A – 2019 REFERENCE COMMITTEE ON COMMISSION ON PROFESSIONAL CONDUCT (CPC); COMMITTEE ON ANESTHESIA (CAN); COMMITTEE ON CLEFT, CRANIOFACIAL AND PEDIATRIC OMS (CCCPOMS); COMMITTEE ON CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT (CCEPD); COMMITTEE ON EDUCATION AND TRAINING (CET); COMMITTEE ON GOVERNMENTAL AFFAIRS (CGA); COMMITTEE ON HEALTHCARE POLICY, CODING AND REIMBURSEMENT (CHPCR); COMMITTEE ON RESEARCH PLANNING AND TECHNOLOGY ASSESSMENT (CRPTA); OMS FACULTY SECTION EXECUTIVE COMMITTEE (FS); EXECUTIVE COMMITTEE, RESIDENT ORGANIZATION OF AAOMS (ROAAOMS); SPECIAL COMMITTEE ON ORAL, HEAD AND NECK ONCOLOGIC AND RECONSTRUCTIVE SURGERY (SCOHNORS); AND SPECIAL COMMITTEE ON PATIENT SAFETY (SCPS)

Lionel Candelaria (NM), V, Chair
Steven Brown (RI), I
Kathy A. Banks (NJ), II
Debra M. Sacco (NC), III
Faisal A Quereshy (OH), IV
Richard Burton (IA), V
Chan M. Park (CA), VI

During its hearing, the Reference Committee received comments on issues and resolutions involving the annual reports of the Commission on Professional Conduct, Committees on Anesthesia, Cleft, Craniofacial and Pediatric OMS, Continuing Education and Professional Development, Education and Training, Governmental Affairs, Healthcare Policy, Coding and Reimbursement, Research Planning and Technology Assessment, OMS Faculty Section Executive Committee, Resident Organization of AAOMS, Special Committee on Oral, Head and Neck Oncologic and Reconstructive Surgery and Special Committee on Patient Safety.

The Reference Committee presents the following recommendations for consideration by the House of Delegates. Delegates are requested to note that prefatory language has been included when appropriate and advisable.

COMMISSION ON PROFESSIONAL CONDUCT (CPC)
The Reference Committee commends the Commission on Professional Conduct for its work in administering the Code of Professional Conduct. The Reference Committee notes that, this year, the CPC reviewed the Code and has recommended changes.
Resolution A-1, Chapter I, Section 20, Subsection J. The Reference Committee reviewed the resolution and agrees that resident members should be expected to abide by those provisions of the Code of Professional Conduct. Reference Committee A recommends for adoption Resolution A-1.

RESOLUTION A-1

RESOLVED, that Chapter I, Section 20, Subsection J. of the AAOMS Bylaws be amended as follows with all conflicting Policies and the Manual of the House of Delegates amended accordingly (strikethrough = deletion; bold underline = addition):

J. Resident Member: Resident members shall be in training in an American Dental Association’s (ADA) Commission on Dental Accreditation (CODA) accredited training program in oral and maxillofacial surgery in the United States or in Canada. Resident members may attend the AAOMS annual meeting with waiver of the general registration fee and may attend clinics free of charge on a space available basis. Resident members shall not be required to pay the membership application fee, shall have until July 1 of the year in which they complete training to apply and, in their last year of residency, shall have their names published as candidates for AAOMS membership. Resident members shall not have the right to hold office and shall not be included in the counts used to determine delegate allocations. Resident members are expected to abide by those provisions of the Code of Professional Conduct in which they are specifically referenced.

FISCAL IMPACT: NONE

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution A-1 and recommends its ADOPTION. (2/3 vote)

Resolution A-2, Sections A.1, G.1 and H.1 and Advisory Opinion A.1.01 of the Code of Professional Conduct. Reference Committee A discussed resolution A-2 and agrees that resident members should be subject to the Code of Professional Conduct and made editorial revisions for consistency throughout the document. Reference Committee A recommends Resolution A-2 (Amend)(RC) in lieu of Resolution A-2.

