It is an honor and privilege to serve as the newly-elected 32nd President of the Society of Neurosurgical Anesthesia and Critical Care (SNACC). I will do my best to fulfill the responsibilities of the coming year.

The time immediately following our Annual Meeting is always an opportunity for reflection. Our Annual Meeting in Atlanta was a great success, with almost 200 registrants and 91 original research presentations, despite the last minute relocation from New Orleans to Atlanta due to Hurricane Katrina.

There are, of course, many individuals who contribute greatly to the overall success of a society in general. Advances and achievements do not just happen by accident or coincidence. They are usually the result of vision, dedication to the cause, and the determination of several individuals. On behalf of all the members of our Society, I wish to express my sincere thanks and appreciation to the members of the SNACC Board of Directors.

Last, but by no means least, it is no exaggeration to state that without the highly efficient and professional running of our ASA management organization, such a meeting could not be successful. I would therefore like to sincerely thank them for their superb work.

The mission statement of the SNACC is “To advance the art and science of the care of the neurologically impaired patient.” I would be very delighted if it could become the natural wish of any practicing and academic neuroanesthesiologist, neurointensivist, physician, or investigator having an interest in neurosurgical anesthesia and critical care, to become a SNACC member and to attend the annual meeting, either to receive up-to-date information on all aspects of the practice of anesthesia, to exchange ideas with colleagues of different backgrounds, or to present the latest scientific advances.

In preparing the Annual Meeting, the SNACC Board will make every effort to ensure high scientific quality, choosing knowledgeable individuals in their fields to address “hot” topics in neuroscience, and continuing rigorous blinded peer-review of submitted abstracts.

The Annual Meeting is just one of our endeavors. The opportunities ahead of us are many and challenging. Our aim is to raise the standards of our specialty by fostering and encouraging education, research, scientific progress, and exchange of information. The SNACC Board of Directors will approach these with care, determination and dedication. The SNACC has highly motivated and
President’s Address Continued (from page 1)

compotent people working for it. The membership of our Society during the past years has remained fairly constant, whereas, membership in a number of anesthesia subspecialty societies is on the decline. This is evidence that we are moving in the right direction. The Journal of Neurosurgical Anesthesiology, also known as the “blue” journal, is the journal of our Society, and I would like to take the opportunity, on behalf of the entire Board of Directors, to thank Dr. James E. Cottrell, Editor-in-Chief, Dr. John Hartung, Associate Editor, and Karl Durst, Associate Publisher, for their efforts and for hosting a page for special announcements to the SNACC members in the journal.

As members of the society we all need to take an active role. Although the Board of Directors is expected to provide leadership by developing and formulating novel ideas and concepts, you have the means of influencing the direction of that leadership. You can participate in the decision-making process, and your comments, suggestions, and criticisms are more than welcome. Please send them to concezione.tommasino@unimi.it.

Please share this newsletter with as many colleagues as possible. Attracting the attention of young colleagues and encouraging them to join our Society should be part of the mission of all SNACC members. It has been my pleasure and privilege to be part of SNACC over the past twenty years, and it will be my pleasure and my privilege to serve SNACC members over the next year.

I wish all of you a very productive year.

With warmest regards,

Stella C. Tommasino, MD

34th Annual SNACC Meeting 2006

This year marks the 34th Annual Meeting of our Society on Friday, October 13, 2006, in Chicago, Illinois. Please watch for details on our Web site regarding the meeting, www.snacc.org. The meeting will feature world experts on the field of Neuroanesthesia and Critical Care, and lectures on, among other topics, the specific pathophysiology, the diagnostics and the treatment options in children suffering from traumatic brain injury.

In addition, the meeting will provide an opportunity to present your scientific work in the form of a poster to an international audience of experts in the field. Online submission of abstracts will be available starting on March 31 through May 26, 2006 (Deadline). Last year about 100 abstracts were accepted for presentation. Accepted abstracts will be published in the October 2006 issue of JNA.

