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

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Members of the College:

Thank you for affording me the privilege of representing you as President of the American College of Osteopathic Obstetricians and Gynecologists for the next year. It is my pleasure and honor to serve you.

I would like to thank Dr. Octavia Cannon for her groundbreaking and strong leadership over the past year as our President. Dr. Cannon’s commitment to our members and our patients, especially with her work on the ACOG well woman task force, will not only serve as a guide during my time as President, but it also leaves me with big shoes to fill. Octavia, the College owes you a great debt.

Though it is no secret that we as a College are facing many new – and potentially daunting – challenges, I am a very firm believer in the maxim, “with great change comes great opportunity.” As we shift to single accreditation, the college soon will not have residency oversight responsibilities – WHAT THAT DOES NOT MEAN is that we no longer have a responsibility to our residents. In fact, the polar opposite is true. It is up to EVERY SINGLE member of our college to make a case for why ACOOG is essential in the development and support of the next generation of OB-GYNs.

To the medical students and residents reading this, know that the college is STRONG. ACOOG is growing yearly and flourishing and we will continue to invest in the next generation of OB-GYNs. ACOOG’s resident reporter program, the fall conference student and resident programs will continue. I pledge to ensure that ACOOG’s future remains BRIGHT.

To all the new Fellows, passing your boards is a tremendous achievement and one that you should be very proud of. As ACOOG President, I guarantee that we as a College will uphold our solemn responsibility of ensuring that the letters F-A-C-O-O-G will always carry the weight and authority commensurate to the hard work you put in to attain this hallowed designation.

As we honor the next generation of ACOOG Fellows, we must also acknowledge that we cannot stop at only recruiting our young Osteopathic physicians from the new osteopathically-focused residency programs. The future of ACOOG relies on us reaching out and welcoming Osteopathic physicians that are trained in allopathic programs and even Allopathic residents that feel a connection to the Osteopathic way.

To our established ACOOG Members, we as a College also have a responsibility to ensure that we continue to meet your needs! Our membership is diverse and spans many generations. We know that ob-gyn millennials have a very different perspective than Gen Xers like me, and the baby boomer ACOOG members also have unique issues. I am a firm believer that our DIVERSITY - racial, political, and generational - is one of ACOOG’s great strengths!

(Continued on Page 3)
For this reason, the board approved the creation of a diversity and inclusion task force chaired by our immediate past president, Dr. Octavia Cannon. It isn’t a controversial statement to say that ACOOG’s leadership should best represent all of our members. ACOOG will be an even better organization when we appreciate and celebrate our differences.

In this same vein, the Board agreed to increase the Membership and Promotions Committee by 1 position. This position will be filled by an affiliate member. All members should feel like they have a voice.

As many of you know, one of my great passions is advocacy. I sincerely believe that as health care providers, we are called to advocate for our patients within AND outside the walls of our exam rooms. Too often, decisions are being made by politicians that directly impact our patients and our specialty without the input of actual health care providers.

We have all read about the recent legislation passed in certain states. Our patients NEED us as experts in women’s health to stand up and advocate for them. It is our responsibility to address and rebut factually incorrect AND medically inaccurate statements and policies. This is not about beliefs; this is about truth. This is not a pro-choice versus pro-life discussion. This is not a Republican or a Democratic issue. This is about science and we cannot remain silent and allow untruths to be propagated and even written into law.

A friend of mine, ACOG Past President Dr. Tom Gellhaus, was the first to share with me the credo that caring for our patients does not end in the exam room. It is an unfortunate reality that as OB-GYNs, we are forced to fight political interference and intrusion into the sacred relationship we have with our patients. As ACOOG President, I am CALLING on all of you to join that fight. Both for our patients and our specialty, your voice must be heard!

We need to INCREASE our advocacy efforts at both the state level and federal level. If you are new to politics attend AOA’s DO Day on the Hill or ACOG’s Congressional Leadership Conference – both held in Washington, DC, both are an excellent introduction into physician advocacy.

If you’re already into policy-making and follow politics, then do MORE! Attend a town hall meeting, meet candidates, get involved in campaigns – remember, you are both a voter and an individual who provides important and essential health care services to hundreds of other voters. With an election right around the corner in 2020, we MUST get engaged!

And with that election in mind, I am going to ask you all to support Ob-GynPAC and the AOA OPAC. Unfortunately, in our politics, “boots on the ground” is not sufficient to make a difference - it takes money as well. Ob-GynPAC and AOA OPAC are one of our strongest tools for making real political change.

Last year at ACOG’s Congressional Leadership Conference, ACOG’s District 4 - (DC, Maryland, Carolina’s, Georgia) won the award for most money raised in support of
Ob-GynPAC - $116,693. My goal as ACOOG President is to beat that number. Although we technically cannot win the award, nothing would give me more pleasure OR send a stronger message that ACOOG is an advocacy force to be reckoned with, than to out raise our counterparts. We are small, but fierce advocates for women’s health. Think about it - we are 2,500 members strong. If 10% of our members pledged $50.00/month for the year, we would easily surpass that number. The trial lawyer’s association PAC raised 7.8 million dollars and spent 7.7 million in 2018 ….. we must ALWAYS remember, if we don’t have a seat at the political table, then our patients and our specialists will be on their menu.

Growing up the son of an immigrant engineer, my father has taught me many life lessons. Of all the wisdom he passed on to me, my favorite saying is the following: IT IS EASY TO BE NICE, BUT IT IS HARD TO BE RIGHT!

I want everyone to think about that when we take care of our patients. We need to do what’s RIGHT for them. We need to stand up for them.

Residents if you see a bad strip - do not sit back and say the attending is aware - speak up/ call an MFM or another attending that is your mentor!

Young fellows - if one of your older partners is still doing pap smears yearly or open hysterectomies - show them the ASCCP app, offer to do the LAVH or TLH with them!

My colleagues - we need to realize our deficiencies and biases and continue to push ourselves.

Because in the end - my daughters need YOU to do what is right. The future of ACOOG, the future of our specialty depends on it!

Thank you again for allowing me the honor to serve you for the next year, and I hope to make you proud!

Thomas Dardarian, DO, FACOOG (Dist) President 2019 - 2020
Summer is here! Our annual conference in New Orleans was incredible. I extend many thanks to the program chairs, Eav Lim, DO, FACOOG, and Rosalyn Miller, DO, FACOOG. As always, many thanks to Dr. Catherine Bernardini and her outstanding Continuing Medical Education Committee as well as the ACOOG staff.

Congratulations to our new president, Thomas Dardarian, DO, FACOOG(Dist) and our latest member of the Executive Committee, Vice President Marydoma Ravasio, DO, FACOOG(Dist). Welcome new board member, Linda M Karadsheh, DO, FACOOG. Dr. Karadsheh has been an active member of the college for many years. I am confident that her dedication will continue as she moves into this new leadership role.

The Single GME Accreditation System application process is nearly completed. Approximately one year remains of this five-year process. Only a few programs remain, awaiting their initial accreditation. It has been a long process, and I congratulate and thank all of our programs and program directors for all of their hard work and dedication. The single accreditation system has created a great deal of confusion within the Osteopathic world. I’d like to take this opportunity to educate our members who may not be involved with graduate medical education. This is basically a summary of the information I presented at our general membership meeting earlier this year. Many of us were trained in Osteopathic residency programs. We are used to the American Osteopathic Association being not only the residency accreditation authority but also the authority for board certification. It is important to realize that the ACGME is only a residency accreditation body. They are not in the business of board certification, nor are they membership organization. Many of our members are questioning the role of Osteopathic board certification. I can assure you that the American Osteopathic Association has no intentions at this time of relinquishing their role as a medical board certification entity. In fact, the AOA is working towards a process for allopathic physicians to obtain their board certification through the AOA.

Over the past few years, I have heard concerns from many Osteopathic physicians of the future of Osteopathic medicine was in jeopardy due to the single accreditation system. This, coupled with the decoupling of AOA membership and AOA board certification, raises the question of the need for the uniqueness of Osteopathic medicine. With my involvement in the ACOOG’s Visiting Professor Program, I have the opportunity to visit with many osteopathic students from across the country. I can assure you that based on my conversations with the students that Osteopathic medicine is alive and kicking and has a very bright future. The students are very energetic and proud to be working towards a DO degree. They are seeking out residency training programs with Osteopathic recognition to continue their holistic training. It is our responsibility to be a resource for the students and to mentor them through the
process wherever there is residency training takes them.

As I have previously stated, the AOA Board of Trustees continues to work on new developments in membership and board certification issues. More details will be available following this summer’s AOA Board of Trustees and House of Delegates meetings. Please remember that as members of the ACOOG you are represented by your specialty college at these meetings. If you have concerns regarding any AOA Board of Trustees or House of Delegates resolutions (they are published on the AOA website). Please feel free to contact me. As a reminder, Dr. Dardarian is the ACOOG delegate this year. He will be filling in for Dr. Patrick Woodman was unable to attend this year due to a previous commitment.

Our college is very strong, and membership is growing. This summer, we will begin working on some new technological advances which will increase communication amongst our members, especially in the realm of continuing medical education. Details about this new and exciting technology platform will be forthcoming.

Have a beautiful and safe summer. I look forward to seeing all of you in Columbus, Ohio at the ACOOG Fall Conference.

Sincerely,

Executive Vice President
Michael J. Geria, DO, MS, FACOOG (Dist.) CS
Strategic Plan 2017-2021

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

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

VALUES
- Offering Member Support
  - Member Driven
  - Compassionate
  - Accountable
- Promoting Fellowship
  - Lifelong Community
  - Access to Member Network
- Providing Engagement Opportunities
  - Leadership Roles
  - Teaching and Mentorship
  - Scholarly Activity

GOALS

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

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

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

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

Your ACOOG DOSE: Delivering Opportunities for Support and Engagement

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

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

CME FACULTY
Help us provide advanced continuing education for your peers by lecturing, teaching an interactive workshop, or writing an online module.

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

VISITING PROFESSOR
Visit a College of Osteopathic Medicine to mentor students about choosing OB/GYN as their specialty.

