Present
Henry W. Lim, MD, President
Brian Berman, MD, PhD, Vice President
Suzanne M. Olbricht, MD, President-Elect
Ted Rosen, MD, Vice President-Elect
Abel Torres, MD, JD, MBA, Immediate Past President
Barbara M. Mathes, MD, Secretary-Treasurer
Marta J. Van Beek, MD, MPH, Assistant Secretary-Treasurer
Neal D. Bhatia, MD
Erin E. Boh, MD, PhD
Kevin D. Cooper, MD Sheila Fallon Friedlander, MD
Jane M. Grant-Kels, MD
Marc D. Brown, MD
Janet G. Hickman, MD
Mark D. Kaufmann, MD
Gary S. Wood, MD
Kimberly J. Butterwick, MD
Linda Stein Gold, MD
Neil S. Sadick, MD
Robert A. Weiss, MD
Terrence A. Cronin, Jr., MD
Valerie Callender, MD
Patricia K. Farris, MD
Robert S. Kirsner, MD, PhD
Vinod K. Sharma, MD, International Board Observer
Danette D. Bentley, MD, Young Physician Board Observer

Not Present:
Meredith Wagner, MD, Residents/Fellows Board Observer

Incoming Board Members
George J. Hruza, MD, MBA, Incoming President-Elect
Diane S. Berson, MD, Incoming Class of 2022
Seemal R. Desai, MD, Incoming Class of 2022
Scott M. Dinehart, MD, Incoming Class of 2022
Abby S. Van Voorhees, MD, Incoming Class of 2022

Speakers / Guests
Sabra Sullivan, MD, Chair, Council on Government Affairs and Health Policy
Murad Alam, MD, Co-Chair, Clinical Guidelines Workgroup Non-Melanoma Skin Cancer
Karen Edison, MD, Chair, Specialty Positioning Campaign Work Group
Lawrence F. Eichenfield, MD, Chair, Ad Hoc Task Force on Governance

Staff
Elaine Weiss, JD, Executive Director and CEO
Robert M. Portman, JD, General Counsel
Barbara Greenan, Sr. Director, Advocacy & Policy
Cindy Kuhn Sr. Director, Membership Engagement
Diane Simmons, MPA, RN, CAE, Sr. Director, Education/Chief Learning Officer
Krista D. Kauper, Sr. Director, Constituent Relations & Strategic Planning
CALL TO ORDER
Henry W. Lim, MD, President and presiding, called the meeting of the Board of Directors of the American Academy of Dermatology Association to order at 8:03 AM (EDT) on Saturday, July 29, 2017. Dr. Lim welcomed the Board members, observers, incoming Board members and guests.

QUORUM
Barbara M. Mathes, MD, Secretary-Treasurer declared that a quorum was present for the transaction of business.

ORDER OF BUSINESS/INTRODUCTORY MATTERS
Antitrust Compliance Policy, Fiduciary Obligations, and Note Taking
Dr. Mathes referred the Board members to the background materials regarding the AAD/A Antitrust Compliance Policy and note taking during meetings and reminded them about the importance of following their fiduciary obligations, including maintaining confidentiality and declaring conflicts of interest.

Separate Order of Business
Mr. Portman reminded the Board members that they would follow the American Institute of Parliamentarians Standard Code of Parliamentary Procedure (formerly Sturgis Code of Parliamentary Procedure), and that it is essential that the AAD follow the order of business and observe corporate formalities necessary to ensure the separateness of the two organizations.

Disclosure of Conflicts of Interest and Code of Conduct
The Board members’ disclosures of potential conflicts of interest and code of conduct were circulated. Dr. Mathes asked Board members to update their disclosures and to declare any other actual or potential conflicts of interest with respect to specific agenda items for this meeting. None were declared.

Consent Agenda
Dr. Lim noted that the AAD and AADA Consent Agenda email ballot was posted to BoardEffect and was approved by email vote prior to the meeting. The minutes from the May 20, 2017 Board meeting, the June 29, 2017 Board email ballot and the June 8, 2017 Executive Committee summation report were included in the Consent Agenda email ballot and approved by email vote prior to this meeting.