Please encourage anesthesiology residents and fellows to apply for the prestigious John D. Michenfelder New Investigator Award. The award is presented annually to the resident, fellow, or junior faculty member whose research exemplifies the Society’s mission of improving the art and science of neurosurgical anesthesia and care of the critically ill neurosurgical patient. Individuals who wish to have their work considered need to submit an abstract for presentation at the meeting and forward a full manuscript of their respective research to the SNACC office. The recipient of the John D. Michenfelder New Investigator Award will be asked to make an oral presentation of his/her work at the SNACC Annual Meeting and will receive a plaque in honor of this occasion.

ASA Neurotrack 2006

The ASA meeting will once again have a coordinated educational and scientific program in neurosciences and neuroanesthesia. The ASA Neurotrack is chaired by Dr. Dan Cole with Drs. Bendo, Domino, Hemmings, Lam, and Patel serving on the committee. Unlike last year, at which all the Neurotrack sessions were on Saturday and Sunday, this year’s program will occupy the entire ASA Annual Meeting time (October 14-18, 2006). Refresher courses include anesthetic management of carotid artery disease, awake craniotomy, neuroprotection, intracranial vascular disease, depth of anesthesia monitoring, and monitoring of the brain and spinal cord. In addition, we will hold two Refresher Course Sessions, similar to the New York PGA presentations, each with three speakers, on the Periop Care of the Patient with Acute CNS Injury and Avoiding Complications in Neuroanesthesia. Panels include: Key Concepts in Neuroanesthesia; Mild Hypothermia and Cerebral Protection; Anesthetic Considerations for Neurological Disorders; Brain Function Monitoring and Depth of Anesthesia, and Stem Cells: Current Scientific, Philosophical, and Political Perspectives. A Transcranial Doppler workshop is also planned.
The Society of Neuroanesthesiology and Critical Care Breakfast Panel was presented at the Annual Meeting of the American Society of Anesthesiologists on Sunday, October 23, 2005. The Breakfast Panel titled “Current Issues in Anesthesia for Spine Surgery” was one component of the outstanding Neuroanesthesiology Track at the ASA Annual Meeting. The panel was introduced by Dr. Karen Domino, president of SNACC, and moderated by Dr. Susan Black, Professor of Anesthesiology at University of Alabama School of Medicine. Panelists, Dr. John Drummond, Professor of Anesthesiology from the University of California, San Diego; Dr. Jeremy Lieberman, Associate Professor from University of California, San Francisco; and Dr. Lorri Lee, Associate Professor from University of Washington discussed issues related to current clinical management of patients undergoing spine surgery. Dr. Drummond addressed the issue of blood pressure management during spine surgery, in particular addressing clinical situations in which management other than the routine intraoperative blood pressure management might be considered. He discussed the potential benefits of induced hypotension during major thoracolumbar procedures in patients not at high risk for neurologic compromise. These benefits include reduced intraoperative blood loss and/or decreased bleeding in the operative field that may translate into improved operating conditions. He also discussed the potential role of maintenance of a higher blood pressure intraoperatively in patients at risk for intraoperative neurologic compromise, especially during cervical spine procedures. In these situations, he suggested maintaining blood pressure at awake levels – avoiding more than a 10% decrease in pressure.

Dr. Lieberman discussed the current role of motor evoked potential (MEP) monitoring during spine procedures. He presented information demonstrating the benefit of adding MEP monitoring to somatosensory evoked potential monitoring in patients undergoing procedures associated with significant risk of intraoperative neurologic injury. In addition, he reviewed the impact of anesthetic management on quality of monitoring, suggesting that avoidance of volatile anesthetic agents is important in obtaining optimal monitoring conditions. While use of low dose volatile agents may allow for adequate monitoring in patients without preoperative neurologic compromise, in patients with impaired function preoperatively, use of volatile agents may preclude successful MEP monitoring.

