Present
Mark Lebwohl, MD, President
Timothy G. Berger, MD, Vice President
Abel Torres, MD, JD, MD, President-Elect
Kenneth J. Tomecki, MD, Vice President-Elect
Brett M. Coldiron, MD, Immediate Past President
Suzanne M. Olbricht, MD, Secretary-Treasurer
Barbara M. Mathes, MD, Assistant Secretary-Treasurer
Neal D. Bhatia, MD
Robert T. Brodell, MD
Marc D. Brown, MD
Kevin D. Cooper, MD
Robert D. Durst Jr., MD
Jane M. Grant-Kels, MD
Janet G. Hickman, MD
Julie A. Hodge, MD, MPH
George J. Hruza, MD
Mark D. Kaufmann, MD
Carrie A. Kovarik, MD
Stephen H. Mandy, MD
Jack S. Resneck, Jr., MD
Kathryn Schwarzenberger, MD
Gary S. Wood, MD
Sabrina Newman, MD, Young Physicians Board Observer
Nathaniel Milett, MD, Residents/Fellows Board Observer
Andreas D. Katsambas, MD, International Board Observer

Not Present:
Sheila Fallon Friedlander, MD
Paul A. Storrs, MD

Incoming Board Members
Henry W. Lim, MD, Incoming President-Elect
Brian Berman, MD, Incoming Vice President-Elect
Marta J. Van Beek, MD, MPH, Incoming Assistant Secretary-Treasurer
Erin Boh, MD, Incoming Director, Class of 2020
Kimberly J. Butterwick, MD, Incoming Director, Class of 2020
Linda Stein Gold, MD, Incoming Director, Class of 2020
Neil S. Sadick, MD, Incoming Director, Class of 2020
Terrence A. Cronin, Jr., MD, Incoming Chair, Advisory Board Chair
Vinod K. Sharma, MD, Incoming International Board Observer
Faranak Kamangar, MD, Incoming Residents/Fellows Board Observer

Speakers / Guests
Elizabeth S. Martin, MD, Chair, Council on Communications
Karen Edison, MD, Chair, Specialty Positioning Work Group
Consultants from GYMR Public Relations:
   Patrick McCabe, Partner
   Brianna Gavio, Account Supervisor
Sabra Sullivan, MD, PhD, Incoming Chair, Council on Government Affairs, Health Policy and Practice
CALL TO ORDER
Mark Lebwohl, MD, President and presiding, called the meeting of the Board of Directors of the American Academy of Dermatology to order at 8:00 AM (EST) on Monday, March 7, 2016. Dr. Lebwohl welcomed the Board members, observers and guests.

QUORUM
Suzanne M. Olbricht, 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. Lebwohl 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.

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. Olbricht 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.

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 Academy follow the order of business and observe corporate formalities necessary to ensure the separateness of the two organizations.

Review and Approval of Academy Board of Directors Board Minutes and Executive Committee Email Ballot and Summation Report

Dr. Olbricht presented the minutes of the November 7, 2015 Board meeting and the Executive Committee email ballot of November 16, 2015 and the summation report from January 14, 2016.

A motion was made and duly seconded to approve the Board minutes of the November 7, 2015 Board meeting and the Executive Committee email ballot of November 16, 2015 and the summation report from January 14, 2016.

ACTION: Approved

OFFICER AND DIRECTORS REPORTS

President’s Report

Dr. Lebwohl reported on his meetings on Capitol Hill with Steve Katz, MD, FAAD, head of NIH/NIAAMS, with the PhRMA CEO about drug pricing issues, and with the FDA regarding the regulation banning under 18 tanning and problems with the iPledge Program. He advised the Board about the iPledge exceptional circumstances form and the efforts that AADA is making to solve problems with the program. He also discussed the results of the 2016 member satisfaction survey, with particular focus on member burnout. He then discussed the space issues in the Schaumburg office and announced the formation of an Ad Hoc Task Force to Evaluate Headquarters Space Planning with Dr. Janet Hickman as chair. He closed by thanking the Board for their exceptional work and support during his presidential year.

