

5. The business meeting adjourned in order to proceed with the social hour and the extended discussion on postoperative cognitive dysfunction organized by Zhongcong Xie and Roderic Eckenhoff.

Minutes of the 2011 SAGA Annual Meeting

Hilton Chicago
10/17/2011

The SAGA Annual Meeting was well attended by an international audience. After an introduction to the meeting by President Frederick Sieber, MD, President-Elect Zhongcong Xie, MD, PhD introduced the speakers for the three keynote presentations:

1.) Buwei Yu, MD, PhD, President of the Chinese Society of Anesthesiology, Professor and Chairman of the Department of Anesthesiology at Ruijin Hospital, Shanghai, spoke on the status of geriatric anesthesia in China.

2.) Arnold J. Berry, MD, MPH, Professor of Anesthesiology at Emory University School of Medicine, spoke on the status of geriatric anesthesia in the US.

3.) Denham Ward, MD, President of the Foundation for Anesthesia Education and Research. spoke on the involvement of FAER in research and education in geriatric anesthesia.

The Annual SAGA Business Meeting was held from 7:30 to 8:00 PM; SAGA members discussed and voted on the four following business items:

1. Board Elections, New Members:

Martin H. Dauber, MD
University of Chicago

Sheila Barnett, MD
Beth Israel Deaconess Medical Center

Bu Wei Yu, MD, PhD
Ruijin Hospital
Shanghai Jiaotong University
School of Medicine

SAGA is pleased to expand its international involvement with the election of Dr. Wu. His participation in the SAGA meeting and election to the Board is highlighted in the website for the Chinese Society of Anesthesiology (<http://www.csaol.cn/bencandy.php?fid=6&aid=5229>).

2. FAER Donation:

SAGA voted to donate \$2000 to FAER for the upcoming year.

3. Board membership rules:

SAGA voted to allow non-US SAGA members to serve on the SAGA board as long as they paid full membership dues.

4. Treasurer's Report:

After expenses related to the meeting and the FAER donation are paid, SAGA should end the year with a cash balance of just over \$7600. Expenses for the year were \$750 for the new website development, \$87 in other misc expenses including domain registration and website hosting, \$850 for this meeting (thank you to the Chinese Society for picking up the food tab), and \$2000 to FAER. Income for the year is estimated to be \$2200, all from membership dues.

Current membership is 40 Active, 2 Honorary, 1 Associate, 2 International and 36 resident or medical student members.

5. Website update:

The SAGA website and Facebook page are up and running. The plan for the future is to post meeting minutes online and begin soliciting corporate sponsorship.

Annual Meeting Minutes

October 17, 2010

Omni Hotel
San Diego, CA

1. Dr. Rooke presented the Treasurer's Report.
Income (to date): \$2925
Expenses (to date, including expenses for the annual meeting): \$3027
Expected year-end balance: \$11,134 (not including FAER donation)
2. Donation to the Foundation for Anesthesia Education and Research (FAER)
There was a discussion concerning making another donation to FAER. SAGA has done this annually for several years. A motion to donate \$2000 to FAER was passed unanimously.
3. Election of officers.
The following individuals were elected to the Board:

President-elect: Zhongcong Xie, MD, PhD

Secretary: Mark Neuman, MD

Treasurer: Alec Rooke, MD, PhD

At-large members: Ruben Azocar, MD
Ruth Burstrom, MD
Mary Ann Vann, MD

At year's end, Frederick Sieber, MD will become President and Christopher Jankowski, MD will become Immediate Past President. At-large Board Members Shamsuddin Akhtar, MD, Jacques Chelly, MD, PhD, MBA, and Jacqueline Leung, MD, MPH will complete their terms in 2011.

4. As in-coming President of the Board, Dr. Sieber, MD offered some comments regarding his goals and vision for SAGA. A wide-ranging discussion ensued during which members presented their assessment of the challenges and opportunities facing SAGA. Primary among these are increasing membership and increasing the activity and visibility of the organization. It was agreed that the Board would address these issues during upcoming conference calls.

Respectfully submitted,

Christopher J. Jankowski, MD

Minutes of the 2009 Annual Meeting of SAGA, the Society for the Advancement of Geriatric Anesthesia

Time: Sunday, October 18, 2009 from 5:00 – 8:00 pm

Venue: Elmwood Room of the New Orleans Hilton Riverside Hotel

Content:

1. Social events (5:00 to 6:00 pm):

A one hour cocktail party was held. Colleagues and friends were happy to see each other and chatted about their careers and life over the past year.

2. Research (6:00 to 7:30 pm):

Eight researchers from seven institutions presented their basic and clinical research results at the meeting. Each was given 10 minutes for the presentation and questions. Due to time constraints, only one or two questions were permitted per speaker. The institution, mentor, presenter and presentation are as followings:

From Harvard (Zhongcong Xie)

Zhipeng (David) Xu: Potential Dual Effects of Isoflurane on Abeta-induced Caspase Activation.

Yiyi (Laura) Zhang: The Mitochondrial Pathway of the Isoflurane-induced Apoptosis.

From Miami (Mike Lewis)

Lana Jones Mawhinney: "Isoflurane induced spatial learning deficits are linked to an elevation in NR2B subunit of the NMDA receptor in a subgroup of aged rats."