Dr. Lee reviewed available information related to postoperative ischemic optic neuropathy, a cause of permanent vision loss that is uniquely associated with prone spine surgery. She pointed out that the majority of patients suffering this complication are middle aged, otherwise healthy patients undergoing relatively long, high blood loss lumbar and thoracic spine procedures, who experience some degree of hypotension intraoperatively. Because these factors are not present in all cases, and even in the “classic situation” for ischemic optic neuropathy the complication is uncommon, Dr. Lee pointed out that the etiology is likely multifactorial and may include other as yet unidentified factors.

SNACC Collaborative Research Project

SNACC MEMBERS COLLABORATIVE RESEARCH PROJECT

CASE CONTROL STUDY FOR POSTOPERATIVE VISUAL LOSS

The Postoperative Visual Loss (POVL) Registry, funded by the ASA, has now collected 83 cases of ischemic optic neuropathy (ION) associated with spine surgery. The profile of these patients is that of relatively healthy ASA 1-2 patients undergoing multi-level instrumented spine surgery with an anesthetic duration of 6 hours (94% of cases) and an EBL of 1000 ml (82%). Both hematocrit and blood pressure varied widely. Though we can identify relatively high-risk procedures, we cannot identify patients at risk for this disease, and we do not know how the hemodynamic management, fluid administration, and / or transfusion threshold affects the development of this lesion. To determine the influence of these parameters on ION, a case control study is needed.

INCLUSION CRITERIA FOR ION CASE CONTROL STUDY

1) US / Canadian Center with a large volume of multi-level instrumented spine surgery;
2) Patient age 18 yo;
3) Instrumented spine surgery in the prone position lasting > 3 hours;
4) Location of spine operation in the thoraco-lumbar-sacral area (not cervical)

We would like to recruit a minimum of 20 centers to participate in this case control study. We anticipate needing 4 matches for each ION case from the POVL Registry that fits the above criteria (approx. 78 cases). An abbreviated POVL form will need to be filled out on all controls.

If you would like to participate, please contact Karen Domino, MD, MPH at kdomino@u.washington.edu.
The Society of Neurosurgical Anesthesia and Critical Care (SNACC) is an organization dedicated to improving the art and science of neurosurgical anesthesia, and the care of the critically ill, neurologically impaired patient. Critical to this mission is the recruitment and training of anesthesia residents, neuroanesthesia clinical fellows and neuroanesthesia research fellows. The contribution of those individuals who serve as teachers, mentors and role models to our specialty cannot be underestimated. In recognition of these contributions, the Society presents its Distinguished Teaching Award (DTA) to those who have shown continued excellence in neuroanesthesia education.

The DTA for the year 2005 was awarded to Dr. David Smith, Associate Professor of Anesthesiology, Critical Care and Biochemistry-Biophysics, of the University of Pennsylvania. Dr. Smith was nominated for the award by his colleagues, both past and present. He has a strong commitment to the education of residents in anesthesiology and to medical students. In fact, he has influenced in excess of 500 students and residents over his career. In addition to education, he has made important scientific contributions and is a co-editor of the widely read textbook Anesthesia and Neurosurgery. It is readily apparent that Dr. Smith commands the respect of his peers and colleagues not only within the neuroanesthesia community but also in the larger anesthesia and neuroscience communities as well. The Board of Directors of SNACC congratulate Dr. Smith.

The New Investigator Award this year went to Dr. Chanannait Paisansathan, MD for her report entitled "CSF S100B Related to Vasospasm in Patients Undergoing Intracerebral Aneurysm Clipping Surgery." She is currently Assistant Professor of Anesthesiology focusing on Neuroanesthesia and Cardiothoracic Anesthesia, and she heads the Pediatric Neuroanesthesia Division at the University of Illinois at Chicago. She previously completed fellowship training in neuroanesthesia, pediatric anesthesia and cardiothoracic anesthesia. As the recipient of the NIA, Dr. Paisananthan presented her findings in an oral presentation at the 33rd SNACC Annual Meeting that was held in Atlanta, Georgia, October 21, 2005 and received a plaque and an award of $2500.

