

# Board News

*Paul R. Young, MD*

At its annual meeting in April, the Board of Directors held an election of three new members and elected its officers for the coming year. Dr. Lanny Copeland was elected President of the Board of Directors, effective immediately. Dr. Copeland is serving his 5th year on the Board of Directors. He is senior partner of Family Practice Associates in Moultrie, Georgia. He succeeds Dr. Howard Rabinowitz of Philadelphia as President of the ABFP.

The Board of Directors also elected Dr. James Puffer to be Vice-President. Dr. Puffer is also serving his 5th year as a Director. He is Associate Professor and Chief of the Division of Family Medicine at the UCLA Center for Health Sciences. Dr. Puffer has a special interest in sports medicine and has been instrumental in the devel-

opment of the Certificate of Added Qualifications in Sports Medicine. He replaces Dr. Kenneth Frederick as Vice-President.

Dr. William Bernhardt was elected as the member-at-large of the Executive Committee of the Board. He is a family physician in private practice in Midwest City, Oklahoma, and is serving his 5th year on the Board.

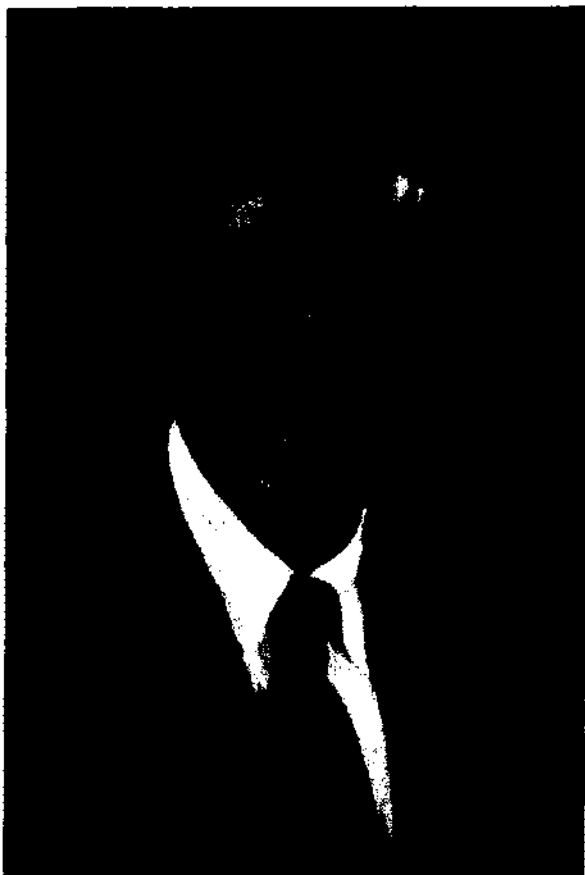
Elected to the position of Treasurer of the Board is Dr. Edward Bope of Columbus, Ohio. Dr. Bope is Program Director of the Family Practice Residency at Riverside Methodist Hospital in Columbus. He is serving his 4th year on the Board of Directors.

Dr. Mary Kane Goldstein was elected as the new at-large member of the Board. She holds a Certificate of Added Qualifications in Geriatrics and chairs the Test Committee for Geriatrics. She is Director of Graduate Medical Education in Geriatrics and Clinical Assistant Professor of Geriatric Medicine at the Stanford University School of Medicine in Palo Alto, California.

Dr. James C. Martin of San Antonio, Texas, was elected as a nominee from the American Academy of Family Physicians. Dr. Martin is in private practice in San Antonio and has served the ABFP as an item writer for several years.

There are five members of the Board of Directors who are not family physicians. This year, the term of Dr. Norton Greenberger, representing Internal Medicine, expired. Replacing him is Dr. Donald T. Erwin, Chairman of the Department of Internal Medicine at The Ochsner Clinic in New Orleans. Dr. Erwin has served as a Director of the American Board of Internal Medicine and has served ABFP as a member of a test committee. He is Clinical Associate Professor of Medicine at both Tulane University and Louisiana State University School of Medicine.

In other business, the Board of Directors considered several policy matters. The issue of modification of the duration of the certificate was reported by the Recertification Committee. After careful evaluation of longitudinal data regarding performance on the cognitive examination, the



**Dr. Lanny Copeland**

Board concluded that there was no clear evidence that the duration of the time-limited certificate should be changed.

The Board of Directors reviewed several petitions by Diplomates interested in achieving a Certificate of Added Qualifications in Adolescent Medicine. Some evidence exists that a group of Diplomates may be disenfranchised from being chosen for leadership positions in academic adolescent medicine because they have no access to certification in that area of interest. The Board considered this issue at great length and proposed a strategy for study of alternatives involving relationships with the American Board of Pediatrics and the American Board of Internal Medicine, as well as some fundamental issues relating to the definitions of certificates of added qualifications. The

Board of Directors believes that the implications of any precipitous action are sufficiently severe that great care is required to resolve this issue.

Another issue of concern to the Board of Directors was the "retraining" of other specialists. Implicit in plans to offer retraining is the issue of certification. Because there are only a few proposals of sufficient detail to consider, the Board lacked data regarding the size and nature of the potential problem. However, the Board reaffirmed its position that it cannot sacrifice the standards for certification to allow the recognition of alternate pathways. The Board must adhere to its own standards and definitions. To compromise those standards would undermine the essence of the certification process and the meaning and significance of the certificate.