2017 – 2018
College Nominating Committee

2018

ELECTION MANUAL
2018

2017 – 2018
College Nominating Committee

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Dear Colleagues,

On behalf of the members of the 2017 – 2018 College Nominating Committee, we are pleased to provide the 2018 ACR Election Manual containing detailed information on all candidates running for an elected position. Candidates for the selected positions are also mentioned in the manual.

This manual is being provided to offer detailed information on all candidates prior to ACR 2018. Enclosed is a photo of each candidate as well as a standardized CV, including relevant biographical information and personal comments provided by the candidates. You will also find the ACR Electioneering Policy as well as ACR election policies and procedures.

All candidates are asked to attend the ACR 2018 session on Monday, May 21 beginning at 8:00 a.m., where each candidate in a contested election will make a two-minute presentation. Candidates are also asked to attend the “Meet the Candidate Forum” on Sunday, May 20, from 4:00 – 5:00 p.m. Speaker training will be offered for candidates in contested elections. Details on this training will be sent to each candidate prior to the meeting.

Elections will take place on Monday, May 21, from 9:45 a.m. – 12:45 p.m. All results will be posted Monday afternoon.

We want to thank all of the candidates for their willingness to run for these offices and for providing a large amount of material in a timely fashion.

Sincerely,

Kathryn G. Gardner, MD, FACP
Chair, College Nominating Committee

Join Y. Luh, MD
Vice Chair,
College Nominating Committee
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Position Duties, Descriptions and ACR
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Introduction to College Nominating Committee Process

The College Nominating Committee (CNC) consists of 9 members (6 elected by the Council, 2 from the BOC, 1 from the CSC), of which each year three are elected by the Council to serve one 2-year term. The College Nominating Committee (CNC) shall meet in person or via conference call at least once a year. The Committee shall inform the membership at least forty-five (45) days before the Annual Meeting of its nominations for the offices of president, vice-president, council speaker, council vice-speaker, for vacancies on the Board of Chancellors (BOC), five (5) or more council candidates for the CNC, and five (5) or more Council candidates for the CSC.

The CNC shall also select two (2) members of the ACR who are in private practice to attend the annual meeting of the Intersociety Committee. Those representatives to the Intersociety Committee meetings will be selected for two (2) year terms staggered so that one (1) will be selected each year.

Nominations

The CNC shall present nominations to the Council at its annual meeting. Independent nominations shall be accepted as long as they meet the requirements stipulated in Article VIII, Section 13. The following ascribed duties and position descriptions are to be made in accordance with our bylaws.

President

Ascribed Duties (Article VII, Section 2)

The president shall be a member of the BOC, a member of the Executive Committee of the Board and a non-voting member of all commissions, committees, and task forces (except the CNC, CSC, and Judiciary Committee). The president shall deliver a presidential address at the annual meeting and shall perform such other duties as may be prescribed from time to time by the BOC or the Executive Committee of the Board. As provided in the Association’s bylaws, the person elected to serve as president shall also serve as a member of the Association BOD (Board of Directors) and as the president of the Association.

Position Description*

This is an elected position. Traditionally the outgoing chair of the (BOC) is elected to serve as president the next year. In alternate years, other current and/or past members who have served on the BOC are considered for this position. Normally this person is someone who has completed his/her sixth year on the BOC.

The president will:
• be a member on the BOC;
• be a member on the Executive Committee;
• be a member on the Budget & Finance (B&F) Committee;
• act as ex-officio of all commissions and committees (except CNC, CSC and Judiciary Committee);
• deliver the presidential address at the ACR Annual Meeting;

*subject to change

Vice President

Ascribed Duties (Article VII, Section 3)

The vice president shall be a member of the BOC, a member of the Executive Committee of the Board and a non-voting member of all commissions and committees (except the CNC, CSC, and Judiciary Committee). In the absence of the president or in the event of the president’s inability or refusal to perform his or her required functions, the vice president will perform the duties of the president, and when so acting, shall have all the powers of and be subject to all of the restrictions on the president. The vice president shall perform such other duties as may be prescribed periodically by the BOC, the Executive Committee of the Board, or the president. As provided in the Association’s bylaws, the person elected to serve as vice president shall also serve as a member of the Association BOD (Board of Directors) and as the vice president of the Association.

Position Description*

This is an elected position. Traditionally a member rotating off the BOC after serving 5-6 years is recommended for this position.

The vice president will:
• attend 3 BOC meetings a year – Spring, Fall, and Winter Retreat;
• participate on conference calls (approximately 6 per year);
• attend and present at chapter meetings (approximately 6 per year);
• make society visits (approximately 4 per year); and
• attend other meetings (approximately 4 per year).

Members of the Board of Chancellors

Ascribed Duties (Article VI, Section 1)

The BOC shall employ its powers for the diligent promotion of the purposes of the College and shall have authority and jurisdiction to conduct its business and affairs in accordance with applicable laws, its articles of incorporation and these bylaws.

The BOC shall present to the Council at its annual meeting a full report covering the College activities, including a financial report.

*subject to change
Position Duties, Descriptions and ACR Election Procedures

Members of the BOC shall accept at the time of election or appointment, the duty of attending annual sessions of the Council and its reference committees. All members of the BOC shall have the privilege of the floor at Council meetings, but shall not have a vote.

Position Description*

The BOC shall consist of a number of chancellors, not to exceed thirty-four (34) members who shall be the executive body of the College. As provided in the Association’s bylaws, the persons elected, appointed or selected to serve on the BOC shall also serve on the ACR Association’s Board of Directors. To be eligible for membership on the BOC, whether by appointment, reappointment, election or reelection, the individual must be a Member or Fellow of the College.

BOC members:
- must be practicing radiologists or radiological physicists who have been actively involved in the College and have leadership qualities beneficial in addressing the issues brought to the Board;
- accept the duty of attending all sessions of the ACR Annual Meeting and its reference committees;
- are responsible for implementing programs and activities, which accomplish policy goals, support activities of the College and have the authority to act on behalf of the College in a broad range of activities;
- carry out Council policy and goals;
- guide the finances of the College;
- develop, review and approve annual reports covering the activities of the year from commissions, committees and task forces;
- serve on commissions/committees and/or task forces as determined;
- meet 3 times a year typically – spring, fall, and winter;
- participate on conference calls (approximately 2 per year);
- visit chapters (approximately 3 per year); and
- attend commission & committee meetings and participate in their conference calls.

Society Chancellors

The chair of the BOC may invite RSNA, ARRS, ARS, and ASTRO through their governing boards each to propose at least three (3) members from such organizations who are also members of the College. These names shall be presented to the CNC who, with the concurrence of chair of the BOC, may select one (1) individual from each organization to serve on the BOC, or may request a society submit additional members for consideration. Should RSNA, ARRS, ARS, or ASTRO fail to propose individuals considered to be acceptable members for the chancellorship allotted to it, such office shall remain vacant until such members are proposed and selection is made by the CNC.

College Nominating Committee

Position Description*

The CNC consists of 9 members (6 elected by the Council, 2 from the BOC, 1 from the CSC), of which each year three are elected by the Council to serve one 2-year term. Members must be a councilor or alternate councilor for the term nominated. A member of the CNC may not be a nominee of the committee.

The CNC members:
- must be practicing radiologists or radiological physicists who have been actively involved in the College and have leadership qualities beneficial in addressing the issues brought to the Board;
- accept the duty of attending all sessions of the ACR Annual Meeting and its reference committees;
- are responsible for implementing programs and activities, which accomplish policy goals, support activities of the College and have the authority to act on behalf of the College in a broad range of activities;
- carry out Council policy and goals;
- guide the finances of the College;
- develop, review and approve annual reports covering the activities of the year from commissions, committees and task forces;
- serve on commissions/committees and/or task forces as determined;
- meet 3 times a year typically – spring, fall, and winter;
- participate on conference calls (approximately 2 per year);
- visit chapters (approximately 3 per year); and
- attend commission & committee meetings and participate in their conference calls.

Ascribed Duties (Article V, Section 9)

The Council Steering Committee shall represent the Council between Council meetings and provide Council liaison with the Board of Chancellors and the chapters. Members of the Council Steering Committee shall serve as members of the commissions of the Board of Chancellors, upon appointment by the chair of the Board of Chancellors.

Position Description*

The CSC consists of the speaker, vice-speaker and at least fifteen (15) but no more than twenty (20) additional members of the Council. Eight members, who must have at least one year remaining as a councilor for the term for which they are nominated, are to be elected by the Council. CSC nominees must be councilors for the terms for which the candidates are nominated. At each annual meeting four members are to be elected from the candidates. Elected members of the CSC shall be eligible for

*subject to change
Position Duties, Descriptions and ACR Election Procedures

renomination and re-election for a second 2-year term if they qualify. Councilors with only one year remaining as a councilor who win re-election shall serve their final year as a councilor-at-large. The other members are appointed by the speaker and approved by the Council. Geographic distribution should be considered when recommending candidates/nominations. Nominees for election to the CSC should have attended at least one previous ACR annual meeting as a councilor, alternate councilor or chapter officer. The persons elected or appointed to serve on the CSC of the College shall also serve on the CSC of the Association.

CSC members:
• must be a councilor for the term nominated (for election in May 2018 they must be a councilor until May 2020);
• represent the Council between Council meetings;
• have primary responsibility for planning and evaluating the annual meeting;
• provide Council liaison with the BOC, chapters, and radiological organizations;
• serve as liaisons to ACR commissions and/or committees;
• may serve on a reference committee;
• serve as a liaison to each regional or specialty caucus;
• take an active role in debate of resolutions during reference committee sessions;
• meet at convenient time and site before each scheduled meeting of the Council in order to conduct business that may come before it;
• attend approximately 5 meetings a year typically during the Spring, Summer, Fall, RSNA, and a winter meeting;
• attend an orientation in Reston, VA;
• participate on conference calls (approximately 6 per year);
• participate in Capitol Hill visits;
• participate in RADPAC;
• serve on a CSC work group;
• review resolutions for possible CSC sponsorship or co-sponsorship; and play a major role in the development and revision of the ACR’s Practice Parameters and Technical Standards. Each parameter or standard that is expected to undergo field review is assigned to one or two CSC members to chair the final phases of the review process. CSC members appoint a review committee which meets by conference call to resolve comments submitted during the field review process. The calls last between 20 minutes and 2 hours during the months of September through January.

Intersociety Committee

The Intersociety Committee (ISC), as sponsor of the annual ISC Summer Conference, serves as a vital link in the organizational chain of radiology, bringing together diverse organizations with various missions into one cohesive group discussing concerns of vital interest to the specialty as a whole. It serves as a gathering place for leaders in radiology. In this forum each society has an equal voice helping to formulate solutions to the issues confronting the practice of diagnostic radiology and radiation oncology.

Intersociety Committee Private Practice Representative

Description
The CNC shall also select two (2) members of the ACR who are in private practice to attend the annual meeting of the Intersociety Committee. Those representatives to the Intersociety Committee meetings will be selected for two (2) year terms staggered so that one (1) will be selected each year. Each selected representative shall be a physician who has a private office and/or who practices in a hospital without a radiology residency program. These two (2) selected representatives shall be in addition to the College’s regular representatives to the annual meeting of the Intersociety Committee.

The private practice representative
• attends the Intersociety Summer Conference; and
• writes a report for the Council.

Election Rules

Election for the positions shall be by ballot at the annual meeting of the Council. The term of office of each officer so elected shall begin at the conclusion of that meeting. If additional nominations are made from the floor, they must be supported by a nominating petition signed by fifteen (15) or more members of the Council and shall be presented to the speaker of the Council not less than fourteen (14) days before the annual meeting of the College.

Electioneering Policy

A copy of the Electioneering Policy can be found in the Election Manual.

Elections

All candidates are asked to attend the session of ACR 2018 on Monday, May 21, beginning at 8:00 a.m. The candidates in contested elections (BOC – Member at Large, BOC – Chair, Commission on Medical Physics, CNC and CSC) are to make a two (2) minute nominating speech to the Council during this session. A “Meet the Candidate Forum” will be held on Sunday, May 20 at 4:00 p.m. All candidates in contested elections are asked to attend the forum and answer questions from members of the Council. The elections will take place on Monday, May 21 from 9:45 a.m.–12:45 p.m. The results will be promptly posted.
ACR Electioneering Policy

Introduction

In 1997, the ACR Council approved the recommendations of the report of the Governance Committee. In one of its recommendations, the Governance Committee “strongly suggest(ed) that strict limits on electioneering be imposed.” In addition, the committee expressed concern that the election process itself could become a time-consuming distraction for the Council that already meets too infrequently. In response, the initial ACR Policies and Procedures discouraged campaigning but did not outright prohibit this practice. No current formal ACR policy addresses campaigning.

Current policy does provide a mechanism for candidates to communicate their views as follows:

a. A submission in the ACR Election Manual provided in advance of the meeting to all councilors. The Election Manual includes a photo of each candidate as well as a standardized CV, which includes relevant biographical information and personal comments provided by the candidates.

b. An opportunity to provide a two-minute speech to the ACR Council during the Annual Meeting.

c. An opportunity to address individual councilors at a “Meet the Candidates” Forum during the Annual Meeting.

In 2008, the ACR Council passed Resolution 41, directing the ACR Council Steering Committee to develop and implement binding regulations for candidate communications and to publish those regulations in the ACR Election Manual as well as directly to the candidates.

The Council Steering Committee is considering the following approach to fulfill the intent of Resolution 41.

I. Prohibition against mass distribution of campaign materials via e-mail, FAX, phone and other electronic media (including all forms of social media).

II. Prohibition against mass mailing of campaign materials to councilors or alternate councilors.

III. Prohibition against distribution of campaign buttons, stickers, pens, or any similar items prior to or at the ACR Annual Meeting.

IV. Prohibition against display or distribution of campaign posters, balloons or other visual aids at the ACR Annual Meeting and at any other meeting or event where multiple ACR members, councilors, alternate councilors, members of the Board of Chancellors, or officers of the College are expected to be present.

V. Candidates may make a limited number of personal phone calls to support their candidacy.

VI. Candidates may visit the geographic and specialty caucuses that they would normally attend at the ACR Annual Meeting. They may be introduced to the caucus, but may not deliver a campaign speech.

VII. Failure to abide by these election rules may result in the disqualification of the involved candidate for the elections held during the affected ACR Annual Meeting. Any candidate who violates these rules may, at the discretion of a committee composed of the speaker, vice speaker and chair of the College Nominating Committee, be declared ineligible for election in that year and have his or her name stricken from the ballot.