The Society of Neurological Anesthesiology and Critical Care awards the John D. Michenfelder New Investigator Award each year to an anesthesiology resident, fellow or junior faculty member who has submitted a full manuscript report of his/her research. The award is made to the new investigator whose research best exemplifies the Society's mission to advance the science of neurosurgical anesthesia and care of the critically ill neurosurgical patient. Residents, fellows and junior faculty members within three (3) years of ending of postgraduate training are eligible to receive this award.

We gratefully acknowledge the support of the Integra Foundation for the 2005 John D. Michenfelder New Investigator Award. We are happy to report they will continue to support the award in 2006!
Announcing…
The Society of Neurosurgical Anesthesia and Critical Care

John D. Michenfelder New Investigator Award
Funded by the Integra Foundation
To Be Presented at the

34th Annual Meeting
Friday, October 13, 2006
Chicago, Illinois

CALL FOR ABSTRACTS/MANUSCRIPTS
Submission Deadline: May 26, 2006

The Society of Neurological Anesthesiology and Critical Care, in its efforts to encourage anesthesiology residents and fellows to become more involved in the Society, is pleased to offer the John D. Michenfelder New Investigator Award. The award is presented annually to the resident, fellow, or starting junior faculty whose research exemplifies the Society’s mission of improving the art and science of neurosurgical anesthesia and care of the critically ill neurosurgical patient.

SNACC Members are encouraged to have their residents, fellows, and junior faculty apply for this prestigious honor. To apply for the New Investigator Award, residents, fellows, and junior faculty must submit an abstract for the SNACC Annual Meeting, check the box that the individual wishes to apply for the New Investigator Award and submit a full length manuscript to the administrative office.

The recipient of the New Investigator Award will be asked to make an oral presentation of his/her work at the SNACC Annual Meeting and will receive a plaque in honor of this occasion and $2500 for travel reimbursement funded by the Integra Foundation.

For more information check the SNACC Web site at www.snacc.org, or contact the Society’s office:

SOCIETY OF NEUROSURGICAL ANESTHESIA AND CRITICAL CARE
520 N. Northwest Highway Park Ridge, Illinois 60068-2573
Telephone: (847) 825-5586 Fax: (847) 825-5658 E-mail: snaccmeetings@asahq.org

2005 SNACC Travel Award Recipients
Funded by the Integra Foundation who is graciously presenting ten $1000 travel awards again in 2006

Erol Cavus, MD
Universitätsklinikum Schleswig-Hostein
Campus Kiel
Kiel, Germany

Bettina Jungwirth, MD
Technische Universität München
Munich, Germany

Hailong Dong, MD, PhD
University of Fukui
Fukui, Japan

M Lucia Gordan, MD
Technische Universität München
Munich, Germany

Kenji Yoshitani, MD
Duke University
Durham, NC, USA

Olaf Cremer, MD
University Medical Center Utrecht
Utrecht, The Netherlands

Hetal Hosalkar, MD
University of Pennsylvania
Folsom, Pennsylvania, USA

Uta Winkelheide, DVM
Technische Universität München
Munich, Germany

Kristine Kellermann, DVM
Technische Universität München
Munich, Germany

Patrick Meybohm, MD
Universitätsklinikum Schleswig-Hostein
Campus Kiel
Kiel, Germany

Funded by the Integra Foundation
Alex Bekker, MD, PhD
Associate Professor of Anesthesiology and Neurosurgery
Chief of Neuroanesthesia Division
Director of Clinical Research at the Department of Anesthesiology.
New York University School of Medicine
New York, NY

Dr. Bekker’s work has focused on the computer simulation of biological systems, cognitive recovery after surgery, postoperative pain control, and clinical pharmacology. He is an author of 26 peer reviewed and 17 educational publications, 5 US patents, and more than 50 abstracts. Dr. Bekker is an Ad Hoc reviewer for Anesthesiology, Anesthesia and Analgesia, Journal of Neurosurgical Anesthesiology, Journal of Clinical Anesthesiology, Microvascular Research, Drugs and Aging, The Journal of Respiratory Diseases, and General Hospital Psychiatry.