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

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

BOARD OF TRUSTEES
If you have some experience volunteering with ACOOG and would like to do more, perhaps the Board is for you. New skills and perspectives are always valued.

FOUNDATION
The Medical Education Foundation of ACOOG supports a number of educational and research programs within the profession. We welcome you to volunteer on the MEFACOG Board or for a specific project.

CERTIFICATION
Although the certifying board is a separate entity, it is integral to the advancement of our MISSION. We appreciate the partnership we share and encourage you to consider becoming an ABOGOG examiner.
2019-2020 Board of Trustees

Thomas Dardarian, DO, FACOOG (Dist)
President

Patrick Woodman, DO, FACOOG (Dist)
President-Elect

Marydonna M. Ravasio, DO, FACOOG (Dist)
Vice President

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

Octavia M. Cannon, DO, FACOOG (Dist)
Immediate Past President

Sherman Dunn, DO, FACOOG (Dist)
Trustee

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

David Jaspan, DO, FACOOG (Dist)
Trustee

(Continued on Page 9)
2019-2020 Board of Trustees
(Continued from Page 8)

Linda M Karadsheh, DO, FACOOG
Trustee

Mark LeDuc, DO, FACOOG (Dist)
Trustee

Jennifer L Nichols, DO, FACOOG (Dist)
Trustee

Jennifer L Papp, DO, FACOOG
Trustee

Takeko Takeshige, DO, FACOOG
Trustee

Gregory S Willis, DO, FACOOG
Trustee

Christopher David Ackerman, DO
Resident Representative

Kelsey Ulanowicz, OMS-III
Student Representative

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

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

Valerie Bakies Lile, CAE, FACOOG (Hon)
Executive Director
New Members
Welcome new members! The Board of Trustees approved the following new members at the 86th Annual Conference in March 24, 2019 meeting in New Orleans, LA

New Regular Members
* Senior Member in Bold

Basiouni Basiouni, DO
Bradley Burger, DO, FACOOG
Kristen Caldwell, DO
Shil Cwalinski, DO, FACOOG
Thuy Do, DO
Christina Duncan, DO, FACOOG
Jennifer Gibbs, DO
Jessica Green, DO
Jessica Hemsoth, DO
Ayesha Hussain, DO, FACOOG
Jessica Kim-Vaghela, DO
Vladimir Leibovsky, DO, FACOOG
Brianne Maxwell, DO
Sweta Mehta, DO, FACOOG
Lucinda Mirra, DO
Marelli Montanez, DO
Cheryl Profit, DO, FACOOG
John Michael Robinson, DO, FACOOG
Jovana Spreitzer, DO, FACOOG
Paul Stevens, DO
Michael Swift, DO, FACOOG
Isaac Thimmesch, DO, FACOOG
Bertha Vasquez, DO, FACOOG
Tracy Verrico, DO, FACOOG
Jason Wheatley, DO, FACOOG
Jeffrey Williams, DO, FACOOG
Joanna Woo, DO, FACOOG

Life Membership
Mark A. DeMasi, DO, FACOOG (Dist)
Rick Johnson, DO
James Spencer, DO, FACOOG

TARA A. HEYLIGER, DO
New Fellows 2019

March 27, 2019

Hilton New Orleans Riverside - New Orleans, LA

Jazmin Baker, DO; Julie Wiley, DO; Larissa Smith, DO; Elizabeth Elsagga, DO; Dina Gottesman, DO; Laura Sheridan-Kelchner, DO; Shil Cwalinski DO; Elizabeth Clayton, DO; Alexis Felsman, DO; Emily Burnette, DO; Corinne Jeppson, DO; Anne Davis, DO; Martin Joel Hallam, DO; Lindsay Parker, DO; Kaitlyn Brunner, DO; Michael Ricardo, DO; Maggi Forgue, DO; Jonathan T. Turriago, DO; Lynsey Beams, DO; Niamh A. Condon, DO; Christopher Van Orsdoll DO; Shanon Tuter-Spitzley, DO; Kenneth Poppen, DO; Jason Wheatley, DO; Bertha Castro-Vasquez, DO; Roger Packard, DO; Whitney Crye, DO; Casey Ramar, DO; Lauren Mellor, DO; Kristopher Weemes, DO; Lisa Vaughn, DO; Monica Wirrig, DO; Sarah Gerlach, DO; Rebecca Krzyminski, DO; Ajit Gubbi, DO

Front row left to right:
Jazmin Baker, DO; Julie Wiley, DO; Larissa Smith, DO; Elizabeth Elsagga, DO; Dina Gottesman, DO; Laura Sheridan-Kelchner, DO; Shil Cwalinski DO; Elizabeth Clayton, DO; Alexis Felsman, DO; Emily Burnette, DO

Second row left to right:
Corinne Jeppson, DO; Anne Davis, DO; Martin Joel Hallam, DO; Lindsay Parker, DO; Kaitlyn Brunner, DO; Michael Ricardo, DO; Maggi Forgue, DO; Jonathan T. Turriago, DO; Lynsey Beams, DO; Niamh A. Condon, DO; Christopher Van Orsdoll DO; Shanon Tuter-Spitzley, DO

Third row left to right:
Kenneth Poppen, DO; Jason Wheatley, DO; Bertha Castro-Vasquez, DO; Roger Packard, DO; Whitney Crye, DO; Casey Ramar, DO; Lauren Mellor, DO; Kristopher Weemes, DO

Top row left to right:
Lisa Vaughn, DO; Monica Wirrig, DO; Sarah Gerlach, DO; Rebecca Krzyminski, DO; Ajit Gubbi, DO
Highlights
86th Annual Conference

March 24-29, 2019
Hilton New Orleans Riverside - New Orleans, LA

Sheryl A. Kingsberg, PhD was the recipient of Distinguished Fellow Honorary Lecture Award.

Octavia Cannon, DO presents the ACOOG Service Award for Program Chair for 2018 Fall Conference to Becky G. Graham, DO, FACOOG.

Thomas Dardarian, DO presents the MEFACOOG Distinguished Lecture Award to Pooja Mehta, MD.

Joseph N. Bottalico, DO, FACOOG (Dist) was the recipient of Service Award for Program Chair for 2018 Fall Conference.

Thomas Dardarian, DO presents the Barbara Hawkes Memorial Lecture Award Curtis Lowery, MD.

Octavia Cannon, DO presents the ACOOG Mentor of the Year Award to Michael J. Geria, DO, FACOOG (Dist).

Sheryl A. Kingsberg, PhD was the recipient of Distinguished Fellow Honorary Lecture Award.

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Octavia Cannon, DO presents the ACOOG Mentor of the Year Award to Michael J. Geria, DO, FACOOG (Dist).

James Perez, DO and Octavia Cannon, DO present the MEFACOOG Commendation to Lori A. Crites-Perez, RN, RDMS.

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Octavia Cannon, DO presents the ACOOG Board of Trustees Service Award 2013-2019 to Catherine Bernardini, DO, FACOOG (Dist).

Dr. Geria presented the medallion to Susan Janeczek, DO.

Drs. Hubka and Woodman presented the medallion to Sherman Dunn, Jr, DO.

Octavia Cannon, DO presents the ACOOG Board of Trustees Service Award 2017-2019.

Dr. Geria presented the medallion to Susan Janeczek, DO.

James Perez, DO and Octavia Cannon, DO presents the MEFACOOG - AOF Outstanding Resident of the Year in OBGYN Award to Helen Kristina Martinez-Costa, DO.

David L. Wolf, DO, was the recipient of The Arnold P. Gold Foundation Humanism in Medicine Award.

Octavia Cannon, DO presents the ACOOG Distinguished Service Award to Valerie Payne-Jackson, DO, FACOOG (Dist).

Eric J. Carlson, DO was the recipient of the MEFACOOG Commendation.

Emily Henning, DO was the recipient of the ACOOG Board of Trustees Service Award 2017-2019.

2019 Distinguished Fellows

Drs. Hubka and Woodman presented the medallion to Sherman Dunn, Jr, DO.

Dr. Geria presented the medallion to Susan Janeczek, DO.

(Continued on Page 14)
2019 New Distinguished Fellows

Susan Janecek, DO  |  Octavia Cannon, DO  |  Sherman Dunn, Jr, DO
2019 - 2020 President

Hooding of the new President, Thomas Dardarian, DO.

Presentation of ACOOG Past President’s plaque to Octavia Cannon, DO by incoming President, Thomas Dardarian, DO.

Dr. Thomas Dardarian
Lynch Syndrome – Identification and Management of High-Risk Patients

1 Category 1-B AOA CME Credit

Overview
Several of the cancers encountered in obstetrics and gynecology may have a syndrome to be considered. Lynch syndrome, also called hereditary nonpolyposis colorectal cancer (HNPCC), is the most common hereditary cancer syndrome, yet it is often not discussed outside of an oncology office.1 In the United States, it is projected that 1 million people have Lynch syndrome, yet only 5% of them have currently been diagnosed.2 It is important for Ob/Gyns to discuss Lynch Syndrome, since up to more than 70% of women identified as having it will acquire endometrial cancer and more than 10% will acquire ovarian cancer. In fact, the sentinel/first cancer diagnosed in nearly half of women eventually proven to have Lynch syndrome will be a gynecologic cancer.3 Increased risk of both endometrial and ovarian cancers necessitates OB/Gyns have higher awareness of the cancers associated with Lynch syndrome and inquire about it when taking a family history.

References:
1. Lee et al. Missed opportunities: Genetic counselling and testing among ethnically diverse cohort of women with endometrial cancer. Gyn Oncol 151 (1018) 153-158.

Instructions
1. Read this article
2. Log into your account at www.acoog.org
3. Click “Education” and “CME” and select this activity’s posttest/evaluation
4. Complete the posttest and evaluation

Your participation will be reported based on when you complete the activity. ACOOG reports credits on a quarterly basis.

Please contact ACOOG with questions. (cme@acoog.org)

Target Audience
This activity is designed for obstetricians and gynecologists.