VIII. Questions concerning the appropriateness of electioneering activities should be directed to the ACR Office of Governance and Member Engagement at 800-227-5463 ext. 4998 or tbehbahani@acr.org.
Elections for specific officers of the College including members of the ACR Board of Chancellors, ACR Council Steering Committee, and ACR College Nominating Committee will be held during ACR 2018 on Monday, May 21, 2018 at the Washington Marriott Wardman Park.

Elections will be held by secret ballot. A sample ballot will be available to the Council prior to the meeting.

Voting will occur from 9:45 am until 12:45 pm. In the event a run-off election is required, the Speaker or Vice Speaker will announce the time of the election and this information will also be provided via email and the mobile app.

Councilors will be credentialed through electronic means. An Alternate Councilor substituting for a Councilor must be credentialed through the Credentials Committee. No one may vote twice, even if they are filling two positions.

No literature or campaigning will be allowed within 100 feet of the voting room. Tellers should also refrain from wearing or having any campaign literature or promotional pieces in the voting area. The voting will conclude at 12:45 pm. At that time, the Tellers will close the room and begin the process of registering the vote tallies. Tellers will vote just prior to assuming their duties in the voting room.

Candidates will be listed on the ballot at random. If any candidates are properly nominated from the floor, their names will be placed on the ballot after the names of candidates appearing on the initial ballot. Credentials of the candidates will be reflected on the ballot consistent with the highest medical degree obtained.

The vote tally will be registered on official ACR election tally sheets and verified by each Teller. A candidate who is running unopposed for a position will be elected if he or she receives at least one vote. For the offices of President and Vice President, Speaker, Vice Speaker or member of the Board of Chancellors, those candidates receiving a majority vote will be elected. Should a majority not be achieved on the first ballot, a run-off election will be performed. For all other elections, the candidate receiving the highest number of votes will be elected. When there are multiple candidates for multiple positions, the candidates receiving the highest numbers of votes will be elected.

Verification of vote totals will be made by each Teller and the final votes will be totaled on the official ACR election master tally sheet. The completed tally sheet will then be signed by each Teller. Ballots and the official ACR election tally sheet will be sealed and kept at the ACR offices for at least one year following the election.

Following the election, staff will register the results (verified by the Tellers) including the names of those elected to each position for announcement and display via the ACR 2018 web site. The final vote tally will be made available upon specific request to any of the following: the Chairman or Vice-Chairman of the ACR Board of Chancellors. Tellers should refrain from sharing any vote tallies after the election.
James A. Brink, MD, FACP

**Preferred Address**
Massachusetts General Hospital
55 Fruit St., FND 210
Boston, MA 02114

**Contact**
jabrink@partners.org

**Education**
- 1980-1984 MD, Indiana University, Indianapolis, Indiana

**Employer**
Massachusetts General Hospital Imaging

**Areas of Interest**
James A. Brink is Radiologist-in-Chief at the Massachusetts General Hospital (MGH) and the Juan M. Taveras Professor of Radiology at Harvard Medical School. Dr. Brink served as Chair of the Yale University Department of Diagnostic Radiology from 2006 to 2013 prior to returning to MGH, where he had trained. Dr. Brink has broad experience in medical imaging, including the utilization and management of imaging resources, with specific interest and expertise in issues related to the monitoring and control of medical radiation exposure. For the ACR, Dr. Brink serves as Chairman of the Board of Chancellors. For the National Council for Radiation Protection and Measurements (NCRP), he serves as the Scientific Vice-President for Radiation Protection in Medicine. For the National Academies of Sciences, Engineering and Medicine, he serves as Vice-Chair of the Nuclear and Radiation Studies Board.

**Major academic, practice and/or community achievements**
The focus of my research has been the physical and biological principles of computed body tomography. Based on my background in electrical engineering, I sought to bridge the gap between physicists and radiologists for better understanding of the technical principles that guide image acquisition and image reconstruction at computed body tomography. I explored the impact of helical CT on specific image quality parameters including longitudinal resolution and image noise. As helical CT matured, my work extended the technical definition of image reconstruction to include parameters that allowed advanced applications to develop, such as CT colonography, CT angiography, and teleradiology. Most recently, my research efforts turned to improved ways to monitor and control the radiation dose associated with medical imaging. Our investigations assessed the impact of various dose reduction technologies on the magnitude of radiation exposure associated with computed tomography.

**ACR Activities**
- 2016-2018 Chair, Commission on International Relations
- 2016-2020 Chair, ACRIN Fund For Imaging Innovation Research Selection Committee
- 2016-2020 Chair, Commission on Government Relations
- 2016-2018 Chair, Board of Chancellors
- 2016-2018 Chair, Executive Committee
- 2010-2014 Chair, Committee on International Education and Meeting
- 2010-2014 Co-Chair, Image Wisely Executive Committee
- 2010-2014 Co-Chair, ACR/RSNA Task Force on Adult Radiation Protection Image Wise
- 2008-2014 Chair, Commission on Body Imaging

**Number of publications, books chapters and/or presentations**
- Publications: 132
- Chapters: 22
- Presentations: 299

**Honors**
- Bearman Lecturer, John Hopkins, Department of Radiology, 2017
- Levin Lecturer, Thomas Jefferson University, Dept. of Radiology, 2016
- Castele Lecturer, Case Western Reserve School of Medicine, Dept. of Radiology, 2016
- Fleischner Lecturer, Beth Israel Deaconess Medical Center, Dept. of Radiology, 2016
- Honorary Membership, International Organization for Medical Physics, 2015
- Gold Medal, American Roentgen Ray Society, 2015
- Honorary Membership, American Association of Physicists in Medicine, 2014

**Candidate Information**

What do you consider the most important issues facing the ACR?
With the MACRA legislation of 2015, the way physicians will be paid going forward will look very different from how we have been paid in the past. The move toward Alternative Payment Models (APMs) will involve two-sided financial risk in which health systems and practitioners are responsible for the care of a cohort of patients — including the cost of their care. The implementation of site neutral payments has the potential to pit radiologists who practice in hospital-based facilities against those who practice in independently-owned facilities, and it represents a blow to patients and providers who value a choice in the imaging services. The marked explosion of machine learning and artificial intelligence for medical imaging warrants careful consideration about how radiology will be practiced in the future. With rising tensions among the myriad demographics in our country, the diversity and inclusiveness of our specialty has never been more important.

How should the ACR respond to them?
Our greatest influence in at-risk contracting may be felt through efforts to reduce rising medical expense trend. Leveraging appropriate use criteria for decision support at the time a radiology order is entered can have a profound impact. Regarding site neutral payments, the ACR’s position must not favor one type of practice over another; we must object to policies that arbitrarily steering patients to the lowest cost provider without regard to the many other factors that may influence the choice of an imaging provider. The challenges and opportunities of artificial intelligence (AI) require the ACR to leverage its Data Science Institute to put radiologists at the forefront of developing AI tools to enhance the practice of Radiology. The diversity and inclusiveness of our specialty must be enriched through expansion of programs such as the ACR’s Pipeline Initiative for Enrichment of Radiology (PIER) program.

Reason for seeking office
Having served the ACR in myriad capacities over the past 25 years, I believe that I have amased extensive experience with all facets of the organization and am well equipped to represent the College in the many venues where its influence is most critical. The ACR remains an incredibly vibrant organization with broad impact on our medical specialty, and the diverse challenges facing our specialty warrant a guiding hand with broad understanding of the critical internal and external change drivers. While my formative years in College leadership were valuable in shaping my understanding of the College functions and resources, the last four years as Vice-Chair and Chair of the Board of Chancellors have given me a firm handle on the critical issues facing our specialty. Finally, let me say what a privilege it would be to serve as the ACR President: it would be my distinct honor to help guide the direction of the College, for the benefit of our patients and our profession.

Chapter Activities
- Executive Committee, Massachusetts Radiological Society, 2013-2017
- Executive Committee, Radiological Society of Connecticut, 2003-2013
Marta Hernanz-Schulman, MD, FCR

Prefered Address
484 Beech Creek Rd
Brentwood, TN 37027-3405

Contact
marta.schulman@vanderbilt.edu

Education
- 1983-1985 Pediatric Radiology Fellow, Harvard Medical School, Boston, Massachusetts
- 1983-1984 Chief Fellow, Harvard Medical School, Boston, Massachusetts
- 1980-1983 Resident in Radiology, Boston University, Boston, Massachusetts
- 1982-1983 Chief Resident, Boston University, Boston, Massachusetts

Employer
Vanderbilt University Medical Center

Employer Type
Academic/University-based

Primary Practice
Diagnostic Radiologist

Subspecialy
Pediatric Radiology

Honors
- ABR Life Time Service Award, 2014
- Aunt Minnie - Most Effective Philanthropy Program or Campaign (Pause and Pulse leader), 2011
- Consecutive Editor's Recognition Award with Special Distinction, 1989-2005
- Presidential Recognition Award, SPR, 2003
- Pediatric Radiology Editorial Board, 2003-present
- The Cafey Award Best scientific research - SPR, 1994
- RSNAFaculty mentor Best Scientific work by resident, 1994
- Radiology Editorial Board, 1990-2000

ACR Activities
- 2017-2018 Member, Rapid Response Committee
- 2017-2018 Member, Committee on Appropriateness Criteria Gaps and Harmonization
- 2015-2018 Member, Committee on Awards and Honors
- 2015-2018 Member, Audit Committee
- 2015-2019 Chair, Pediatric Rapid Response Committee
- 2015-2019 Member, Committee on O-RADS
- 2013-Present Member, ACR Medicaid Network
- 2012-2018 Chair, Commission on Pediatric Radiology
- 2012-2015 Member, Board of Chancellors
- 2001-2019 Chair, Pediatrics Subcommittee on DXIT - Education

Number of publications, books chapters and/or presentations
Publications: 146
Chapters: 49
Presentations: 200

Areas of Interest
- Best Practices in Radiology. This is one of my overarching goals, which coincides with ACR principles. Within my local purview as Medical Director of Diagnostic Imaging at Vanderbilt Children’s Hospital, we have set systems in place to ensure that the right patient, right test, done right away, is the product of a child’s journey through our department.
- Dose optimization. This is a corollary of Best Practices. On a national level, I have worked with The Image Gently Alliance as one of the original group of founding members and continue as a member of its Steering Committee. I chaired and led its Pause and Pulse Campaign, to promote dose optimization in diagnostic fluoroscopy. This campaign received the Aunt Minnie Award for most successful philanthropic campaign of 2011.
Alan H. Matsumoto, MD, FACR

Preferred Address
1215 Lee St.
Department of Radiology & Medical Imaging
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Charlottesville, VA 22908

Contact
ahms4d@virginia.edu

Education
• 1976-1980 Medical Degree, Wake Forest University, Bowman Gray School of Medicine, Winston-Salem, North Carolina

Honors
• American Heart Association Dotter Award and Lectureship, 2015
• Lifetime Service Award, American Board of Radiology, 2015
• Gold Medal Award - Association of Vascular and Interventional Radiology Technologists, 2012
• ACR Fellowship, 2000
• Dean’s Award for Clinical Excellence UVA Health System, 1995
• Alpha Omega Alpha, 1979
• Phi Beta Kappa, 1975
• Sigma Xi Research Honor Society, 1975

ACR Activities
• 2015-2019 Vice Chair, Commission on Interventional & Cardiovascular Radiology
• 2014-2017 Chair, Identity & IR Specialty Board Certification Subcommittee
• 2013-2018 CAC, Carrier Advisory Committee Network
• 2012-2018 Member, JACR Editorial Board
• 2012-2015 Co-Chair, Committee on Education and Training - IR Taskforce
• 2012-2015 Member, ACR Program Committee
• 2011-2015 Member, All Members Meeting Steering Committee
• 2010-2014 Member, Council Steering Committee
• 2002-2004 Member, College Nominating Committee

Number of publications, books chapters and/or presentations
Publications: 240
Chapters: 50
Presentations: 250

Areas of Interest
Having practiced in both a private practice and an academic department setting, combined with prior service to the radiology community in multiple organizations, have provided me a foundation of experience to help me better understand the challenges and changes that lay before our specialty and health care. My current and previous leadership roles have taught me to listen to be heard, build bridges through relationships and common goals, and know when to follow and when to lead. Moving forward, flexibility, adaptability and accountability will be three keys to our ongoing success.

Major academic, practice and/or community achievements
• Chair of the Department of Radiology and Medical Imaging at the University of Virginia; a Department with 51 clinical faculty, 13 research faculty, 40 residents, 25 fellows/instructors, and >800 staff.
• 2002-2003 President, Virginia Chapter of the ACR
• 2001-2002 President Elect, Virginia Chapter of the ACR
• 2000-2001 Councilor 1st Term, Virginia Chapter of the ACR
• 1995-2003 State Representative, Carrier Advisory Committee for CMS

Candidate Information

• Service to the ACR as previously noted in the ACR activities section
• Annual Meeting Program Chair for the SIR meeting in 2006
• Past-President of the SIR, 2015
• Chair of the CVRI Council for the American Heart Association 2016-18
• Helped to train > 100 IR fellows and > 250 DR residents
• Editorial Board member of 4 peer-reviewed journals
• Board Member of the Fibromuscular Dysplasia Society of America
• President of the Southeastern Angiographic Society, 2005-08
• Examiner for the ABR

What do you consider the most important issues facing the ACR?
• Adjusting to the various new practice models, mergers and partnerships for the membership
• Supporting the missions of education and research in an ever-changing clinical practice paradigm
• More seamless and mutually beneficial integration of DR and IR practices
• Bundling of imaging services into clinical services (i.e. MRI with hip replacement)
• Generating comparative effectiveness data that drives value-based reimbursement
• Managing the ever-growing data sets related to imaging

How should the ACR respond to them?
• Difficult to provide a specific answer, since practices and politics are local. However, sharing of information about successful models will helpful to inform future decisions.
• Supporting outcomes research via the HPI and NRDR (which ACR is pioneering) and well as other initiatives started by the ACR foundation; creating partnerships and building bridges with other societies to leverage and optimize use of resources
• Create models in which exclusive contracts will allow for partnerships and carve outs as necessary so that IRs are not disadvantaged as compared with Cardiologists or Vascular surgeons practicing in the same space, while supporting the growth and business of the DRs
• Requires the generation of data to support the value-based contributions of Radiology/Rad Oncs/ Med Phys
• Contributing to the knowledge of augmented intelligence and Machine Learning as envisioned by the ACR Data Science Institute.
• Always adapting and being part of the solution

Reason for seeking office
To better serve and positively impact the DR and IR communities and contribute to the mission and goals of the ACR.