RESOLUTION A-2 (Amend) (RC)

RESOLVED, that Sections A.1, G.1 and H.1 and Advisory Opinion A.1.01 of the Code of Professional Conduct be amended as follows with all conflicting Policies and the Manual of the House of Delegates amended accordingly (strikethrough = deletion; underline = addition):

A.1 In all dealings with the public and profession, oral and maxillofacial surgeons and resident members training in accredited oral and maxillofacial surgery programs should uphold the honor of their profession by acting in accordance with the letter and the spirit of the Code, as well as all applicable law and regulation.

A.1.01 Respect for Law and Individual Rights: The oral and maxillofacial surgeon and the resident member training in accredited oral and maxillofacial surgery programs should respect the rule of law and the rights of the individual.

G.1 The oral and maxillofacial surgeon and the resident member training in an accredited oral and maxillofacial surgery program should respect the rule of law and the rights of their colleagues.

H.1 Oral and maxillofacial surgeons and resident members training in accredited oral and maxillofacial surgery programs have a duty to be honest and trustworthy in their communications and to treat all parties fairly.

FISCAL IMPACT: NONE
RESOLUTION A-2

RESOLVED, that Sections A.1, G.1 and H.1 and Advisory Opinion A.1.01 of the Code of Professional Conduct be amended as follows with all conflicting Policies and the Manual of the House of Delegates amended accordingly (strikethrough = deletion; bold underline = addition):

A.1 In all dealings with the public and profession, oral and maxillofacial surgeons and resident members training in accredited oral and maxillofacial surgery programs should uphold the honor of their profession by acting in accordance with the letter and the spirit of the Code, as well as all applicable law and regulation.

A.1.01 Respect for Law and Individual Rights: The oral and maxillofacial surgeon and the resident training in accredited oral and maxillofacial surgery programs should respect the rule of law and the rights of the individual.

G.1 The oral and maxillofacial surgeon and the resident training in an accredited oral and maxillofacial surgery program should respect the rule of law and the rights of their colleagues.

H.1 Oral and maxillofacial surgeons and residents training in accredited oral and maxillofacial surgery programs have a duty to be honest and trustworthy in their communications and to treat all parties fairly.

FISCAL IMPACT: NONE

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution A-2 (Amend)(RC) in lieu of Resolution A-2 and recommends its ADOPTION) (2/3 vote)

COMMITTEE ON ANESTHESIA (CAN)
The Reference Committee acknowledges the Committee on Anesthesia (CAN) efforts in addressing issues related to anesthesia, including component society implementation of the office anesthesia evaluations and re-evaluations; planning and evaluation of CAN-sponsored educational programs; and offering anesthesia simulation educational programs at regional locations.

The Reference Committee applauds CAN for its efforts with the BEAM module and the development of a web application to assist the evaluators in performing the office anesthesia evaluations and the submission of the evaluation for membership requirements. The Committee also applauds CAN for the development of the programming for the 2019 Anesthesia Patient Safety Conference and for the 2019 Anesthesia Update that will be held at this year’s AAOMS Annual Meeting.

COMMITTEE ON CLEFT, CRANIOFACIAL & PEDIATRIC OMS (CCCPOMS)
The Reference Committee applauds the Committee on Cleft, Craniofacial, and Pediatric Oral and Maxillofacial Surgery (CCCPOMS) for its assistance with issues pertaining to cleft, craniofacial, and pediatric oral and maxillofacial surgery. The CCCPOMS addressed issues and areas of concern regarding the oral and maxillofacial surgery presence and time allotted within the ACPA.

COMMITTEE ON CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT (CCEPD)
The Committee on Continuing Education and Professional Development is responsible for the development, execution and oversight of the clinical education of all major meetings and educational activities of the association within the guidelines of the American Dental Association Continuing Education Recognition Program (CERP) and the Accreditation Council for Continuing Medical Education (ACCME). CCEPD is also responsible for the review and approval of continuing dental education and continuing medical education credit for educational activities developed by other committees within AAOMS as well as oversight of the joint partnership process. Additionally, CCEPD identifies and develops new methods for delivering continuing education to the AAOMS membership. Reference Committee A commends the CCEPD for its continued efforts in developing a comprehensive continuing dental and medical education mission statement and strategic educational goals for the Association and for all the hard work putting together the Annual Meeting and Dental Implant Conference.
COMMITTEE ON EDUCATION AND TRAINING (CET)
The Committee on Education and Training considers issues related to quality, criteria and standards for acceptable
education and training in OMS residency programs, predoctoral program and related programs. The Reference
Committee commends CET for continually monitoring the OMS Accreditation Standards and for the continued
success of the Matching Program. The committee also applauds CET for all its hard work on the NBME exam and
for its efforts in developing a national curriculum database.