Dr. Lim noted that the AAD Board of Directors May 20, 2017 minutes and the AAD June 29, 2017 Board email ballot which contained the recommendations for action on the Strategic
Planning Work Group Request for Proposal and Tecker International Expenditure were extracted from the Consent Agenda for discussion.

UNFINISHED BUSINESS
Ad Hoc Task Force on Governance
Dr. Eichenfield presented the Ad Hoc Task Force on Governance (AHTF) report. He started by reviewing the mission and sequence of activities of the AHTF. He noted that he was here to present the AHTF’s recommendations regarding changes to the definition of Direct Financial Relationship in the Academy’s Code for Interactions with Companies and its effect on the obligation of Key Leaders, including the Presidential line, to divest themselves of financial relationships with industry. He noted that the AHTF was particularly focused on the ability of Key Leaders to continue to engage in industry-supported clinical research while in office.

The AHTF’s proposed motion was as follows:

Proposed Motions:

1. In the Administrative Regulation on Code for Interactions with Companies, delete the research exemption from footnote 8 and 11 and move the exemption into the body of the Administrative Regulation under 1.4. In addition, accept the recommended edits for research exemption for Key Society Leaders.

2. Implement an electronic approval process for Key Society Leaders to utilize to receive approval to participate in clinical research utilizing the Key Society Leader Documentation of Clinical Research Activities.

The current research exemption in the Code reads as follows:

Key Society Leaders may accept research support as long as grant money is paid to the institution (e.g., academic medical center) or practice where the research is conducted, not to the individual. Exception may be made in certain circumstances for provision of consultant or investigator expertise related to protocol development and/or safety monitoring or any other consulting work related to one’s own past, current or potential research studies as long as the activities are not related to marketing or promotional efforts. In this event, the Secretary-Treasurer must be provided with background information and approval must be provided in advance for an exception to the policy. In these circumstances, compensation to the individual may not exceed $10,000/company/year. Verifying 1099 forms must be submitted to the Secretary-Treasurer when received. This exception may not be applied to the President, who shall remain free from any and all direct financial relationships during his/her term of office.

The AHTF recommended deleting this language and replacing it with the following language:

*These restrictions do not apply to funding received by a Key Leader from a Company (whether directly or through an affiliated institution) for scientific research performed or overseen by the Key Leader, including service as an investigator in a clinical trial, or participation in other types of research efforts. Participation in advisory meetings primarily involving research, consultation related to protocol design and development, and participation in data-safety monitoring boards are also exempt.*

*Paid promotional talks and participation in other marketing activities for Companies are not considered research and are not allowed by Key Society Leaders.*
The Executive Director will oversee the approval/denial process for research activities of Key Society Leaders. If questions arise about a clinical research activity by a Key Society Leader, the Executive Director will seek opinion from one to three individuals who have held an AAD elected office (at any time) and are actively involved in clinical research. Key society leaders may appeal decisions of the Executive Committee to the full AAD Board at any time.

Dr. Eichenfeld explained that this proposal would substantially broaden the research exemption while also transferring responsibility for making decisions where there are questionable relationships from the Secretary-Treasurer to the Executive Director. Where there are questions, the Executive Director will make the decision in consultation with one to three individuals who have held elected Academy office and are actively involved in clinical research. He stated that the AHTF was also recommending the adoption of a form to be used by Key Leaders to report industry-funded research relationships.

Dr. Eichenfeld reported on the results of a survey that the AHTF conducted of all current and former board members who were or are eligible to run for President on the reasons why they chose not to run for President. The survey showed that over 60% of the respondents said that the divestment requirement was not a factor in their decision not to run for President.

The Board discussed the AHTF proposal. Several members expressed concern about having the Executive Director make decisions about whether a Key Leader’s industry-sponsored research fits within the research exception. They noted that this puts the Executive Director in a difficult position since the Executive Director reports to two of the Key Leaders—i.e., the President and Secretary-Treasurer.