Secretary-Treasurer’s Report

Twelve Month Year-to-Date (YTD) Financial Report Ending December 31, 2015

Dr. Olbricht presented the Twelve-Month YTD Financial Report ending December 31, 2015. She discussed specific categories of revenue and expense and ways of increasing revenues and decreasing costs. She reported that the unaudited surplus for 2015 was $1.2 million, which is significantly more than budgeted.

Dr. Olbricht also reported that the Reserve Income Fund (RIF) has an estimated shortage of $693,013 and the Strategic Reserve Fund (SRF) has an unallocated balance of $476,430, most of which has been allocated in the 2016 budget. She further reported that the Endowment Fund has reached $10,372,876. She noted that the RIF deficit would be covered by the Endowment Fund for accounting purposes only—i.e., the funds would not be moved out of the Endowment Fund. Lastly, she reported on the performance of the AAD/A investment portfolio.

A motion was made and duly seconded to accept the Twelve Month Year-to-Date Financial Report Ending December 31, 2015 for information only.

ACTION: Approved

Looking Back/Looking Forward

Dr. Olbricht discussed major initiatives undertaken in past six years, the budget process/sequence, and the Secretary and Assistant Secretary duties and interactions with the rest of the Board, Officers, and staff. She thanked the Board and staff for their trust and support over the past six years and urged them to provide the same support for Drs. Mathes and Van
Beek over the next six years.

**Cost of Living Increase**

Dr. Olbricht reminded the Board that the 2015 dues increase bylaws amendment included an annual cost of living increase based on the Consumer Price Index-Urban (CPI-U) for 2017 and beyond. She stated that the CPI-U index increase for 2017 is 0.7%. She noted that the Board of Directors has the ability to decline the cost-of-living increase. If approved, the Academy would realize an increase of $63,935 in dues revenue for 2017.

A motion was made and duly seconded to approve increasing the 2017 dues by 0.7%.

Dues structure for 2017 would be:
- Fellow, Associate, Adjunct (Corporate), and Affiliate - $805.60
- Military Discount - $483.36
- Researcher (Affiliate and Adjunct) - $503.50

**ACTION:** Approved

A motion was made and duly seconded not to round the amounts of the dues increase.

**ACTION:** Approved

**2016 Election Status**

Dr. Mathes reminded the Board that online voting opened worldwide Saturday, March 5, 2016 to all voting members and that ballot books were mailed on Friday, March 4, 2016. She noted that both online and paper ballots would be accepted through April 4, 2016 and encouraged everyone to vote.

**Executive Director Report**

Ms. Weiss referred the Board to her written report and highlighted the following items:

Environmental Scan—Ms. Weiss described the impressive level of media coverage that dermatology has been receiving. Staff and leadership are constantly on the lookout for opportunities to promote dermatology and AAD/A members. She noted that staff will be vigilant in tracking the federal and local elections as they will have a big impact on dermatology initiatives.

Advocacy—Ms. Weiss noted that the FDA’s under 18 tanning restrictions are a huge victory for AADA and dermatology. She reported on the media reaction to the regulation and the grassroots campaign that AADA is conducting with its membership and the public to show support for the rule. She reported on AADA’s efforts to (a) persuade the Centers for Medicare & Medicaid Services to extend the deadline for hardship exemptions to the EHR “Meaningful Use” rules; (b) secure federal legislation to ensure interoperability between EHR vendors and clinical data registries and to prevent information blocking by such vendors; and (c) to fight excessive drug pricing by pharma companies and narrowing of networks by private payors.

DataDerm—Ms. Weiss reported on the launch of DataDerm. At the time of her report, over 3,600 dermatologists and physician extenders had enrolled in the Medicare PQRS program through DataDerm. She also reported on the outcomes summit on March 5, 2016 that AAD hosted with key stakeholders to discuss the role of outcomes measurement in dermatology.

CME/MOC—Ms. Weiss noted that AAD’s new self-assessment question of the week was a big hit. This new CME activity already has had 2,300 members participate with credit going towards CME and the Maintenance of Certification (MOC) self-assessment requirement.
Annual Meeting—Ms. Weiss reported that the registration and financial results for this Annual Meeting were well above budget and expectations. She commended the Scientific Assembly Committee and staff, including Tim Moses and Diane Simmons, for their excellent work in creating and organizing the meeting. She also congratulated Nancy Ali and her team for raising more than $1.725 million at the President’s Gala on Saturday night.