Committee on Governmental Affairs (CGA)
The Reference Committee recognizes the Committee on Governmental Affairs for its essential work with the
Association’s state and federal government affairs activities. Reference Committee A commends CGA for continuing
to monitor and work with the AAOMS Board of Trustees and committees such as the Committee on Healthcare
Policy, Coding and Reimbursement (CHPCR) to set and carry out the Association’s advocacy agenda. The CGA also
fulfills a liaison capacity with component societies regarding state legislative/regulatory issues affecting the specialty
and partners with the OMSPAC Board to encourage fellow/member participation in the Association’s grassroots
advocacy program, the OMS Action Network.

Committee on Healthcare Policy, Coding and Reimbursement (CHPCR)
The Reference Committee commends the Committee on Health Care Policy, Coding and Reimbursement (CHPCR) for
its efforts to continue to monitor key elements with CMS’s Quality Payment Program (QPP) and the sustained
growth, for hosting three webinars over the past year focusing on important changes in the industry, for participating
in the Dental Quality Alliance (DQA) and for continuing to participate in code update/valuation processes via the
AMA Specialty Society Committees and SNODENT.

OMS FACULTY SECTION EXECUTIVE COMMITTEE (FS)
The Reference Committee commends the Faculty Section Executive Committee on its continued discussion
of issues related to OMS predoctoral and postdoctoral education, training and related issues and for its annually
recommended nominees for the Donald B. Osbon Award and the Daniel M. Laskin Predoctoral Educator of the Year
Award.

RESIDENT ORGANIZATION OF AAOMS EXECUTIVE COMMITTEE (ROAAOMS)
The Reference Committee acknowledges the work of the Resident Organization Executive Committee including
ROAAOMS’s discussion of current activities, projects and issues related to residency education and training.

The Reference Committee applauds ROAAOMS for its continual dental school visits and informal learning sessions, its
involvement within the ADEA and ASDA and for its third standalone Resident Educational Program.

SPECIAL COMMITTEE ON ORAL, HEAD AND NECK ONCOLOGIC AND RECONSTRUCTIVE SURGERY (SCOHNORS)
The Reference Committee acknowledges the SCMORS development of educational programs, overseeing the area of
oral cancer, coordinating collaborative studies, and increasing awareness of oral, head and neck cancer.

The committee discussed the importance of changing the name of the SCMORS to better align with its purpose and
duties and to be consistent with the title of the head and neck CODA accredited fellowships and ABOMS CAQ
examination. The committee further discussed the importance of transitioning from a special committee to a
standing committee, noting the increased impact of HPV and head and neck cancers. The committee believes it is
beneficial at this juncture to follow the precedence that was set by the Committee on Cleft, Craniofacial and Pediatric
Oral and Maxillofacial Surgery (CCCPOMS) to omit the mandatory district representation.

Resolution A-3, CHAPTER IX, COMMITTEES AND SECTIONS, Section 10. M. Reference Committee A reviewed
resolution A-3 and made editorial changes to the duties to reflect the comprehensive responsibilities of the
committee. Reference Committee A recommends Resolution A-3 (Amend)(RC) in lieu of Resolution A-3.
RESOLUTION A-3 (Amend) (RC)

RESOLVED, that CHAPTER IX, COMMITTEES AND SECTIONS, Section 10. M. of the Bylaws be amended as follows with all conflicting Policies and the Manual of the House of Delegates amended accordingly (strikethrough = deletion; bold underline = addition):

M. Committee on Oral, Head and Neck Oncologic and Reconstructive Surgery (COHNORS)

Composition: The Committee on Oral, Head and Neck Oncologic and Reconstructive Surgery shall be comprised of six (6) voting fellows and members of whom one shall serve as Chair. Committee members are eligible to complete up to two (2) consecutive three-year terms. The Chair may serve for a total of up to eight (8) years on the Committee. District representation is preferred when possible.