Learning Objectives
To be a lifelong learner, physicians must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices. Those who participate in this activity will receive information and develop skills that should allow them to:
• Identify the rate and prevalence of hereditary cancer syndromes
• Describe the significance of Lynch syndrome

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in women's health, including associated malignancies

- Identify risk factors and diagnostic procedures for Lynch syndrome
- Assess the importance of the role of primary care physicians, including the role of the OB/GYN, in identifying and screening for Lynch Syndrome.

**Fee**
This activity is offered at no charge to ACOOG Members in good standing.

**Release Date:** September 1, 2019  
**Review Date:** August 30, 2020

**Faculty & Disclosures**
*This article was prepared by:*
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Gynecologic Oncologist  
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Dr. Vasques has indicated she has no relevant conflict of interest to disclose.

*Peer Reviewers*
Michael J. Geria, DO, MS, FACOOG (Dist) CS  
Executive Vice President, ACOOG  
Director of Medical Education, Residency Program Director  
Inspiria Health Network  
Vineland, New Jersey

Dr. Geria has indicated he has no relevant conflict of interest to disclose.

**Competencies Supported**
Osteopathic & ACGME Core Competencies
- Patient Care and Procedural Skills
- Medical Knowledge
- Interpersonal and Communication Skills
- Professionalism

Institute of Medicine Core Competencies
- Provide patient-centered care
- Work in interdisciplinary teams
- Employ evidence-based practice

**CME Credit Designation**
The American College of Osteopathic Obstetricians and Gynecologists is accredited by the American Osteopathic Association to provide osteopathic continuing medical education for physicians.

The American College of Osteopathic Obstetricians and Gynecologists designates this program for a maximum of 1 AOA Category 1-B credits and will report CME and specialty credits commensurate with the extent of the physician’s participation in this activity.

**System Requirements**
The posttest for this activity is designed to work on most popular web browsers. JavaScript and cookies need to be enabled in your browser in order for the activity to work properly. If you're experiencing technical issues, please update your browser, and clear your browsing history, cookies, and cache. This often solves most common technical issues.

**Privacy Policy**
This activity complies with ACOOG’s privacy policy (https://www.acoog.org/web/Online/Privacy_Policy.aspx)

**LINK TO CME POSTTEST:**
https://www.surveymonkey.com/r/595X27H
Lynch Syndrome –
Identification and Management of High Risk Patients

By DeEtte R. Vasques, DO, FACOOG

There are some cancers that may involve a genetic predisposition or a hereditary cancer syndrome. A hereditary cancer risk assessment is imperative to identifying patients and families at increased risk for hereditary cancers. For the obstetrician-gynecologist (OBGYN), the comprehensive history and physical performed at a well woman examination is the optimal opportunity to discuss and evaluate for these syndromes. If increased risk is suggested, a referral to a cancer genetics or health care provider with expertise is highly recommended.

Most hereditary cancer syndromes are autosomal dominant inheritance. In an autosomal dominant disease, if you get the abnormal gene from only one parent, you can get the disease. Often one of the parents may also have the disease. There is a 50% chance of the child having the condition at birth with a near 100% likelihood of phenotypic expression. This is true for all pregnancies.

Several of the cancers encountered in obstetrics and gynecology may have a syndrome to be considered. The most common related to gynecologic cancers include hereditary breast and ovarian cancer syndrome, Lynch syndrome, Li-Fraumeni syndrome, Cowden syndrome, and Peutz-Jeghers syndrome.

Hereditary breast and ovarian cancer syndromes (BRCA 1 & 2) are the most recognized hereditary syndromes by patients and providers alike. This likely secondary to the fact that breast cancer is so prevalent. Additionally, a phenomenon known as the “Angelina Effect” took place in 2013. That was the year Angelina Jolie announced her BRCA1 (+) status and planned double mastectomy and gynecologic surgery. Shortly thereafter, requests for screening increased in both appropriate and less appropriate patient populations. Screening guidelines are well established and can be easily reviewed through the National Comprehensive Cancer Network (NCCN) the American Cancer society and other reputable sites.

Endometrial cancer is the most common gynecologic malignancy diagnosed with approximately 61,880 predicted in 2019. Lynch syndrome is the most common hereditary cancer syndrome, yet it is often not discussed outside of an oncology office. In 1913, Dr. Aldred Scott Warthin first reported on “Family G” having a hereditary uterine and gastrointestinal cancers. This was further expanded on by Dr. Henry Lynch who was able to follow “Family G” over seven generations and 929 descendants through 2005. Henry T. Lynch, MD described in his obituary as an eminent researcher and trailblazer died June 2, 2019 at the age of 91. He is credited with identifying a strain of hereditary nonpolyposis colon cancer that was named after him – Lynch Syndrome. Incidentally, he is also credited with the discovery of hereditary breast and ovarian cancer syndrome which would eventually lead to the discovery of the BRCA gene.

Lynch syndrome, also called hereditary nonpolyposis colorectal cancer (HNPCC) is the only hereditary uterine cancer, accounts for most cases of hereditary colorectal, and is the second
most common cause of inherited ovarian cancer. Other sites of cancer include the stomach, small bowel, hepatobiliary system, renal pelvis, ureter, brain and skin. It is an autosomal dominant disorder of mismatch repair (MMR) proteins that results in poor repair of DNA replication errors. These errors preferentially accumulate in regions of the genome called microsatellites giving the so-called microsatellite instability. DNA mismatch repair is a mechanism to recognize and repair genetic errors that commonly occur during DNA synthesis. An error in this system is what allows the errors to persist and lead to a malignancy. More than 50% of women with Lynch syndrome present with endometrial cancer as opposed to colorectal cancer. It is important to note, women with colon cancer who have Lynch have a 26% risk of developing endometrial cancer within 10 years.

Lynch syndrome DNA MMR has a prevalence of 1 in 600 to 1:3000. The most common associated genes are: MLH1, MSH2, MSH6 and PMS2. It has been found that deletions in the EpCAM gene also may lead to inactivation of MSH2 and result in Lynch syndrome. EpCAM is a gene that encodes a carcinoma-associated antigen and is a member of a family that includes at least two type 1 membrane proteins. The antigen is being used as a target molecule for immunotherapy.

Approximately 3-5% of women who present with endometrial cancer are found to have Lynch syndrome. This is comparable to the 3% of colorectal cancers noted to be associated with the syndrome as well. Typically, hereditary cancers occur in younger populations. The incidence of Lynch syndrome in women younger than 50 are greater when adjusted for age with an incidence of 5-9% for endometrial and 5-7% colorectal cancer in this age group. The risk of malignancy through age 70 with Lynch syndrome carries a risk of 18-61% for colorectal cancer compared to 4.5% that of the general population. Similarly, the risk of endometrial cancer is 16-61%. Finally, the risk of ovarian cancer is 5-10% while the general population is 1.3%. It has been noted in women who present with endometrial cancer and Lynch Syndrome, the onset of colorectal malignancy had a median of 11 years giving the opportunity to identify and screen this population. Similarly, women with colon cancer who have Lynch syndrome have a 26% overall risk of developing endometrial cancer within 10 years affording screening opportunity as well.
Cancer risk varies with mutation:

<table>
<thead>
<tr>
<th>Gene</th>
<th>Endometrial Risk</th>
<th>Ovarian Risk</th>
<th>Colorectal Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>MLH1</td>
<td>43-57%</td>
<td>5-20%</td>
<td>46-49%</td>
</tr>
<tr>
<td>MSH2</td>
<td>21-57%</td>
<td>10-38%</td>
<td>43-52%</td>
</tr>
<tr>
<td>MSH6</td>
<td>17-46%</td>
<td>1-11%</td>
<td>15-44%</td>
</tr>
<tr>
<td>PMS2</td>
<td>0-15%</td>
<td>No increased risk</td>
<td>12-20%</td>
</tr>
</tbody>
</table>

Data from:

Defects in the above genes allow for genomic instability along the entire genome including noncoding single nucleotide and dinucleotide repeats scattered throughout the DNA. These areas are the areas of microsatellite instability (MSI).

MSI from non-inherited, Lynch syndrome can result from a methylation of the MLH1 promoter. This is a common phenomenon found in 20-30% of endometrial cancers and 15-20% of colon cancers. Therefore, if an MLH1 abnormality is noted, a methylation test must be done to confirm it this is a genetic or sporadic tumor to be complete.

Individuals at risk for Lynch syndrome include:
- Individuals in families meeting Amsterdam I or II criteria and individuals meeting revised Bethesda guidelines.
- Individuals diagnosed with colorectal cancer (CRC) that shows a high level of microsatellite instability and/or loss of expression of one of the MMR protein on IHC.
- Individuals diagnosed with endometrial cancer (all or) those diagnosed prior to age 60 years.
- First-degree relative of those with known MMR/EPCAM gene mutation.
- Individuals with >5 percent chance of an MMR gene mutation by prediction models.

If the tumor is noted to have an MMR abnormality, testing is then performed by direct germline DNA testing or a blood test in the patient. This is generally reserved for those outlined above or those with known IHC or MSI findings on tissue testing. Currently
most testing is done using panels of genes through various companies that have been FDA approved.

**Screening of a Lynch patient**

Endometrial: There is no proven effective screening strategy for early detection of either endometrial or ovarian cancer. For endometrial cancer, women with Lynch syndrome are recommended to have annual pelvic examination and endometrial biopsy every one to two years, starting at 30 to 35 years of age or three to five years earlier than the earliest age of diagnosis of these cancers in the family. Transvaginal ultrasound may be considered in PMP women but not premenopausal women as the endometrial stripe has a wide range of thickness, so it is too difficult to interpret.
Ovarian: There is a lifetime risk of ovarian cancer for patients with Lynch syndrome at 8% (higher risk in MLH1 @ 20% and MSH2 @ 24%). Data do not support screening for ovarian cancer and guidelines vary in their recommendations. For patients who choose to undergo ovarian cancer screening, transvaginal ultrasound with serum CA125 can be offered on an annual basis. Features known that distinguish Lynch from sporadic ovarian cancers include earlier stage, younger patients, greater proportion of non-serous histology and accompanying synchronous endometrial cancer in up to 22% of diagnoses.

