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# Presidential Address of the American Orthopaedic Society for Sports Medicine

## Mentorship, Opportunity, and Volunteerism

Jo Ann Hannafin,\* MD, PhD, *President, AOSSM*



I would first like to highlight a number of initiatives undertaken by our society over the past year and will follow with a more personal perspective on my career path as an orthopaedic sports medicine physician.

I started my year as society president by participating in the groundbreaking of the new AAOS building in Rosemont in August. This facil-

ity, as you are aware, will house a new Orthopaedic Learning Center, the offices of the AAOS, AOSSM, AANA, and a total of 26 orthopaedic organizations. The AOSSM is an equity partner both in the building and the OLC, which brings opportunities for future growth and for consistent involvement in the OLC programs. The building has gone up rapidly despite a difficult winter in Rosemont. Over 11 months, the site has been transformed from a vacant lot to a beautiful structure, as can be seen in these photographs taken by Irv Bomberger, whose photography skills we have grown to marvel at. The facility is on time and on budget with an expected move-in date of early December. Courses will begin at the state-of-the-art OLC in March 2015.

In the fall of 2013, 2904 AOSSM members were contacted to complete a member survey. The purpose of the survey was to assess member perceptions regarding the organization's functions and member services. Approximately one-fourth of the membership responded to the survey, and I would like to highlight some of those responses as well as our response to your suggestions and critiques.

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Presented at the 40th annual meeting of the AOSSM, Seattle, Washington, July 2014.

The members who responded to the survey reflect a wide range of the membership, with a majority of the respondents between age 35 and 54. Sixty percent were in a private practice setting and 22% were in an academic or university-based practice.

We were also very interested to see who we are as sports medicine physicians, including the range of sports medicine coverage. On average, 25% of the membership are involved in the care of high school or collegiate teams, including football, basketball, soccer, baseball, or softball.

Members were asked to rate the AOSSM compared with other professional societies with regard to education, research, fellowship, communications, and publications. The membership viewed the activities of our society favorably, and a variety of suggestions were given to improve the educational format of our meetings, educational opportunities, and opportunities for involvement and fellowship.

Advocacy efforts were also a common theme given the current level of apprehension regarding ongoing changes in the health care environment.

Some raised concerns that the society had become more political and less research focused, while other members felt that the society was running well.

A very common theme was the desire to expand participation by the membership in leadership, professional interaction, communication, and fellowship.

That call has been heeded by the Board, and a number of initiatives have been undertaken to broaden participation by the membership. We are a strong society. The activities of our society and its committee structure rely on a large core of volunteers who spend a considerable amount of time working for the benefit of all of us.

This year, multiple calls for volunteers were sent out to the membership and 66 positions were filled by volunteers, many of whom have not previously served on an AOSSM committee.

An under-40 member is assigned to each committee to represent the younger members of the society and to keep our ideas fresh and forward thinking. Please keep your eyes open for information about volunteer opportunities in the fall SMU.

If you don't volunteer, it is difficult to get involved.

There are several new initiatives undertaken by the Board of the AOSSM that I would like to review.

A new AOSSM team physician committee was formed this year and will be chaired by Dr Tim Hosea, who has extensive experience in New Jersey high school athletics as well as collegiate, national team, and Olympic coverage. Care was taken to select members of this committee from a variety of regions of the country and experience in team coverage spanning high school to professional athletics. The committee met by conference call this spring and will meet in person for the first time at this meeting. They are highly energized about serving the membership and the athletes that we care for. Please feel free to reach out to the members of this committee with ideas, comments, and suggestions.

A significant effort has also gone forth to help with potential changes in sports medicine—fellowship training. In 2013, the ACGME announced significant changes in the processes for evaluation and accreditation of fellowship programs which had the potential for placing stand-alone fellowship programs at risk. The AOSSM worked very closely with AANA, ASES, and the AAOS to raise our objections and concerns to the initial plan put forward by the ACGME. Some positive changes have already occurred.

The AOSSM has created a Fellowship Accreditation Task Force chaired by Dr Jeff Dugas to address the issues critical to the stand-alone programs and to facilitate processes for compliance with the new ACGME regulations without threatening the existence of these fellowships which are longstanding, highly regarded, and train a significant portion of our fellows yearly.

There was also significant feedback from the membership regarding concerns about the rapidly changing health care environment. In response to these concerns, the Health Policy and Ethics Committee has been revamped and renamed the Committee on Legislative and Regulatory Advocacy. This committee is chaired by Dr Stephen Weber and is charged with monitoring and responding to federal or state legislation or regulation that affects the practice of sports medicine. The committee will work with government relations staff to identify priorities and draft responses to proposed legislation or regulation and will communicate to the AOSSM membership and leadership regarding priority issues.