Chapter Activities
• 2012-2015 Councilor 2nd Term, Virginia Chapter of the ACR
• 2002-2003 President, Virginia Chapter of the ACR
• 2001-2002 President Elect, Virginia Chapter of the ACR
• 2000-2001 Councilor 1st Term, Virginia Chapter of the ACR
• 1995-2003 State Representative, Carrier Advisory Committee for CMS
Mahadevappa Mahesh, MS, PhD, FACR

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Johns Hopkins Outpatient Center, Suite 4235
601, N Caroline St
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mmahesh@jhmi.edu

Education
• 1981-1984 BSc, University of Mysore, Mysore, India
• 1987-1988 MS, Marquette University, Milwaukee, Wisconsin
• 1984-1986 MSC, University of Mysore, Mysore, India
• 1981-1984 BSc, University of Mysore, Mysore, India

Employer
Johns Hopkins University

Employer Type
Academic/University-based

Primary Practice
Physicist

Subspecialty
Medical Physics and Molecular Imaging

Honors
• Elected to National Council of Radiation Protection and Measurements (NCRP), 2015
• 2nd Vice President of Radiological Society of North America (RSNA), 2012
• Fellow of the Society of Cardiovascular Computed Tomography, 2011
• Fellow of the American College of Medical Physics, 2011
• Fellow of the American College of Radiology, 2009
• Fellow of the American Association of Physicians in Medicine, 2007
• Appointed member of Radiation Control Advisory Board for State of Maryland, 2002

ACR Activities
• 2012-2016 Chair, Committee on Education - Medical Physics
• 2011-2017 Member, RSNA-ACR Public Information Web Site Committee
• 2010-2013 Member, Communications Committee - Membership & Communications
• 2010-2012 CSC Liaison, Commission on Medical Physics
• 2010-2011 Member, Council Steering Committee
• 2008-2012 Chair, Committee on Government Relations - Medical Physics
• 2008-2013 Member, Task Force on Radiation Benefits/Risk Primer
• 2006-2019 Associate Editor, JACR Editorial Board
• 2006-2018 Member, Commission on Medical Physics
• 2004-2005 Chair, Panel on Physics

Number of publications, books chapters and/or presentations
Publications: 112
Chapters: 15
Presentations: 155

Areas of Interest
• Associate Editor for Journal of American College of Radiology (JACR)
• Deputy Editor for Academic Radiology
• Consultants to the Editor for Radiographics
• Board member and Treasurer for the American Association of Physicists in Medicine (AAPM)
• Board member of the Society of Cardiovascular Computed Tomography (SCCT)
• Past board member for Radiology
• ABR Core Exam and Oral Board Exam Committee
• Council and Scientific Committee member for the National Council on Radiation Protection and Measurements (NCRP)
• Member of Imaging Communication Network

Candidate Information

• In addition, many years as Councilor and member of ACR Council Steering Committee and Commission on Medical Physics has provided me ample experience in serving American College of Radiology interests

Major academic, practice and/or community achievements
• Professor of Radiology and Cardiology at Johns Hopkins University School of Medicine
• Chief Physicist at Johns Hopkins Hospital
• Professor of Environmental Health Science at Johns Hopkins Bloomberg School of Public Health
• Associate Editor and Physics Column Editor for the Journal of American College of Radiology (since 2007)
• Developed e-radiology physics program at Johns Hopkins University School of Medicine
• Member of Radiation Control Advisory Board for Maryland Radiological Health Programs
• Leadership position at the Johns Hopkins University Faculty Senate
• Special Research Volunteer at National Institute of Health (NIH)
• Council and Scientific Committee Member of National Council of Radiation Protection and Measurements (NCRP)
• Subject Matter Expert for United Nations – International Atomic Energy Agency (IAEA)
• National Contact Person for United States at United National Scientific Committee on the Effects of Atomic Radiation (UNSCEAR)

What do you consider the most important issues facing the ACR?
• Increasing constraints in insurance reimbursements and encounters with insurance companies trying to link past radiation exposures to restrict access to quality imaging.
• The need to demonstrate quality and safety in the practice of Medical Physics.
• Threats of reversal of existing self-referral law in states like Maryland.
• Decreasing research funding impacting imaging research.

How should the ACR respond to them?
• ACR should continue to be the national leader in addressing imaging issues including quality and safety. Especially when issues related to radiation doses and risks from medical imaging arises, ACR should continue to respond timely and effectively to any concerns raised by media, regulators, or patients alike.
• ACR should continue strong lobbying efforts to address insurance reimbursement cuts, NIH and research budget cuts.
• ACR should continue to provide needed resources to those combating self-referral issues.
• ACR should continue to maintain prominent voice for quality and safety in medical imaging.

Reason for seeking office
As a practising medical physicist in a large academic center (Johns Hopkins), I have taken pride in fostering good relationship among radiologists, technologists and patients alike. For the past several years, I have served on the ACR Commission on Medical Physics, Council Steering Committee, served as councilor-at-large, chair of physics panel and education committee and also as Associate Editor for JACR (since 2007). I have passionately participated in advocacy related activities including meeting with our national and state legislatures to ensure ACR issues are adequately addressed. In addition, my involvement with the Maryland Radiological Society for several years has led me to be elected as the President, a first for a medical physicist to lead the local ACR chapter. Overall, I consider myself with vast experience and well suited to serve on the board representing medical physics and it would be an honor to work with the college on these important issues.

Chapter Activities
• 2017-2019 President, Maryland Radiological Society
• 2016-2017 Vice President, Maryland Radiological Society
• 2011-2012 CSC Liaison, Maryland Radiological Society
• 2011-2012 CSC Liaison, West Virginia Radiological Society
• 2010-2011 CSC Liaison, Maryland Radiological Society

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Education
• 1981-1984 BSc, University of Mysore, Mysore, India
• 1987-1988 MS, Marquette University, Milwaukee, Wisconsin
• 1984-1986 MSC, University of Mysore, Mysore, India
• 1981-1984 BSc, University of Mysore, Mysore, India
Tariq A. Mian, PhD, FACR

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Scottsdale, AZ 85261

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mianta@gmail.com

Employer Type
Medical Radiation Physics, Inc.

Primary Practice Subspecialty
Physicist Medical Physics and Molecular Imaging

University of Arizona

Employer Type
Academic/University-based

Primary Practice Subspecialty
Physicist Medical Physics and Molecular Imaging

Honors
• Fellow, American Society for Radiation Oncology, 2013
• Fellow, American Association of Physicists in Medicine, 2012
• Fellow, American College of Radiology, 2002

ACR Activities
• 2016-2020 Member, Commission on Medical Physics
• 2013-2014 Member, Council Steering Committee
• 2013-2014 CSC Liaison, Commission on Medical Physics
• 2012-2013 Member, Council Steering Committee
• 2012-2013 CSC Liaison, Commission on Medical Physics
• 2011-2016 Chair, Subcommittee on Physics RO
• 2011-2015 Chair, Committee on Practice Parameters & Standards - MedPhysics
• 2010-2011 Vice Chair, Committee on Practice Parameters & Standards - MedPhysics
• 2007-2008 Chair, Committee on Government Relations - Medical Physics
• 2004-2009 Member, Committee on Radiation Oncology Practice Accreditation - Q&SS

Number of publications, books chapters and/or presentations
Publications: 12
Presentations: 15

Areas of Interest
• Leadership and Management: Involved in the leadership roles with the national and state professional organizations (ACR, AAPM).
• Medical Physics: Expertise in all three disciplines of medical physics which includes imaging, therapy, and nuclear medicine physics.
• Accreditation: Working with community practices, and academic institutions and helping them with the ACR accreditation process for diagnostic modality and radiation oncology practice.
• Regulatory Compliance: Working with State and Federal agencies involved in regulation that can have a great influence on the practices of ACR members.
• Radiation Safety: Shielding design/calculations and safety surveys. Implementation of radiation protection programs including personnel monitoring, annual audit and training.
• Practice Parameters: Participation in the development and review of ACR practice parameters and technical standards for medical physics.
• Education: Medical physics education of residents and allied health professionals.

Candidate Information

Major academic, practice and/or community achievements
• 2010-Present Member, Radiology Advisory Board, Yavapai College, Prescott AZ.
• 1992-1995 Present President, Chief Medical Physicist, Medical Radiation Physics, Inc., Scottsdale, AZ.
• 2015-2017 Board of Directors, American Association of Physicists in Medicine.
• 2012-2014 Secretary/Treasurer, Arizona Chapter of American Association of Physicists in Medicine.
• 2009-2010 Director of Medical Physics, University of New Mexico Cancer Center and Radiation Oncology Associates of New Mexico, Albuquerque, NM.
• 2005-2010 Member, Arizona, Radiation Regulatory Hearing Board, Appointed by the Governor, State of Arizona.
• 1999-2000 Associate Professor and Chief of Clinical Physics, University of Arizona, Tucson, AZ.

What do you consider the most important issues facing the ACR?
There are many important issues that ACR faces today. I will discuss two important issues which I am familiar and actively involved with.

Accreditation: ACR accreditation helps assure that patients are receiving the highest level of image quality and safety. ACR has a 30-year track record of providing the gold standard in accreditation. The college must continue their leadership in practice accreditation of both imaging and radiation oncology facilities.

Regulatory Compliance: It is important that the regulatory bodies hear the voice of ACR members as regulations related to radiation safety and drug/device approval and use are developed.

How should the ACR respond to them?
Accreditation:
• Reducing the time, it takes to complete the accreditation evaluation.
• Make sure the needs of the customer (facilities applying for accreditation) are met in a timely manner.
• Improvements in application process requiring only necessary information, making the process less onerous for the facilities applying for accreditation.
• Accreditation program fees should be reviewed periodically and adjusted if necessary.

Regulatory Compliance:
• Closely working with Federal (NRC) and State regulatory bodies.
• Greater involvement of ACR with other national (NCRP) and international (ICRP) organizations who can significantly impact the regulatory issues.
• Continuing collaboration with other professional organizations (AAPM, ASTRO, SNMMI) who are involved in such issues.
• Keeping ACR members informed of changes in regulatory policies in a timely manner and providing resources to comply with regulations.

Reason for seeking office
I will bring a unique perspective as Chair of ACR Commission on Medical Physics. I have broad experience working in all three disciplines (imaging, therapy, nuclear medicine) of medical physics at both community practices and academic institutions. In my current practice, I work with radiologists, radiation oncologists and medical physicists.

I have gained over 20 years of valuable experience from my involvement with the ACR Accreditation Programs and Practice Parameters while serving on various ACR physics subcommittees and as an accreditation surveyor (radiation oncology).

Currently I am serving as a member of ACR Commission on Medical Physics. Previously, I have served as a member of this Commission for seven years.

I have served on ACR leadership for two years as a member of ACR Council Steering Committee. Currently I am serving as ACR Alternate Councilor from Arizona. Prior to that, I served two terms as ACR Councilor and seven years as Alternate Councilor from Arizona.

Chapter Activities
• 2017-2018 Alternate Councilor, Arizona Radiological Society.
• 2013-2014 CSC Liaison, Utah Radiological Society.
• 2011-2014 Councilor 1st Term, Arizona Radiological Society.
• 2006-2007 Secretary/Treasurer, Arizona Radiological Society.
Richard A. Barth, MD, FACP

Preffered Address
725 Welch Road - Room 1690
Stanford, CA 94305

Contact
rabarth@stanford.edu

Education
- 1971-1975 MD, University of Health Sciences, The Chicago Medical School, Chicago, Illinois

Employer
Stanford University Radiology

Employer Type
Academic/University-based

Primary Practice
Diagnostic Radiologist

Subspecialty
Pediatric Radiology

Honors
- Caffey Society Membership, 2016
- Fellow, American College of Radiology, 2015
- American Board of Radiology Lifetime Achievement Award, 2015
- Society for Pediatric Radiology Presidential Recognition Award, 2010
- UCSF Department of Radiology Outstanding Alumni Award, 2009
- Society for Pediatric Radiology Caffey Award, 2009
- Stanford University Department of Obstetrics Teaching Award for Outstanding Faculty, 2004
- Alpha Omega Alpha Medical Fraternity, 1975

ACR Activities
- 2017-2018 Chair, Committee on Pediatric - Econ
- 2016-2019 Chair, Committee on Economics - Pediatric
- 2014-2018 Member, Commission on Economics
- 2013-2015 Member, Economics Committee On Medicaid
- 2013-2018 Member, ACR Medicaid Network
- 2012-2017 Member, Commission on Pediatric Radiology
- 2012-2017 Co-Chair, Committee on Government Relations - Pediatric
- 2012-2016 Member, Commission on Government Relations
- 2012-2016 Co-Chair, Committee on Economics - Pediatric
- 2010-2012 Member, Committee on Economics - Pediatric

Number of publications, books chapters and/or presentations
Publications: 70
Chapters: 5
Presentations: 211

Areas of interest
My interests focus on imaging applications for children and addressing their unique challenges compared with adults, including different physiology, smaller anatomy, and increased sensitivity to the adverse effects of radiation. I have published and implemented multidisciplinary imaging algorithms to assure accurate diagnoses balanced with reduced radiation exposure. My interests dovetail well with the excellent collaborative effort of the pediatric commission to develop appropriate utilization criteria based on clinical scenarios to assure cost-effective, safe care.

My academic and leadership experience have provided me a broad understanding of the key issues and opportunities in pediatric radiology. I will apply this knowledge to work collaboratively with the pediatric commission and develop a comprehensive strategic roadmap to advance the imaging care of children utilizing the resources available thru the ACR.

Candidate Information

Major academic, practice and/or community achievements
I have leadership experience as the current Radiologist-in-Chief at Stanford Children’s Health and prior President and Chair of the Board of Directors of the Society for Pediatric Radiology. At Stanford, I chaired the pediatric radiology strategic roadmap committee, which produced a vision paper for a comprehensive full service pediatric radiology program including subspecialty radiologist expertise, formation of a translational research program, and planning a full service department. The strategic plan was funded by hospital leadership and implemented over the last 10 years. I am also a founding member of the Center for Maternal Fetal Health at Stanford and Director of the Fetal MRI program. I was the prior Associate Chair for Clinical Affairs. Responsibilities included medical direction for physician staffing, oversight for RVU productivity and quality metrics, and capital budget planning. At the SPR, I have led advocacy efforts and the first pediatric radiologist “hill” visit.