The Board members also discussed the need for consistency and expertise in resolving questions which could be difficult if different people were involved in each decision, as well as the need for rapid responses.

Other Board members noted that there is sometimes a fine but important line between legitimate research and speaking on behalf of the company. It was also noted that the current policy does not preclude key officers from participation in clinical research as long as compensation for research went to the institution or practice and not the individual. It was also noted that the policy made no mention of nonclinical research, i.e. lab research.

Some Board members felt that the President should have no industry relationships or that the Professionalism and Ethics Committee should be involved in reviewing such relationships. There were questions as to whether the AHTF reviewed the industry conflict policies of other societies and some members were concerned that the AHTF recommendations would make the Academy an outlier relative to other specialty societies.

After further discussion, a motion was made and duly seconded to refer the matter back to the AHTF for further consideration consistent with comments made during Board discussion, including concerns raised about the role of the Executive Director in the decision making process, the need for a consistent rapid response peer group with clinical research experience, and the concern about allowing the President to engage in industry-funded relationships during his or her year in office.

**ACTION:** Approved
NEW BUSINESS
Council on Science and Research
Basal Cell Carcinoma Clinical Guidelines
Cutaneous Squamous Cell Carcinoma Clinical Guidelines
Dr. Alam presented the Basal Cell Carcinoma Clinical Guidelines and the Cutaneous Squamous Cell Carcinoma Clinical Guidelines. He stated that in accordance with the Administrative Regulations for Evidence-Based Clinical Practice Guidelines, the proposed guidelines were developed using an evidence-based methodology by the Nonmelanoma Skin Cancer Guideline Work Group with assistance from AAD staff, and Dr. Conway Huang as Clinical Guidelines Committee (CGC) liaison.

Dr. Alam added that the Academy membership was given a chance to comment on both guidelines from April 12 – 28, 2017. The most significant comments that were reviewed and text modified_updated were re: superficial radiation therapy (SRT)/e-brachytherapy.

Additional comments made at the Board meeting on the BCC guidelines which the work group will be asked to consider including are:

XRT: mention of risk of secondary malignancies and chronic radiodermatitis
XRT: mention of inferior cosmetic outcomes after 2+ years compared with surgery from PRS paper
Metastatic BCC section also includes advanced BCC treated with visomedegib, so should be retitled “Metastatic and Advanced BCC”

Additional comments submitted by members that did not affect the text:
  - Some worried that use of Mohs was becoming the de facto standard of care. This is not how the guideline reads—treatment choices are stratified by risk, with Mohs being indicated only for high-risk skin cancers. The Mohs appropriate use criteria is referenced in both guidelines.

Pending Board approval of these proposed guidelines; the documents will be submitted to Journal of the American Academy of Dermatology (JAAD) for publication.

A motion was made and duly seconded to approve the draft Basal Cell Carcinoma (BCC) Clinical Guidelines as presented with the flexibility to address comments from the Board in discretion of the Nonmelanoma Skin Cancer Guidelines Work Group.

ACTION: Approved

A motion was made and duly seconded to approve the Cutaneous Squamous Cell Carcinoma (cSCC) Clinical Guidelines.

ACTION: Approved

Audit Committee
2016 Audit Report
Dr. Mathes stated that the Audit Committee performed a detailed review of the audited 2016 financial statements and discussed the required independent disclosures with the auditors. She reported that no significant errors or disagreements were noted. She stated that an unqualified opinion (the highest opinion you can receive) was provided to the Academy’s financial statements for the year ended December 31, 2016, noting no unexplained variances for the year. She reported that the Committee was satisfied that the audit report, as presented to the Board of Directors, is complete and accurate. She commended Ms. Weiss, Steve Debnar, and their staff for this excellent outcome.
A motion was made and duly seconded to approve the 2016 independent auditor's report of the December 31, 2016 financial statements.