From UCSF (Jackie Leung):

Dr. Sakuro Kinjo: "Predictors of postoperative pain in older patients"

From University of Pennsylvania (Lee Fleischer):

Dr. Mark Neuman: "Variations in Hip Fracture Care: Insights from Medicare Data"

From Academic Department of Geriatrics, Guy's and St Thomas' NHS Foundation Trust, London, UK:

Dr. Tania Elias: Proactive Care of Older People Undergoing Surgery: Evaluation of a New Service-POPS Urology" (Age Anaesthesia Association abstract winner)

From Duke (Terri Monk):

Tameka Noel (BS - 4th year medical student at Duke): Does Preoperative Cognitive Status Predict Postoperative Cognitive Decline in Elderly Patients?

3. Keynote speaker (7:30 to 8:15 pm):

The guest speaker was Dr. William J. Lanier, Jr., M.D., Professor of Anesthesiology at Mayo Clinic and he is the Editor-in-Chief of Mayo Clinic Proceedings. His presentation was about the editor's view of the importance of spreading the word about geriatric anesthesia issues to the general medical community.

4. Business:

Three new board members were elected by the SAGA members at the meeting for the 2010-2011 term. They are Dr. Jacqueline Leung from University of California at San Francisco; Jacques Chelly from the University of Pittsburgh and Dr. Shamsuddin Akhtar from Yale University.

Respectfully submitted,
Zhongcong Xie, MD, Ph.D.
Secretary

Minutes of the Annual Meeting of the Society for the Advancement of Geriatric Anesthesia (SAGA)

Rosen Plaza Hotel

Sunday, October 19, 2008

Submitted by Fritz Sieber, Secretary

Research updates in areas of interest to Geriatric Anesthesia were given by:

Zhongcong Xie (Harvard) - Effects of inhalational anesthetics on caspase activation.

Lana Jones (Miami) - isoflurane effects in aged rats and the mechanism of elderly POCD.

Jeff Silverstein (Mt Sinai) - update on dexmedetomidine study.

Deb Culley (Harvard) - SAGA, how are we doing in research.

Outgoing President Sheila Barnett discussed the IOM report focused on retooling for an Aging America. Following Dr. Barnett's presentation, SAGA voted and passed a resolution that SAGA would support the implementation of the IOM recommendations.

Business topics discussed included:

a. Treasurer update- SAGA is fiscally sound with current cash of >\$15K.

b. SAGA speaker honorarium - the Board will decide this issue on an individual basis.

c. Several panels have been submitted to the ASA annual meeting on behalf of SAGA.

d. The board is in the planning stages of a 1-1 ½ day retreat for SAGA strategic planning including such issues as appointment of an event planner, networking for SAGA members, and a newsletter.

e. Dr. Rooke announced that the Second International Meeting on the Perioperative Care of the Older Patient will be held at the Hospital for Special Surgery in New York City on December 11, 2008. A brochure is attached.

The following persons were elected to office effective January 1, 2009:

Christopher Jankowki assumes duties as President.

President elect- Fritz Sieber

Secretary- Zhongcong Xie

Treasurer- Alec Rooke

Board members- Mike Lewis, Mark Neuman, and Ruth Burstrom

7th Annual SAGA Meeting, October 14, 2007, San Francisco, CA

SAGA held its 7th annual meeting this year in San Francisco. The meeting was open to all SAGA members and interested ASA attendees. Light refreshments were served. There was a 30 minutes reception for networking and membership sign up, followed by an open forum discussion on SAGA initiatives: both past and future. The minutes from the meeting are included below. Approximately 50- 60 attendees attended at least part of the meeting.

Key Speakers:

Sheila Barnett, MD President SAGA

Fritz Seiber, MD Secretary SAGA

Deborah Culley, MD Treasurer, SAGA

Arnold Berry, MD ASA Section Chair/

David Cook, MD, FAER Council on Aging

Bernadette Veering, MD Chair of Geriatric Meeting Section for ESA Netherlands

George Silvay, MD Professor Anesthesiology Mt Sinai

Meeting welcome *S. Barnett*

Dr Barnett thanked all attendees and participants.

She explained that the ASA Curriculum was essentially now complete, this was one of SAGA's goals for this year. The curriculum will soon be available to all through the ASA and SAGA websites.

She commented that similar societies, e.g. Geriatric Cardiology, have had substantial success at fund raising and this is something SAGA will need to address. She reminded everyone that SAGA is a charitable organization so donations can be tax exempt.

Activities during the year included the submission of a Fellowship proposal to the John A Hartford foundation. This is currently on hold for consideration. In addition a program type grant was submitted to the American Society of geriatrics to create educational programs for ongoing maintenance MOCA proposal – this is also under consideration.

FAER /ASA perspectives *A. Berry*

Dr Berry was welcomed by SAGA. He led further discussions on the geriatric Fellowship proposal. This year a geriatric fellow will start at the Mayo Clinic in January 2008. He encouraged other academic programs to pursue non ACGME fellowships in Geriatric Anesthesiology as well.