Duties: (1) develop a maxillofacial head and neck oncology database, (2) develop a head and neck national referral network, (3) collaborate with appropriate committees on education and training (Committee on Continuing Education and Professional Development), (4) oversee [oral, head and neck oncologic and reconstructive surgery] the area of oral cancer, and (5) coordinate collaborative studies.

FISCAL IMPACT: NONE

RESOLUTION A-3

RESOLVED, that CHAPTER IX, COMMITTEES AND SECTIONS, Section 10. M. of the Bylaws be amended as follows with all conflicting Policies and the Manual of the House of Delegates amended accordingly (strikethrough = deletion; bold underline = addition):

M. Committee on Oral, Head and Neck Oncologic and Reconstructive Surgery (COHNORS)

Composition: The Committee on Oral, Head and Neck Oncologic and Reconstructive Surgery shall be comprised of six (6) voting fellows and members of whom one shall serve as Chair. Committee members are eligible to complete up to two (2) consecutive three-year terms. The Chair may serve for a total of up to eight (8) years on the Committee. District representation is preferred when possible.

Duties: The duties of the special committee shall be to: (1) develop a maxillofacial head and neck oncology database, (2) develop a head and neck national referral network, (3) collaborate with appropriate committees on education and training (Committee on Continuing Education and Professional Development), (4) oversee the area of oral cancer, and (5) coordinate collaborative studies.

FISCAL IMPACT: NONE

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution A-3 (Amend)(RC) in lieu of Resolution A-3 and recommends its ADOPTION) (2/3 vote)

SPECIAL COMMITTEE ON PATIENT SAFETY (SCPS)
Reference Committee A commends the SCPS for their continued work on developing talking points for media inquiries, their revision to the Culture of Safety Surgical Update and for their second Anesthesia Patient Safety Conference that focused on pediatric anesthesia patient safety.
OTHER BUSINESS

Resolution A-4, Section II. Reference Committee A reviewed resolution A-4 regarding residents’ ability to file a complaint with the AAOMS Commission on Professional Conduct and saw the need to include the resident membership in the guidelines of the Code of Professional Conduct. Reference Committee A recommends adoption of Resolution A-4.

RESOLUTION A-4

RESOLVED, that Section II. Guidelines for Filing a Complaint of a Violation of the AAOMS Code of Professional Conduct of the Code of Professional Conduct be amended as follows with all conflicting Policies and the Manual of the House of Delegates amended accordingly (strikethrough = deletion; bold underline = addition):

Who may file a complaint: Any AAOMS fellow, member, candidate, resident member, state or regional oral and maxillofacial surgery society or state dental or medical board or American Board of Oral and Maxillofacial Surgery (ABOMS) may file a complaint of unprofessional conduct or a violation of the Code; however, a current member of the commission who has a direct personal or financial interest in the matter of complaint should recuse himself or herself from any participation in the matter.

FISCAL IMPACT: NONE

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution A-4 and recommends its ADOPTION) (2/3 vote)

DISTRICT RESOLUTIONS

Resolution A-5. The Reference Committee acknowledges District I and its efforts in addressing issues related to anesthesia, including the mandating of emergency airway management courses, certified assistants and recurring survey of members’ anesthesia activity. The committee believes the preservation of anesthesia is important and recommends adoption of Resolution A-5 (District I)(Amend)(RC) in lieu of Resolution A-5. The RC looks forward to the Board’s report back to the 2020 House of Delegates.

RESOLUTION A-5 (District I) (Amend) (RC)

RESOLVED, that the AAOMS Board consider strengthening the Office Anesthesia Evaluation program by including the following requirements:

Required recurring emergency airway management simulation training
Mandated use of certified anesthesia assistants for moderate and/or deeper sedation/general anesthesia sedations
Recurring survey of member anesthesia activity including number and levels of sedations

And be it so

RESOLVED, that the Board report back to the House on this at its 2020 Annual Meeting.