What do you consider the most important issues facing the ACR?
- Artificial Intelligence (AI) Some view AI as a high threat that will ultimately replace radiologists. My personal view is that AI represents a tremendous opportunity and a necessity for enabling radiologists to provide high-quality care through efficient workflow in the era of rapidly increasing image datasets.
- Appropriate utilization of imaging will continue to be scrutinized by Medicare and commercial payers as part of cost reduction strategies and focus on adding value in the healthcare system.
- Children’s Health Insurance Program (CHIP) reauthorization is highly important to assure children are provided access to healthcare.
- Anthem Insurance policy. The policy steers patients away from hospitals to outpatient imaging centers and denies patients choice regarding where their imaging will be performed. The policy is highly concerning for the profoundly negative impact on the quality and safety of care provided to both children and adults.
- MACRA implementation

How should the ACR respond to them?
- Artificial Intelligence. The ACR should support development of appropriate AI algorithms and assist with translation into clinical practice. This will create tremendous value for practicing radiologists.
- Continue development of AUC to support mandated consultation required by PAMA. This legislation has minimal impact on children, who are covered under Medicaid. The ACR and pediatric commission should collaborate on a strategy to assure that appropriate imaging of children is also mandated.
- The ACR should support legislation for re-authorization of CHIP, absent of offsets such as site neutral payments which threaten overall reimbursement and access of the sickest patients to appropriate imaging facilities.
- The ACR should continue educating members on how to oppose the Anthem policy through advocacy with their respective hospital associations, insurance commissioners, and elected officials.
- MACRA. Provide support to address radiology requirements. Advocacy with CMS.

Reason for seeking office
I seek this position because I am passionate about improving pediatric care and believe the ACR pediatric commission in collaboration with the ACR’s government policy, advocacy, clinical, and research programs provides an excellent opportunity to elevate the imaging care of children. I firmly believe that a great healthcare system cannot exist without outstanding radiology to support patient care. It is critical that radiology as a specialty be nimble in reacting to challenges and acting upon opportunities in the rapidly changing, highly complex healthcare environment to assure that radiology remains outstanding.

My academic and leadership experience has provided me a broad understanding of the key issues and opportunities in pediatric radiology. I will apply this knowledge to work collaboratively with the pediatric commission and develop a comprehensive strategic roadmap to advance the imaging care of children utilizing the resources available thru the ACR.
Board of Chancellors - Member At-Large

Kimberly E. Applegate, MD, MS, FCR

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145 Romany Rd.
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Employer
University of Kentucky

Employer Type
Academic/University-based

Primary Practice
Diagnostic Radiologist

Subspecialty
Pediatric Radiology

Honors
• 1998-2001 MS, Epidemiology & Biostatistics, Case Western Reserve University, Cleveland, Ohio
• 1984-1988 MD, George Washington University Medical School, Washington, DC
• 1980-1984 BA, Chemistry, UC Berkeley, Berkeley, California

ACR Activities
• 2015-2018 Member, Board of Chancellors
• 2015-2018 Liaison, Image Wisely Executive Committee
• 2015-2019 Member, Commission on Leadership & Practice Development
• 2013-2018 Member, Commission For Women and Diversity
• 2013-2015 Member, Commission on Government Relations
• 2013-2013 Member, Board Self Evaluation Committee
• 2013-2015 Speaker, Audit Committee
• 2013-2015 Speaker, Budget and Finance Committee
• 2013-2015 Speaker, Executive Committee
• 2013-2015 Speaker, Council Steering Committee

Number of publications, books chapters and/or presentations
Publications: 200
Chapters: 74
Presentations: 225

Areas of Interest
• Governance, member engagement
• Quality and Safety
• Radiation Safety, protection, and guidelines
• Young physician and RFS engagement

Candidate Information

Major academic, practice and/or community achievements
• Initial and ongoing steering committee member of the Image Gently Campaign for appropriate use of ionizing radiation imaging in children. Harmonization and ongoing learning with international communities.
• Evidence-based Imaging book series to promote appropriate imaging use.
• Quality improvement and safety culture learning opportunities.

What do you consider the most important issues facing the ACR?
• Disorganized healthcare systems with declining revenues
• Continued commoditization of the radiologist
• Physician wellness

How should the ACR respond to them?
• Implementation of ACR strategies and toolkits, including Imaging 3.0
• Increased collaborations, decreased redundancies across the Radiology Community of organizations
• Enable individual members to thrive in their practices by providing tools to do things that they cannot do alone but that the College can do as a large organization.
• Further develop and carefully implement the new strategic plan for the College

Reason for seeking office
To serve the College and continue to use the knowledge gained from many years of work with both wonderful colleagues and outstanding staff: (ACR purpose) To serve patients and society by empowering members to advance the practice, science, and professions of radiological care.
And I believe in the ACR vision: that members be universally acknowledged as leaders in the delivery and advancement of quality healthcare.

Chapter Activities
• 2017-2017 Established Resident and Fellow KY state chapter, Kentucky Radiological Society
• 2013-2014 CSC Liaison, Indiana Radiological Society
• 2010-2012 Councilor 1st Term, Georgia Radiological Society
• 2008-2009 President, Indiana Radiological Society
• 2005-2006 Treasurer, Indiana Radiological Society

Second term – 3 years
Daniel L. Rubin, MD, MS

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Medical School Office Building (MSOB)
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Stanford, CA 94305

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dlrubin@stanford.edu

Education
- 1998-2000 MS in Biomedical Informatics, Stanford University, Stanford, California
- 1980-1985 MD, Stanford University School of Medicine, Stanford, California
- 1976-1980 BS, Stanford University, Stanford, California

Employer
Stanford University

Employer Type
Academic/University-based

Primary Practice
Diagnostic Radiologist

Subspecialty
Body Imaging

Honors
- Distinguished Investigator Award, The Academy for Radiology & Biomedical Imaging Research, Coalition, 2017
- Fellow, American Institute for Medical and Biological Engineering (AIMBE) College of Fellows, 2017
- RSNA Honored Educator Award, Radiological Society of North America (2012 and 2013), 2012-2013
- Fellow of the American College of Medical Informatics (ACMI), 2012
- Distinguished Paper Award, American Medical Informatics Association, 2006, 2010

ACR Activities
- 2017-2018 Member, Data Science Institute Breast Imaging Subcommittee
- 2010-2014 Member, Committee On LIRADS - Q&S
- 2009-2014 Member, Commission on Clinical Research & Information Technology
- 2009-2014 Member, IT Informatics Committee
- 2007-2011 Member, National Mammography Database Committee - Breast Imaging

Number of publications, books chapters and/or presentations
Publications: 243
Chapters: 4
Presentations: 232

Areas of Interest
I am a clinical Radiologist (focused on cancer imaging) and expert in biomedical informatics/data science/artificial intelligence (AI). The focus of my work is developing AI methods in Radiology and quantitative imaging techniques to enable radiologists to optimally use the enormous amount of data in images. I also use these methods to create decision support applications to improve Radiologist performance and clinical care. A driving goal of my work is to close gaps in clinical Radiology practice and maximize the value Radiology brings to clinical care by integrating imaging data with clinical and other data that are accumulated during patient care. I am also developing AI methods to predict optimal treatments based on image features, and to detect disease early or even predict future disease based on imaging and clinical data.

Candidate Information

Major academic, practice and/or community achievements
I am a tenured Associate Professor at Stanford and Director of Biomedical Informatics at Stanford Cancer Institute. I developed AI methods for machine understanding of images and texts, (i) discovering quantitative imaging phenotypes of disease that predict best treatments (Nesaro-Oncol 2016), (ii) developing innovative histopathology image classifiers to predict survival (Nature Comm 2016), and (iii) leveraging multi-institutional data for discovery without requiring data sharing through distributed computation of statistical predictive models (J Statistical Software 2017). My ePAD Web-based tool for viewing/annotating medical images has nearly 3000 users who created 21,000+ image annotations. My AIM data model for image annotations is now part of the DICOM standard. I chaired or served on many national informatics committees and editorial/scientific boards and am an Assoc Editor of JDI. I have 240+ peer-reviewed papers (cited nearly 600 times last year, H-index 24) and 10 inventions.

What do you consider the most important issues facing the ACR?
I believe the explosive growth in data science/AI in Radiology is both an opportunity and a threat to Radiology, and radiologists who are both knowledgeable about data science and the clinical practice of Radiology need to be on the forefront of these issues. There is a tremendous onslaught of research and commercial development of AI methods and applications focusing on Radiology, but there are also growing concerns about AI eroding radiologist skills and lessening the field’s attractiveness to the best trainees. There is also little attention being paid by commercial AI developers to what radiologists truly need clinically, and measuring the good/bad impact of AI on practice. On the other hand, there are exciting opportunities to expand the role of radiologists in clinical care by becoming data integrators/interpreters, with the possible future convergence of Radiology and Pathology.

How should the ACR respond to them?
First, ACR needs to engage trainees and radiologists and educate them. AI is an enabler that will enhance their role in care, rather than diminishing it. ACR should work with NIH (NIBIB and NCI) to help identify important clinical directions for AI. For example, fostering image sharing and development of public image resources is a critical bottleneck to AI development. ACR should also engage in outreach to its members to help develop large repositories of image annotations that are critical for AI development. This could be done through expansion of its registries. Second, ACR needs to engage with regulatory bodies such as FDA to educate them about appropriate ways of evaluating AI methods brought to market and the potential value of “post marketing surveillance” in order to detect unanticipated deleterious impacts on practice as early as possible. Third, ACR should educate its members about AI developments and its clinically-proven value to counterbalance the hype.

Reason for seeking office
I am passionate about advancing the contributions that radiologists make to clinical care through more effective use of the images they acquire and the data that they process in routine clinical practice, and have been doing this through my research programs. At the same time, tremendous changes in data science technologies and an explosion in data are transforming Radiology practice, and much of the change is being driven by forces outside Radiology–(AI companies, government, and non-physicians). As someone with both clinical Radiology and AI/data science expertise, I wish to have a hand in helping to shape the Radiology field in ways that will capitalize on the opportunities provided by technological innovations and prevent radiologists from falling victim to potentially predatory practices. In particular, I hope to ensure that radiologists retain their crucial role as clinical experts in the patient care process, as it evolves through maturation of AI technologies.
Richard Strax, MD, FACR

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Houston, TX 77024

Contact
rstrax@hotmail.com

Education
• 1968-1972  BA, New York University University College, New York, New York
• 1972-1976  MD, New York University School of Medicine, New York, New York
• 1976-1977  Internal Medicine Internship, Long Island Jewish Hospital, New Hyde Park, New York
• 1977-1980  Diagnostic Radiology Residency. University of Texas Health Science Center at Houston, Houston, Texas

Employer
Baylor Radiology Associates

Primary Practice
Academic/University-based

Subspecialty
Diagnostic Radiologist  Body Imaging

Honors
• Texas Medical Association Award for Excellence in Academic Medicine, 2015
• Excellence in Leadership Award Christus St. Joseph Hospital, 2000
• Fellowship American College of Radiology, 1996

ACR Activities
• 2016-2018  Member, Council Steering Committee
• 2015-2019  Chair, Awards Criteria Committee
• 2015-2017  Member, Governance Committee
• 2015-2019  Member, Commission on Membership and Communications
• 2013-2018  Elected Member, Council Steering Committee
• 2012-2018  Member, Panel On Appropriateness Criteria - Vascular Imaging 1
• 2011-2017  Member, Bylaws Committee
• 2010-2012  Elected Member, Council Steering Committee
• 2010-2014  Member, State Government Relations Committee - Government Relations
• 2003-2004  Chair, Committee On Membership Development

Number of publications, books chapters and/or presentations
Publications: 15
Presentations: 6

Areas of Interest
Professional - After practicing interventional radiology in urban hospitals for 30 years, including at a Level I trauma center, I have more recently practiced body imaging, IR and breast radiology at our rural community hospital. Working in a smaller hospital environment has allowed me to know my fellow clinicians in other disciplines and to know my patients, truly being able to function as an imaging clinician and being able to implement Imaging 3.0.

Leadership and Advocacy - I have been president of my city and state radiological societies. I have served two terms, four years, as chief of medical staff in a large urban hospital. I have served in a variety of elected and appointed leadership roles within the ACR and at Baylor College of Medicine. Leadership in the broader radiology community, and gaining the trust of physicians in other specialties, has allowed me to serve as an effective advocate for radiology and the medical profession before government leaders and the public.

Major academic, practice and/or community achievements
• Baylor College of Medicine

Candidate Information

• Election to the Faculty Senate as representative from the Department of Radiology
• Appointment to the Institutional Policy Committee
• Appointment to Clinical Faculty Input Committee
• Texas Medical Association - 2015 Award for Excellence in Academic Medicine
• Houston Museum of Health and Medical Science - Board member, Chair of Program Committee, 2013-2016
• Greater Houston Radiology Associates, private practice partner - 1982-2012
• Christus St. Joseph Hospital - Chief of Medical Staff, 1997-2000
• Texas Medical Board - Gubernatorial appointment, district review committee, 2000-2007
• Houston Radiological Society - President, 1994-1995

What do you consider the most important issues facing the ACR?

There are external and internal issues facing the ACR.

External - Unprecedented changes in the American healthcare system are impacting radiology as they are all other medical specialties. There are new onerous government regulations and reductions in pay for the work we perform. Since a primary function of the ACR is to advocate for radiologists, these become serious issues facing the ACR. Another external issue is competition with other medical specialties for limited resources as well as scope of practice issues.

Internal - The ACR has done an exceptional job maintaining relevance to practicing radiologists in the past. A challenge will be to remain relevant to a new generation of radiologists who increasingly find themselves employed by large groups and academic institutions. Another internal challenge will be continuing to fund the vital activities that have been established to support radiology in the community and within leadership positions.

How should the ACR respond to them?

Advocacy - The ACR has successfully focused efforts on educating government, insurance and public policy leaders about the central role of radiology in medicine. This has helped reduce the negative impact of proposed changes on our profession. Working with patients and patient advocacy groups will improve care and also enhance the image of the ACR.

House of Medicine - Having influential AMA representatives has been important in gaining the respect of our colleagues in the healthcare team.

Funding - The College has worked hard to reduce expenses and bolster activities that raise revenue for the organization, and these efforts must continue. The ACR needs to be a good steward of the funds provided by members, and avoid further dues increases as a means to maintain solvency.

Membership - Convincing radiology groups to provide 100% ACR membership is a priority. Focusing on diversity and including early career members in decision making will help keep membership strong and motivated.