There was lively discussion concerning the about future directions for SAGA and how to take to geriatrics as a specialty area to higher level within Anesthesiology's leading organizations: ABA, ASA and FAER. There was also considerable talk on establishing areas that could be tackled by SAGA. This include discussion on:

- Maintenance of certification opportunities
- Practice assessments and opportunities

- SAGA as a MOCA resource

Issues regarding strategic initiatives were raised. Many felt that there is a need for a common geriatric mission and work needs to be done on streamlining current work and looking for areas of overlap, as well as involving ABA and other key components. Related to this topic were Dr. Cook's comments both at the meeting and from earlier conversations through the FAER council on Aging. There were many suggestions from the floor – about possible best practices, guidelines, more involvements in ASA/ ABA

Future Geriatric Meetings

B. Veering –

The European Society of Anesthesiology (ESA) International meeting has granted permission to Bernadette Veering to create a new section on Geriatrics. This will result in entire line of research, education and other presentations at annual ESA meetings. This is a significant achievement by Dr. Veering, who was congratulated. The next ESA meeting will be in Spain.

G. Silvay

Discussed opportunities for an international meeting in Prague – there will be a need for attendance and speakers.

F. Sieber

Discussed potential for a one day meeting prior to the PGA in NY in 2008. This will involve collaboration between HSS, Hopkins and the AAA in England. Hopkins could provide CME credits. This still needs significant investigation about costs, responsibilities and amount of administrative time required.

Treasurer's Report *D. Culley*

SAGA reports a positive bank account. We have approximately 40 paid and active members. SAGA is no longer using a credit card – it was too expensive to maintain for the small number of users. SAGA needs to continue to recruit new members and do fundraising.

Students

Two students attended the SAGA meeting and were Introduced, they were from Duke and Brown . They are both submitting applications for anesthesiology residencies.

New Board members

Ben Antonio, Greg Crosby, and Zhongcong Xie were elected to serve as board members for 2008 and 2009.

Next year, elections will be held for the President Elect, the Secretary, the Treasurer and three at-large Board positions.

The meeting was adjourned!

Minutes of the Annual Meeting of the Society for the Advancement of Geriatric Anesthesia (SAGA)

Hilton Hotel ~ Chicago, IL
Sunday, October 15, 2006

After a gathering reception which started at 4:00pm a meeting was called to order by raining SAGA President Terri Monk, MD. Dr. Monk's initial presentation discussed the possible grant sources for geriatric anesthesia research and the possibility of AGS and FAER forming a partnership to provide financial support to establish a geriatric anesthesiology fellowship. Interactive debate amongst the SAGA members focused on whether to propose a 1 or 2 year fellowship or have it as a 1 year fellowship with an optional 2nd year based on individual performance and expectations being met. The geriatric fellowship was proposed to include clinical, educational, and research commitments. It was felt that it must include at least a 6 week rotation on a geriatric medical service. SAGA membership was very uniform in the opinion that the individual chosen for the fellowship must have appropriate mentor identified for the time they spent in the program. This was thought to be most important for guidance in geriatric research.

A more formal presentation on this topic was given by Arnold Berry, MD who represented FAER in discussing what the structure should be for the geriatric anesthesiology fellowship. At the conclusion of the discussion it was decided to purse to establish this fellowship. Dr. Berry was going to take back the comments of SAGA membership to the FAER board to further define requirements to support such a geriatric anesthesiology fellowship.

The following agenda items were then addressed:

Election of Officers

Future meeting plans for SAGA

Treasurer report from Tim Gilbert, MD

Election of Officers:

The following officers were determined by a vote of SAGA membership:

SAGA President – Sheila Barnett MD (2006-08, Harvard University)

President Elect – Chris Jankowski MD (2006-08, Mayo Clinic)

Secretary – Fritz Sieber, MD (2006-08, Johns Hopkins)

Treasurer – Deborah Culley, MD (2006-08, Harvard University)

Election of New Board Members:

Bradley Smith, MD (2006-07, Vanderbilt)

Leann Groban, MD (2006-08, Wake Forest)

Gary Vasdav, MD (2006-08, Mayo Clinic)

Shamsuddin Akhtar, MD (2006-08, Yale University)

Future SAGA meetings:

The plan is to have the annual SAGA meeting at the Annual ASA meeting weekend on Sunday between 4-6pm. Further discussion debated whether to have a separate SAGA meeting independent of the ASA for CME purposes. Dr. Monk updated the SAGA membership on her involvement to try holding a co-joined meeting with SAMBA for 2007. She informed the membership that at this time it did not seem feasible. Further discussion with SAMBA for 2008 and beyond would still be considered a possibility to have a co-joined meeting. Newly elected SAGA President Shelia Barnett, MD proposed a single day geriatric meeting co-sponsored by Harvard University. Further discussions lead to an enthusiastic response from the SAGA members to motion and consider organizing this meeting for 2007.

Treasurer Report

Tim Gilbert, MD presented to SAGA membership that the assets for the society in 2005 were \$13,500 and as of October 2006 had grown to \$16,800.

In conclusion, recognition was given by SAGA membership to Terri Monk, MD for her service as SAGA President during her 2 year term. A plan for a 1 day CME meeting co-sponsored at Harvard University would be fulfilled with a geriatric curriculum by current SAGA President Sheila Barnett, MD. Dr. Barnett would stay in touch with the developments for the proposed geriatric fellowship with further updates to the SAGA membership.