**ACTION:** Approved

A motion was made and seconded to approve the rest of the May 19, 2017 Audit Committee report for information only.

**ACTION:** Approved

**Council on Member Services**

**Master Dermatologist Award**

Dr. Butterwick stated that the Member Recognition Committee reviewed the curriculum vitae of the candidates and selected Caroline S. Koblenzer, MD, FAAD to receive the Master Dermatologist Award for 2018. Dr. Butterwick summarized Dr. Koblenzer’s background, qualifications, and achievements, as well as her contributions to the specialty.

A motion was made and duly seconded to approve awarding Caroline S. Koblenzer, MD, FAAD as the 2018 recipient of the Master Dermatologist Award.

**ACTION:** Approved

A motion was made and seconded to approve the rest of the March 4 and May 8, 2017 Council on Member Services report for information only.

**ACTION:** Approved

**OFFICER AND DIRECTORS REPORTS**

**President’s Report**

Dr. Lim reported that the last four months had been very enjoyable and complimented the work of the superb Academy staff. He then reported on his meetings and activities since the last Board meeting, including a meeting with the Society of Dermatology Physician Assistants, the American Medical Association (AMA) House of Delegates meeting and the great work of the Dermatology Section Council, and the AADA-NIAMS (National Institute of Arthritis and Musculoskeletal and Skin Diseases) meetings on Capitol Hill to lobby for additional research funding for dermatology conditions. He noted that Academy leadership would be meeting with the American Board of Dermatology leadership soon to discuss maintenance of certification issues.

Dr. Cooper reported on the activities of the AAD-Society of Investigational Dermatology (SID) Joint Ad Hoc Task Force, including content mapping between the *Journal of the American Academy of Dermatology (JAAD)* and the *Journal of Investigational Dermatology (JID)*, joint AAD-SID educational sessions, and alignment on diversity efforts.

**Honorary Members**

Dr. Lim reminded the Board to keep the Honorary Membership recipients confidential. He presented five (5) members who had been nominated for Honorary Membership. Dr. Lim noted that at its May 20, 2017 meeting, the Board approved changing the age criteria for Honorary Membership to 65 and over and limited the number of honorary membership recipients granted in a given year to a maximum of five (5), not including the Gold Medal recipient.

A motion was made and duly seconded to approve the following five (5) nominees for honorary membership:
Gold Medal Recipient
Dr. Lim reminded the Board of the importance of keeping this Gold Medal information strictly confidential. He stated that the nominee for 2018 Gold Medal award recipient is Stephen A. Katz, MD, PhD, FAAD, Bethesda, MD. He referred the Board to the background materials for the information on Dr. Katz’s impressive background.

A motion was made and duly seconded to award the Gold Medal to Stephen A. Katz, MD, PhD, FAAD, from Bethesda, Maryland.

ACTION: Approved

Secretary-Treasurer’s Report
Dr. Mathes presented the Second Quarter Financial Report Ending June 30, 2017. She discussed specific categories of revenues and expenses and reported that the net surplus at the end of the second quarter was approximately $8.9 million. She noted that this figure was ahead of budget due in part to a very successful meeting in Orlando.

Dr. Mathes next reported that the Reserve Income Fund (RIF) was nearly $3 million short of the targeted RIF balance, but that the money to cover this imbalance is in other funds. She noted that the Board will likely need to fix this shortage at the end of the year.

She concluded by discussing the investment portfolio performance, the budgeting process, and the stellar audit report.

After discussion, a motion was made and duly seconded to approve the Second Quarter Financial Report Ending June 30, 2017 for information only.

ACTION: Approved

Executive Committee Member-At-Large
Dr. Mathes presented Drs. Stein Gold and Sadick from the Board Class of 2020 as candidates for the Member-At-Large seat on the Executive Committee that will be vacated by Kevin Cooper, MD at the end of the 2018 Annual Meeting. Drs. Stein Gold and Sadick each made a short statement about their interest in serving on the Executive Committee.