Reason for seeking office

I have been fortunate to serve the ACR in a number of positions. As a councilor and three term elected member of the Council Steering Committee, I have had the opportunity to become familiar with the College policy making process, and to exchange ideas with radiologists from all over the country. In addition, serving on both the Governance Committee and Bylaws Committee, I have gotten to know the rules by which the College functions.

The ACR serves its members, and I have been able to serve our membership as Chair of the Committee on Membership Development and Chair of the Awards Criteria Committee. From the CSC I have been liaison to state chapters and affiliated radiology organizations.

I believe I have the leadership skills, experience and credibility to serve on the Board of Chancellors. Election to this position by my fellow Councilors will allow me to apply all that I have learned to help implement the policies of the Council for the benefit of radiologists and our patients.

Chapter Activities

• 2017-2018  CSC Liaison, Kansas Radiological Society
• 2017-2018  CSC Liaison, New Mexico Society of Radiologists
• 2017-2018  CSC Liaison, Oklahoma State Radiological Society
• 2010-2011  Immediate Past President, Texas Radiological Society
• 2009-2010  President, Texas Radiological Society
C. Matthew Hawkins, MD

Preferred Address
130 Woodlawn Ave.
Decatur, GA 30030

Contact
hawkcm@gmail.com

Education
• 2003-2007  MD, Michigan State University College of Human Medicine, East Lansing, Michigan

Employer
Emory University School of Medicine

Employer Type
Academic/University-based

Primary Practice
Interventional Radiologist
Subspecialty
Interventional Radiology

ACR Activities
• 2016-2020  Chair, Committee on Economics - IR and Cardiovascular
• 2015-2019  Chair, Committee on Quality Experience - PFCC
• 2015-2018  Associate Editor, JACR Editorial Board
• 2014-2015  Alternate Councilor, Young and Early Career Professionals Section - Executive Committee
• 2014-2018  Chair, Informatics Advisory Council
• 2012-2013  Member, Council Steering Committee
• 2012-2013  Chair, Resident and Fellow Section - Executive Committee

Number of publications, books chapters and/or presentations
Publications: 47
Presentations: 87

Chapter Activities
• 2017-2018  Alternate Councilor, Georgia Radiological Society
• 2013-2014  CSC Liaison, Idaho Radiological Society
• 2013-2014  CSC Liaison, Oregon Radiological Society
• 2013-2014  CSC Liaison, North Dakota Radiological Society
• 2012-2013  CSC Liaison, Ohio State Radiological Society
Andrew B. Rosenkrantz, MD

**Preferred Address**
660 1st Avenue
New York, NY 10016

**Contact**
Andrew.Rosenkrantz@nyumc.org

**Education**
- 2004-2008 Residency, Diagnostic Radiology, University of Maryland Medical Center, Baltimore, Maryland
- 2003-2004 Internship, Preliminary Medicine, Winthrop University Hospital, Mineola, New York

**Employer**
NYU Langone Health

**Employer Type**
Academic/University-based

**Primary Practice**
Diagnostic Radiologist

**Subspecialty**
Abdominal Imaging

**Honors**
- ACR Innovation Grant recipient, 2017
- Editor’s Recognition Award, Radiology, 2016
- JACR “Best of 2016” award (top article in Training & Education), 2016
- Certificate of Merit, RSNA, 2016
- Fellow, Society of Computed Body Tomography & Magnetic Resonance, 2015
- Fellow, Society of Abdominal Radiology, 2014
- NYU Department of Radiology, Fellow of the Year Award (for excellence in teaching), 2009

**ACR Activities**
- 2017-Present Member, RIC Radiology Integrated Care Network
- 2017-2021 Member, Economics Committee on Reimbursement
- 2017-2021 Member, MR PI-RADS Steering Committee
- 2017-2021 Member, Commission for Women and Diversity
- 2017-2018 Member, ACR Program Committee
- 2017-2018 Member, Council Steering Committee
- 2017-2018 Chair, Young and Early Career Professionals Section - Executive Committee
- 2017-2018 CSC Liaison, Commission on Body Imaging
- 2017-2018 Member, Commission on Membership and Communications
- 2016-2017 Vice Chair, Young and Early Career Professionals Section - Executive Committee

**Number of publications, books chapters and/or presentations**
- Publications: 299
- Chapters: 5
- Presentations: 84

**Areas of interest**
- Numerous departmental and institutional committees (quality and safety, patient-centered care, process improvement, billing)
- Extensive committee experience for numerous specialty societies (ACR, RSNA, ARRS, AUR, SAR, SCCTMTR)
- Interests in health policy and economics (health policy pathway chair for 2016 and 2017 ACR annual meetings; authored series of JACR articles on MACRA)

**Candidate Information**

**Major academic, practice and/or community achievements**
- Associate Professor of Radiology and Urology
- Attending Physician, Bellevue Hospital; Attending Physician, Gouverneur Healthcare Services
- Director of Health Policy, NYU Langone Department of Radiology
- Section Chief, Abdominal Imaging
- Affiliate Research Fellow, Harvey L. Neiman Health Policy Institute
- Editorial boards of Radiology, JMIRI, and AJR

**What do you consider the most important issues facing the ACR?**
- Ensuring the visibility of radiologists to patients and referring physicians
- Ensuring radiology’s place in the new landscape of alternative payment models
- Ensuring that radiologists are leaders in leveraging artificial intelligence and big data to transform patient care
- Dealing with growing clinical volumes; stress and burnout
- Promoting the adoption of Imaging 3.0 and of patient and family centered-care
- Attracting the top medical students into radiology
- Being sure to remain the “voice” of radiology in representing all radiologists
- Ensuring that the value of ACR membership is clear and transparent to radiologists and that College membership remains robust in terms of both retention and recruitment of new members

**How should the ACR respond to them?**
- Maintain a focus on quality and safety
- Provide data and evidence to policymakers and other stakeholders that appropriately reflect the value-added of radiologists’ services
- Continued government engagement and advocacy, including at the grassroots level
- Educate College membership regarding how to thrive in the face of an onslaught of new regulations and increasingly complex payment systems
- Build a bench of strong leaders to ensure the future of the College
- Engage College membership, providing opportunities and outlets for members to meaningfully participate and contribute to College activities
- Give tools for radiologists to be successful local practice leaders
- Work with state chapters to coordinate initiatives and act

**Reason for seeking office**
I have had the fortune to get involved with the College on numerous fronts, including the YPS, CSC, Neiman HPI, as well as the Economics, Diversity, and Membership Commissions. As the YPS Representative on the BOC, I will continue to contribute to the College, building upon these earlier experiences. Of note, I have served on the YPS Executive Committee for the past three years, most recently as YPS Chair. While serving the YPS, I have sought to increase the level of engagement and activity by YPS members, for example helping to encourage YPS participation in College committees, developing YPS programming at the annual meeting, and pursuing YPS mentorship opportunities. During this time, I have greatly enjoyed working with amazing colleagues and staff, gaining an understanding of the College’s workings, and developing many new relationships. Overall, I have a strong passion for the College’s activities and would give the position my complete commitment.

**Chapter Activities**
- 2017-2018 CSC Liaison, New York State Radiological Society
- 2015-2016 Alternate Councilor, New York State Radiological Society
Catherine J. Everett, MD, MBA, FCR

Preferred Address
812 Madame Moores Lane
New Bern, NC 28562

Contact
ceverett@coastalradiology.com

Education
• 2002-2010 MBA, Yale School of Management, New Haven, Connecticut
• 1976-1980 Resident and Fellow, NC Memorial Hospital, Chapel Hill, North Carolina
• 1972-1976 MD, UNC School of Medicine, Chapel Hill, North Carolina
• 1968-1972 BA, Duke University, Durham, North Carolina

Employer
Coastal Radiology Associates, PLLC

Employer Type
Radiology Group Practice

Primary Practice
Diagnostic Radiology

Subspecialty
Breast Imaging

Honors
Order of the Long Leaf Pine, Awarded by the governor for service and dedication to NC, 2017

ACR Activities
• 2017-2019 Member, GSER Network Planning Committee
• 2016-2018 Member, Council Steering Committee
• 2016-2018 Member, Engage Steering Committee
• 2016-2020 Member, Committee On Education - PFCC
• 2015-2019 Member, Commission on General, Small, Emergency and Rural Practice
• 2015-2019 Chair, Committee on Economics - GSR
• 2015-2016 Workgroup III Chair, Council Steering Committee
• 2015-2020 Chair, ACR Senior Retired Section
• 2014-2016 Member, Council Steering Committee
• 2012-2012 Delegate, RLI Ambassador

Number of publications, books chapters and/or presentations
Publications: 2
Presentations: 3

Areas of Interest
From 2008-10, I attended Yale School of Management for my MBA. Twice monthly I traveled from NC to CT for classes, and studied hours between sessions. I continued my fulltime practice of radiology, serving as my group president.

I developed a business plan introducing voice recognition and structured reporting to our service centers. 4 hospitals and 4 imaging centers. Our practice formed a company to produce radiology reports for these clients, at a considerable savings to them. We are now in our 7th year, and have enthusiastic support from all. Because of the imbedded criteria in our templates, we have historical near 100% compliance with the current MIPS/MACRA; and anticipate very high scores in 2017.

I have been extensively involved in evaluating practice model changes, as a preliminary process for my own practice. The economics committee of GSER, which I chair, surveyed membership re these models, culminating in an open microphone session at the 2017 annual meeting.

Major academic, practice and/or community achievements
I have worked in a rural private practice group in coastal North Carolina for over 30 years. I am a managing partner, and president. At our flagship hospital, I also served as department of imaging chair 16 years, as Chief of Staff, and as a member of the board. I am currently an appointed member of the CEO’s physician advisory committee.

Meanwhile, our group has grown from one hospital with 6 radiologists, to four hospitals with a group of 13. We were able to gain maximal subspecialty coverage and efficiency through innovative scheduling and IT solutions. But we knew we were vulnerable to the increasing consolidation of practices and health systems.

Three years ago, we began evaluating the future of our practice. Under my leadership, we assessed mergers, alliances, associations, system employment, and corporate physician partnership. The project culminated in our joining Radiology Partners. My experience allows me to offer insight to others in this process.

What do you consider the most important issues facing the ACR?
• New payment models and the shift from fee-for-service to alternatives. This is the single most important challenge for the ACR since the development of the RBRVU’s. The ACR was recognized as a leader and protagonist in that effort. Radiologists benefited. The current challenge must be met proactively as well, with leaders from our profession.
• Artificial Intelligence and Machine Learning
• Practice model changes. IR and DR.
• Membership. ACR must improve engagement of the grassroots members, and broaden the value to other stockholders such as radiologist employers.
• Advocacy, government relations and economics. Sustain and maintain one of our strongest pillars.

How should the ACR respond to them?
• All pertinent resources and staff must be directed to the understanding of these new rules, and the teaching and implementation for radiologists. Webinars, case studies for radiologists involved in ACO’s, toolkits will all likely be necessary. The HPI data will be crucial for radiologists to use for negotiation.
• Embrace AI as part of radiology. Continue support of the DSI with strong leadership and expertise to make sure radiology supplies and vets the data and validates the solutions. Convince radiologists to embrace AI as an enhancement, not a replacement. And make sure that is the case!
• ACR should be open and innovative in crafting an alliance between IR and DR to strengthen the house of radiology. Current ACR leadership, which includes many IR physicians, should take the lead in educating and suggesting models. ACR should monitor the rapid consolidation of health systems, and its effect on practices.
• Know your customer
• Don’t mess with success

Reason for seeking office
I have had the privilege to serve on the Council Steering Committee 2014-2018. I spent the first year learning from leadership on the committee, and said very little. Over the next three years, I realized the importance of having a voice as the table for community practice radiologists, and I became one. Issues such as changing practice models within an industry of rapid consolidation, subspecialty reading requirements and limitations, potential good and bad consequences of the development of IR as a specialty, and wording and content of Practice Parameters and Technical Standards have unique implications for smaller and more rural practices, and I have made sure our observations and opinions are voiced.

I am particularly interested in working with other leaders to make sure the transition to the IR specialty with the new and different relationships with Dr is positive and synergistic, while still voicing the challenges for small groups.

Chapter Activities
• 2017-2020 Councilor 2nd Term, North Carolina Radiological Society
• 2014-2017 Councilor 1st Term, North Carolina Radiological Society
• 2014-2015 President, North Carolina Radiological Society
• 2013-2014 Membership Chair, North Carolina Radiological Society
• 2011-2016 Newsletter Editor, North Carolina Radiological Society
### Council Steering Committee

**Elaine R. Lewis, MD, FACR**

**Preferred Address**
2754 Welsh Road
Mohnton, PA 19540

**Contact**
Elaine.lewis@towerhealth.org

**Employer**
West Reading Radiology Associates

**Employer Type**
Radiology Group Practice

**Primary Practice**
Diagnostic Radiologist

**Subspecialty**
Body Imaging

**Honors**
- Janet M. Glasgow Memorial Achievement Citation, 1984
- Award for Excellence in Surgery, 1984
- Alpha Omega Alpha Honor Medical Society, 1983
- Merck Award for scholastic achievement, 1982
- Blood Bank Achievement Award in Medical Technology, 1978

**ACR Activities**
- 2017-2018 Member, Council Steering Committee
- 2016-2017 Member, Council Steering Committee
- 2012-Present Delegate, RLI Ambassador

**Number of publications, books chapters and/or presentations**
- Publications: 1
- Presentations: 3

**Areas of Interest**
- State Chapter Management including financials and bylaws
- Quality and Safety in Radiology
- Legislative Issues, including federal, state, and local

**Major academic, practice and/or community achievements**
- 2012 – Present Board of Directors, West Reading Radiology Associates
- 1994 - 2008 Chief, Section of Computed Tomography
- 2006 - 2007 Chief, Section of Diagnostic Radiology
- 2012 – Present Chair, Department of Radiology

**What do you consider the most important issues facing the ACR?**
- Continue to educate members on MACRA with frequent updates and improve functionality of registries.
- Via the Data Science Institute, promote uses of Artificial Intelligence which improve the diagnostic capability of radiologists. Work to be certain that the use of AI integrates seamlessly into the daily workflow.

**Reason for seeking office**
I am currently in my second year as an appointed member of the CSC. I have found the rewards of working with such a dedicated group of radiologists to be personally fulfilling. I also see that there is much work to be done, and would like to offer my time to work on solutions to issues radiologists are currently facing.