Respectfully Submitted,
Jerry O'Hara, MD
Secretary, SAGA

SAGA Update from the ASA in Atlanta, Georgia

October, 2005

Dear Members of the Society for the Advancement of Geriatric Anesthesia:

When the ASA relocated the annual meeting from New Orleans, LA, to Atlanta, GA, this past October it resulted in many of the planned meetings to be canceled. This included cancellation of the Society for the Advancement of Geriatric Anesthesia (SAGA) meeting originally scheduled for Friday, October 21, 2005. On Tuesday, October 25, 2005, several of the SAGA officers and board members informally meet to discuss future plans for SAGA. The discussion was led by SAGA president, Terri Monk, MD. Several issues that were discussed included: 1) when to hold the next SAGA meeting, 2) what can be done to improve communication among SAGA members, 3) should there be an escalation of effort to provide a better CME opportunity for SAGA members, and 4) would there be grant support available to allow a CME SAGA meeting to be organized?

When to hold the next SAGA meeting:

It was discussed to continue having an annual meeting at the ASA in some capacity. The feeling was that it is difficult to get a CME meeting organized that is convenient for SAGA members to attend prior to the start of the ASA on Friday evening. It was discussed that the SAGA meeting at ASA might take place in the format of a breakfast panel for SAGA.

Communication of SAGA members: It was suggested that the officers and board members attempt to involve themselves with a quarterly phone conference that would begin in 2006. Dr. Jerry O'Hara was to be responsible for contact information and then forward this information to Michael Lewis, MD. Dr. Lewis has offered to coordinate quarterly phone conferences. It was also thought that a SAGA chat-room site would be beneficial so all SAGA members could visit the site to offer educational and clinical input for the society members to discuss.

CME Opportunity for SAGA: There was further discussion on holding a separate half or one day CME course in 2007. It was thought that the Society of Ambulatory Anesthesiology (SAMBA) officers

be approached to see if they would be interested in allowing SAGA to hold a meeting adjacent to the start of their meeting. It was emphasized we would need to ask SAMBA to assist in applying for the necessary CME credits. Michael Lewis, MD, has been very gracious to extend his expertise in organizing CME activity to lead SAGA in having their first half or full day CME meeting. Many officers and board members of SAGA offered their time and support to make this a successful CME course event. SAGA President, Terri Monk, MD offered to contact the proper SAMBA officers for this consideration.

Grant Support for a SAGA CME Meeting: President, Terri Monk, MD, felt there would be opportunity to approach the American Geriatric Society for an educational grant in support of a CME meeting.

Election of New Board Members: Since there was not an official Fall 2005 ASA SAGA board meeting to elect new board members, it was suggested that those board members whose term would have expired in 2005 be asked to extend their two year term for one additional year. These individuals (David Cook, MD, from the Mayo Clinic, Rochester, MN, Jacqueline Leung, from UCSF, San Francisco, and Frederick Sieber, MD, from John Hopkins University at Baltimore) were contacted and asked to extend their commitment as a board member of SAGA for an additional year. I can report that all three of these board members whose two year term would have expired at the 2005 meeting have generously agreed to remain in their positions for one additional year until reelections can be held officially.

Respectfully submitted,

Jerry O'Hara, MD
Secretary

**Minutes of the Annual Meeting of the Society for the Advancement of Geriatric
Anesthesia (SAGA)
Las Vegas Hilton, Friday October 24, 2004**

The meeting called to order at 6pm

After a light dinner, there were two presentations:

A) Mark Newman, M.D. Department of Anesthesiology, Duke University

B) Anesthesiologists experience working in Industry: Charles McKlesky M.D. , Abbot Laboratories

Dr McKlesky gave an entertaining and insightful review of his experiences moving from an Academic to an industry type position.

Following the presentations, Jeff Silverstein MD, President gave a presentation of activities within the society over the last year. Special thanks were given to Sheila Barnett M.D. for the establishment and publication of the first SAGA newsletter. The hope is to publish a newsletter twice a year. Sheila also reported that SAGA is now capable of handling dues payments with VISA/Mastercard. Dr. Monk suggested the possibility of having a gerianesthesia meeting (outside of the current meeting in conjunction with the ASA meeting). One thought was to apply for a grant from the AGS to support the meeting.

Elections for the officers of the society were made. All officer positions were uncontested.

- 1) Terri Monk, MD: President
- 2) Sheila Barnett, MD: President Elect
- 3) Timothy Gilbert, MD: Treasurer
- 4) Jerome O'Hara, MD: Secretary
- 5) Jeff Silverstein, MD: Immediate Past President

There were three board positions open for election. These were contested elections and the three positions were filled by:

- 1) Michael Lewis, MD
- 2) Bernadette Veering, MD, PhD
- 3) Christopher Jankowski, MD

The meeting was called to conclusion at 9:30pm

**Minutes For SAGA Annual Meeting
Friday October 10, 2003 at the San Francisco Hilton Yosemite B
Program 6 - 10pm**

The scientific portion of the SAGA meeting included two presentations:

1) Can We Change the Health of Ourselves and Our Country By Preoperative Evaluation: The Experience with Real Age and How I use it in my Preoperative Practice

Michael Roizen, MD
Professor of Anesthesia & Critical Care
Professor of Medicine
SUNY Upstate Medical University

2) Prognostic Importance of Functional Reports from Patients

Kenneth Covinsky, MD, MPH
Associate Professor of Medicine
Division of Geriatrics, University of California, San Francisco

Because the speakers ran over time, the business meeting was rather short. Ideas discussed were:

- A) Fundraising: ideas including approaching Industry for grants were discussed
- B) Newsletter and Membership, we discussed the need to increase. At the moment we have fifty members. The newsletter was tied into this recruitment drive. In order to increase membership we need to give something tangible to the membership to take away. The future of SAGA was discussed. It was noted that our membership may be enthusiastic, but we are still small. One suggestion was to create a newsletter that could be distributed to members and even mailed to prospective members. Drs Lewis and Barnett said they would help coordinate this.
- C) Treasurers Report: the society continues to be financially healthy with \$13,000 in the bank. A credit card had been obtained which has made it easier to sign members.
- D) Elections: since all posts are held for a two-year period three board positions had to be filled at this meeting. By unanimous vote the three previous board members were elected for another two-year term.