RESOLUTION A-5 (District I)

RESOLVED, that the AAOMS Board consider strengthening the Office Anesthesia Evaluation program by including the following requirements:

Required recurring emergency airway management simulation training
Mandated use of certified anesthesia assistants for moderate or deeper sedation
Recurring survey of member anesthesia activity including number and levels of sedations

And be it so

RESOLVED, that the Board report back to the House on this at its 2020 Annual Meeting.

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution A-5 (District I) (Amend)(RC) in lieu of Resolution A-5 and recommends its ADOPTION) (majority)
Resolution A-6, Section G, Trustee District Caucuses. Reference Committee A understands that the changing dates of future annual meetings, the committee concurs with District IV and recommends the adoption of Resolution A-6.

RESOLUTION A-6 (District IV)
RESOLVED, that section G. Trustee District Caucuses, be amended as follows with all conflicting Policies and the Manual of the House of Delegates amended accordingly (strikethrough = deletion; bold underline = addition:

SUMMER CAUCUS
(between August 10 - September 1)
Trustee districts shall convene a summer caucus for the purpose of addressing issues before the upcoming House with the following stipulations:
1. The summer caucuses shall be convened preferably during the period August 10 - September 1 to allow receipt of the annual reports by the membership for review and to provide the opportunity for comments to their delegates prior to the pre-annual meeting caucus

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution A-6 (District IV) and recommends its ADOPTION (majority)

On behalf of the Reference Committee, we would like to thank Dr. Indresano for his exceptional leadership this past year and especially thank Rita Indresano for her support, time away from her everyday life and patience this past year. Please join us in a round of applause for Rita and the Indresano family for sharing Tom with us this past year. The specialty has been very fortunate to have you as our leader.

Mr. Speaker and House of Delegates, I would also like to thank my committee members: Steven Brown, Kathy Banks, Debra Sacco, Faisal Quereshy, Richard Burton and Chan Park and AAOMS staff for their time and efforts in completing this report.
During its hearing, the Reference Committee received comments on issues and resolutions involving the annual reports of the Committees on Constitution and Bylaws, Membership, Practice Management and Professional Staff Development, and Public and Professional Communication, Journal of Oral and Maxillofacial Surgery Editorial Board, and on Sections I, II and III of the Board’s annual and supplementary reports, the Strategic Plan, bylaw and policy amendments, resolutions from district caucuses, and the President’s Address.

The Reference Committee presents the following recommendations for consideration by the House of Delegates. Delegates are requested to note that prefatory language has been included when appropriate and advisable.

**COMMITTEE ON CONSTITUTION AND BYLAWS (CCB)**

At the 2018 AAOMS Annual Meeting, the House of Delegates passed Resolution 18-B-14 (RC) (Amend) (District VI) charging the Committee on Constitution and Bylaws with revising the AAOMS Governing Rules and Regulations to include gender-inclusive language. The Committee heard testimony regarding a few editorial changes. Upon review of the Appendix in Resolution B-1, the Committee acknowledges one additional editorial change, as highlighted, below:

AAOMS Bylaws (lines 1588-1591: This right of indemnification shall inure to such person whether or not he the individual is a trustee, officer, committee or commission member, employee or agent at the time such liabilities, costs or expenses are imposed or incurred and, in the event of his the individual’s his death, shall extend to his the person’s legal representative.

Noting this editorial change, Reference Committee B recommends adoption of Resolution B-1:

**RESOLUTION B-1**

RESOLVED, that the AAOMS Governing Rules and Regulations be revised to be gender inclusive, as presented in Appendix A.

**FISCAL IMPACT: NONE**
(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution B-1 and recommends its ADOPTION) (2/3 vote)

COMMITTEE ON MEMBERSHIP (CM)
During 2018-2019, the Committee on Membership reviewed and monitored membership-related information, including dues and assessments, waivers/reductions, candidate applications, requests for life, retired and inactive membership designations, and resignation requests. The Reference Committee commends the committee on its strong work in supporting AAOMS membership.