Ms. Weiss concluded by showing a video tribute to Dr. Lebwohl.

International Board Observer
Dr. Katsambas referred the Board to his International Board Observer Report for information only. He discussed the efforts by the International Affairs Committee and the World Congress Fund Review Task Force to promote and strengthen the relationship between AAD and international members and societies. He reported on the number of international members and attendees at the AAD Annual Meeting. He also reported on scholarships awarded for attendance by international dermatologists at the AAD Annual Meeting, the World Congress, and other meetings.

He thanked the Board for the opportunity to serve as the International Board Observer and wished Dr. Vinod K. Sharma well, who will be taking over for him after the Annual Meeting. Dr. Lebwohl thanked Dr. Katsambas for his service.

Young Physicians Board Observer Report
Dr. Sabrina Newman referred the Board to her Young Physicians Board Observer Report for information only. She noted that in response to the residents’ needs assessment survey, which identified telemedicine training as a significant priority, the Young Physicians Committee (YPC) is working on developing a telemedicine residents’ curriculum. The YPC is still reviewing the residents’ needs assessment survey results and will provide feedback to staff and leadership.

Dr. Carrie Kovarik noted that the Teledermatology Committee is working with the YPC in developing these modules. She noted that that telemedicine training is a significant gap in AAD’s educational offerings. She also asked for more support for the AAD telemedicine platform.

Dr. Lebwohl asked Dr. Kovarik to provide a firm proposal with a fiscal note to support this request.

Residents/Fellows Observer Report
Dr. Nathaniel Miletta referred the Board to his Resident/Fellow Board Observer Report for information only. He noted that the residents’ needs assessment survey has led to several new initiatives, including improved communication of the Annual Meeting Residents Track; a Q&A bank to help residents prepare for Boards; a student loan refinancing program; and a Camp Discovery online fundraiser.

Dr. Miletta thanked the Board for the opportunity to serve as the Residents/Fellows Board Observer and introduced Dr. Faranak Kamangar, MD, who will be taking over for him after the Annual Meeting. Dr. Lebwohl thanked Dr. Miletta for his service.

Council on Medical Specialty Societies (CMSS)
Dr. Lebwohl referred the Board to the Council on Medical Specialty Societies report for information only.

2015 Journal of the American Academy of Dermatology Report
Dr. Lebwohl referred the Board to the 2015 Journal of the American Academy of Dermatology report for information only.
AAD UNFINISHED BUSINESS

Council on Communications- Specialty Positioning Campaign
Drs. Elizabeth Martin and Karen Edison presented the Specialty Positioning Campaign Plan. They reminded the Board that in March 2015, the Board approved the engagement of GYMR Public Relations to develop a new specialty positioning campaign. They reported that the Council on Communications was very happy with GYMR’s work so far. They noted that GYMR conducted research with dermatologists, non-dermatologist physicians, Academy members, and board members to gauge their current perceptions about the specialty and its place in the current health care system. They developed the Specialty Positioning Campaign Plan based on the results of this research, as well as the Academy’s 2011 perception research, published research and news articles.

Patrick McCabe and Brianna Gavio of GYMR gave a presentation on the results of their research and the proposed campaign. On the positive side, non-dermatologist physicians like and respect dermatologists, particularly with respect to their role in diagnosing and treating skin cancer. On the negative side, non-dermatologist physicians cite problems with patient access to dermatologists and they don't think of dermatologists for non-skin cancer conditions. They stated the goal of the Specialty Positioning Campaign is to change the conversation about the field of dermatology and dermatologists, and to highlight that dermatologists are:

- Dedicated physicians highly-trained to provide life-saving, life-changing and cost-effective care
- Eager to be integral partners in a high-value, patient-centered health care team

The remainder of the report focused on the tactics and strategies for achieving these goals. The plan is to complete research and drafting of materials in the April-June timeframe and to start the implementation phase from July through December.