Colorectal (CRC): It is suggested that individuals with Lynch syndrome undergo CRC screening with annual colonoscopy beginning at age 20 to 25 years, or two to five years prior to the earliest age of CRC diagnosis in the family (whichever comes first). Some guidelines reported in NCCN and American College of Gastroenterology (ACG) suggest that in families with an MSH6 mutation, CRC screening may be started at an age of 25 to 30 years due to the lower CRC risk and a later age at CRC diagnosis. However, CRC risk in men with the MSH6 mutation is not as low as in women and that if an early-onset CRC exists in the family, then the CRC screening should begin between the ages of 20 and 25 years. The CRC risk for PMS2 mutation carriers is delayed for both men and women. However, there are very early-onset cases are reported and a delay in CRC screening is not recommended. CRC screening has been demonstrated to decrease mortality in individuals with Lynch syndrome.

Reproductive Counselling:
Individuals of reproductive age should be offered carrier testing and prenatal testing options including preimplantation genetic diagnosis. In addition, couples should be advised of the possibility and risks associated with both partners being carriers of pathogenic variants in the same MMR gene, leading to a 25 percent chance of having a child with constitutional mismatch repair deficiency syndrome (biallelic mutations of the DNA MMR genes). Carrier testing can be offered to the partner to determine if they are carriers of pathogenic variants in the same MMR gene.

Prophylactic Surgery:
Risk-reducing hysterectomy and bilateral salpingo-oophorectomy surgery is effective in preventing endometrial and ovarian cancers in women with Lynch syndrome. Timing is individualized and may be considered depending on co-morbidities, family history the LS gene and when childbearing is complete. Hysterectomy has not been shown to reduce endometrial cancer mortality, but it can reduce the incidence of endometrial cancer overall. Insufficient evidence exists to make recommendations for risk reducing salpingo-oophorectomy (RRSO) in MSH6 and PMS2 mutations.

Chemoprevention:
There are limited data regarding chemoprevention for gynecologic malignancies specifically in women with Lynch syndrome. However, in the general population, the Cancer and Steroid Hormone (CASH) case-control studies demonstrated a 50 percent reduction in the risk of endometrial and ovarian cancer associated with the use of oral contraceptive pills. In addition, progestin-containing agents have been shown to reverse or arrest disease progression in women with endometrial hyperplasia; however, these data do not
address the role of progestins in prevention of endometrial cancer.

A multi-institutional, short-term biomarker study was completed comparing levonorgestrel oral contraceptive pills with depot medroxyprogesterone acetate (DMPA) for chemoprevention in women with Lynch syndrome. This study demonstrated that these high-risk women do show a decreased proliferative response of their endometrium to short-term exogenous progestins, suggesting that oral contraceptives and DMPA may be reasonable chemo-preventive agents. Additional studies are needed.

**Risk to Relatives:**
It is important to advise patients to tell their relatives about possible inherited cancer risk options for risk assessment and management. Recommend genetic counselling. Finally, genetic counselling referrals (GCR) have been demonstrated to be missing the mark. In 2018, Lee et al published results looking at GCR and subsequent genetic testing in an ethnically diverse group of high-risk women.

Between 2011 and 2016 five hundred and eighty-three women diagnosed with endometrial cancer where 31.6% (184) were found to have at least one high risk feature. They found only 58% were given GCR with only 35% undergoing genetic counselling. Ten of the 65 high risk women who completed the testing were found to be Lynch (+). Incidentally, two patients of Asian descent had normal MMR but were tested and also tested positive for Lynch syndrome.

Identification of high-risk women with or without MMR abnormalities should ultimately lead to genetic test and counselling. Improving identification of those at risk and implementing screening guidelines have proven to decrease the mortality associated with colon cancer and the incidence of gynecologic malignancies after risk reducing surgeries. A simple guideline reference can be found in the NCCN guidelines.

**References:**
1. Lee et al, Missed opportunities: Genetic Counselling and testing among ethnically diverse cohort of women with endometrial cancer. Gyn Oncol 151 (1018) 153-158
3. ACOG Committee Opinion Number 634, Hereditary Cancer Syndromes and Risk Assessment, June 2015 reaffirmed 2017 Committee on Genetics
4. Lu et al, Endometrial and ovarian cancer screening and prevention in women with Lynch syndrome (hereditary nonpolyposis colorectal cancer) UpToDate: Apr -08, 2019
ACOOG Calendar of Events
& AOBOG News

ACOOG CME

Calendar of Events

2019 Advances in Women’s Health
October 3-6, 2019
Hyatt Regency Columbus
Columbus, OH

2020 Advances in Women’s Health
October 15-18, 2020
Westin Peachtree Plaza
Atlanta, GA

2021 Advances in Women’s Health
October 21-24, 2021
Sheraton Grand Chicago
Chicago, IL

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

88th Annual Conference
April 11-16, 2021
Hyatt Regency Coconut Point
Bonita Springs, FL

89th Annual Conference
April 3-8, 2022
Grand Hyatt San Antonio Riverwalk
San Antonio, TX
AOBOG Adds Second Administration of Primary Written Exam

AOBOG has added a second administration of the Primary Written Exam. In addition to the current administration in the spring, there will now be a fall administration. This change is to provide residents and practicing physicians with more opportunities to take the exam each year. The first fall administration will take place October 12-19, 2019 at Pearson VUE testing centers across the U.S. Applications are currently available online at https://certification.osteopathic.org/obstetrics-gynecology/all-exams/. The final deadline to apply is September 16, 2019.

OCC Changes

AOBOG will soon be launching its new exam format for OCC Component 3. The new platform is called Advanced Real-Time Certification (ARC) and will consist of small batches of questions delivered online periodically throughout your certification. Be on the lookout for more information about ARC and when you will begin the process!

The Physician Portal (physicianportal.osteopathic.org) is also a great resource for you to review your OCC requirements and progress.

Become an AOBOG Examiner!
Be the Change! Set the Bar!!!!

Join the AOBOG as an examiner! Participate in question and test development, work with cutting edge physicians who are making a difference! Go above and beyond by committing to the future of the osteopathic profession. We meet twice a year for exams, and all examiners earn CME while contributing to their lifelong learning. Become a part of a great group of OB/GYN leaders by joining this prestigious group of physicians!

For more information or to apply, please visit certification.osteopathic.org/obstetrics-gynecology/volunteers/ or email aobog@osteopathic.org.

AOBOG welcomes its newest examiners: Ajit Gubbi, DO; Rachel Kaplan, DO; Trung Nguyen, DO; Florian Walter, DO; and Gregory Willis, DO!

2019 & 2020 Examination Schedule

Fall 2019 Exam Dates and Deadlines:
• September 20-21, 2019 – Primary Oral Exam – Rosemont, IL (final deadline to apply is June 24, 2019 or when the cap on candidates has been reached)
• September 20-21, 2019 – Subspecialty Certification Exams (initial subspecialty certification only) – Rosemont, IL (final deadline to apply was June 3, 2019)
• October 12-19, 2019 – Primary Written Exam (new fall administration!) – Pearson VUE Testing Centers (final deadline to apply is September 16, 2019)

Spring 2020 Exam Dates and Deadlines:
(Applications available fall 2019)
• April 13-18, 2020 – Primary Written Exam – Pearson VUE testing centers across the US (final deadline to apply is March 9, 2020)
• April 24-25, 2020 – Primary Oral Exam – Rosemont, IL (final deadline to apply is

(Continued on Page 26)
January 27, 2020 or when the cap on candidates has been reached)
• April 24-25, 2020 – Subspecialty Certification Exams (initial subspecialty certification only) – Rosemont, IL (final deadline to apply is December 13, 2019)

All examination applications are exclusively available on the AOBOG website.

View the entire calendar of upcoming exams at certification.osteopathic.org/obstetrics-gynecology/important-dates/ Visit the AOBOG website for up-to-date information about certification, examinations, applications, and Osteopathic Continuous Certification (OCC).
In nationwide surveys, over 1200 women between the ages of 30 to 50 were asked to share their thoughts about reducing or eliminating their heavy menstrual bleeding.

48% of women were interested in a 3-4 minute treatment to reduce or eliminate their heavy bleeding.

90% of women interested in endometrial ablation want zero bleeding.

72% of treated women reported amenorrhea after Minerva ES, twice as high as the nearest competitor (36%).

And 93% of women reported bleeding was reduced to normal levels or less after Minerva.

For the best period of her life.

Quality of care. Quality of life.

Ob Hospitalist Group

Sign up for job alerts NOW HIRING
Stop UTIs before they start

**ellura** is a non-antibiotic alternative for UTI prevention

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Prescribe Solosec® (secnidazole) for your patients

Patients may pay as little as $25 for treatment with the Solosec Savings Program*

*Excluding Medicaid, Managed Medicaid, and Medicare. Terms and conditions apply. Please visit solosechcp.com/savings for more details and to download a savings card.

Visit solosechcp.com for Important Safety Information and full Prescribing Information.

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We put patients and their families at the center of everything we do.

This belief inspires us and the work we do to support the care and well-being of the patients and families we serve. Every day, we devote our passion, expertise and resources to developing and delivering products that support patients in the areas of maternal and women's health, anemia management and cancer supportive care.
Practice Opportunities

MATERNAL FETAL MEDICINE PHYSICIANS (OHIOHEALTH)

OhioHealth Maternal Fetal Medicine Physicians is hiring a Maternal Fetal Medicine Physician to join a well-established practice serving the Columbus, Ohio, community.

- The practice has locations at OhioHealth Riverside Methodist Hospital (RMH), OhioHealth Grant Medical Center (GMC), OhioHealth Dublin Methodist Hospital (DMH) and additional outreach locations.
- RMH and GMC both have Level III Maternity Service and Level III NICU and DMH has Level II Maternity Service and Level II NICU, proving world-class healthcare.
- Strong partnership through a loyal referral base of OB/GYNs.
- The three main practice locations offer advanced diagnostics, including 3D/4D ultrasound and genetic counseling services.
- 1:9 weekend call schedule.