ACTION: The Board selected Dr. Stein Gold by written ballot from the Board Class of 2020 to serve the two-year term of the Member-At-Large seat. Dr. Stein Gold’s term will begin at the close of the Annual Meeting in February 2018.

Executive Director Report
Ms. Elaine Weiss referred the Board to her written report and highlighted the following issues in her verbal report:
• Summer Academy meeting registration and revenues were very solid and are expected to yield a surplus of $635,000.
• The Academy has contracted with Mind Your Business (MYB) to assist in the Academy’s Reimagining the Summer Meeting project. The purpose is to take a fresh look at the meeting and propose options for doing things differently and presumably better. MYB’s final report is expected by the end of the second quarter of 2018.
• AAD will be conducting a hands-on procedural skills course on neurotoxins and fillers at the Northwestern Simulation Center in Chicago, November 11-12, 2017. The course is already sold out.
• JAAD has achieved the #1 Impact Factor in Dermatology, a huge accomplishment, in addition to having a large mainstream media impact (several examples provided).
• The Academy has received several awards for writing and design, including:
  o 12 - American In-house Design Awards
  o 8 - American Web Design Awards
  o 1 - ASHP Editor’s Award
  o 3 - APEX Awards for publication excellence
  o Dermatology World also won the Gold Award for Best Cover – Photo from the American Society for Healthcare Publication Editors for the April 2016 “Take a Pill!” cover. This marks the second time in three years that Dermatology World has taken the top prize in this category.
  o Dermatology World’s APEX Awards for Publication Excellence
• The SPOT Skin Cancer™ Campaign continues to produce great results in terms of media coverage and impact. Several examples were provided.
• The Practice Management Center (PMC) was launched at the Annual Meeting and is already showing signs of great success. Members clearly like it, based on their direct feedback, number of hotline calls, time spent on the website, and number of downloads of PMC tools and resources.
• The SkinSerious campaign, the Academy’s specialty positioning effort to change the conversation about the field of dermatology and dermatologists, continues to produce great results. The campaign’s mantra is:
  o Dedicated physicians highly-trained to provide life-saving, life-changing and cost-effective care; and
  o Are eager to be integral partners in a high-value, patient-centered health care team.
  The key audiences for the effort are the House of Medicine, payors, and policymakers. Several examples of this successful media effort were provided.
• A preview of the Council on Government Affairs and Health Policy advocacy report was provided, including mention of the role of DataDerm in assisting AAD/A members in reporting under the new Medicare Merit-Based Incentive Payment System (MIPS); and AADA staff’s heroic efforts to monitor health care reform, advocate for the right of physicians to compound drugs in their offices.
• A preview was also provided of upcoming events that will occur before the next Board meeting, including the Diversity Conference, the Legislative Conference, AAD/A Budget meetings, and the AMA/RUC meeting.

International Board Observer
Dr. Sharma referred the Board to his written report for information only. He verbally reported on the number of Annual Meeting Registration Scholarships and the Strauss and Katz World Congress Fund Scholarships that are targeted to international dermatologists to encourage participation at the AAD Annual Meeting.
Young Physicians Board Observer Report
Dr. Bentley referred the Board to her written report for information only.

DISCUSSION ITEMS

Maintenance of Certification (MOC) Survey
Dr. Lim presented the Maintenance of Certification (MOC) Survey. He made the following points:

- At the Board’s last meeting, it reviewed and voted not to allow the members to vote on a request by a group of members to change the AAD or AADA bylaws to oppose MOC.
- It also voted to approve an Advisory Board resolution to survey the membership regarding their opinions of MOC.
- The Board of Directors agreed this opinion poll should be a census of the full US, MOC-eligible membership and not a statistically valid survey mechanism to only a randomized portion of membership.
- Leadership has been working with Advisory Board, chairs of the Member Communications Committee and the Council on Education as well as Academy staff to prepare a poll that will meet the needs of the Advisory Board.
- Leadership has also conducted a call with the American Board of Dermatology (ABD) to let them know this poll will be conducted.
- The poll will be fielded in early August and results will be in by early September.
- Results will be reported to leadership, members and the ABD.
- This poll represents a new way in which the Academy will take a “Pulse of the Profession”, report out to membership on key issues, and consider formal action for the Board.