The report was very well received by the Board, but the Board did ask for a more aggressive timeline. It also noted the need to partner with patients and patient advocacy groups and to address some of the negative perceptions with policy initiatives to address shortages of dermatologists (e.g., by advocating for more training spots), encourage dermatologists to do consults for other physicians, and educate primary care and other physicians on what dermatologists do and know.

A motion was made and duly seconded to approve the Specialty Positioning Campaign Plan as presented.

ACTION: Approved

AAD NEW BUSINESS

Heard from the Field

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

Dr. Coldiron raised the question whether AAD could provide priority housing for the Annual Meeting to members who donate more than $5,000 for AAD philanthropic causes or to SkinPAC. Mr. Portman responded that AAD could provide priority housing status for donors to AAD charitable causes. He said that as a 501(c)(3) entity, AAD could not offer priority housing to SkinPAC donors,
but he would work with Tim Moses on determining whether AAD could transfer some housing rights to AADA at a fair market value price so that AADA could reserve rooms at blocked hotels for SkinPAC donors.

Confirmation of Secretary-Treasurer
Dr. Lebwohl noted that the Secretary-Treasurers must be affirmed by every new AAD Board.

A motion was made and duly seconded to confirm Dr. Mathes as Secretary-Treasurer and Dr. Van Beek as Assistant Secretary-Treasurer for the 2016-2017 AADA Board of Directors term effective at the close of the 2016 Annual Meeting.

ACTION: Approved

AAD Annual Organizational Resolution
Dr. Olbricht stated that the Annual Organizational resolution, which was included in the Board’s background materials, was a housekeeping matter that allows the officers and staff to transact business on behalf of the Academy.

A motion was made and duly seconded to adopt the AAD Annual Organizational Resolution as presented.

ACTION: Approved

Administrative Regulation – AAD Code for Interactions with Companies
Dr. Lebwohl presented the following proposed edit to the AAD Code for Interactions with Companies to expand the existing exception to the restriction on Direct Financial Relationships for Key Leaders to cover a broader set of research-related consulting activities.

8 and 11 Definition: A Direct Financial Relationship is a compensated relationship held by an individual that should generate an IRS Form W-2, 1099 or equivalent income report. Key Society Leaders (including the President, President-Elect, Immediate Past President, the Secretary-Treasurer, Assistant Secretary-Treasurer, the chief executive officer of a Society’s membership organization, and the Editor(s)-in-Chief of Society Journal(s) may provide uncompensated service to for-profit health care products companies (“Companies”) and accept reasonable travel reimbursement in connection with those services. 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 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.

After discussion about the intent of the exception, a motion was made and duly seconded to approve the above edit to the Administrative Regulation – Code for Interactions with Companies as presented.
A motion was made and then accepted as a friendly amendment to revise the new language to read “or any other consulting work related to the Key Leader’s own past, present, or potential research studies.”

**ACTION:** Approved

**Professionalism and Ethics Pledge**

Dr. Lebwohl noted that the Board adopted the Professionalism and Ethics Pledge at its May 16, 2015 meeting. He noted that the Professionalism and Ethics Committee had included the words “strive to” in the preamble of the Pledge and that several members of the Board and the Committee were in favor of putting similar language at the beginning of the Pledge itself. The Board discussed the Pros and Cons of this change.

A motion was made and duly seconded to approve adding the words “strive to” the beginning of the professionalism and ethics pledge as presented.

**PLEDGE**

In acting as a dermatologist, I will **strive to**

1. Put my patients' welfare above other interests;
2. Provide care that adheres to professional standards of practice;
3. Provide care for those in need; and
4. Foster collegiality through interaction with the medical community.

**ACTION:** Approved

**Formally Trained Dermatologists Are Better Qualified**

Dr. Coldiron presented the Formally Trained Dermatologists Are Better Qualified report for information only.

A motion was made and duly seconded to approve a resolution that the AAD Board of Directors formally supports the concept that formal education of dermatologists (completed medical school, dermatology residency, boards, and fellowships) should be considered a positive quality indicator.

**ACTION:** Approved

**Ad Hoc Nominating Committee**

Dr. Berger stated that the Ad Hoc Nominating Committee was prepared to present two candidates to the Board for election to serve as a Board representative on the Nominating Committee. He noted that this year the candidates are from the West / Northwest Region.