Enjoy the stability of employment along with highly competitive compensation, comprehensive benefits, relocation assistance, and student loan reimbursement.

Partnership for Healthcare Excellence Today and in the Future

Today’s complex healthcare environment requires physicians and hospitals to work together to achieve excellence in clinical quality, patient safety and service quality. One of the ways we achieve that kind of partnership is through the OhioHealth Physician Group (OPG), a medical group of OhioHealth physicians, advanced practice providers and associates.

We value the expertise of our strong physician network. We seek out your ideas for improving the patient experience and implement them. It’s one of the reasons why we are regularly ranked in the top 10 percent of Press Ganey’s hospital experience survey, which measures physician engagement and satisfaction.

You can contribute to a culture that has repeatedly made OhioHealth one of the Fortune “100 Best Companies to Work For.” And you can collaborate with MD Anderson Cancer Network-certified physicians, use telemedicine to seek the real-time advice of experts across the system, be a part of our state-of-the-art Neuroscience facility, Level 1 Trauma Center or Primary Stroke Center, or find your fit in any of our ambulatory or specialized care sites across the central region of the state.

We Never Stop Learning

At OhioHealth, we want to do more than support the careers of our physicians — we want to grow their talents and help them reach their highest aspirations. We see your education not as an expense, but as a strategic investment in the health system.

We know growth isn’t limited to just education, so we rely on the voices and leadership of our physicians. We have Clinical Guidance Councils, a Physician Diversity Workforce Group, and the OhioHealth Physicians.

(Continued on Page 31)
Leadership Institute to help you lead, grow and innovate in all facets of your career.

**We Want to Talk About Your Future**

Columbus is one of the top locations in the country for young professionals, with a mix of big-city amenities and small-town affordability. OhioHealth offers a wide range of professional experiences in communities throughout central and southeast Ohio, giving you the opportunity to find the perfect fit for your family and your career.

For more information, please contact Jessica Federer at (614) 544-4355 or email your CV to Jessica.Federer@ohiohealth.com.

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**OB/GYN – FQHC IN CENTRAL CA**

Are you a newly trained or experienced OB/GYN Physician in search of a challenging yet supportive practice opportunity? If so, consider joining the expanding provider team at Family HealthCare Network. Located in the heart of California’s growing Central Valley, we are a dedicated team, working together with patients to optimize the health of the community. Our providers are committed to offering exceptional primary care, and have the opportunity to build their skills among a team of multi-specialty providers. With access to on-site services such as ultrasound, imaging, laboratory services, and other specialty services, you will have the opportunity to focus on providing quality medicine with a mission.

Our employed positions offer:
- a team approach to care
- a stable work environment with a competitive income
- an attractive benefits package with an extensive list of professional benefits
- located within a couple of hours from the state’s beautiful foothills, lakes, the Sequoia National Park and the Central Coast

You will be fully supported to provide the patient care you have been trained to do. We are currently seeking board certified or board eligible providers seeking to offer quality health care services with a mission.

For more information contact or send your CV to:

Marya Vela, Provider Staff Recruiter
mvela@fhcn.org or providerrecruitment@fhcn.org
559-737-4710

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**OB/GYN - PEORIA, IL**

**ACADEMIC PHYSICIAN OPPORTUNITY**

**Job Specifics**
- The Department of Obstetrics and Gynecology at the University Of Illinois College Of Medicine at Peoria is seeking an obstetrician/gynecologist to serve as a non-tenured, clinical discipline track faculty at the rank of Assistant/Associate/Professor.
- Candidates must have a MD/DO degree, be board certified or eligible, and licensed or eligible for licensure in the State of Illinois.
- The position will supervise and educate OB/GYN residents in out-patient clinics, in-patient services, labor & delivery, and surgery. Opportunities exist for clinical research. Prior experience in graduate medical education is highly desirable.
- Minimal call is required.
- EEO Employer M/F/Vet/Disabled

(Continued on Page 32)
The Community
• Peoria, the largest Illinois metropolitan area outside of Chicago and St. Louis, is home to a large collection of medical research, educational and clinical facilities including the University of Illinois College of Medicine at Peoria and Jump Trading Simulation & Education Center.
• Peoria, Illinois, offers a range of residential opportunities whether you are looking for something out of the way, in the woods, along the river or right in the heart of the city.
• Peoria is also home to a number of performance venues, museums, art galleries and more than two dozen historic landmarks of both local and national fame.

About The University of Illinois College of Medicine at Peoria
The University of Illinois College of Medicine Peoria makes up one of the nation’s largest public medical school. The Peoria campus is known among students for its small class sizes, rigorous curriculum and hands-on clerkships; to residents and fellows for the strong academic setting, large referral base and exceptional facilities; and by physicians seeking the ideal combination of teaching and practicing medicine in a research-based university setting.

Please contact or send CV to:
Brandi McCombs, OSF HealthCare Physician Recruitment
Ph: (309) 683-8351 | Fax: (309) 683-8353
Email: brandi.n.mccombs@osfhealthcare.org
Web: osfhealthcare.org

OB/GYN - VALLEJO, CA
SUTTER MEDICAL GROUP
Sutter Medical Group is currently seeking a BC/BE OB/GYN for an established practice in Vallejo, CA.
Sutter Medical Group is a successful, 1000+ member multi-specialty group offering physicians the opportunity to build their practices within a progressive, financially sound and collaborative organization. SMG is recognized as a Top Performing Physician Group by the Integrated Healthcare Association. Our members are dedicated to providing the highest quality and most complete health care possible to the people in the communities we serve in the greater Sacramento Sierra Region of Amador, Placer, Sacramento, Solano and Yolo Counties.

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

Community Information
Our inviting Northern California location offers a rich variety of lifestyle advantages. Come experience exhilarating outdoor activities with convenient access to the Napa Valley wine country, the splendor of Lake Tahoe, the majestic Sierra Nevada Mountains and the excitement of San Francisco.

Contact Information
Jason Tafoya, Physician Recruiter
Sutter Health, Sacramento Sierra Region
2750 Gateway Oaks, Sacramento, CA 95833
800.650.0625 - email: Tafoyajp@sutterhealth.org

(Continued on Page 33)
PERMANENT OBSTETRICS & GYNECOLOGY POSITION
At Patrlow, Harbin & Poist OBGYN, M.D., P.C., our employee culture combines a friendly and collegial work environment with high performance standards. We are actively seeking a BE/BC Obstetrics & Gynecology Physician to join our team! In addition to excellent compensation, the incoming provider can expect to be a part of a busy practice with opportunity for partnership after 3 years.

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

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

Interested candidates please contact:
Kelly Hargrove
314-236-4454
khargrove@cejkasearch.com

Please reference Position ID 161241 when responding.

OB/GYN
OTTAWA, IL
What are you looking for? Great base salary? Work/life balance? Proximity to a big city? We have the total package...

Job Specifics
• Work/life balance exists in this new position as an employed physician of OSF HealthCare Medical Group
• Call is 1:4 weekends; single hospital responsibilities at OSF Saint Elizabeth Medical Center
• Supportive work environment including 3 OB/GYN, Midwife, Nurse Practitioner and onsite Maternal Fetal Medicine Clinic
• Epic electronic health record is utilized in OSF inpatient and outpatient settings
• H1B visa applications accepted.
• EEO Employer M/F/Vet/Disabled

The Benefits
• Competitive base salary plus incentives.
• 4 weeks paid vacation and 6 paid holidays
• 480 hours sick time/year
• Signing bonus
• Loan repayment options
• Paid occurrence based malpractice, CME, association membership dues
• Health, life, and dental insurance, retirement plan, and paid relocation

The Community
• Ottawa, a town with a population of 18,000, has easy access to I-80 and I-39, offers ready access to major cultural centers in Chicago, Rockford, and Peoria (each approximately 80 to 90 minutes by car)
• The community has a family-oriented environment and boasts excellent public and parochial schools.
• Recreational opportunities abound with four beautiful State parks located within ten minutes of Ottawa (Starved Rock, Mathieson Park, Buffalo Rock and Illini State Park) and the Illinois & Michigan Canal Trail.

Not enough? OSF HealthCare, named best employer in Illinois by Forbes magazine!

Please contact or send CV to:
Brandi McCombs, OSF HealthCare Physician Recruitment  
Ph: (309) 683-8351 or (800) 232-3129, press 8    
Fax: (309) 683-8353  
Email: brandi.n.mccombs@osfhealthcare.org  
Web: osfhealthcare.org  

CENTRAL OHIO REGION (OHIOHEALTH)  
OhioHealth is seeking OB/GYN physicians to join their successful hospital employed teams at multiple locations in the Central Ohio region, including Athens and Marion. These well-established practices are extremely busy with a loyal patient base.

Join us and enjoy:  
• Both practices are in close proximity to the hospital  
• Supportive team environment  
• Excellent benefits and retirement packages

OhioHealth, a family of not-for-profit, faith-based hospitals, has been serving patients in central Ohio since 1891. Its campuses are comprised of 11 award-winning hospitals and more than 200 neighborhood care sites within the central Ohio region. Our network is comprised of approximately 3,500 of Ohio’s finest physicians. These physicians work in practices, hospitals and ambulatory sites throughout the communities we serve. The OhioHealth Physician Group (OPG) employs more than 600 physicians, in primary care and a wide range of specialties. We also partner with hundreds of independent practicing physicians, to add to the overall healthcare quality in central Ohio.

For the twelfth consecutive year, OhioHealth has also been named one of the nation’s top 15 health systems for clinical performance by IBM Watson Health six times – more than any other health system. OhioHealth has ranked first or second nationally for the last seven years in Press Ganey’s Physician Engagement Survey.

For more information, please contact Jessica Federer at (614) 544-4355 or email your CV to Jessica.Federer@ohiohealth.com.

KSB HOSPITAL - DIXON, IL  
Excellent opportunity for a board certified or eligible OB/GYN to join our Hospital Employed practice at KSB in Dixon, IL. You will be joining 2 physicians and 2 APPs in this busy practice with a healthy mix of obstetrics and gynecology. Our BirthPlace, with an exciting remodel completing in early 2019, averages approx. 350 births per year. Call is 1:3.