The publications arm of the AOSSM continues to thrive under the guidance of the Medical Publishing Board of Trustees and the editorial genius of Dr Bruce Reider. Dr Doug Brown has just completed his tenure as the Chair of the Medical Publishing Board, and we owe him a debt of gratitude. He has guided the publishing arm through a time of significant growth, with the expansion of the *AJSM* and the addition of *Sports Health* and the *Orthopaedic Journal of Sports Medicine*, our new open access journal, and has been a thoughtful, fiscally sound, and outstanding leader of the Board. Dr Bob Stanton will follow in the footsteps of Dr Brown, and we anticipate continued growth and success.

Dr Reider has continued to provide superb and thoughtful editorial leadership to our publications. Paper submissions continue to rise, and in 2013, 322 articles were published, a 13% increase over 2012, while time from acceptance to publication has dropped. The 5-year impact factor of the *AJSM* is 4.937 which ranks the *AJSM* number 1 of 63 journals in the field of orthopaedics. This impact

factor reflects the quality of the scientific submissions, the skill of our volunteer reviewers, and the editorial guidance of Dr Reider. The journal is indeed one of the priceless jewels of our organization and something that all members of the society should be proud of.

*Sports Health*, under the editorial stewardship of Dr Edward Wojtys, continues to grow both in numbers of manuscript submissions and journal subscriptions. The papers published continue to reflect the multidisciplinary focus of the journal, with contributions in the areas of sports physical therapy, athletic training, primary care, and orthopaedic sports medicine. I encourage all of the members to consider gifting a subscription to *Sports Health* to their school athletic trainers.

The use of the *AJSM* and *Sports Health* mobile apps has continued to expand, and if you haven't tried them yet, I would strongly suggest that you try. It is an efficient and lightweight way to access the journal.

The *OJSM*, our online open access journal, has been open for a little over 1 year and has continued to grow with an increase in original submissions. The quality of the papers published has been high, in keeping with our historical standards. There are now 12 international partner societies in the publication of the *OJSM*, setting a standard for international collaboration and sharing of ideas.

Members were also asked to rank the educational opportunities available to them. While our opportunities provide value to the membership, we have responded to some criticisms concerning the annual meeting and have made deliberate changes to the meeting. As you might have noticed, award presentations are not being done during the meeting this year in an attempt to increase the numbers of papers presented. Award presentations were made at the Board meeting on Wednesday night. Research award presentations have been integrated into the scientific sessions that are appropriate to their topics.

We have expanded the educational opportunities at the meeting in several ways:

1. Additional concurrent sessions have been added to highlight specialty areas that are of interest to the membership.
2. Instructional courses have always been highly rated, and we have added instructional courses to the Sunday schedule.
3. Expansion of the meeting into the afternoon is being tested this year, and we will monitor the response of the membership to this change. An afternoon session will be held at 2 pm today culminating in a symposium on coracoclavicular ligament reconstruction highlighting masters in shoulder surgery.

The Program and Instructional Course Committees have worked very hard to create a program that is responsive to the 2013 survey. We look forward to your feedback on our meeting so that continued progress can be made to make this meeting a rewarding one for all participants.

It goes without saying that none of the topics that I have reviewed today—the innovations, growth, and progress—could occur without an incredible group of full-time staff.

Our Executive Director, Irv Bomberger, and Managing Director, Camille Petrick, are the life blood of the organization and provide institutional memory as the leadership changes from year to year. They have helped grow this organization into one that is envied by subspecialty organizations around the world. I have learned a lot from both of them this year and would like to publically thank them for their support and remarkable service to the AOSSM.

Our directors of Research, Education, Communications, and Corporate Relations as well as all of the AOSSM staff work tirelessly to improve the society for all of our members. When you see them please thank them for all that they do for you!

On a sad note, I want to inform you of the death of Mike Konstant earlier in the week after an extended battle with cancer. He joined the staff to work with the *STOP Sports Injury* program and will be greatly missed.

I would now like to spend some time on the topic area of my address: MENTORSHIP, OPPORTUNITY, AND VOLUNTEERISM.

If I had looked into the future when I began medical school in 1979, I would never have imagined that I would be standing before you today.

I was born and raised in southeastern Massachusetts, the daughter of an x-ray technician and a stay-at-home mom who believed in the power of education and hard work. I was fortunate to play high school sports in the pre-Title IX era and walked on as a very average JV swimmer my freshman year at Brown. Thanks to Title IX, rowing began at Brown in the spring of 1974, and I was recruited to row and my life was forever changed.

For those that don't know much about rowing, it is a sport with no superstars, a sport that relies on precision and ultimate teamwork for success, and a sport that was perfect for me.

If you have not yet read *The Boys in the Boat*, I would recommend it to everyone. It is set in Seattle in the 1930s and documents the growth of a disparate group of young men into Olympians. It is a wonderful story integrating stories of life in the 1930s and the role of sport in our development.