Ansgar M. Brambrink, MD, PhD
Associate Professor
Director of Faculty Development
Department of Anesthesiology and Peri-Operative Medicine
Oregon Health & Science University
Portland, OR

Dr. Brambrink is a clinician, a research scientist and an educator. His clinical interests involve neuro- and trauma anesthesia, critical care and management strategies for the difficult airway. His neuroscience-related research is currently focused on regeneration and plasticity after experimental stroke. In recognition of his original scientific research, he has received several prestigious awards in Germany including the “DGAI-Forschungsstipendium” in 2002. Dr. Brambrink is author of 62 publications in peer-reviewed journals and 41 book chapters and is editor of two textbooks on anesthesia. He acts as ad hoc reviewer for scientific journals such as Stroke and the Journal of Cerebral Blood Flow and Metabolism. Over the last several years, he has also acted as a host and moderator for a number of international scientific and educational meetings.

Monica S. Vavilala, MD
Associate Professor of Anesthesiology, Pediatrics and Neurological Surgery
University of Washington
Seattle, WA

Dr. Vavilala is board certified in pediatrics and anesthesiology and has been on faculty at the University of Washington since 1997. Her primary research focus involves examining cerebral hemodynamics in pediatric traumatic brain injury (TBI). Specifically, she is interested in the relationships between blood pressure, cerebral blood flow, cerebral autoregulation and outcome in pediatric TBI. She is also interested in understanding the mechanism of cerebral edema in pediatric diabetic ketoacidosis (DKA). Dr. Vavilala has over 40 peer reviewed publications in the area of pediatric trauma, pediatric TBI and pediatric cerebral autoregulation. She is funded by NICHD and is a member of the Pediatrics Subcommittee Study Section of NICHD. She is also Vice President for Communications of SNACC. Dr. Vavilala enjoys music, and spending time with her family.
Title: Anesthesia and the Injured Central Nervous System

Objectives:
After attending this panel, participants will understand 1) anesthetic implications of traumatic brain injury for non-neurosurgical procedures, 2) common etiologies for perioperative stroke in patients undergoing non-neurosurgical procedures, and 3) how best to avoid neurological deterioration with airway management in patients with cervical spine injury. They will recognize and be able to apply this information to their practice.

Moderator: Karen B. Domino, MD, MPH
University of Washington School of Medicine
Seattle, WA

Anesthesia for non-neurosurgical procedures in head injured patients: Beyond “avoid hypotension and hypoxia”
Basil Matta, MD, FRCA
Addenbrooke’s Hospital
Cambridge, UK

True or False? The neurologist: “This patient’s perioperative stroke was caused by an episode of intraoperative hypotension.”
Cor J. Kalkman, MD, PhD
University Medical Center
Utrecht, The Netherlands

Airway management in the cervical spine injured patient – Awake… Asleep… or does it matter? A critical appraisal.”
Concezione Tommasino, MD
University of Milano
Milano, Italy

8th International Neurotrauma Symposium

Key Dates
• Notification of acceptance 1 March 2006
• Close of earlybird registration 15 March 2006

Traumatic Brain and Spinal Cord Injury
Rotterdam, The Netherlands
21-25 May 2006
http://www.ints2006.org

Main Themes
• Impact of neurotrauma
• Cross talk
• Dynamics of lesion progression
• Pediatric TBI: a developing concern
• Ethics and Trails
• Genes and destiny
• Breaking barriers

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The Neurocritical Care Society 4th Annual Meeting
www.neurocriticalcare.org
November 2-5, 2006
Baltimore, MD

The Neurocritical Care Society was founded to improve outcomes for patients with life-threatening neurological illnesses by promoting quality patient care, professional collaboration, research, training and advocacy.
Reports of Scientific Meeting: Society of Neurosurgical Anesthesia and Critical Care Scientific Meeting
Atlanta, Georgia, October 21, 2005

As noted in Dr. Thomasino’s address, the 33rd Annual Meeting of Society of Neurosurgical Anesthesia and Critical Care (SNACC) was relocated to the Hyatt Hotel in Atlanta, Georgia due to the lingering effects of Hurricane Katrina on New Orleans. This monumental task was seamlessly performed by the ASA management company headed by Julie Davis and Gary Hoormann. Cor Kalkman, MD, PhD was the program director and assembled a faculty of 13 international experts on the field of neuroanesthesia/critical care and neuroscience. There were 188 SNACC members in attendance.