After discussion, a motion was made and duly seconded to approve moving forward with the MOC Survey in the manner proposed.

ACTION: Approved

AAD Social Media Strategy
Ms. Tolley-Hall presented the AAD Social Media Strategy. She stated that the Academy began its social media journey when it opened its own You Tube channel in 2008 on which videos were posted showing how to take care of skin, hair and nail conditions, and linked them in e-mail messages. Ms. Tolley-Hall stated the Academy now has a presence on Facebook, Twitter, Pinterest and Instagram.

Ms. Tolley-Hall noted that over time, the Academy had too many voices and too much content on too many social media channels. In 2016, the Board approved a plan to partner with a recognized digital agency, Social Driver, to develop a social media strategy that would maximize AAD/A’s impact with our core audiences while taking into account available staff and resources. The agency helped AAD/A develop a strategy that outlines key audiences with which AAD/A would like to connect with on social media (the general public, Academy members, and JAAD subscribers) and identifies goals for each of those audiences. Engagement with the Academy’s content and driving traffic to the Academy’s website are important goals for all three audiences.

Ms. Tolley-Hall presented the key objectives of the new social media strategy:

- Streamline AAD/A’s channels for better audience retention and a higher quality of content shared
- Develop a stronger content planning and distribution process across all Academy social media channels
- Track key metrics to measure our influence and engagement on social media

Ms. Tolley-Hall also noted that having staff manage the Academy’s social media accounts helps ensure adherence to AAD branding guidelines when developing content and maintenance of a
consistent voice on each of the channels. The plan is to measure and analyze how each of the accounts are performing on a monthly basis, develop a consistent editorial calendar for each of the channels and work collaboratively to cross-promote across the channels when appropriate. AAD/A staff will continue to seek feedback from the Council on Communications, the Member Communications Committee and the JAAD Editorial Board on the Academy’s social media strategy. Ms. Tolley-Hall then reported on specific examples of the new strategy and the successful results.

A motion was made and duly seconded to approve the social media report for information only.

**ACTION:** Approved

*The AAD Board of Directors recessed at 11:30 a.m. Eastern.*

*The Board moved into Joint AAD-AADA Board of Directors Meeting at 11:38 a.m. Eastern*

**AAD/A HEARD FROM THE FIELD**

Dr. Lim invited Board members to raise issues of concern that they were hearing about in the field.

**Letter from Facebook Group Regarding Scope of Practice/Truth in Advertising Abuses**

Dr. Bhatia reported that over 1,000 members of a private Facebook page had submitted a letter to the Board of Directors expressing their concerns about scope of practice and truth in advertising abuses, as well as several other issues. They perceived a lack of interest or action by AAD/A and were looking for more forceful advocacy by AAD/A on these issues, as well as a more forceful position on “who is a dermatologist” and “what does it mean to be board certified.” Dr. Bhatia noted that this group did not seem to recognize the AAD/A’s efforts in these areas, and that AAD/A needs to do a better job of communicating these efforts, as well as some of the legal constraints, including antitrust laws, that restrict AAD/A’s ability to take more forceful positions and actions against unauthorized/unsupervised practice of dermatology and false advertising regarding the same.

The Board discussed the letter and the options for better communicating its current efforts and doing more to address scope of practice and truth in advertising abuses, including developing a rapid response program for reporting specific incidents to state medical boards and educating the public about the need to see a board certified dermatologist for dermatologic conditions. The Board also discussed the need to better educate AAD/A members on the proper use of physician extenders and to address the problem of limited access to dermatologists.

The Board discussed creating an interdisciplinary rapid response team (RRT) to review the ideas discussed by the Board and AAD/A’s current policies and actions regarding scope of practice/truth in advertising abuses and advise the Board on what else AAD/A can be doing to address these issues.