My undergraduate life revolved around sports and academics as I struggled with making a decision between science and medicine. I ultimately chose to work at Dartmouth College prior to beginning medical school, where I shared a mentor with Dr Freddie Fu, Dr Roy Foster. During those 2 years I discovered what it was like to train on an elite level and began to set goals to row on a national or international level.

When I moved to New York to begin my MD PhD program at the Albert Einstein College of Medicine, I had the privilege of rowing at the New York Athletic Club with a group of elite, male rowers who included John Brisson, with whom I shared a coach. Our relationship as teammates led to marriage, and we will celebrate our 32nd wedding anniversary this year. The New York Athletic Club was not an easy place to be female in those days, but over time my teammates recognized that my goal was the same as theirs ... to be as fast as possible and to win boat races. My athletic and academic lives

were completely separate, my medical school classmates had no concept of our training and many of my rowing teammates had no idea that I was a medical student.

In 1981, while cross-training on cross-country skis, my life changed with a bad fall resulting in the "unhappy triad of O'Donoghue." Yes, like so many in this audience my pathway to a career in orthopaedics began with a sports injury. Emergency ACL surgery followed ... yes, in those days primary ACL repair was the state of the art and was performed as soon as possible following the injury. Nine months later I was back to competitive racing, and 33 years later my ACL is still working!

My surgeon was Martin Levy, who had completed his sports medicine fellowship with Russ Warren at HSS. He seemed so old and wise at the time ... little did I know until later in my training that he was 6 months out of his fellowship at the time of my surgery. He reconstructed my knee and taught me all about the ACL. Two years later I arranged an elective with him, although still uncertain if this was the area for me. The first 2 women were about to begin residency training at Einstein, and emotions were mixed across the department as to the wisdom of this change. At the end of the elective we reviewed my performance and plans, and he said something quite simple to me ... "you could be good at this" ... and the rest is history.

From that day forward a series of doors began to open for me: an orthopaedic residency at Einstein/Montefiore followed by a 2-year fellowship at the Hospital for Special Surgery.

When I interviewed at HSS in 1988, Dr Warren commented that he had never interviewed a gal before ... and I was not optimistic that my application would be successful ... but happily it was, and my career at HSS began.

The first year was spent with Dr Steven Arnoczky transitioning my science from basic membrane biology to basic and translational orthopaedic research. He has been a scientific mentor and friend for 24 years, and both I and the sports medicine community owe him a debt of gratitude for all that he has done to expand orthopaedic sports medicine research and education. I am thrilled that he is being inducted into the AOSSM Hall of Fame this morning, as his teaching and research have touched all of our lives.

The sports service was small at that time, consisting of Drs Russell Warren, Thomas Wickiewicz, David Altchek, and Stephen O'Brien, who all contributed to my surgical training, academic development, and opportunities for team coverage. They continue to be colleagues and collaborators. Dr Hollis Potter and I were fellows at the same time, and she has taught all of us at HSS everything that we know about MRI and has become a dear friend. The sports service has expanded significantly since that time.... Some think that we grow on an almost daily basis!

Dr Warren and Ronnie Barnes cleared the way for me to work with the New York Giants as the first female sports fellow in the NFL, and I remain very grateful for that early opportunity. I learned a lot from Ronnie on how to communicate with elite athletes, especially those who were twice my size! David Altchek opened the door for my coverage of the New York Mets, which I continued as an assistant team physician for 5 years postfellowship, and I also had

the opportunity to work with Steve O'Brien covering both St. Johns University and the New York/New Jersey Knights.

Other opportunities for team coverage evolved when Tim Hosea invited me to join the sports medicine team at USRowing, when Mary Lloyd Ireland as the medical director of the WUSA recommended me to the New York Power organization, and when Dr Lisa Callahan opened the door for me with the New York Liberty.

All of these opportunities were possible because colleagues looked beyond themselves to share opportunities with me. This is a lesson that I learned early and often—the sum of the whole is always stronger than the individual parts and that rather than being threatened by collaboration, we are all made stronger.

This picture was taken by Dr John Feagin at one of the first AOSSM meetings that I attended. I was standing with Mary Lloyd Ireland, Carol Teitz, Liza Arendt, Ro Morwessel, and the late Sandy Kirkley. John was struck by a group of women standing together in a room full of men and recorded that day for all of us. I am not certain where Etty Griffin was when the photo was taken, but she was most certainly at the meeting. In those days we all knew each other because our numbers were quite small.

Although I have the honor of being the first female president of this society, I am certainly not the first to have made an impact on this group. There are a number of women whose membership in the society preceded mine and have contributed significantly to our profession, including Drs Liza Arendt, Carol Teitz, Etty Griffin, Patti Kolowich, Mary Lloyd Ireland, and the late Sandy Kirkley to name just a few.