Annual Minutes of the Society for the Advancement of Geriatric Anesthesia (SAGA)

October 11, 2002, Orlando, FL

Submitted by Terri G. Monk, Secretary and G. Alec Rooke, President

On May 21, 2002, a meeting was held by email to vote on changes to the Articles of Incorporation for SAGA in the State of Washington. Identical changes to the Bylaws were proposed (see attached). These changes clarified the charitable, educational and non-profit purpose of SAGA as defined by the tax code, and clarified the dissolution clause and disposition of assets. The changes were unanimously approved.

In Attendance, October 11 meeting: Shamsuddin Akhtar, Sheila Barnett, Mary Burnett, Frances Chung, Dave Cook, Greg Crosby, Deborah Culley, Paul Heerdt, Chris Jankowski, Jackie Leung, Michael Lewis, Jonathan Mark, Terri Monk, Philippa Newfield and husband Gordon, Peter Pompei, Alec Rooke, John Sage, Chris Shoub, Fritz Sieber, George Silvay, Jeff Silverstein, Yung-Fong Sung

Sheila Barnett, Treasurer, reported that SAGA currently has 33 Active members, plus 6 expired memberships. Expenses to date for 2002 total \$530, mostly for government fees. The costs of this meeting have not yet been paid and are expected to be approximately \$830. The cost of the exhibit at the ASA meeting is \$225 and has not been paid. SAGA has collected \$2040 from memberships to date this year, and has \$2000 in corporate sponsorship pledged for this year (all from Abbott). The current balance in the account is \$10,623.57.

Terri Monk, Secretary, asked and received approval of the minutes from the meeting on October 12, 2001.

Brief reports were given on SAGA's association with other societies. Jeff Silverstein reported that the SAGA breakfast panel at the December, 2001 NYPGA meeting attracted over 30 people. Terri Monk reported that the SAGA panel at the May, 2002 SAMBA meeting was very well received. She anticipates that our panel proposal for the May, 2003 SAMBA meeting will be accepted. Alec Rooke reports that our panel proposal for the April, 2003 SCA meeting has been accepted. The proposals for all these meetings are posted on the SAGA website.

The IRS has approved the non-profit status of SAGA. Alec Rooke explained that it is a provisional ruling in that SAGA has not been around long enough for the IRS to make a final ruling. The ruling will be made in five years, but unless we do something overtly wrong, this decision should be a formality. The IRS letter of determination is posted on the website.

A discussion of the website ensued. A number of suggestions were made for additional items on the website including: a current bibliography of geriatric anesthesia articles; a "frequently asked questions" section for anesthesia professionals and one for patients; a section for reviews of scientific publications from anesthesia and geriatric journals with commentary and hopefully the original abstract (would need permission); a section on research opportunities in geriatric anesthesia, including current, funded research and a list of available grants; ask to have SAGA linked to other websites, such as the AVAA or GASNET. We would have to research the legal implications of our educational material (it was suggested we contact Lance Lichtor). It was also suggested that slide shows could be protected on the website by posting them only as

PDF files. That way someone who wanted duplicates would have to identify themselves to us and explain how the slides were to be used. Alec Rooke was appointed webmaster.

The future of SAGA was discussed. It was noted that our membership may be enthusiastic, but we are still small. One suggestion was to create a paper based membership brochure that could be distributed at meetings, or even mailed to prospective members. Another suggestion was to publicize SAGA with each of our state societies. Frances Chung suggested that we need a big meeting that should include speakers and topics outside of anesthesia. When the concern was voiced that SAGA might not command a great audience yet, Greg Crosby and Jonathan Mark suggested that SAGA align itself with an academic institution that can provide CME. The meeting would then be a joint venture between SAGA and the academic institution. One possibility might be the Duke Conference on Aging held every two years. Assuming the topic(s) of the meeting were sufficiently inclusive, it might well be possible to attract people to the meeting from fields other than anesthesiology. Such an approach would help promote SAGA's goal of being more than just an "anesthesia" society someday. Another thought to increase SAGA's visibility was to sponsor a resident essay or research competition, with the winner receiving some award, perhaps a free trip to a meeting. Lastly, the opinion was expressed that it would be helpful to work with AARP to promote health care for older patients. Some skepticism was expressed over the success of such an approach given the AARP's attitude toward physicians. Nevertheless, it would be interesting and useful to invite someone from AARP to speak to SAGA about their concerns with health care for elderly patients.

An amendment was passed to permit PhD's to join SAGA as Active members, subject to the same interest and expertise criteria used to admit physicians.