The Board also agreed that Dr. Lim should respond to the letter positively, professionally and promptly and possibly ask the group to choose a representative to participate in the RRT process.

**Online Physician Reviews**

Dr. Cronin reported on the problem of how physicians can respond to abusive online reviews without violating Health Information Privacy Protection Act (HIPAA). He suggested that the Academy educate members on how to respond legally and productively to these reviews. He noted that a recent Dermatology World article addressed this issue and was quite useful, but that the Academy needs to do more. It was noted that an affinity partner had created a free webinar on this topic, the link of which was shared with the Board. [https://www.aad.org/forms2/dont-get-yelped-webinar](https://www.aad.org/forms2/dont-get-yelped-webinar).
Physician Compounding
Dr. Sadick raised concerns about companies selling compounded drugs directly to physicians in violation of the Food and Drug Administration (FDA) rules and other compounding issues. It was noted that the Council on Government Affairs and Health Policy (GAHP) is looking at this and will be doing an article on compounding in an upcoming issue of Dermatology World.

State Legislation re: Maintenance of Certification and Self-Regulation
Ms. Weiss reported on the potential adverse effects of anti-Maintenance of Certification (MOC) legislation at the state level. She stated that there is an anti-MOC state legislative movement around the country that would prevent MOC from being used as a criterion for licensure, hospital credentialing, or insurance network participation. While this may seem like a good development to those who oppose MOC of any kind, MOC helps distinguish dermatologists from the non-dermatologist physicians and physician extenders and the movement may end up with other types of government oversight replacing self-regulation by medical boards. She noted that it also potentially sends a message to the public and the health care community that the AAD does not believe maintaining high standards for specialty care is important.

The Board moved out of Joint AAD-AADA Board of Directors Meeting at 1:08 p.m. Eastern.

The AAD Board of Directors reconvened at 1:08 p.m. Eastern.

CONSENT AGENDA
Rapid Response Team Update: ASPS Joint Guidelines on Reconstruction after Skin Cancer Resection
Dr. Torres presented the Rapid Response Team (RRT) Update on ASPS Joint Guidelines on Reconstruction after Skin Cancer Resection. He reminded the Board that this was an effort among several surgical and dermatologic societies to develop these guidelines led by the American Society of Plastic Surgeons (ASPS) and the American Society for Dermatologic Surgery (ASDS). The societies have been negotiating a memorandum of understanding (MOU) for several months to govern the collaborative effort. The goal for the AAD with the MOU has been to ensure that AAD has legal rights in the work, visible ownership, and ability to veto the final product within a defined approval period (90 days in the current version of the MOU). In addition, the dermatology societies have been working to ensure parity of dermatology and plastic surgery representation. The final version of the MOU is pending signatures—and the RRT is in agreement that all AAD considerations have been satisfactorily addressed. Dr. Torres also noted:

- Areas of clinical focus were initially discussed and narrowed during the introductory meeting to focus on areas that would be beneficial for both specialties and stay away from areas that could be challenging.
- Subsequent ranking by the work group led to a final list of seven (7) questions that will cover the topics listed.
- Importantly, these questions will not include pre-surgical consultation as it was felt such questions could be too contentious.
- Now that the clinical questions have been finalized, the evidence review and rest of the guideline process is estimated to take a minimum of 18 months with a target of finalizing the manuscript by the end of 2018.

While the RRT will not be active, should any potential issues arise during the development process, the group will be ‘on-call’ for discussion as needed.

A motion was made and duly seconded to approve moving forward with MOU as presented.
A motion was made and duly seconded to approve the President’s, Secretary-Treasurer, Executive Director, the International Board Observer and the Young Physicians Board Observer reports and the Rapid Response Team Update for information only.

**ACTION:** Approved

AAD May 20, 2017 Board of Directors Minutes

Dr. Mathes stated that the AAD May 20, 2017 Board of Directors minutes were pulled from the consent agenda email ballot to review an edit to lines 678 – 682 for the ASPS Joint Guidelines on Post Skin Cancer Reconstruction.