These women have contributed to the society and to the care of collegiate athletes across the country.

The pool of sports medicine fellowship-trained women continues to grow, as do the number of female sports medicine physicians involved in the care of professional, national, team, and collegiate athletes. This year one of our members, Dr Gloria Beim, served as the chief medical officer for the Sochi Olympic games. In order to better serve her athletes, this remarkable woman learned and became fluent in Russian for the Olympic Games. I am honored to acknowledge all of them and the service that they provide.

My involvement with the AOSSM began with an appointment as a member of the research committee. I learned during that time that participation, hard work, and responsiveness are critical to the success of any committee. If you exhibit those characteristics, word spreads and you are invited to participate in other initiatives and committees.

I would encourage any AOSSM member with a passion for volunteerism and a goal of playing a role in the future of the AOSSM to volunteer for committee appointments. It is an opportunity to learn your strengths and weaknesses, to contribute to the Society and the profession, to network and learn from your colleagues, and to develop leadership skills ... you never know where it might lead you!

The next decade will bring change and challenges to our community that we have not even begun to recognize. As

surgeons we are very focused on technology and new treatment approaches, whether they be surgical or biologic. It will be incumbent upon our profession to demonstrate the scientific validity of what we prescribe and the surgery that we perform. It will be important to be vigilant as we adapt to the changes and to continue to scientifically assess and report on our outcomes. The growth and expansion of multicenter groups such as MOON and MARS will be necessary to document outcomes and provide data validating and justifying our treatment of athletic injury. If we cannot continue to demonstrate the scientific rationale for the treatment of our patients, we do a disservice to those who come to us for care. Without data demonstrating efficacy, patient access to care will ultimately be restricted by the insurers.

In spite of the potential doom and gloom facing us in health care, it is important to realize why we are here. We have the best job there is in medicine. We remain passionate about our careers, about the care of athletes and active individuals, and about the continued advancement of our profession. I for one am happy to go to work every day!

The past 2 years have been filled with the highest of highs and the lowest of lows. In April of 2013 I was diagnosed with early multiple myeloma after sustaining a cervical spinous process fracture while performing a Lachman exam on a heavy knee.

I am incredibly fortunate that my disease was diagnosed at an early stage and I am now in remission following chemotherapy and an autologous stem cell transplant.

I learned a lot about myself, my family, friends, and colleagues during the first year of treatment, and I am so grateful to everyone who helped me get through that process. It is important for all of us to realize how fragile life can be and how it can change in a moment.

Ruth Riley recently retired from the WNBA, and I was struck by this quote, which reflects my experiences in sports medicine.

Success in life is never an individual accomplishment ... it is a culmination of those who inspire you to chase your dreams, those who encourage you over the long road ... and those who impart the necessary knowledge.

There are those who give you the physical tools, those who give you the opportunity and those who work alongside you every day in pursuit of mutual goals.

To the past presidents of the AOSSM and to the members of the Board: It has been an honor and pleasure to learn from you and work with you. You have without exception dedicated your careers to the care of athletes, to the education of sports medicine physicians, and to the advancement of the mission of the AOSSM.

To my partners at HSS and specifically to the members of the Women's Sports Medicine Center: It has been and continues to be a pleasure to work with you, learn from you, and share in the care of athletes. As I recovered

from my stem cell transplant, you supported me, my practice, and my patients without question or hesitation.

I would especially like to thank Dr Lisa Callahan with whom I cofounded the WSMC in 1994, Dr Beth Shubin Stein, my program chair, Dr Sabrina Strickland, Dr Marci Goolsby, and Theresa Chiaia, DPT, an incredible physical therapist. These women are incredible partners, thought leaders, and friends. And to Denise Larocque, Mary Barone, and Jean Barra.... Thank you for making our team work so well.

And last but not least I would like to thank my husband John and our children Andrew, Caitlin, and Connor. As I mentioned earlier, John and I met 35 years ago while training as rowers at the New York Athletic Club. Rowing became an immediate bond and has continued to be an important part of our lives. Our children grew up on the sidelines of race courses, and as a family we spent countless hours participating in and watching swimming, diving, and

rowing events. John was a lawyer in addition to being a high school and pre-elite rowing coach for many years. Four years ago he retired his practice and returned to his true passion ... he became a collegiate women's rowing coach. John has been my friend, partner, incredible support system, and a frank and astute advisor over the years. I love you and thank you for the sacrifices that you have made for me. I could not have done this without you.

And to Andrew, Caitlin, and Connor: Thank you for pursuing your passions in sports and life and for understanding and being proud of having a mom who loves her career.

In closing I would like to thank you and ask you to remember that despite the frustrations of life and the things that we cannot control.... Please be thankful for your families, for your health, for the beauty of the work that we do every day, for the trust of our patients, and for being able to make a difference!

Enjoy the rest of the meeting.

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