After discussion, a motion was made and duly seconded to instruct the Nominating Committee to consider additional candidates and present their recommended candidates for selection at the May 21, 2016 Board meeting.

**ACTION:** Approved

**Priorities Committee Strategic Planning Retreat**

Dr. Torres presented the Priorities Committee Strategic Planning Retreat report for information only. He discussed the process the Priorities Committee followed in developing its proposed report. He described the questions that the Committee addressed and list of 11 strategic priorities that the Committee identified.
A motion was made and duly seconded to approve the 11 strategic priorities, divided into two categories, to be used as guiding principles over the next three years and direct the Priorities Committee chair to work with appropriate CCTFs to identify projects, staff and financial resources needed to incorporate these outcomes into the upcoming 2017 budget cycle.

ACTION: Approved

A motion was made and duly seconded to incorporate teledermatology into these priorities to the fullest extent feasible and appropriate.

ACTION: Approved

Council on Member Services
ILDS Certificate of Appreciation Nominations
Dr. Schwarzenberger presented Drs. Carrie L. Kovarik and Toby A. Maurer as the two 2016 ILDS Certificate of Appreciation nominees.

A motion was made and duly seconded to approve Drs. Carrie L. Kovarik and Toby A. Maurer as the 2016 ILDS Certificate of Appreciation Nominees.

ACTION: Approved

Advisory Board Resolutions
AB Resolution: Academy 001 (A-16)
Preservation of the Unity of Medical and Surgical Dermatology

RESOLVED, that the Advisory Board partner with the AAD Board of Directors to ask the Member Communications Committee to educate, gather background information, and poll the membership as originally planned in accordance with the Board of Directors motion of the 2015 Annual Meeting [(a) to contact the American Board of Dermatology to confirm grandfathering requirements for any certification exam on Micrographic Surgery and Dermatologic Oncology (MSDO), b) to educate the membership regarding the issues including pros and cons, eligibility and exam development; and c) to survey, after an appropriate period, the membership and report results back to the Board of Directors]; and be it further

RESOLVED, that the membership communications committee provide a report back to the Advisory Board at the AAD Summer Academy meeting.

A motion was made and duly seconded to refer this resolution to the Member Communications Committee.

ACTION: Approved
AB Resolution: Academy 002 (A-16)
Maintenance of Certification Ending 10-Year Recertification – American Board of Dermatology Representative

RESOLVED, that the AAD board of directors’ advocate on behalf of the almost 2,000 anti MOC petition signatories and the general AAD membership to the ABD and the ABMS to delay all MOC/ recertification requirements until there is independent third party data subject to peer review that shows significant improvement in patient outcomes; and be it further

RESOLVED, that if the ABD cannot/will not comply with changing their representation and removing all MOC requirements that the AAD move forward with a new credentialing board for dermatology; and be it further

RESOLVED, that we must put a hold on the time-limited recertification examination immediately; and be it further

RESOLVED, that ABD should immediately change their recertification policy and remove all the MOC requirements, keeping only CME in place, until the above data is available.

A motion was made and duly seconded to reject this resolution based on the discussions the Board is currently having with the American Board of Dermatology about MOC.

ACTION: Approved

AB Resolution: Academy 003 (A-16)
Maintenance of Certification

RESOLVED, participation in recertification and MOC is not a requirement to retain your fellowship status in the Academy.

After discussion, motion was made and duly seconded to approve this resolution and refer it to the Membership Committee to develop an Administrative Regulation clarifying that recertification is not requirement for maintaining Fellowship.

Mr. Portman noted that the current wording of the Fellowship requirements in the bylaws could be interpreted by the Membership Committee and the Board to not require recertification to maintain Fellowship

ACTION: Approved

AB Resolution: Academy 009 (A-16)
Polling of Membership

RESOLVED, that the AAD/A Board of Directors adopt an administrative regulation that requires the Board to poll the membership on its views on any issue for which a member petition has been presented that has been signed by at least 2.5 percent of the membership.

A motion was made and duly seconded to refer the resolution to the Joint AAD/AB Work Group.