Annual SNACC Dinner Symposium: “Managing Uncontrolled Hemorrhage in Neurosurgery and Neuro-critical Care”

With an unrestricted educational grant from NovoNordisk, a multi-disciplinary panel discussed the pathophysiology and clinical management of intracranial hemorrhage. Dr. Dougald Monroe (University of North Carolina) provided a review of the coagulation cascade and the role of factor VIIa as an initiator of hemostasis. Dr. Stephan Mayer (Columbia University) provided his interpretation of data from the clinical trial on the efficacy of recombiant factor VIIa (rFVIIa) in the acute management of intracerebral hemorrhage. Dr. Arthur Lam (University of Washington) concluded the program with clinical antidotes on the use of rFVIIa in the perioperative management of trauma patients.

Basic Science Keynote Lecture

In his lecture entitled “Neurobiology of Aging and Alzheimer’s Disease” William C. Mobley, MD, PhD (Professor and Chair of Neurology at Stanford University), elaborated on the role of target-derived neurotrophic factors in neurodegenerative diseases. He delineated the significance of retrograde nerve growth factor signaling via axon terminals to neuron cell bodies. Dr. Mobley concluded that investigations on mechanisms of axonal transport will provide novel treatments for neurodegenerative disorders.

Scientific Abstracts Session

Ansgar Brambrink, MD, PhD (Oregon Health and Science University) directed the scientific abstract sessions which featured a poster discussion format. Ninety-four research posters from our international membership were presented in ten areas of neuroanesthesia and neurosurgery. The major focus topics were: cerebral blood flow, cerebral ischemia, cerebral protection, clinical neuropharmacology, neumonitoring and neurosurgical critical care. This session is always a fertile forum for the exchange of scientific ideas and clinical techniques. Abstracts of the scientific papers are published in the Journal of Neurosurgical Anesthesiology (2005; 15:217-41).

Clinical Keynote Lecture

Eelco F. M. Wijdicks, MD (Mayo Clinic College of Medicine, Rochester, Minnesota) discussed the concept of death throughout recorded history and provided a modern day guideline that attempts to clarify the definition of brain death. The Harvard Criteria for Brain Death was one of the first documents published by the anesthesiologist Dr. Henry Beecher from the Massachusetts General Hospital in 1968. Dr. Wijdicks concluded his remarks by comparing cultural perspectives of brain death from the United States, Canada, Great Britain, and Japan.

Clinical Forum

A lively “open mike” session led by Gregory Crosby, MD (Harvard Medical School, Boston, MA) and Verna L. Baughman, MD (University of Illinois at Chicago, Chicago, IL) started the afternoon program. The first case was a spirited discussion of awake craniotomies. The second case involved a patient with an intracerebral aneurysm. The issues of whether to clip or coil the aneurysm were debated as well as techniques of neuromonitoring for this case.

Panel on Postoperative Cognitive Dysfunction

The afternoon session focused on postoperative cognitive dysfunction (POCD). Lars S. Rasmussen, MD, PhD (Copenhagen University Hospital, Copenhagen, Denmark), discussed the limitations of neuropsychological testing in the assessment of POCD. He discussed the need for the composition of the test battery to be targeted towards the given patient group of interest. The second speaker, Eric J. Heyer, MD, PhD (Columbia University, New York, NY), presented his experience with ongoing studies on carotid endarterectomy (CEA) and POCD. Dr. Heyer discussed the role of anesthetic and surgical techniques on POCD. Dr. Heyer then discussed the possible role of the Apolipoprotein E (APOE) ε-4 allele in POCD, which is the first study to link this common genetic polymorphism to POCD following CEA. Satwant K. Samra, MBBS, MD (University of Michigan, Ann Arbor, MI) concluded the session by sharing recent unpublished data and its analysis on neurocognitive outcomes from IHAST-2.