You can expect:  
• Very competitive compensation plan  
• Comprehensive benefit plans for the physician and their family  
• 4 week’s vacations in addition to 2 weeks CME  
• Relocation assistance  
• Education loan repayment assistance  
• Signing bonus  
• And more!

About KSB  
KSB Hospital is an independent, 80 bed community hospital. We currently employ 55 physicians in a multi-specialty, hospital integrated group practice. At KSB, it’s the people – our patients, our team, our families – that make us special!
About Our Community
KSB Hospital lies on the banks of the Rock River in historic Dixon, IL. Dixon has much to offer a physician and their family! Living in Dixon offers the advantages of a smaller town with a great quality and cost of living, welcoming neighbors, and a safe environment - all while still being less than 2 hours from anywhere in Chicago including O’hare International Airport and the Magnificent Mile. With Dixon’s more than 25 parks, a selection of golf courses, a beautiful riverfront, and a vibrant downtown; we have plenty to offer for everyone!

Direct Contact Information
To hear more about this opportunity, please contact Ryan Miller, Physician Recruiter, KSB Hospital, rmmiller@ksbhospital.com, 815-285-5901

OB/GYN
GALESBURG, IL
What are you looking for?
Great base salary? Work/life balance? Proximity to a big city? We have the total package

Job Specific:
- Practice with two other OB/GYN physicians and a family physician trained in OB. Lab and x-ray are on site.
- In the process of building a new Family Birthing Center.
- Current physicians average approximately 425 deliveries per year.
- A physician with surgical gynecology skills (abdominal, lap-assisted, and vaginal hysterectomies) and urogynecology skills (cystocele, rectocele repair) is desired with moderately advanced surgical procedure capability a plus.
- Practice has certified Ultrasound Technician and two Midwives
- Primary OB call is 1:4.
- H1B Visa applications accepted.
- EEO Employer M/F/Vet/Disabled

The Benefits:
- Competitive base salary plus incentives.
- 4 weeks paid vacation and 6 paid holidays
- 480 hours sick time/year
- Signing bonus
- Loan repayment options
- Paid occurrence based malpractice, CME, association membership dues
- Health, life, and dental insurance, retirement plan, and paid relocation

The Community:
- OSF HealthCare St. Mary Medical Center is a 99-bed acute care hospital providing state-of-the art therapeutic, diagnostic, medical & surgical services to Galesburg, Illinois and surrounding areas. https://www.osfhealthcare.org/st-mary/
- While the city offers the best of urban living from great restaurants to excellent entertainment and recreational activities, anyone you ask can tell you that Galesburg’s small town roots is at the heart of everything that goes on here.
- A city rich in history, Galesburg is one of the only remaining historic sites where the famous Lincoln-Douglas debates occurred. Both Carl Sandburg and former President Ronald Reagan resided here and their homes are still available for viewing.

Please contact or send CV to::
Brandi McCombs, OSF HealthCare Physician Recruitment
Ph: (309) 683-8351 | Fax: (309) 683-8353
Email: brandi.n.mccombs@osfhealthcare.org
Web: osfhealthcare.org

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Practice Opportunities . . .
(Continued from Page 35)

OB/GYN
ESCANABA, MI
Job Specifics:
• Seeking an additional OB/GYN physician
to join a stable practice of four Board
Certified OB/GYN physicians and one APN
at OSF HealthCare St. Francis Hospital &
Medical Group in Escanaba, MI
• Equal mix of obstetrics and gynecology
• Average more than 300 deliveries per year
• Regional leader in minimally invasive
gynecologic surgeries
• Call is taken one week at a time. Reduced
time is allocated for office patients and the
focus is on the care of the obstetric patient.
• EEO Employer M/F/Vet/Disabled

Benefits:
• Competitive base salary plus incentives.
• 4 weeks paid vacation and 6 paid holidays
• 480 hours sick time/year
• Signing bonus
• Loan repayment options
• Paid occurrence based malpractice, CME,
association membership dues
• Health, life, and dental insurance, retirement
plan, and paid relocation

Hospital:
• OSF St. Francis is part of OSF HealthCare,
a 13-hospital health system that has been
serving the South Central Upper Peninsula
of Michigan and Illinois since 1884
• Designated a “Top Rural Hospital” by the
Leapfrog Group for six years
• Second busiest critical access hospital in the
state of Michigan.
• Physician longevity

Community:
Located on Lake Michigan in the Upper
Peninsula of Michigan, Escanaba is in the heart
of Delta County and is known for the largest
stretch of fresh water shoreline in the U.S.
and is surrounded by nearly 900,000 acres of
national
Escanaba has a population of about 16,000
residents with about 45,000 residents
throughout the entire service area.
The area schools are ranked among the best in
the U.S.
Enjoy four distinct seasons of recreational
activities, including hiking, rock climbing,
kayaking, golfing, bicycling, fishing, sailing,
snowmobiling, snowshoeing, skiing, swimming
and camping.
Please contact or send CV to:
Brandi McCombs, OSF HealthCare Physician
Recruitment
Ph: (309) 683-8351 | Fax: (309) 683-8353
Email: Brandi.n.mccombs@osfhealthcare.org
Web: https://www.osfhealthcare.org/st-francis/

OB/GYN  ROCKFORD, IL
WHAT ARE YOU LOOKING FOR?
GREAT BASE SALARY? WORK/LIFE
BALANCE? PROXIMITY TO A BIG CITY?
WE HAVE THE TOTAL PACKAGE

Job Specifics:
• OSF Medical Group, part of OSF
HealthCare, seeks a board certified/board
eligible Ob/GYN physician to join a
robust and growing practice including four
physicians and one APN.
• OSF HealthCare would welcome and
embrace an OB/GYN physician focused on
Natural Family Planning methods.
• Academic appointment is available with
the UIC College of Medicine, Rockford,
Illinois.
• Clinic is located just two blocks from OSF
Saint Anthony Medical Center.
• Group has approximately 500 deliveries per
year.
• Call is 1:5.
• EEO Employer M/F/Vet/Disabled

(Continued on Page 37)
The Benefits:
• Competitive base salary plus incentives.
• 4 weeks paid vacation, 6 paid holidays and 480 hours sick time/year
• Signing bonus
• Loan repayment options
• Paid occurrence based malpractice, CME, association membership dues
• Health, life, and dental insurance, retirement plan, and paid relocation

The Community:
• OSF HealthCare Saint Anthony Medical Center, is a 254-bed, Level I Trauma Center located in Rockford, Illinois. Serving Northern Illinois, OSF HealthCare Saint Anthony Medical Center is home to the Center for Cancer Care, Cardiovascular Institute, Illinois Neurological Institute and OSF Wound Healing Center. https://www.osfhealthcare.org/saint-anthony/. The Rockford area is home to some of the greatest variety in residential opportunities and is consistently ranked as one of the top five metropolitan areas in the United States for affordable housing.
• The Rockford area is home to some of the greatest variety in residential opportunities and is consistently ranked as one of the top five metropolitan areas in the United States for affordable housing.
• The Rockford Park District consists of over 150 public parks, 10 golf courses and more than 7,000 acres of land, providing residents plenty of room to bike, hike, swim, boat, picnic, camp and fish

Please contact or send CV to:
Brandi McCombs
OSF HealthCare Physician Recruitment
Ph: (309) 683-8351 | Fax: (309) 683-8353
Email: Brandi.n.mccombs@osfhealthcare.org

OBSTETRICS/GYNECOLOGY – ESTABLISHED PRACTICE, ABOUT ONE HOUR TO PHOENIX-METRO
Excellent opportunity for BC/BE Ob/Gyn physician to join Banner Medical Group in the beautiful, mountainous town of Payson, AZ. We are actively recruiting for an experienced, team-oriented physician to join this established practice.

We seek candidates who are:
• Board Certified or Board Eligible in Obstetrics/Gynecology
• Minimum two years of experience
• Interested in full scope Ob/Gyn
• Patient-focused, friendly and energetic

Payson is a beautiful town that offers a lower cost of living, loads of outdoor activities, and a small-town feel. With a mild four seasons, Payson acts as a gateway to some of the state’s most popular outdoor activities: hiking, photography, camping, skiing, fishing, hunting, etc. With hospital privileges at Banner Payson Medical Center, our practice provides care to a population of over 15,000 as well as several surrounding communities. Some additional details about the position:

• Monday - Thursday office hours; weekday and weekend (low-volume) call shared 1:2
• Medical Assistants, dedicated Surgery Scheduler, Front Office, and leadership support
• Expected patient load of 20-25 patients/day/physician

Imagine a career where you can:
• Drive health care change
• Experience a physician-led environment where your voice matters
• Collaborate with top specialists and medical centers in an integrated setting
• Access academic medicine, research and

(Continued on Page 38)
clinical trials
- Advance into key leadership roles or other subspecialties
- Experience greater professional stability with access to sound systems in place
- Enjoy a culture where physician well-being is weaved into our values

Banner Health is one of the largest non-profit health care systems in the country with twenty-eight hospitals (15 in Arizona), six long term care centers and an array of other services, including family clinics, home care services and home medical equipment, in six western states. As a leading nonprofit provider of health care in every community we serve, Banner Health is deeply committed to our providers with a customer-obsessed approach to making health care easier, so life can be better. Your voice is valued, your well-being matters, and strong teams are fostered.

In addition to a culture where innovation and improvement are encouraged, WE OFFER YOU a generous compensation package including:
- competitive base salary + paid time off + relocation assistance + paid malpractice + paid CME plus allowance + paid professional fees + 401k matching + excellent benefit package options that provide security for you and your family.