ACTION: Approved
Burden of Skin Disease
Dr. Lim presented the Burden of Skin Disease report. He noted that this project will fit well with the Specialty Positioning campaign. He reported that the contract with Milliman to produce the report has been signed, the cost of the report has already been approved, and the final report is expected to be available in July 2016. He then discussed the details and contents of the report, including the analysis of the drivers of costs of treating skin cancer and other diseases. He noted that the Communications staff will translate this report into reader-friendly materials for public education purposes.

Ad Hoc Task Force on Data Collections Platform and Registries
Drs. Van Beek and Taylor presented report on DataDerm. They noted that DataDerm was launched during the Annual Meeting. The AAD’s Physician Quality Reporting System (PQRS) registry reporting offering was transferred from Healthmonix to FIGmd, the DataDerm registry vendor, and has been certified as a PQRS Qualified Registry by the Centers for Medicare and Medicaid Services for 2016. Over 3,600 users had signed up as of the Board meeting and would be reporting on up to 35 measures, 16 of which will be dermatology-specific. They then discussed the online enrollment process, reporting options (electronic health records (EHR) and non-EHR), and the DataDerm dashboards that participants will be able use to review and analyze their data. They concluded by discussing the short- and long-term goals for DataDerm and timeline for achieving these objectives, as well as data governance issues.

EXECUTIVE SESSION
The AAD went into Executive Session at 12:40 p.m. (EST) to discuss confidential matters, including the Executive Director’s employment agreement, a joint statement with the American Board of Dermatology regarding Maintenance of Certification, and pending ethics matters.

During Executive Session, a motion was made and duly seconded to reinstate the membership of a Fellow based on the reinstatement of her licenses in New Jersey, subject to the conditions instituted by the New Jersey Board of Medical Examiners.

ACTION: Approved

The AAD adjourned Executive Session at 2:09 PM (EST).

Skin Cancer Think Tank Retreat
Dr. Rigel presented a report on the Skin Cancer Think Tank Retreat for information only. This retreat was held during first weekend in December 2015 in Chicago. The topic of the retreat was what can be done to re-establish AAD as leader in prevention and detection of skin cancer. Dr. Rigel summarized the history of AAD skin cancer activity starting in the 1980’s and the gradual usurpation of the AAD’s leadership position in this area by other dermatology groups. The Retreat participants discussed several ways in which AAD could regain its position as the leading organization in the prevention and detection of skin cancer, including:

- Inventory current program and look toward increasing impact
- Publicize successes
- Build effective coalitions with other groups with AAD as leader
- Expand social media and target groups
- Ensure that advocacy efforts reflect changing demographics
- Increase funding for data collection/research
- Advocate for a national skin cancer stamp
- Hold a summit of key stakeholders

A motion was made and duly seconded to refer these recommendations to the Council on...
Community, Corporate & Philanthropic Relations for integration into AAD programs and activities.

**ACTION:** Approved

**CONSENT AGENDA**

<table>
<thead>
<tr>
<th>Date</th>
<th>Agenda Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 25, 2016</td>
<td>Council on Science and Research Burden of Skin Disease</td>
</tr>
<tr>
<td>December 4-5, 2015</td>
<td>Council on Community, Corporate &amp; Philanthropic Relations Skin Cancer Think Tank Retreat</td>
</tr>
<tr>
<td>January 6 &amp; January 25, 2016</td>
<td>Council on Science and Research</td>
</tr>
<tr>
<td>February 8, 2016</td>
<td>Ad Hoc Task Force on Data Collections Platform And Registries</td>
</tr>
<tr>
<td>January 7, 2016</td>
<td>Council on Education and Maintenance of Certification</td>
</tr>
<tr>
<td>November 14, 2015</td>
<td>State Society Relationships Committee</td>
</tr>
<tr>
<td>February 4, 2016</td>
<td>Leadership Development Steering Committee</td>
</tr>
</tbody>
</table>

A motion was made and seconded to accept the Academy consent reports as presented.

**ACTION:** Approved

**ADJOURNMENT**

There being no further business, Dr. Lebwohl adjourned the Academy Board of Directors Meeting at 2:47 PM (EST) on Monday, March 7, 2016.

Respectfully Submitted,

Barbara M. Mathes, MD, FAAD
Secretary-Treasurer