SNACC will reconvene at the 2006 Annual Meeting on October 13, 2006 in Chicago, IL.

Neuro-Intensive Care Subspecialty

The United Council for Neurologic Subspecialties (UCNS) has approved a subspecialty in Neuro-Intensive Care. Andrew Kofke, MD (andrew.kofke@u.washington.edu) is the SNACC liaison with the UCNS Accreditation Council. Ansgar Brambrink, MD, PhD (brambrin@ohsu.edu) will serve as SNACC liaison for accredita-

tion and Michael Souter, MD (msouter@u.washington.edu) as SNACC liaison for examinations. Please contact Dr. Kofke if you have questions and/or comments.

2006 Nominations for Officers

The Nominating Committee (Cor J. Kalkman, MD, Brenda Fahy, MD, and Eugene Fu, MD) is seeking nominations for Secretary/Treasurer and one Board-at-Large member for election at the October 2006 SNACC meeting. The bylaws read, “Additional nominations for officers may be made by the membership petitions duly filed with the Secretary/Treasurer at least thirty (30) days prior to an election at the annual membership meeting. In order to qualify as nominating petitions, there shall be affixed thereto the signatures of twenty-five (25) members of the Society as a minimum.” Individuals chosen for the Secretary/Treasurer position are those who have demonstrated a commitment to SNACC and have served the Society in a number of administrative positions. Their experience with these administrative responsibilities as well as their effectiveness in performing these tasks is crucial in their nomination. Cor J. Kalkman, MD
Call to Order
The meeting was called to order by Dr. Domino at 12:45 p.m.

President’s Report
Dr. Domino thanked Hospira Worldwide for sponsoring the Annual Meeting Luncheon and the automated response system for the Clinical Forum. She also thanked Gary Hoormann and his staff. She asked the members to review the Collaborative Research Project and to complete the participation form should they be interested in being involved in the study. She commented on the importance for the Society to have more involvement from the members, especially the younger members as they are the future of the organization.

Dr. Domino advised that one of her goals as president was to establish both a Scientific Advisory Board and an Education Advisory Board. The Scientific Advisory Board will develop the Annual Meeting scientific program while the Education Advisory Board will develop educational program for the meeting.

Treasurer’s Report
Dr. Soriano reported that the Society was in good financial health. As of September 30, 2005, the Income and Expense Statement reflected that SNACC had total income of $150,876.02 and total expenses of $56,318.00 with income over expenditures of $94,558.02.

Nominations Report
Dr. Tommasino announced the election results for the 2006 Board of Directors:

Secretary/Treasurer - Dr. Basil Matta
Vice-President for Communications - Dr. Monica Vavilala
Directors – Dr. Ansgar Brambrink and Dr. Alex Bekker

Dr. Tommasino congratulated the new Board members and thanked the members for casting their votes.

Distinguished Teacher Award
Dr. Patel advised the members that the criteria for the award was published on the Society’s Web site. He introduced the 2005 SNACC Distinguished Teacher Award Recipient, Dr. David Smith, and recognized him for his accomplishments and contributions.

Travel Award Recipients
Dr. Domino introduced the ten 2005 Travel Award Recipients.

Transition of Leadership
Dr. Domino passed the gavel to the 2006 SNACC President, Dr. Concezione “Stella” Tommasino. Dr. Tommasino thanked Dr. Domino for her contributions to the Society and presented her with a Past President’s Scroll. Dr. Tommasino commented that she is looking forward to an exciting year as President.

Dr. Domino welcomed everyone to attend next year’s SNACC Annual meeting in Chicago, October 12-13, 2006.

The meeting was adjourned at 1:50 p.m.

Respectfully submitted,

Sulpicio G. Soriano, MD
Secretary/Treasurer