A vote was taken and it was determined that, for now, SAGA would not charge people to attend the annual SAGA meeting, especially if it primarily consisted of a business meeting and not much educational material. It was suggested that the educational part of the meeting should be first on the agenda. Doing so might attract interested individuals who might not want to attend the rest of the meeting.

Officer and Board elections were held by paper ballot. Terri Monk was elected President-Elect, Mike Lewis Treasurer and Sheila Barnett Secretary. However, after the meeting it was suggested that it would make more sense to permit the Secretary and the Treasurer to serve for a maximum of three consecutive terms. Ballot by email was then sent to the SAGA voting members. By a vote of 21 to 1, the bylaws were amended such that "Section 5.2 Term" now reads, "The term of office of each Officer shall be two years. Only Secretary and Treasurer may serve in the same post for consecutive terms, for a maximum of three consecutive terms. Time in office that is held in fulfillment of an un-expired term does not count toward these limitations. The President-Elect shall succeed the President in office at the conclusion of the latter's term." By a vote of 22 to 0, Mike Lewis was elected Secretary and Sheila Barnett Treasurer. Three new At-Large Board members were elected: Greg Crosby, George Silvey and Yung-Fong Sung. All new officers and Board members, plus the new President, Jeff Silverstein, assumed office at the conclusion of the meeting.

The scientific portion of the SAGA meeting included presentations from several speakers involved in funded projects devoted to increasing geriatrics expertise in the specialty of anesthesiology. Dave Cook spoke first and outlined the place and intent of the Research Agenda Setting Project (RASP) project in the funded initiative by the American Geriatrics Society, "Increasing Geriatric Expertise in Surgical Subspecialties". The process by which the research review occurred was described as was the editorial processes that were brought to bear in

generating the final document. Dr Cook outlined the primary conclusions in the Anesthesia component of the RASP project by highlighting the needs in the Preoperative Assessment, Intraoperative Management and Postoperative Care of the geriatric surgical patient. The section summaries and the executive summary of the project were supplied as a handout to meeting attendees.

Dr. Mary Burnett presented how she and her department of Anesthesiology at the University of Nebraska Medical Center have enhanced its geriatric training of medical students & residents with the help of a grant from the Hartford Foundation and also a Reynold's Foundation grant. 1) The Hartford grant addressed both third year medical students (M3s, during their surgery rotation) and fourth year students (M4s, during their anesthesia rotation). The M3s were required to complete two geriatric web-based modules (postop delirium & pain management) and were then tested. M4s received a "Physiology of Aging" lecture each month and were required to complete 2 of 6 web-based geriatric modules followed by testing. 2) One of the goals of the Reynold's grant was to improve resident education in geriatrics. After reviewing our curriculum, we surveyed our faculty to assess the current level of geriatric content, made improvements and added 6 lectures yearly. Many lectures were given by members of other departments (geriatrics, pharmacology, intensivists). The grant also provided for two guest experts in geriatrics per year to speak at a combined surgery and anesthesia grand rounds conference. A "geriatric journal club", attended by the guest speaker, has been added each year as well. Six web-based, geriatric modules were created and cover different perioperative scenarios with questions and answers related to the unique concerns of geriatric management. The resident assigned to the PACU rotation is required to complete this (each module takes 20-30 min). Testing is in development. These grants have allowed the lines of communication to open widely between geriatrics, surgery and anesthesia. It has even led to a joint effort among our surgeons, cardiologists, geriatricians and anesthesia in developing a perioperative beta-blocker protocol. The final result of all this seems to be our mutual goal of improving outcomes for our geriatric patients. The modules can be found at <http://www.unmc.edu/anesthesia/Resources%20and%20Links.htm>. Page down to "Educational Resources and click on: "Geriatric Computer Modules". Then click on "Anesthesia Modules". The modules can also be accessed from the department's website: <http://www.unmc.edu/anesthesia>

Dr. Fritz Sieber described the initiatives currently underway at Johns Hopkins to increase geriatric expertise in the field of Anesthesiology. His efforts comprise three initiatives. In the first initiative the Anesthesiology Department is integrating geriatrics into the residency program by designating three (3) grand rounds during the year devoted to geriatric issues. In the second initiative the Anesthesiology Department is integrating geriatrics into the residency program by establishing a monthly case conference and journal club focusing on perioperative management of the geriatric patient. In the third initiative the Anesthesiology Department is integrating geriatrics into the residency program by instituting patient simulation applications into geriatric anesthesia training utilizing the METI whole body computer simulator located in the Patient Simulation Laboratory at the Uniformed Services University of the Health Sciences (USUHS).

Inserted at the beginning of the Preface of the Bylaws:

This corporation is organized exclusively for charitable, scientific and educational purposes within the meaning of section 501(c)(3) of the Internal Revenue Code.

No part of the net earnings of the corporation shall inure to the benefit of, or be distributed to, any of its members, trustees, officers or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payment and distributions in furtherance of the organization's 501(c)(3) purposes.

No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

Notwithstanding any other provision of these Bylaws, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code or the corresponding section of any future United States Internal Revenue law, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code or the corresponding section of any future United States Internal Revenue law.

Inserted as a new Article to the Bylaws:

DISSOLUTION

The property of this corporation is irrevocably dedicated to charitable and educational purposes.

