Board News

Paul R. Young, MD

The annual meeting of the Board of Directors was held April 24-26, 1995. Elections were held to replace those Directors whose terms expired and to elect new officers. The nominee chosen from the American Academy of Family Physicians was J. Lewis Sigmon, Jr., MD, of Charlotte, North Carolina. He replaces William Bernhardt, MD, of Midwest City, Oklahoma. The new At-Large Director is Cynda Johnson, MD, of Kansas City, Kansas. She was nominated by The Society of Teachers of Family Medicine and replaces Edward Bope, MD, of Columbus, Ohio, the retiring President. Peter Silberfarb, MD, of Dartmouth Hitchcock Medical Center in Lebanon, New Jersey, replaces John Hayes, MD, of Indianapolis, Indiana, as the psychiatrist nominated by the American Board of Psychiatry and Neurology.

As a result of the election of officers, Michael Hagen, MD, of Lexington, Kentucky, is the new President of the Board. James Shetlar, MD, of Frankenmuth, Michigan, is the Vice-President; Donald Keith, MD, of Seattle, Washington, is the new Treasurer; and Joseph Tollison, MD, of Augusta, Georgia, is the At-Large Member of the Executive Committee.

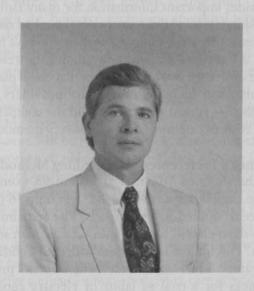
Other major actions included a resolution to continue publication of the *Journal of the American Board of Family Practice* but to negotiate a significant reduction in costs. This includes a change in publishers but without interruption of publication on a bimonthly basis.

Also important to family physicians was a resolution that creates an increase in fees to candidates for certification, recertification, CAQ certification, and CAQ recertification. The fees are to increase by \$200. This increase will apply to all examinees beginning in 1997. Thus, the sports

medicine examination fee will be \$750, and the certification and recertification examination fees will be \$700. Beginning in 1998, the geriatric examination fee for certification and recertification will be \$750.

This is the first increase in fees for many years. The anticipated development and implementation of a computerized examination will undoubtedly affect the fee structure, although it is too embryonic to make reasonable projections. Certainly some savings will be possible by reducing the travel time and total time away from one's practice.

Obviously, those physicians who will be in their 6th year of their certificate in 1996 might wish to apply for the 1996 examination and thus avoid the fee increase for recertification until the next cycle, by which time there should be a computerized examination available.



Michael Hagen, MD