Please submit your CV for immediate consideration, to: doctors@bannerhealth.com. For questions, please contact Pam Disney, Sourcing Strategist, at: (602) 747-4397. Visit our website at: www.bannerdocs.com

As an equal opportunity and affirmative action employer, Banner Health recognizes the power of a diverse community and encourages applications from individuals with varied experiences and backgrounds. Banner Health is an EEO/AA - M/W/D/V Employer. Please, No Agency Solicitation.
The American College of Osteopathic Obstetricians and Gynecologists

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Martha Prud’homme.................................................Program Manager
Earn up to 24.25 Category 1-A, AOA and Category 1 AMA PRA CME Credits™

- 17.25 for General Session Credits
- 5 for Optional Ultrasound Pre-Course Credits
- 2 for Optional OMM Pre-Course Credits

NEW!

- NPs and PAs who register for the 2019 Advances in Women’s Health conference receive a complimentary 1-year Affiliate ACOOG Membership!
ACOOG invites you to be part of our 2019 Advances in Women’s Health conference. This conference has been carefully designed to meet the unique educational needs of women’s healthcare physicians and providers. It offers thorough advanced approaches to a variety of clinical topics and emerging issues faced by OB/GYNs. In addition to topics presented by leading experts, this year’s schedule provides an opportunity to participate in hands on workshops and participate online. We hope to see you in Columbus for the 2019 Advances in Women’s Health conference.

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

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

REQUIREMENTS FOR SUCCESSFUL COMPLETION
Participation in the activity, completion of the online attestation form, and completion of the online post-course evaluation are required to receive CME credit and a certificate of attendance.

LOCATION & LODGING

Hyatt Regency Columbus
350 N High Street
Columbus, OH 43215
Group Rate: $171, plus taxes and fees
Use code G-OBGY or ACOOG

Located in central Columbus, all rooms at the Hyatt Regency Columbus feature a flat-screen TV with cable channels, desk and coffee maker.

Complementary WiFi is accessible throughout the Columbus Hyatt Regency. The hotel has a 24-hour business center and on-site laundry facilities, along with a fitness center.

This property also has one of the top-rated locations in Columbus! Guests are happier about it compared to other properties in the area.
SOCIAL EVENT

The Big Bang Dueling Piano Bar
401 North Front Street
Columbus, Ohio 43215

Join us for an amazing night of entertainment, laughs and music at The Big Bang Dueling Piano Bar. As one of Columbus’ most highly-rated attractions, you’re sure to have a GREAT time while you sing along, stump the pianists and have fun with your friends and colleagues.

And don’t forget to sponsor a student to attend this exciting event!

The cost for each participant/guest is $75.

NEW! NPs and PAs who register for the 2019 Advances in Women’s Health conference receive a complimentary 1-year Affiliate ACOOG Membership!

Valid for one-year only.
OPTIONAL PRE-COURSES: EARN UP TO 7 ADDITIONAL CME CREDITS

Thursday, October 3, 2019

PRE-COURSE #1

**Obstetrics Ultrasound Flipped Classroom**
1:00 - 3:00 PM
**ONLINE COURSES ARE REQUIRED BEFORE PARTICIPATING IN THE HANDS-ON WORKSHOP**

Limited to the first 40 participants who register
Available Credits:
5 AOA Category 1-A CME Credits
5 **AMA PRA Category 1 Credits™**
  • 3 credits earned online (Required)
  • 2 credits earned in-person at the hands-on workshop

**About this Course**
This course will focus on proper scanning procedures and interpretation for fetal growth assessment in women at or between 21-30 weeks of pregnancy.

Ultrasound is important in obstetrics for identifying pregnancy-related conditions that put the mother or baby at risk during delivery. Rapid advances in technology and technique require Ob/Gyns and advanced practitioners to update their knowledge and skills in order to properly perform ultrasound. Research suggests the quality of Ob ultrasound and its interpretation is highly variable and operator dependent, but competency-based ultrasound training has been shown to minimize variability and improve ultrasound reliability, especially for Ob/Gyns, reducing missed or incorrect diagnoses, and improving patient safety.

**Learning Objectives:**
  • Describe the technique for a basic anatomy ultrasound scan
  • Demonstrate the correct technique performing detailed fetal anatomic ultrasound examinations in fetuses
  • Correctly interpret the results of at least 80% of scans

**Format**
This course is designed as a flipped classroom, meaning the lectures (four 45-minute modules) are completed online before you attend, and all class time is devoted to hands-on practice and observation with ultrasound machines and live models. Each participant will receive feedback from an expert facilitator on areas of strengths and opportunities for improvement.

Faculty
James Perez, DO, FACOOG (Dist)
Lori Crites-Perez, RN, RDMS

Ultrasound Trainers
Stephanie E. Rajchel, DO, FACOOG
Michelle Birkenholz, DO, FACOOG
Jennifer A. Roncone, DO, FACOOG
Mona Prasad, DO, MPH

PRE-COURSE #2

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

2 AOA Category 1-A CME Credits
2 **AMA PRA Category 1 Credits™**

Natalie Hyppolite, DO, FACOOG
AGENDA

GENERAL SESSION
17.25 CME Credits

Friday, October 4, 2019
(6.75 CME Credits)

7:00-7:30am  Breakfast / Exhibitors
7:15-7:30 AM  President's Welcome
7:30-8:15am  Addressing Human Trafficking
              New Efforts & New Challenges
              Past Presidents Honorary Lecture
              Theresa Flores, LSW, MS
8:15-9:00am  Atypical Glandular Cells & AIS
              Management
              Peter Schnatz, DO
9:00-9:45am  Break with Exhibitors
9:45-10:30am CPR in Pregnancy
              Daniel Berger, DO
10:30-11:15am Cardiac Critical Care for Pregnant
              Patients: The Power of Teamwork
              Michele Voeltz, MD
11:15-12:00pm Fertility Awareness-Based Methods
               (FABMs) And Natural Family Planning
              Madeleine Guevara, DO
12:00-1:15pm  Lunch with Exhibitors
1:15-2:00pm  Employment Contract Negotiation
              Bonnie Simpson Mason, MD
2:00-2:45pm  Individualizing Hormone Therapy
              During Menopause and Beyond
              Valerie Schulte, DO
2:45-3:15pm  Break with Exhibitors
3:15-4:00pm  Informed Consent & Proper
              Documentation
              Shania Seibles, DO, JD
4:00-4:45pm  Office Procedure Safety &
              Telemedicine
              William Bradford DO

Saturday, October 5, 2019
6.75 CME Credits

7:00-7:30am  Breakfast / Exhibitors
7:30-8:15am  State Legislation, Federal Regulation & The
              Future of Roe V Wade
              Sarah Horvath, MD
8:15-9:00am  OMM in Post-op GynOnc Patients
              Carl Christie, DO
9:00-9:45am  Chronic Cardiac Disease in Pregnancy
              Lindsay Castle, DO
9:45-10:30am Break/Exhibits
10:30-11:15am Pelvic Floor Dysfunction & Incontinence
              Andrew Croak, DO
11:15-12:00pm Dyspareunia: Listening, Logic and
              Comprehensive Care
              Karen Liberi, MS, MPT, WCS
12:00-1:30pm  Non-CME Lunch Symposium
1:30-2:15pm  Diagnosis & Treatment Of Bacterial
              Vaginitis: What To Do When Your
              First Line Therapy Doesn’t Work
              Andrew Zink, DO
2:15-3:00pm  Utilizing Best Practices to Communicate
              With Patients About Unexpected Prenatal
              Chromosomal Results
              Stephanie Meredith, MA
3:00-3:45pm  Fertility Preservation After GynOnc
              Surgery
              Carl Christie, DO
3:45-4:30pm  Addressing Persistent Gaps in
              Endometriosis-Related Pain: Strategies for
              Improving Patient Quality of Life
              Larry Holland, DO;
              Karen Liberi, MS, MPT, WCS;
              Sara Spears

Sunday, October 6, 2019
3.75 CME Credits

7:30-8:00am  Breakfast
8:00-8:45am  Spiritual Well-Being Of Health Care
              Professionals-My Soul Is Steady Within
              Sameerah Shareef, MSN, CNM
8:45-9:30am  The Teenager & Sexuality: Speaking
              Their Language
              Tyree Winters, DO
9:30-9:45am  Break with Exhibitors
9:45-10:30am MIGS: Robotic Laparoscopy Techniques
              Larry Holland, DO
10:30-11:15am ARRIVE Trial Update
              Jennifer Papp, DO
11:15-12:00pm Reducing Maternal Morbidity with
              Interpregnancy Care
              Daniel Berger, DO
IMPORTANT MEETINGS

Thursday, October 3, 2019
8:00am-12:00pm  Board of Trustees
12pm-5pm  Early Registration
12pm-3pm  Resident Research & QI Workshop

Friday, October 4, 2019
1:00pm-3:30pm  Council of Postgraduates
3:30pm-5:00pm  CMEC Meeting
5:30pm-7:00pm  Residency Fair/NSS Mixer

Saturday, October 5, 2019
8:00am-12:00pm  Medical Student Educational Program
  •  Residency Panel
  •  OMM Session (1st and 2nd year students)
  •  Mock Interviews (3rd and 4th year students)
1:00pm 2:30pm  Membership and Promotion Committee
3:30pm 5:00pm  National Student Society (NSS-ACOOG)

MANDATORY for NSS-ACOOG Representatives
## Things to Do!