Upon the winding up and dissolution of the corporation, after paying or adequately providing for the debts and obligations of the corporation, the remaining assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code or the corresponding section of any future United States Internal Revenue law, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations as said court shall determine, which are organized and operated exclusively for such purposes.

Minutes of the Society for the Advancement of Geriatric Anesthesia (SAGA)

October 12, 2001, New Orleans, LA
Submitted by Terri G. Monk, Secretary

In attendance: Hanne Abildstrom, Sheila Barnett, George Bause, Charles Beattie, Ruth Burstrom, May Chin, David Cook, Greg Crosby, Deborah Culley, Jeffrey Dwyer, Nancy Dwyer, Tom Ebert, Philip Gordon, Beverly Gregory, Paul Heerd, Chris Jankowski, Tim Johnson, Perry Jones, Nancy Kwan, Brian McGlinch, Terri Monk, Philippa Newfield, Charles Novak, Alec Rooke, Fritz Sieber, George Silvay, Jeff Silverstein, Yung-Fong Sung, Bernadette Veering, Craig Weldon

The second meeting of SAGA was held at 7:00 PM at the New Orleans Marriott Hotel on October 12, 2001. The meeting was called to order by Alec Rooke, President. Thirty people attended the meeting. The first order of business was ratification of the bylaws. Dr. Rooke also presented a plan to incorporate SAGA as a non-profit organization in the State of Washington and this was approved by a vote of the membership present at the meeting.

The treasurer, Sheila Barnett, reported on the financial status of the organization. All funds to date have been from membership fees, totaling \$6525. Total expenses to date have been \$182.25, plus an estimated \$1300 for the cost of the current meeting. The membership then voted to use the calendar year as the membership year, but to have the term for board members run from October to October. Dr. Rooke then discussed the need for corporate sponsorship and made an appeal to the membership to assist in obtaining funding for SAGA. After discussion, it was decided to appeal for corporate sponsorship for specific projects such as the creation of a website.

Terri Monk reported that she had been in contact with the Dr. Lance Lichtor, the President of SAMBA. The board of SAMBA has a great deal of interest in establishing a relationship with SAGA. They would like all of the members of SAGA to become members of SAMBA since the goal of "better perioperative care of elderly surgical patients" is important to both organizations. The SAMBA board approved a Geriatric Ambulatory Anesthesia lecture session at the May 2002 meeting of SAMBA. The panel will be entitled "Outpatient Anesthesia in the Geriatric Patient. SAMBA will also accept abstracts for the annual meeting relating to the practice of Geriatric Ambulatory Anesthesia and will allow SAGA to place handouts at the SAMBA registration desk during that meeting. The SAMBA board will also allow a small easel poster advertising the SAGA to be placed near the registration desk at the May 2002 meeting.

Jeff Silverstein reported on plans for a SAGA sponsored breakfast panel at the New York Post Graduate Assembly in Anesthesia (PGA). SAGA will host a panel entitled "Expert Colloquium

on the Perioperative Care of the Elderly Patient” on Friday morning, December 7, 2001 at the New York Hilton Hotel in New York, NY. On the afternoon of December 10, 2001 there will be a second panel at the PGA hosted by Terri Monk. The panel will be entitled “The Special Needs of the Elderly Surgical Patient.”

Alec Rooke reported on plans to develop a SAGA website. He presented the start-up costs, design costs, and server maintenance costs for three different webmasters. A copy of the plans and estimated costs are attached to this report. Terri Monk reported that she would investigate the cost of website design at the University of Florida. A general discussion ensued about the goals of the website. It was decided to appeal for corporate sponsorship to cover the costs of the website. Another suggestion was that the website contain reviews of important articles from the anesthesia and non-anesthesia literature.

An election for three at-large SAGA Board members was held. The nominees for this position (in alphabetical order) were Mary Burnett, David Cook, Paul Heerdt, Jacqueline Leung, Fritz Sieber, George Silvay, and Yung-Fong Sung. A closed ballot election was held and Dave Cook, Jacqueline Leung, and Fritz Sieber were elected as the new board members to serve a two year term.

The suggestion was made to advertise SAGA in journals in the hopes of attracting new members. In addition to the anesthesia journals, it was decided to publicize SAGA in the Association of VA Anesthesiologists journal (AVAA). The business meeting was adjourned. After the meeting concluded, Dr. Jeff Dwyer, Director of the Institute on Aging at the University of Florida presented a lecture entitled “The Future is Aging: Demographic, Policy, and Clinical Implications”

SAGA Website

Options explored to date are to develop a website using either the wife of Mike Smith (Sarker Web Designs, see <http://aacdhq.org> for a sample), Jim McGreal (see www.jmcstudios.com for samples such as <http://www.sambahq.org/>) or Steve Leith (206 443-0604; WordWare; sample www.deerharbor.com).