**Chapter Activities**
- 2017-2018 CSC Liaison, District of Columbia Metropolitan Radiological Society
- 2017-2018 CSC Liaison, Pennsylvania Radiological Society
- 2012-2013 President, Pennsylvania Radiological Society
- 2009-2010 Treasurer, Pennsylvania Radiological Society

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**Candidate Information**

- **Education**
  - 1989-1990 Fellowship Body Imaging, The Johns Hopkins Hospital and University, Baltimore, Maryland
  - 1985-1989 Radiology Residency, The Reading Hospital and Medical Center, Reading, Pennsylvania
  - 1984-1985 Internal Medicine Residency, Albert Einstein Medical Center, Philadelphia, Pennsylvania

- **Reason for seeking office**
  - I am currently in my second year as an appointed member of the CSC. I have found the rewards of working with such a dedicated group of radiologists to be personally fulfilling. I also see that there is much work to be done, and would like to offer my time to work on solutions to issues radiologists are currently facing.

- **Chapter Activities**
  - 2017-2018 CSC Liaison, District of Columbia Metropolitan Radiological Society
  - 2017-2018 CSC Liaison, Pennsylvania Radiological Society
  - 2012-2013 President, Pennsylvania Radiological Society
  - 2009-2010 Treasurer, Pennsylvania Radiological Society

- **One 2-year term**

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**Continue to educate members on MACRA with frequent updates and improve functionality of registries.**

**Via the Data Science Institute, promote uses of Artificial Intelligence which improve the diagnostic capability of radiologists. Work to be certain that the use of AI integrates seamlessly into the daily workflow.**

**Reason for seeking office**
I am currently in my second year as an appointed member of the CSC. I have found the rewards of working with such a dedicated group of radiologists to be personally fulfilling. I also see that there is much work to be done, and would like to offer my time to work on solutions to issues radiologists are currently facing.

**Chapter Activities**
- 2017-2018 CSC Liaison, District of Columbia Metropolitan Radiological Society
- 2017-2018 CSC Liaison, Pennsylvania Radiological Society
- 2012-2013 President, Pennsylvania Radiological Society
- 2009-2010 Treasurer, Pennsylvania Radiological Society
Johnson B. Lightfoote, MD, FACR

Preferred Address
Pomona Valley Hospital Medical Center
1798 North Garey Ave.
Pomona, CA 91770

Contact
Lightfoote@msn.com

Education
- 1972-1976  MD, Harvard Medical School, Boston, Massachusetts
- 1988-1990  MBA, Pepperdine University, Malibu, California

Honors
- Distinguished Service Award, Phillips Academy, 2011
- Commissioned Officer’s Award, U.S. Public Health Service, 1979
- Aesculapian Society, Harvard Medical School, 1976

ACR Activities
- 2015-2017  Member, Council Steering Committee
- 2014-2016  Member, Council Steering Committee
- 2013-2018  Chair, Committee For Diversity and Inclusion
- 2015-2017  Member, Governance Committee
- 2017-2019  Member, JACR Editorial Board
- 2015-2017  Member, GSER Community
- 2017-Present  Member, Task Force On Brand Strategy
- 2017-Present  Member, ACR Medicaid Network
- 2015-2017  Member, Task Force On Brand Strategy
- 2015-2017  Member, GSER Community
- 2017-Present  Member, Task Force On Brand Strategy
- 2015-2017  Member, GSER Community

Number of publications, books chapters and/or presentations
Publications: 23
Presentations: 19

Areas of Interest
- Informatics and new technologies and workflows, and how they will affect the practice of radiology
- New practice models; equity and employment relationships among radiologists and parent organizations
- Diversity of the radiology workforce and representation of all segments of society in the health care professions and radiological sciences in particular
- Pipeline development of increasingly diverse future radiologists and physicians
- Broadening the representation and reach of ACR of all radiology practice types, including new, nonequity and nontraditional practice arrangements

Major academic, practice and/or community achievements
- Former Medical Staff President and member of the Board of Directors of Pomona Valley Hospital Medical Center
- Former Chair of the Section on Radiology of the National Medical Association
- Member of Executive Committee of the California Radiological Society
- Active in alumni engagement and service for Harvard Medical School and Phillips Academy

What do you consider the most important issues facing the ACR?
- ACR seeks to represent all radiology practices and practice types
- ACR has an opportunity and obligation to expand the gender and ethnic diversity of incoming radiologists
- ACR has an opportunity to lead in the development and adoption of new data sciences technology to enhance the service of the radiological professions to our patients

How should the ACR respond to them?
- ACR should actively reach out to new radiologist in novel and particularly non-equity practice arrangements to involve and more actively understand and represent their interests.
- ACR should explicitly undertake efforts in recruitment and outreach to improve the representation of URMs in the radiological professions, and of women in leadership roles in organized and academic radiology.
- ACR should continue to develop its robust informatics efforts, primarily through the Data Sciences Institute, and to promulgate and make available such advances, both as a public service and as a revenue source.

Reason for seeking office
I’d like to enhance ACR’s expertise, energies and leadership in the handful of major issues that face our profession. I’d like to enlist the energies of a wider and more diverse ACR membership in reaching the goals of the strategic plan, as adopted in 2014, and revised in 2017.

Chapter Activities
- 2011-2017  State of California Radiology Technology Certification Commission, California Radiological Society
- 2017-Present  CSC Liaison, California Radiological Society
- 2017-Present  CSC Liaison, Hawaii Radiological Society
- 2014-2017  Councilor 2nd Term, California Radiological Society
- 2011-2017  Executive Committee, California Radiological Society
- 2010-2016  Executive Committee, California Radiological Society

Candidate Information
Gregory N. Nicola, MD, FACR

Preferred Address
80 Riverside Blvd
Apt. 14P
New York, NY 10069

Contact
gn nicola@yahoo.com

Education
- 1995-1999 MD, Case Western University School of Medicine, Cleveland, Ohio

Employer
Hackensack Radiology Group

Employer Type
Radiology Group Practice

Primary Practice
Diagnostic Radiologist

Subspecialty
Neuroradiology

Honors
Fellow of the American College of Radiology, 2017

ACR Activities
- 2017-2018 Member, Council Steering Committee
- 2017-2018 CSC Liaison, Commission on Government Relations
- 2016-2017 Member, Governance Committee
- 2016-2017 Member, Council Steering Committee
- 2016-2017 CSC Liaison, Commission on Government Relations
- 2016-2020 Member, Commission on Economics
- 2016-2020 Chair, Economics Committee On MACRA
- 2015-Present Member, RIC Radiology Integrated Care Network
- 2013-2019 Member, Economics Committee on Reimbursement
- 2013-2019 Member, Committee on Economics - Neuro

Number of publications, books chapters and/or presentations
Publications: 41
Presentations: 30

Chapter Activities
- 2017-2018 CSC Liaison, Delaware Radiological Society
- 2017-2018 CSC Liaison, Radiological Society of New Jersey
- 2017-2018 Secretary, Radiological Society of New Jersey
- 2017-2020 Councilor 2nd Term, Radiological Society of New Jersey
- 2015-2016 Treasurer, Radiological Society of New Jersey
William F. Sensakovic, PhD

Preferred Address
119 Oak Leaf Lane
Longwood, FL 32779

Contact
wfsensak@gmail.com

Education
• 2001-2010  PhD (Medical Physics), The University of Chicago, Chicago, Illinois
• 1997-2001  BA (Physics) with Honors, The University of Chicago, Chicago, Illinois
• 1997-2001  BS (Mathematics), The University of Chicago, Chicago, Illinois

Employer
Florida Hospital

Employer Type
Hospital

Primary Practice
Physicist

Subspecialty
Medical Physics and Molecular Imaging

Honors
• President-Elect Florida Chapter of the American Association of Physicists in Medicine, 2017
• Editor’s Recognition Award, RSNA’s Journal: Radiology, 2017
• Co-Director (Imaging Track), Spring Clinical Meeting of the AAPM, 2017
• Academia.edu ranked in the top 5% of researchers 30-day views for June, 2017
• Associate Editor, Medical Physics, 2016
• Board Member, American Board of Magnetic Resonance Safety (ABMRS), 2016
• Vice-Chair, FL Dept of Health Advisory Council of Medical Physicists, 2015
• Journal Cover: International Forum of Allergy & Rhinology 5(7) for computer algorithm paper, 2015

ACR Activities
• 2017-2017  Councilor-at-Large (Medical Physics), Medical Physics
• 2017-2019  Councilor, Florida Radiological Society
• 2017-2017  Question Writer (Physics), Diagnostic In-Service Exam (DXIT)
• 2016-2017  Chair (Physics Section), Radiology Assessment and Review Series 2 (RADAR 2)
• 2016-2017  Section Editor (Physics), RadExam, Created by the ACR and APDR
• 2015-2019  Member, Committee on Government Relations - Medical Physics
• 2015-2017  Alternate Councilor, Florida Radiological Society

Number of publications, books chapters and/or presentations
Publications: 33
Chapters: 2
Presentations: 87

Areas of Interest
I am a practicing Diagnostic Medical Physicist with board certification. Clinically, I have a keen interest in exploring how informatics, medical physics, and artificial intelligence can contribute to healthcare.

My background primarily involved research in image processing and analysis in radiology. I would like to contribute to the new deep learning initiative of the ACR. I believe a key component of that dovetails with my extensive background in teaching. I believe the future of radiology and medical physics will hinge on determining the kind of training both physicists and radiology residents get related to machine learning and informatics. Without improved training in these areas it will be impossible for radiology to stay competitive in the coming age of information-based medicine.

My current clinical research involves informatics, AI, dose, and image quality.

Candidate Information

Major academic, practice and/or community achievements
• Created a CT protocol for Robot-Guided Adolescent Idiopathic Scoliosis Surgery that reduced dose 90% and currently developing protocols for robotics vendor
• Invited speaker for work related to computer analysis of mesothelioma and simians
• Chair, Imaging Physics Curriculum Subcommittee for the American Association of Physicists in Medicine (AAPM). Develops suggested physics curriculum for radiology residents.
• Chair, Task Group 300 : Framework for a National CT Image Quality Registry. Developing a structure for new image quality registry to complement the ACR CT Dose Index Registry.
• Head of the CT Protocol Committee at Florida Hospital
• Scientific Member of the Florida Hospital Institutional Review Board
• Education Exhibits Committee (Physics Subcommittee) Member for the RSNA Annual Meeting

What do you consider the most important issues facing the ACR?
The most important issue the ACR faces is how to ensure that radiology (and radiologists) play a pivotal role in the upcoming age of information-based healthcare. Technology is accelerating at a rapid pace both due to mass information collection and use of this information to develop artificial intelligence. The future of field will hinge on radiologists understanding and guiding development of these new tools to better patient healthcare and to determine what role humans must play in the changing field. Similarly, data collection is driving new metrics to assess healthcare providers and quality of care. It is crucial that the ACR guide what these new metrics look like to ensure that they truly reflect healthcare improvement and quality of service without unduly penalizing the profession.

How should the ACR respond to them?
In the short term the ACR must rapidly and continuously develop teaching materials to ensure that residents both understand and are comfortable with basic aspects of healthcare metrics, informatics, and artificial intelligence. While a radiologist is not a computer scientist, it is still important that they have a basic understanding so they can respond to the changing future environment (and help shape it) - much in the way they have with radiological physics.

In the long term it must reach out to sister organizations focused on this work so it has a place at the table for guiding the future implementation of informatics and AI. Similarly, it must be active and forward looking when in addressing both the ethics and regulatory framework that surround this new technology. The ACR must begin to formulate what principles and laws should govern its implementation in the medical arena and working with relevant government and pseudo-governmental agencies to get standards and laws enacted.

Reason for seeking office
The ACR plays an extremely important role in guiding both the fields of radiology and medical physics. I see the potential of this organization to navigate the uncertain and exciting future involving the implementation of informatics, artificial intelligence, and development of metrics to assess patient care and physician performance. As a medical physicist and educator with an extensive research background in computer image analysis and metric development I believe I can contribute to the organization and help it to guide our fields in the times ahead.

Chapter Activities
• 2017-2020  Councilor, Florida Radiological Society
• 2017-2017  Councilor-at-Large (Medical Physics), Medical Physics
• 2016-2016  Councilor, Florida Radiological Society
• 2014-2017  Alternate Councilor, Florida Radiological Society
Adam W. Specht, MD

Prefered Address
3309 Chappell Pl
Virginia Beach, VA 23452

Contact
awspecht@verizon.net

Education
• 2003-2004 Fellow/Instructor in Abdominal CT/MR, Musculoskeletal Radiology, and Neuroradiology MCV/VCU, Richmond, Virginia
• 1999-2003 Diagnostic Radiology, MCV/VCU, Richmond, Virginia
• 1990-1994 MD, University of Michigan Medical School, Ann Arbor, Michigan

Employer
Medical Center Radiologists (MCR)

Employer Type
Radiology Group Practice

Primary Practice
Diagnostic Radiologist
Musculoskeletal Imaging

Honors
• Golden Apple Award for Outstanding Educator in Radiology, 2005
• M. Pinson Neal Award for Outstanding Resident in Radiology, 2003

ACR Activities
• 2007-2008 Member, Reference Committee IV
• 2005-2006 Member, Tellers Committee

Number of publications, books chapters and/or presentations
Presentations: 2

Areas of Interest
On a personal level I am interested in leadership roles in the politico-economic arena on behalf of Radiology within the larger medical community. I function as CFO for my group as well, and have depth of knowledge related to operational finances including (e.g.) billing, human resource issues, and multiple insurance types needed to run a sizable medical practice.

Major academic, practice and/or community Achievements
• Practice Vice President, current
• Practice Secretary/Treasurer, former
• Practice Board of Directors, member, 2006-2011

What do you consider the most important issues facing the ACR?
Imaging and imaging-guided therapeutics are central to health care delivery. Despite this, we have persistent issues related to a lack of visibility of the radiologist and the understanding of the crucial role we play in medicine.

Reason for seeking office
Imaging and imaging-guided therapeutics are central to health care delivery. Despite this, we have persistent issues related to a lack of visibility of the radiologist and the understanding of the crucial role we play in medicine.