COMMITTEE ON PRACTICE MANAGEMENT AND PROFESSIONAL STAFF DEVELOPMENT (CPMPSD)
The Committee on Practice Management and Professional Staff Development (CPMPSD) continues to monitor trends in the oral and maxillofacial surgery practice and evaluate continuing education offerings for the entire OMS staff.

The Reference Committee recognizes and applauds the CPMPSD for its dedication, commitment and success in the development, implementation and evaluation of many practice management programs and publications this past year.

COMMITTEE ON PUBLIC AND PROFESSIONAL COMMUNICATION (CPPC)
The Committee on Public and Professional Communications (CPPC) is responsible for oversight of the AAOMS Informational Campaign’s direction, strategies and tactics. The Reference Committee applauds the committee in its use of digital and print communications, public service announcements, consumer survey data, press releases, infographics and patient videos to drive traffic to MyOMS.org as part of the Informational Campaign.

JOURNAL OF ORAL AND MAXILLOFACIAL SURGERY
Reference Committee B commends the JOMS Editorial Board for its great work this past year and looks forward to the addition of a resident section in 2020, in an effort to stimulate more student involvement. The Committee also applauds the editorial board for efforts made in becoming the official journal of the Canadian Association of Oral and Maxillofacial Surgeons.

ADMINISTRATIVE AFFAIRS
AAOMS Strategic Plan, 2018-2020: Reference Committee B reviewed the strategic plan for 2018-2020. It was noted that implementation of the plan is proceeding well and that it will be updated and revised on an ongoing basis with publication on the AAOMS website for review by the membership.

During the Reference Committee Hearings, the Committee heard testimony on the budgetary challenges federal service employees experience due to the timing of the AAOMS Annual Meeting. Respecting the financial considerations and limitations of our federal employees regarding scheduling the national meeting, the Committee discussed the various parameters involved with the selection of meeting dates (i.e. constraints of other meetings, logistics and holidays).

The Committee respectfully recommends inclusion of federal service budgetary constraints in determining future Annual Meeting dates.

Resolution B-2 and B-2 (Amend), Approval of Policy Amendments: Reference Committee B reviewed the AAOMS Policies as amended in accordance with recommendations presented by committees, necessitated by changes proposed to the Bylaws and others to render the policies in compliance with current practice. Resolution B-2 was included in Appendix I to the 2019 Annual Reports, which were available to all members of the House of Delegates with the credentials materials provided. Although no changes were made to Policies in the Board’s Supplementary Report, the resolution wording was revised to include the complete year.
The Reference Committee reviewed Resolutions B-2 and B-2 (Amend) regarding the policies and recommends Resolution B-2 (Amend) in lieu of Resolution B-2.

**RESOLUTION B-2 (Amend)**

RESOLVED, that the amended or added policies as approved by the Board during the period October 2018 – June 2019, as reflected in Appendix I, page AR-112, of the 2019 Annual Reports, Appendix B of the 2019 Supplementary Report of the Board of Trustees, be approved.

**RESOLUTION B-2**

RESOLVED, that the amended or added policies as approved by the Board during the period October 2018 – June 2019 as reflected in Appendix I, page AR-112, of the 2019 Annual Reports, be approved.

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution B-2 (Amend) in lieu of Resolution B-2 and recommends its ADOPTION) (majority)

**FINANCIAL AFFAIRS**

Resolution B-3, AAOMS Informational Campaign Assessment. In order to continue the Informational Campaign at the current level, the Finance and Audit Committee supports continuation of the 2017-2019 assessment for the next three years. Reference Committee B agrees that continuation of the campaign supports the AAOMS mission and commends the CPPC in its work over the past three years. The committee looks forward to seeing the continued efforts and accomplishments and recommends adoption of Resolution B-3:

**RESOLUTION B-3**

RESOLVED, that, effective in 2020, dues-paying members, fellows and candidates be assessed $350 per year, with proportionate reductions for members in discounted dues categories and an exemption given to current, active-duty military members, for each of the three (3) years (2020, 2021, and 2022) for use in supporting the AAOMS Informational Campaign.