<table>
<thead>
<tr>
<th>Location</th>
<th>Driving Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>German Village</strong></td>
<td>7 min</td>
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<tr>
<td>588 S 3rd St</td>
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<tr>
<td>German Village is known for charming brick houses built by 19th-century immigrants along Beck, Mohawk, and Deshler streets. Shops selling books, traditional fudge, and handmade jewelry mingle with art galleries, German pubs, American bistros, and artisan coffee shops. In summer, the Actors’ Theatre Columbus stages outdoor Shakespeare and other plays in Schiller Park with its fountains and flower beds.</td>
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</table>

| **Scioto Mile**                   | 7 min        |
| 233 Civic Center Dr               |              |
| Arena District to the natural beauty of the Whittier Peninsula, the Scioto Mile features lush parkland, fountains, scenic overlooks and a riverfront promenade. |

| **Ohio Theater**                  | 5 min        |
| 39 E State St                     |              |
| Known as the “Official Theatre of the State of Ohio”, the historic 1928 movie palace was saved from demolition in 1969 and completely restored. |

| **Center of Science and Industry**| 8 min        |
| 333 W Broad St                    |              |
| COSI is a science museum and research center located in Columbus, Ohio in the United States. Originally opened in 1964, COSI was relocated to a 320,000 square foot state-of-the-art facility designed by Japanese architect Arata Isozaki along a bend in the Scioto River in the Franklinton neighborhood in 1999. |

| **Columbus Museum of Art**        | 5 min        |
| 480 E Broad St                    |              |
| The Columbus Museum of Art is an art museum located in downtown Columbus, Ohio. Formed in 1878 as the Columbus Gallery of Fine Arts, it was the first art museum to register its charter with the state of Ohio. |

| **Ohio Statehouse**               | 5 min        |
| 1 Capitol Sq                      |              |
| The Ohio Statehouse is the state capitol building and seat of government for the U.S. state of Ohio. The Greek Revival building is located on Capitol Square in downtown Columbus. The capitol houses Ohio General Assembly, consisting of the House of Representatives and the Senate. |

| **Ohio Stadium**                  | 11 min       |
| 410 Woody Hayes Dr                |              |
| Ohio Stadium, also known as the Horseshoe, the Shoe, and the House That Harley Built, is an American football stadium in Columbus, Ohio, on the campus of The Ohio State University. |

| **Wine on High Bar & Retail**     | 5 min        |
| 789 N High St                     |              |
| Sophisticated shop selling wine & craft beer, with a loft bar featuring flights & small plates. |

| **Martini Modern Italian**        | 4 min        |
| 445 N High St                     |              |
| Traditional Italian dishes with a modern twist served in a contemporary space with chandeliers. |

| **The Guild House**               | 5 min        |
| 624 N High St                     |              |
| Unique rustic-modern dining room for sampling eclectic, globally inspired seasonal menus. |

| **Short North Art District**      | 5 min        |
| **Brassica**                      |              |
| 680 N High St                     |              |
| Arts District is a hip, culture-rich area centered on N. High Street. Contemporary galleries fill converted warehouses, and the Wexner Center for the Arts hosts boundary-pushing exhibitions. Shops selling records, streetwear, and vintage clothes are interspersed with student-packed coffeehouses, craft-beer bars, and casual eateries. Programming at Short North Stage spans musicals and cutting-edge drama. |

| **Bakersfield**                   | 7 min        |
| 733 N High St                     |              |
| Casual, quirky choice featuring tacos with handmade tortillas, plus a long cocktail & beer list. |

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**CBUS**

COTA’s CBUS is the city’s free Downtown Circulator, traveling from the Brewery District through Downtown to the Short North and back again. CBUS runs every 10-15 minutes, 7 days a week! Check our operating hours for specific details. URL: https://www.cota.com/how-to-ride/cbus/
ACCREDITATION & CREDIT

Accreditation & Credit Statements for the Live Conference
The American College of Osteopathic Obstetricians & Gynecologists is accredited by the American Osteopathic Association to award continuing medical education credits to physicians. The AOA Council on Continuing Medical Education approves this program for up to 24.25 credits of AOA Category 1-A CME for The American College of Osteopathic Obstetricians & Gynecologists. Physicians should only claim credit commensurate with the extent of their participation in the activity.

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Antidote Education Company and the American College of Osteopathic Obstetricians and Gynecologists. Antidote Education Company is accredited by the ACCME to provide continuing medical education for physicians.

Antidote Education Company designates this live activity for a maximum of 24.5 AMA PRA Category 1 Credit™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

NURSE PRACTITIONERS & PHYSICIAN ASSISTANTS:
The American Academy of Nurse Practitioners Certification Board (AANPCB) recognizes activities approved for Category 1-A credit through the American Osteopathic Association as providing advanced practice CE content hours for applicants seeking renewal through continuing education credit. ACOOG recommends that NPs check with their certification/licensing authority to confirm that AOA credit is reciprocal.

The National Commission on Certification of Physician Assistants (NCCPA) recognizes activities approved for Category 1-A credit through the American Osteopathic Association as Regular Category 1 CME for national certification maintenance.

All NPs and PAs participating in this activity will receive a certificate of completion commensurate with the extent of their participation in the activity.

DISCLOSURE POLICY
All planners, speakers, authors, and reviewers involved with content development for continuing education activities provided by the American College of Osteopathic Obstetricians and Gynecologists (ACOOG) are expected to disclose any real or perceived conflict of interest related to the content of the activity. Detailed disclosures will be included in conference materials and published on ACOOG’s website prior to the conference.

ADA ACCOMMODATIONS
In accordance with the Americans with Disabilities Act, every effort has been made to make this conference accessible to people of all abilities. Please notify ACOOG in writing of any ADA-compliant accommodations or dietary alternatives requested. ACOOG, 201 Main Street, Suite 600, Fort Worth, TX 76102.

GRIEVANCE POLICY
Any registrant finding evidence that the continuing medical education program presented is inappropriate with regard to facilities, materials, program content, or observes any unacceptable promotion of a specific product in the same room as the educational activity, whether by company representative or lecturer, may submit a grievance in writing to ACOOG, 201 Main Street, Suite 600, Fort Worth, TX 76102. Unresolved issues regarding compliance with guidelines of the AOA Division of CME or ACOOG will require a formal written complaint to the American Osteopathic Association, Division of CME, 142 East Ontario Street, Chicago, IL 60611, This grievance procedure is published in compliance with the AOA.

TUITION
The registration fee includes all educational sessions, versions of presentations provided by the presenters, scheduled breaks and meals and participation in all listed activities. Additional charges may apply for some activities, as noted in the brochure. Online-only components do not have access to meals and breaks.

COMMERCIAL SUPPORTERS
Financial support from device and pharmaceutical manufacturers and resellers is being sought for this activity. A final list will be available in the on-site conference materials and on the conference website.

At the time of brochure development, the following have generously made educational grants to this activity:

- Abbvie
- Lupin Pharmaceuticals
- Ferring Pharmaceuticals
- Philips Ultrasound

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

**2019 Advances in Women’s Health**

**Please print**

<table>
<thead>
<tr>
<th>First Name*</th>
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<tbody>
<tr>
<td>Last Name*</td>
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<td>AOA # *</td>
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<td>(if applicable)</td>
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<tr>
<td>Degree*</td>
<td>DO MD NP PA Other</td>
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**Address***

<table>
<thead>
<tr>
<th>Apt. or Suite</th>
<th>City*</th>
</tr>
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<tr>
<td>State, ZIP *</td>
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</table>

**Contact Tel* **

**E-mail***

**Guest Badge** **

- Please print name for guest badge (Adults only)

Please list any dietary restrictions / ADA compliant accommodations.

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

**Refund Policy:** Written cancellation of registration by **Sept 10, 2019** will be subject to a $50 processing fee. No refunds will be given after this date.

### General Session

<table>
<thead>
<tr>
<th><strong>GENERAL SESSION</strong></th>
<th>Early-Registration (payment received by Sept. 9, 2019)</th>
<th>Late Registration (payment received after Sept. 9, 2019)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician Member</td>
<td>$ 650</td>
<td>$800</td>
</tr>
<tr>
<td>Non-Member Physician</td>
<td>$ 950</td>
<td>$1100</td>
</tr>
<tr>
<td>Life Member</td>
<td>$ 400</td>
<td>$ 550</td>
</tr>
<tr>
<td>Affiliate Member</td>
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<td>$ 550</td>
</tr>
<tr>
<td>Resident</td>
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<td>$ 550</td>
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<tr>
<td>Non-Member Resident</td>
<td>$ 500</td>
<td>$ 650</td>
</tr>
<tr>
<td>Student Member</td>
<td>$ 50</td>
<td>$ 75</td>
</tr>
<tr>
<td>Non-Member Student</td>
<td>$ 150</td>
<td>$ 250</td>
</tr>
</tbody>
</table>

**For Daily registration rate please contact**
The ACOOG office at 817-377-0421 or visit our web site www.acoog.org

Pre-registrations will be accepted until **Sept. 17, 2019**. Registrations received after **Sept. 17, 2019** will be accepted on site at the registration desk only. Payment must be received in full to process registration. Faxed registrations without payment information will not be processed.

### Supplemental Sessions

<table>
<thead>
<tr>
<th><strong>SUPPLEMENTAL SESSIONS</strong></th>
<th>Day</th>
<th>Time</th>
<th>CME</th>
<th>Limit</th>
<th>Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ultrasound Live/Online Course</td>
<td>Oct 03, 2019</td>
<td>1:00pm - 3:00pm</td>
<td>5.00</td>
<td>40</td>
<td>$300</td>
</tr>
<tr>
<td>OMM Workshop</td>
<td>Oct 03, 2019</td>
<td>3:00pm - 5:00pm</td>
<td>2.00</td>
<td>100</td>
<td>$100</td>
</tr>
</tbody>
</table>

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

### Additional Event

<table>
<thead>
<tr>
<th><strong>ADDITIONAL EVENT</strong></th>
<th>Day</th>
<th>Time</th>
<th>Cost Per Ticket</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Event - includes: dinner, entertainment and cocktail tickets.</td>
<td>Oct. 5, 2019</td>
<td>6:00-10:00 PM</td>
<td>$75.00</td>
<td></td>
</tr>
<tr>
<td>DONATION - Social Event ticket(s) for Resident or Student</td>
<td>Oct. 5, 2019</td>
<td>6:00-10:00 PM</td>
<td>$75.00</td>
<td></td>
</tr>
</tbody>
</table>

### Payment & Policy

<table>
<thead>
<tr>
<th>Total Due</th>
<th>$</th>
<th>Payment Method</th>
<th>Check (payable to ACOOG)</th>
<th>Credit Card (complete below)</th>
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</thead>
<tbody>
<tr>
<td>Card Type</td>
<td></td>
<td>Visa</td>
<td>MasterCard</td>
<td>Amex</td>
</tr>
<tr>
<td>Card #</td>
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<td>Exp. Date:</td>
<td>CCV:</td>
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