How should the ACR respond to them?
Create and capitalize upon opportunities to increase our visibility and value. This needs to be done at all levels of interaction. First and foremost for our patients, but also with our fellow medical staff, insurers, and politicians.
Eric J. Stern, MD, FACR

Preferred Address
2016 Constance Dr. W
Seattle, WA 98199

Contact
estern@uw.edu

Education
• 1981-1985 MD, UMDNJ-NJMS, Newark, New Jersey

Employer
University of Washington Physicians, Radiology

Primary Practice
Diagnostic Radiologist

Subspecialty
Thoracic Imaging

Honors
• FACP, 2017
• Association of University Radiologists Board of Directors, 2017
• Honorary Member Spanish Radiology Society, 2016
• Consultant to WHO, 2016
• Chair, ISR International Commission on Radiology Education, 2014
• Mexican Society of Radiology Educational Excellence Award, 2013
• ACR Distinguished Service Award, 2010
• Founding President, Alliance of Clinician Educators in Radiology (ACER), AUR, 2007

ACR Activities
• 2017-2018 Thoracic Use Case Panel Chair, ACR Data Science Institute
• 2015-2017 Member, Council Steering Committee
• 2015-2018 Member, Commission on Informatics
• 2014-2018 Member, ACR Bulletin Editorial Advisory Group
• 2014-2018 Member, Commission on International Relations
• 2014-2015 Co-Chair, Lung Cancer Screening Education Taskforce
• 2013-2016 Member, Intersociety Committee - Executive Committee
• 2013-2017 Chair or member, Six different Practice Parameter committees
• 2013-2015 Member, Council Steering Committee

Number of publications, books chapters and/or presentations
Publications: 138
Presentations: 150

Areas of Interest
• Experience:
  Four years of experience on ACR council steering committee.
  Washington State Radiology Society, past-president.
• Expanding interests:
  Informatics/big data and disruptive technologies, as well as the impact of social media on healthcare, the patient and family experience, and related ways to embrace these technological changes to improve our practice.
  Lung cancer screening (LCS): Service on ACR LCS designated centers committee, and co-chairing LCS education task force

Major academic, practice and/or community achievements
• Professor of Radiology, Adjunct Professor of Medicine, Medical Education and Bioinformatics, and Global Health, and Vice-Chair for Academic Affairs, University of Washington.
• Washington State Radiology Society, executive committee 2007 to present, President 2014-2016
• Founding President, AUR Alliance of Clinician Educators in Radiology (ACER).

Candidate Information

• Founding and current Editor, International Society of Radiology GO RAD journal.
• International Society of Radiology (ISR) Executive Committee.
• Chair, ISR International Commission Radiology Education
• AUR Board of Directors 2003-2012, 2017-2019

What do you consider the most important issues facing the ACR?
The future of our profession will hinge on many issues. While some of these issues may seem daunting, I am excited by what the future holds for our profession and extremely confident in the leadership of the college.

Certainly one of the biggest issues is related to the transformations in healthcare that are driving changes to the status quo of radiology practice models and the challenges of migrating from fee for service to value-based, population health management. The ACR will be essential to our practices as we face new paradigms for payment of imaging services, as both revenue generators and cost centers.

Our profession is facing disruptive technologies that we must purposefully embrace to empower our profession and ensure patient safety.

The pipeline of incredible talent into our profession must be attentively nurtured and supported to ensure a vibrant and robust future for the ACR and our profession.

How should the ACR respond to them?
The ACR must continue to be the soul of our profession.

In so doing, the ACR must continue to be the lead voice and standard bearer of radiology quality, safety, and best practices. To continue to thrive, the ACR must proactively embrace the many opportunities to drive long-term value in our health systems by helping to actively shape new healthcare models, and leverage its tremendous expertise and resources in health policy and economics in full support of all of its members.

Through the new Data Science Institute, the ACR is developing the infrastructure that will empower our profession and improve our value and precision in the care of our patients through collaboration with industry partners, governmental agencies, and imaging informatics professionals. These activities will also prove to current and future medical practitioners that radiology is, and will continue to be, the most exciting field in medicine.

Reason for seeking office
As a past member of the CSC, I continue to actively serve the ACR on several committees, commissions, and task forces. My prior 4 years of experience serving on the CSC, with its many liaisons and work groups, has provided me with a deeper understanding of the breadth, interplay, roles, and purpose of this great organization and the important responsibilities that CSC members have in representing the council throughout the year.

This is such an exciting time to be a radiologist! There are so many fantastic opportunities to help the college to continue to advance our profession. The current ACR leadership has created an impressive roadmap for our future and I hope to again bring my energy, experience, and passion in service to the CSC, the council, and the members of the ACR, in the shared vision for our profession.

Chapter Activities
• 2017-2020 Councilor 1st term, Washington State Radiological Society
• 2017-2020 Fellowship Chair, Washington State Radiological Society
• 2014-2016 President, Washington State Radiological Society
• 2013-2016 Councilor 2nd Term, Washington State Radiological Society
• 2010-2013 Councilor 1st Term, Washington State Radiological Society
Paul Wing-Cheung Wong, MD

Preferred Address
Akron Children’s Hospital
1 Perkins Square
Akron, OH

Contact
pwong@akronchildrens.org

Education
• 1990-1994  MD, St Louis University, St Louis, Missouri

Employer
Akron Children’s Hospital’s Radiology

Employer Type
Hospital

Primary Practice
Diagnostic Radiologist

Subspecialty
Pediatric Radiology

Areas of Interest
Board certified pediatric and neuroradiologist

What do you consider the most important issues facing the ACR?
The future of medical care in America is the most important issues the ACR will have to deal with. The Affordable Care Act is in flux under President Trump and how that plays out will have the biggest impact on the ACR. As a pediatric radiologist, the Children’s Health Insurance Plan is of particular interest to me.

How should the ACR respond to them?
We need to keep a close eye on Washington and aggressively respond to changes as they occur.

Reason for seeking office
As a member of the ACR for the past 16 years I have been watching what has been happening and I want to chance to actively influence the future of radiology.

Chapter Activities
• 2017-2020  Councilor 1st Term, Ohio State Radiological Society
• 2016-2017  Alternate Councilor, Ohio State Radiological Society
• 2015-2016  Alternate Councilor, Ohio State Radiological Society
• 2007-2008  Alternate Councilor, Ohio State Radiological Society
• 2005-2006  Alternate Councilor, Ohio State Radiological Society
• 2004-2005  Alternate Councilor, Ohio State Radiological Society
Candidate Information

Zaihleen Keller, MD

Preferred Address
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Laguna Niguel, CA 92677

Contact
zaihleen@gmail.com

Education
• 2007-2011 MD, Chicago Medical School, North Chicago, Illinois
• 2003-2005 BS Chemistry, University of California, Berkeley, California
• 2001-2003 BS, Las Positas College, Livermore, California

Employer
Coast Radiology Imaging and Intervention

Employer Type
Radiology Group Practice

Primary Practice Subspecialty
Diagnostic Radiology Breast Imaging

Honors
• Chicago Medical School Dean’s Award, 2011
• AMWA Glasgow-Rubin Certificate (academic achievement), 2011
• Dr. Martin Gecht Memorial Award (Leadership in community service), 2011
• Alpha Omega Alpha Honor Society (President, Illinois Delta Chapter), 2010
• George C Pimentel Award in Chemistry, 2005
• University of California, Berkeley (High Honors in Chemistry), 2005
• Golden Key International Honor Society, 2003

ACR Activities
• 2013-2014 Member, Resident and Fellow Section Membership Subcommittee
• 2013-2014 Member, ACR Resident Advocacy Committee

Number of publications, books chapters and/or presentations
Publications: 10

Areas of Interest
I have experience evaluating applications during medical school. As a junior AOA member we were given the opportunity to help select senior AOA members with faculty. Each applicant was extremely qualified with excellent academic scores and leadership activities. It was a challenging and rewarding experience reviewing each applicant and evaluating the quality of leadership and academic achievements to arrive at a decision.

Additionally, as the AOA president it was my job to encourage and recruit fellow members to participate in community services. I organized eye clinics in underserved areas that were staffed by AOA members. I enjoy encouraging others to become involved, and take great pleasure as they gain satisfaction from their participation.

I believe these experiences will help me as a member of the College Nominating Committee.

Major academic, practice and/or community achievements
My biggest academic achievement is simply being where I am. I am the first person in my family to ever attend college and medical school. I’m grateful for all of the opportunities that have come my way.

In my practice, I’m currently helping our hospital set up a Lung Cancer Screening program. I’ve helped create protocols, and set up infrastructure for our reports. Additionally, I’ve help start a Lung Cancer tumor board at our hospital to help create a multidisciplinary approach so that our patients may benefit.

What do you consider the most important issues facing the ACR?
I believe the new products and software which include artificial intelligence (AI) have the potential to de-value the work that we perform as radiologists.

How should the ACR respond to them?
I think the ACR is responding in the most appropriate way; by being involved! If radiologists help develop and learn to use AI to their advantage the threat to our jobs is minimized. It goes along with being more than just doctors in the background reading in a dark room. Just like radiologists have to be more involved with the patients and clinical aspects, they need to know about AI and how it can help us do our jobs better, without rendering us irrelevant.

Reason for seeking office
As a new member of the YPS, I am eager to become more involved with the ACR. I recently joined a private practice, which to my delight are not only all members of the ACR, but supportive of my desire to become more involved. I believe that I will be able to dedicate my time and fulfill my duties as a member of the College Nominating Committee. I am organized, enthusiastic, and love to encourage others to become involved. As the president of the California Radiologic Society Resident and Fellow section (CRS RFS), I encouraged many residents to become involved, many of whom attended their first ACR meeting last spring, as members of the CRS RFS board. I am truly in awe of all that the ACR accomplishes and am excited to help recruit and select great people as a member of the College Nominating Committee.

Chapter Activities
• 2015-2017 President (RFS section), California Radiological Society

One 2-year term
Brian F. King, MD

Preferred Address
11620 Wilshire Blvd
Ste. 275
Los Angeles, CA 90025

Contact
drk@imagingking.com

Education
• 1993-1995 Neuroradiology Fellowship, UCLA School of Medicine, Department of Radiological Sciences, Los Angeles, California
• 1989-1993 Board Certification Radiology Residency, Diagnostic Radiology, UCLA School of Medicine, Department of Radiological Sciences, Los Angeles, California
• 1984-1988 Medical Doctor, Southern Illinois University School of Medicine, Springfield, Illinois
• 1976-1979 Bachelor of Science, University of Southern California, Los Angeles, California

Employer
Resolution advanced imaging center

Employer Type
Radiology Group Practice

Primary Practice
Interventional Radiologist

Subspecialty
Neuroradiology

Honors
Best Doctors in America, 2003-2017

ACR Activities
• 2014-2016 Ad hoc committee, Papers and presentations, American Society of spine radiology

Number of publications, books chapters and/or presentations
Publications: 10
Presentations: 35

Areas of Interest
In addition to practicing radiology and neuroradiology for the past 22 years I also have experience in management of it and outpatient imaging center and accredited ambulatory surgical center.

Major academic, practice and/or community achievements
Over the past 22 years I have performed in excess of 30,000 interventional procedures primarily on this spine for pain management. This would include epidural injections, facet injections, radio frequency neurolysis, Vertebroplasty, kyphoplasty, and more recently PRP and stem cell injections.
I also founded a highly successful outpatient imaging center in ambulatory surgical center which was accredited AAAHC.

Reason for seeking office
I have an interest in giving back to the American College of radiology for their support over the past 22 years of my practice. I think with my experience I would have a lot to contribute to the society.

Chapter Activities
• 2014-2017 Councilor 1st Term, California Radiological Society
• 2013-2014 Alternate Councilor, California Radiological Society
Gaurang V. Shah, MD, FACR

Preferred Address
B2A209F, Dept. of Radiology, UMHS
1500 East Medical Center Drive
Ann Arbor, MI 48109

Contact
gvshah@umich.edu

Education
• 1983-1987 MD, KM School of Post Graduate Medicine, Ahmedabad, India
• 1977-1982 MBBS, NHLM Medical College, Ahmedabad, India

Employer
University of Michigan

Employer Type
Academic/University-based

Primary Practice Subspecialty
Diagnostic Radiologist Neuroradiology

Honors
• Reviewer with special Distinction, Journal of Magnetic Resonance Imaging (JMRI), 2016
• Distinguished Reviewer Award, American Journal of Neuroradiology (AJNR), 2014
• Summum Cum Laude Award for American Society of Neuroradiology Exhibit, 2010
• Teacher of the Year, Dept. of Radiology, University of Michigan, 2002
• Radiological Society of North America Roentgen Fellow Research Award, 2001
• Dr. N. G. Gadekar Keynote Address, 1998
• Dr. Ram Rishi Memorial Oration, 1998
• Dr. Asoke Mukherjee Memorial Award & Gold Medal, 1994

ACR Activities
• 2017-2021 Member, RIC Radiology Integrated Care Network
• 2017-2021 Member, Committee on Managed Care - Economics
• 2017-2021 Member, Future Trends Committee - Econ
• 2017-2018 Member, State Government Relations Committee - Government Relations
• 2016-2020 Member, Committee on Chapters - Membership
• 2015-2019 Member, Commission on Government Relations
• 2013-2017 Member, State Government Relations Committee - Government Relations

Number of publications, books chapters and/or presentations
Publications: 51
Chapters: 11
Presentations: 95

Areas of Interest
The field of Radiology is passing through a time of turbulent change, deeply affected by profound technological advances, legislative fiats and economic uncertainty. ACR is a unique organization that can give requisite leadership to the radiology community in combating these challenges. I have served on board of Michigan Radiology Society for last 12 years. I have been chairman of many state radiology committees and Michigan Radiology PAC. I have served on all the officer positions, including the President. Currently I serve as chairman of Artificial Intelligence Committee. I currently serve on multiple committees of ACR, including Managed Care, Future Trends, Radiology Integrated Care Network, State Government Relations and Committee on Chapters.

I am a passionate advocate of transparency and accountability. My efforts and endeavors in CNC would be to establish a meritocratic, engaged and accountable slate of ACR leadership that can help us navigate through these tumultuous times.

Candidate Information

Major academic, practice and/or community achievements
I am involved in all the aspects of academic neuroradiology, including research, teaching and clinical excellence. I am director of medical student education in neuroradiology and director of JMRI at University of Michigan. I engage in collaborative academic research and perform clinical trials. I was awarded teacher of the year by my residents and am proud to mentor them in various projects.

Head and neck radiology, functional MRI and spine radiology are my academic passions. I have authored 2 books in head neck and neuroradiology and was guest editor for Neuroimaging Clinics. I am a manuscript reviewer for multiple medical journals including Radiology, AIR, AJNR, Radiographics, JMRI and Neuroradiographics. I serve as a faculty for national and international conferences and serve on committees of RSNA, ARRS, ASNR, ASHNR, ASFNR and WNRS.