A motion was made and duly seconded to approve the edits to lines 678 – 682 in the May 20, 2017 AAD Board of Directors minutes as presented.

**ASPS Joint Guidelines on Post-Skin Cancer Reconstruction**

Dr. Torres presented the Rapid Response Team's report on the American Society of Plastic Surgeons (ASPS) Joint Guidelines on Post-Skin Cancer Reconstruction for information only. He provided background on how this project came about. He noted that ASPS approached dermatology societies individually to participate with them in the ASPS guidelines and the societies' counterproposal was that it instead become a joint effort that required unanimous approval for the final guidelines produced, was going to do these guidelines on their own, but AAD and the American Society of Dermatologic Surgery (ASDS) approached ASPS and proposed a joint effort. Over the past several months, the parties have been negotiating a memorandum of understanding (MOU) to govern the project. One of the conditions for the dermatology societies’ participation in this project is that they must all agree to the final guidelines. If one dermatology society does not approve, all must agree to not approve. ASPS has been reluctant to include this language in the MOU, so it may require the dermatology societies to enter into a separate MOU among themselves to enforce this “one-for-all and all-for-one rule.” Dr. Torres also noted that the name and focus of the guidelines is going to be changed to post-surgical reconstruction. He stated that the group has set an 18-month timeline for producing the guidelines.

**ACTION:** Approved

AAD Board of Directors June 29, 2017 Email Ballot

**Strategic Planning Work Group Request for Proposal; and Tecker International Expenditure**

Dr. Mathes stated that June 29, 2017 Board email ballot was pulled from the consent agenda email ballot for discussion. She stated that the Board approved the two motions in that ballot to authorize funding for a contract with Tecker International to serve as the AAD/A’s Strategic Planning consultant and a contract with Mind Your Business (MYB) as a consultant for the Reimagining the Summer Meeting project.

The Board member who asked that this issue be pulled from the consent agenda said s/he did so because it was unclear why the Academy needed two consultants for the Strategic Planning process and for the Reimaging the Summer Meeting project. S/he asked why one consultant couldn’t do both as it appeared that the Reimagining the Summer Meeting project was part of the Strategic Planning process.
Dr. Mathes and Ms. Weiss explained that these are very different projects with the need for different kinds of expertise. They noted that the goal of the Strategic Planning process is to create a broad-based plan setting forth the AAD/A’s priorities over a several-year period. The consultant for this process needs to have special expertise in association governance and superior facilitation skills. The Reimagining the Summer Meeting project is much more focused and requires the consultant to have special expertise in running successful meetings.

*The Board moved into Executive Session at 1:39 p.m. Eastern*

During Executive Session, the Board took the following non-confidential actions:

**Approved Dirk Elston, MD, FAAD, as the next Editor-in-Chief of the *Journal of the American Academy of Dermatology***

**AAD Board OF Directors Executive Session Minutes**

Dr. Mathes presented the AAD Board of Directors Executive Session minutes of the May 20, 2017 and June 23, 2017.

A motion was made and duly seconded to approve the AAD Board Executive Session minutes of the May 20, 2017 and June 23, 2017.

**ACTION: Approved**

**AAD Executive Committee Summation Report**

Dr. Mathes presented the June 8, 2017 Executive Committee summation report.

A motion was made and duly seconded to approve the June 8, 2017 Executive Committee summation report.

**ACTION: Approved**

Mr. Portman also provided an update on pending disciplinary actions against certain Academy members, and the Board took appropriate action in several of the cases.

*The Board moved out of Executive Session at 4:10 p.m. Eastern*

*Note that the minutes of the Executive Session are kept in the confidential files of the Executive Office and legal counsel.*

**ADJOURNMENT**

There being no further business, Dr. Lim adjourned the Academy Board of Directors Meeting at 4:10 PM (EDT).

Respectfully Submitted,

Barbara M. Mathes, MD, FAAD
Secretary-Treasurer