(Mr. Speaker, on behalf of the Reference Committee, the Chairman moves Resolution B-3 and recommends its ADOPTION) (2/3 vote)

Resolutions B-4 and B-4a, Approval of 2020 Operational Budget. The Reference Committee reviewed the budgets presented in Resolutions B-4 and B-4a. Resolution B-4 includes expenses for continuation of the AAOMS Informational Campaign Assessment, should Resolution B-3 be approved. As Reference Committee B supports Resolution B-3, the Committee recommends Resolution B-4 in lieu of Resolution B-4a.

**RESOLUTION B-4**

RESOLVED, that a 2020 operational budget with revenues of $22,008,341 and expenses of $21,993,446 as presented on pages AR-83 through AR-97 of the 2019 Annual Reports, be approved.

**RESOLUTION B-4a**

RESOLVED, that a 2020 operational budget with revenues of $20,187,341 and expenses of $20,344,121 as presented on pages AR-83 through AR-97 of the 2019 Annual Reports, be approved.

(Mr. Speaker, on behalf of the Reference Committee, the Chair moves Resolution B-4 in lieu of Resolution B-4a and recommends its ADOPTION) (majority)
DISTRICT RESOLUTIONS

Reference Committee B reviewed a resolution submitted by District VI in support of development of a statement and/or policy regarding e-cigarette and vaping products. Reference Committee B supports this initiative and recognizing its importance, recommends more immediate action. Reference Committee B recommends Resolution B-5 (District VI) (Amend) (RC) in lieu of Resolution B-5 (District VI).

| RESOLUTION B-5 (District VI) (Amend) (RC) |
| RESOLVED, that the AAOMS Board of Trustees, through appropriate committee referral, be directed to develop a statement and/or policy regarding e-cigarette and vaping products and report back to the 2020 House of Delegates. |

| RESOLUTION B-5 (District VI) |
| RESOLVED, that the AAOMS Board of Trustees, through appropriate committee referral, be directed to develop a statement and/or policy regarding e-cigarette and vaping products and report back to the 2020 House of Delegates. |

(Mr. Speaker, on behalf of the Reference Committee, the Chair moves Resolution B-5 (District VI) (Amend) (RC) in lieu of Resolution B-5 (District VI) and recommends its ADOPTION) (majority)

REFERENCE COMMITTEE RESOLUTIONS

Reference Committee B heard testimony regarding the composition of the AAOMS House of Delegates and discussed equitable district representation based on membership numbers versus state by state allocations. The Committee recommends Resolution B-6 (RC).

| RESOLUTION B-6 (RC) |
| RESOLVED, that a special House of Delegates committee with district representation be formed to review the process of delegate allocation and report back to the 2020 House of Delegates. |

(Mr. Speaker, on behalf of the Reference Committee, the Chair moves Resolution B-6 (RC) and recommends its ADOPTION) (majority)

2019 PRESIDENT’S ADDRESS

The Reference Committee expresses gratitude to Dr. A. Thomas Indresano for his leadership, attention to details, many contributions and services to the Association during his year as President. He participated in many meetings at the AAOMS headquarters, ADA headquarters, state and regional societies, as well as allied organizations across the country and internationally, to support and advance the goals, priorities and mission of the specialty of oral and maxillofacial surgery. We commend him for his focus on enhancing the quality of patient care and patient safety. Under his leadership, the Office Anesthesia Evaluation Manual was updated, and a new web application was developed. AAOMS remained vigilant in educating our members about opioid issues and abuse. And the OMS Quality Outcomes Registry (OMSQOR) launched as the first data registry in all of dentistry.

As representatives of all fellows and members of the specialty, we, the members of the House, thank Mrs. Rita Indresano for her support, patience and time away from her everyday life this past year. Thank you, Rita. Please join us in a round of applause for Rita and the Indresano family for sharing Tom with us this past year. The specialty has been very fortunate to have you as our leader and spokesperson, and we look forward to having the benefit of your advice, expertise and counsel for many years to come.

Mr. Speaker and House of Delegates, I would also like to thank my committee members: Cynthia E. Winne, Michael Kleiman, Larry Stigall, MaryLou Sabino, Monte K. Zysset and Elizabeth A. Kutcipal, and AAOMS staff for their time and efforts in completing this report.