I am a past president of Michigan Radiological Society and current president of American Association of Radiologists of Indian Origin.

What do you consider the most important issues facing the ACR?
There are profound changes in physician payment model brought forth by MACRA and transition from productivity and RVU oriented payment model to value based payment models, implemented through MIPS and APM. This is a major change that eludes many a radiologists.

Another major challenge is by deep machine learning and the impact of major technological advances in neural networks and artificial intelligence by IBM, google, Microsoft and Nvidia. Quantification and interpretation by machines threaten to replace humans, especially radiologists.

The incoming paradigm of patient focused care would require a cultural change in radiology. Radiologists need to step out from behind the curtain, interact proactively with patients and referring physicians, integrate themselves as part of team and end their virtual isolation.

As an optimist, I believe that ACR is uniquely positioned to provide greater and relevant leadership in this turbulent time for radiology by becoming more responsive.

How should the ACR respond to them?
Online portals and resources of ACR have been invaluable help to deal with MACRA, ACR can further provide a hotline and more accessible radiology registry that can benefit member radiologists. Bringing about the shift in mindset and shifting focus of a radiologists from RVU conveyor belt and adding quantifiable clinical and value component to their service, should be spearheaded by ACR in an organized way.

ACR can start a meaningful dialogue and collaboration with major technology corporate players influencing the process; ensuring that while that the technology may augment and improve efficiency, a radiologist still remains in charge to provide better patient care and safety.

ACR has a big bullhorn, excellent lobbying apparatus and can rightfully claim patient safety as its mission.

ACR can develop the unique tools and applications and collaborate with other societies to emphasize and mandate patient centered experience that will help survival and growth of radiology.

Reason for seeking office
With X-rays, sonography, CT, MRI and PET, we successfully rode the wave of technological innovations to our great benefit. Digitization of images spawned tele radiology, and now, deep machine learning and AI threaten to be another existential, disruptive technology. With ACA and MACRA, the payment model for radiology is undergoing radical changes. We have perception deficit about our real role in patient care. We need to move out of shadows and claim the center stage that we deserve in patient care. We should integrate ourselves more closely with clinical teams and enhance our value and increase our footprint. Patient focused care necessitates a cultural shift of radiologist mindset.

The challenges that we are facing are akin to a perfect storm.

ACR is the most crucial organization to provide leadership in these challenging times. I would like to establish a transparent process that will allow us to elect enlightened and engaged leaders that will be accountable to the membership.

Chapter Activities
• 2015-2016 President, Michigan Radiological Society
• 2014-2015 President Elect, Michigan Radiological Society
• 2013-2014 Vice President, Michigan Radiological Society
• 2012-2013 Secretary, Michigan Radiological Society
• 2011-2015 Chairman, Political Action Committee, Michigan Radiological Society
Syed Furqan H. Zaidi, MD

Areas of Interest
- Imaging 3.0
- Interventional Radiology
- Utilization Management
- Population Health Management
- Patient Centered Radiology
- Outreach to the different stakeholders about value of radiology
- Defining and Enhancing the Role of Radiologist’s role as Consultant
- Value-Added Radiology
- Co-Management
- Strategic Planning
- Leadership Development
- Physician and Employee Engagement

I am currently engaged in obtaining an Executive MBA from the Wharton School of Business in order to expand my skills of leadership and management. I hope to put these additional skills to good use in serving the mission of the ACR and radiologists in advancing the role of radiologists in population health management. My service as Chair of the Economics Committee of the PFCC has been very fulfilling to work with others in the ACR in addressing patient needs and how radiology can serve patients better in the new era of healthcare reform and patient centered healthcare.

Candidate Information

Major academic, practice and/or community achievements
I have served as the President of Radiology Associates of Canton for the last 7 years, a group of 20-24 radiologists. Under my leadership, our group has been a leader in implementing Imaging 3.0 and utilizing radiology analytics. We have worked closely with the Radiology Leadership Institute to host Imaging 3.0™ Symposia and worked towards elevating the role of the radiologist in patient care. As a result, I have been honored to share our ideas at multiple ACR meetings about the role of radiology in value-based care. Based on these strategic goals, in 2015, I lead our group to join Radiology Partners, the largest hospital-based radiology group in the US. I am now Vice-President of Clinical Operations of RadPartners, focusing on defining and capturing value of radiologists in partnership with health systems/insurers. I have lead our work with ACR in the RSCAN initiative with multiple Imaging 3.0 case studies to share our best practices and help bolster radiologists’ value to CMS.

What do you consider the most important issues facing the ACR?
One issue is perception of lack of value of radiologists in the health care delivery system. This perception of lack of value is held by many administrators, referring physicians, and patients. This is fed by the fact that It has been difficult for radiologists to actively engage in healthcare delivery. We often are not recognized as a service line and so it can difficult to take leadership roles in health systems and enhance our consultative role with physicians. While we bring great value to the care continuum, it has been difficult to capture the value. Another issue is lack of robust transparent quality metrics in radiology. This leads to subjective evaluations of quality. And can lead to displacement or marginalization of high quality radiology versus commoditized radiology. It also leads to lack of engagement by other physicians and healthcare leaders who demand that every specialty demonstrate its value. This leads to marginalization of radiologists in value chain discussions.

How should the ACR respond to them?
I believe the ACR should invest in public outreach by partnering with other stakeholders such as vendors and health systems. The ACR can also invest in outreach to health leaders about value of radiology. We can measure the opinion of radiologists value amongst our fellow healthcare professionals, and among the public by annual surveys. I believe we have to set the mark of having a positive perception amongst a majority of both these groups within 5 years. In order to build robust quality metrics, the Neiman HPI needs significant continued investment. This investment will allow in depth research to build the metrics that are based on outcomes. This will allow for building the next generation value-based payment models. These should be tested at the grassroots level and then be exported nationally as they show success.

By improving public perception of value of radiologists and building value-based payment models, the ACR will ensure its survival and future success.

Reason for seeking office
I aim to continue to be engaged with the ACR in its initiatives of Imaging 3.0 and PFCC. By being on the College Nominating Committee, I will get a chance to serve even more. I would be very active in reaching out to others nationally to encourage their work with the ACR. We must expand outreach efforts to external stakeholders as well. And would help redouble efforts to build national quality metrics that can form the foundation for value-based payment models. I have been encouraged by others in the ACR to keep getting more involved, and so I will repay their trust with efforts to increase the strength of the ACR in defending and advancing radiologists’ interests and enhance our role in delivering high value healthcare. In the era of consolidation, we must strategically work with large health systems, insurers, and CMS in helping them recognize the value of radiologists in healthcare.

Chapter Activities
- 2017-2018 Alternate Councilor, Ohio State Radiological Society
- 2016-2017 Alternate Councilor, Ohio State Radiological Society
- 2015-2016 Alternate Councilor, Ohio State Radiological Society
- 2014-2015 Alternate Councilor, Ohio State Radiological Society

Employer Type
Radiology Group Practice

Primary Practice
Interventional Radiologist

Subspecialty
Interventional Radiology

Honors
- Gold Merit Award received for abstract at ACR 2016 Annual Meeting, 2016
- Beth Israel Medical Center Chief Resident, 2006
- RSNA Roentgen Resident/Fellow Research Award, 2006
- RSNA Roentgen Resident/Fellow Research Award, 2005

Number of publications, books chapters and/or presentations
Publications: 3
Chapters: 1
Presentations: 16

ACR Activities
- 2014-2015 Alternate Councilor, Ohio State Radiological Society
- 2017-2018 Alternate Councilor, Ohio State Radiological Society
- 2015-Present  Member, RIC Radiology Integrated Care Network
- 2013-2019 Member, Future Trends Committee- Econ
- 2012 Delegate, RLI Ambassador
- 2012-2020 Vice Chair, Committee On Economics - PFCC
- 2011-2020 Chair, Committee On Economics - PFCC
- 2015-Present Member, RIC Radiology Integrated Care Network
- 2013-2017 Member, Utilization Management Committee
- 2012-2017  Member, Future Trends Committee - Econ
- 2012 Delegate, RLI Ambassador
Mary C. Mahoney, MD, FACR

Preferred Address
2145 Luray Ave Unit 8N
Cincinnati, OH 45206

Contact
mary.mahoney@uc.edu

Education
• 1988-1989 Fellowship, Body Imaging/Interventional Radiology, University of Cincinnati Medical Center, Cincinnati, Ohio
• 1987-1988 Chief Resident, University of Cincinnati Medical Center, Cincinnati, Ohio
• 1985-1988 Residency, Diagnostic Radiology, University of Cincinnati Medical Center, Cincinnati, Ohio
• 1984-1985 Residency, Diagnostic Radiology, Montefiore Hospital, New York, New York
• 1983-1984 Internship, Internal Medicine, The Christ Hospital, Cincinnati, Ohio
• 1983 MD, Alpha Omega Alpha, University of Cincinnati Medical Center, Cincinnati, Ohio
• 1975 B.A. Mathematics, Magna cum Laude, 1979, Brown University, Providence, Rhode Island

Employer
University of Cincinnati

Employer Type
Academic/University-based

Primary Practice  Subspecialty
Diagnostic Radiologist  Breast Imaging

Honors
• University of Cincinnati Honor Society, 2013-present
• Fellow, American College of Radiology, 2010
• American Board of Radiology, Extraordinary Service and Dedication, 2010
• Fellow, Society of Breast Imaging, 2009
• Physicians’ Council for Responsible Reform, 2009
• American Board of Radiology, Extraordinary Service and Dedication, 2008
• Chief Resident, Department of Radiology, University of Cincinnati, 1987-1988
• Alpha Omega Alpha, University of Cincinnati College of Medicine, 1983
• Magna cum Laude, Brown University, 1979

ACR Activities
• 2017-2018 Member, Board of Chancellors
• 2017-2018 Observer, Executive Committee
• 2010-2014 Committee on Appropriateness Criteria
• 2010-2014 Commission on Breast Imaging
• 2010-2014 Member, Committee on Parameters and Standards – Q&S
• 2009-2010 Vice Chair, Committee on Parameters and AC – Breast Imaging
• 2006-2014 Member, Committee on Parameters and AC – Breast Imaging

Number of publications, books chapters and/or presentations
Publications: 112
Presentations: 269

Major academic, practice and/or community achievements
• 2014-Present, RSNA Board of Directors
• 2010-Present, ABR Board of Governors
Ronald V. Huball, MD, FACR

Preferred Address
1642 Queen Esther Dr
Sayre, PA 18840

Contact
rvhubll@gmail.com

Education
• 2001-2002 Fellow Abdominal Imaging, Wake Forest University, Winston-Salem, North Carolina
• 1998-2001 Diagnostic Radiology, Southern Illinois University, Springfield, Illinois
• 1997-1998 Diagnostic Radiology, Northeastern Ohio Universities College of Medicine, Youngstown, Ohio
• 1996-1997 Internal Medicine, University Alabama Birmingham, Montgomery, Alabama

Honors
• Fellow, American College of Radiology, 2015
• Executive Council, CPSNB, 2015
• Board of Directors, Member, Lyric Opera of Kansas City, 2009
• Ambassador, Kaufman Center of Performing Arts, Kansas City, MO, 2007

ACR Activities
• 2010-2011 Member, College Nominating Committee
• 2009-2012 Chair, Human Resources Committee, Commission on General, Small and Rural Practices
• 2009-2013 Member, Committee On Practice Parameters - GSER
• 2009-2012 Member, Commission on General, Small, Emergency and Rural Practice
• 2009-2013 Member, Committee On Practice Parameters - GSR
• 2009-2012 Member, Commission on General, Small and Rural Practice
• 2008-2011 Member, RADPAC Advisory Council
• 2007-2011 Member, Federal Regulatory Committee - Government Relations

Number of publications, books chapters and/or presentations
Presentations: 20

Areas of Interest:
• Abdominal Imaging
• Advocate for comprehensive Breast Imaging
• Cost efficient delivery of Imaging
• Physician Burnout
• Transparent Leadership
• Advocacy for Integrated Comprehensive Medical Practice
• Patient Safety and Advocacy
• Systems Analysis
• Practice Parameters
• Effective and appropriate Imaging Utilization
• MRI Interography
• Efficient Contrast Utilization

Candidate Information

Major academic, practice and/or community achievements
• Medical Student / Resident Preceptor:
  • University of Missouri Kansas City (St. Luke’s Outpatient Imaging Center)
  • University of Kansas (EKHC-Leavenworth)
  • Université de Sherbrooke
• Clinical Chief of Radiology EKHC Topeka 2008-2009
• Clinical Assistant Professor, University of Kansas 2009
• Fellow, Royal College of Physicians and Surgeons 2013
• Council Member, CPSNB 2015-2017
• Clinical Assistant Professor, Département de radiologie diagnostique,
  • Université de Sherbrooke, Faculté de médecine, 2016.

What do you consider the most important issues facing the ACR?
Advances in imaging and AI technology are creating possibilities for radiologists to treat each patient individually. While these are exciting developments in the field, it will have a profound impact on how we train and envision the role of radiologists. I believe finding effective ways to adjust and adapt to these new technological advances will be a major issue the ACR will face.

How should the ACR respond to them?
The ACR should maintain a close relationship with the leading radiology societies. There is great potential for the ACR to work with these groups to help create a unified message to the radiology community.

Creating educational tracks for the Intersociety meeting’s topic at the AMCLC and other representative society meetings can create a unified message to the radiology community. This would help the ACR maintain a unified voice with other radiologic societies.

Implementing and dissemination of the recommendations and conclusions would help members benefit.

Chapter Activities
• 2010-2012 Councilor 1st Term, Kansas Radiological Society
• 2009-2011 President, Kansas Radiological Society
• 2007-2009 Vice President, Kansas Radiological Society
• 2006-2007 Secretary/Treasurer, Kansas Radiological Society
• 2005-2010 Alternate Councilor, Kansas Radiological Society

Reason for seeking office
It’s my strong desire to contribute to the future of radiology. In 15 years of practice, I have worked in environments ranging from small departments to large centers with residents. I’ve practiced in multiple states in the US and have had an international practice. I am actively involved in the radiology community, educating and exchanging ideas from radiologists of different backgrounds.

These experiences allow me to integrate different perspectives and identify practical and unique solutions to challenges ranging from practice cohesiveness to productivity. These experiences allow me to be an effective conduit.

I believe that the Intersociety conference allows a strategic opportunity for radiologists to shape the future of radiology in an era with rapid technological and societal changes. I will put my best efforts and enthusiasm towards the theme of the Conference. My innovation and problem-solving skills makes me well positioned for this position.