	Sarker Web Design	JMCstudios	WordWare
Start-up costs	est. total \$1000	est. total \$3500	est. total \$1800-2000
Design costs	\$50/ hr	\$88/ hr	Art \$75-90/hr, clipart and images \$30/image, \$600 for design, \$1500-2000 to develop template; maintenance \$75/hr (programming \$100/hr)
Server	? Company in Canada \$45/ month	Inno-tech \$25/ month or \$240/year	Will use whatever we want, but will provide suggestions
FTP	Included	Included	Depends on server
Password protection	Included	Included	Depends on server
Memory space	10MB	50 MB	Depends on server
e-mail	Included (? Number of accounts)	Included (15 accounts)	Virtually all servers include this
Domain registration	\$70 for 2 years	Free from Innotech	Says we should do this, but will help us; \$70/ 2 yrs
Credit card ability	\$1100/ year	\$300/month or \$15/month for secure website if someone from SAGA would retrieve the number	Can do secure website to server or secure website to bank, or more advanced stuff

Minutes of the Inaugural Meeting of the Society of Geriatric Anesthesia

The meeting was called to order by Alec Rooke at 9AM on October 16, 2000 at the Marriott Hotel in San Francisco. In attendance were Sheila Barnett, Ruth Burstrom, Frances Chung, Dave Cook, Greg Crosby, Deborah Culley, Chris Jankowski, Jacqueline Leung, Charles McLeskey, Terri Monk, Stan Muravchick, Charles Novak, Jerry Reves, Alec Rooke, Ray Roy, Michael Scott, Frederick Sieber, George Silvay, Jeffrey Silverstein and Yung-Fong Sung. Gary Hoormann was present representing the ASA's society management service.

As there was a general consensus that a society for the advancement of geriatric anesthesia should be formed, the group first addressed the question of the name for the society. Several proposals were made, but there was no great enthusiasm for GAS or SAG. SAGE was considered a good acronym, but a fully suitable name using those letters was not determined (though Society for Anesthesia in GERiatrics could be used). Possibilities included Society for Anesthesia in Geriatrics and Society for Anesthesiologists with Geriatric Expertise. Other suggestions included Society for Geriatric Anesthesia (SGA, similar to the SCA for the cardiac society) and Society for the Advancement of Geriatric Anesthesia (SAGA). It was decided to continue the discussion of a choice of name to a later time.

The discussion then turned to a review of the proposed bylaws. The liveliest discussion of the morning then ensued and it concerned the goals and purpose of the society, particularly as it related to the involvement of non-anesthesiologists and non-physicians within the society. Several individuals spoke eloquently of the need for the society to broaden its interest base and that we should do everything possible to encourage participation of non-anesthesiologists in the society given our desire to have an impact on all phases of perioperative care of the geriatric patient. On the other hand, concern was expressed over the risk of losing our desired identity (a society with the perspective of an anesthesiologist) if the society were to become too populated by non-anesthesiologists. No one argued for excluding non-anesthesiologists and non-physicians from the society; at issue was who would be permitted to vote and be on the Board. No clear consensus could be achieved, so the participants decided to continue with a review of the proposed bylaws.

Questions arose over the relationship of the new society to the ASA. It was explained that, as with other (smaller) societies such as SAMBA or ASCCA, our society would be separate from the ASA (no legal connection). However, many societies maintain close ties to the ASA as it helps with society meetings such as on the Friday before the ASA meeting (ASA helps with meeting rooms). Furthermore, at some point in our future, the society will likely want and need a professional management service to help with many of the routine tasks of running a society. One management option is through the ASA and its employee, Gary Hoormann. Other options mentioned were the people who run the Society of Cardiovascular Anesthesiologists (SCA) and Shirley Bishop who manages the AUA and the WSSA (WA State Soc.). The good news is that for now we can "hire" help as needed and as funds permit, and still utilize Gary for advice for free.

The next issue was membership categories and dues. Besides the issue of who gets to vote, etc., the issue of Charter membership came up. The basic idea of having a membership category that would permit interested individuals to pay a substantial amount upfront was endorsed by the participants, but the details needed working out. The concept of International, Retired and Honorary memberships were also endorsed.

It was decided that the term of office for officers and board members be two years. Committee Chair and Committee Member positions could be on an annual basis as they are

chosen by the President-Elect and reappointment is permitted. [Ed. Note: On reflection, this makes little sense, as the new President-Elect would technically be the person who would appoint the committees for the second year of the then President's term. It seemed easiest to make all committee terms two years, so I went ahead and changed the bylaws.]

The Members-at-Large of the Board are to number 6 (plus President, President-Elect, Secretary, Treasurer and Immediate Past-President constitute a Board of 11 people). Members-at-Large are to be elected on a staggered basis (three new members each year).

Other details of the bylaws were discussed. Dr. Rooke stated that further discussion of the bylaws will occur via the internet, and once the details are worked out the bylaws will be distributed for ratification by the membership.

Election of officers took place by a show of hands: President, Alec Rooke; President-Elect, Jeff Silverstein; Secretary, Terri Monk; Treasurer, Sheila Barnett. It was decided to defer election of the six Members-at-Large for the Board of Directors.

Some brainstorming about the Annual Meeting took place. Although the Friday before the ASA meeting is always an option (and will likely be utilized next year in New Orleans), the possibility of affiliating with other societies or meetings was felt to be worth pursuing. Alec Rooke reported he had recently made initial contact with the Presidents of SAMBA and the SCA and was reasonably encouraged by their interest. The thought that it could be beneficial to both groups; our society would gain exposure to additional potential members, expenses could be shared, and the other society would have access to an additional educational program. Although it is too late to arrange much for 2001, Jeff Silverstein mentioned that the NYPGA meeting has not yet set its 2001 meeting agenda. IARS is another possibility.

The meeting adjourned at 11AM.