Mr. Speaker, members and alternates of the House of Delegates, past presidents, Board of Trustees, friends, and guests, I am honored and humbled to be in a position to serve as president of this remarkable organization. In the year to come, I pledge to serve our specialty in a manner that will make those who have influenced and encouraged me over the years proud. Whatever I have accomplished in life is but a reflection of what I have learned from watching the way in which they conduct business and live their lives.

I would like to use my time this morning to share a few thoughts about why I believe AAOMS’s culture and, most of all, the “people” and “process” that comprise this organization are our greatest assets. The combined strength of these three elements – culture, people and process – will enable us to meet and transcend the challenges confronting the specialty of oral and maxillofacial surgery and, indeed, the future of our nation’s healthcare system.

As healthcare professionals, we live in uncertain times, fraught with confusion and profound change. In fact, I could use all my allotted time this morning just listing these challenges. However, after three days of reference committee meetings, caucuses, House sessions and hallway discussions, I doubt any of us would learn anything new. Despite these difficulties, however, I remain optimistic about the future of our specialty. I am not naïve or in denial about the issues that face us. Rather, I am confident because I know the quality of the individuals who serve on the AAOMS Board of Trustees, House of Delegates, committees and AAOMS staff.

When I think of our Board of Trustees, the first word that comes to mind is “Nobility.” Nobility is not innate; it is learned and honed by life experiences – both good and bad. Nobility comes from an internal desire to be a better person today than you were yesterday. That attitude and desire for continuous self-improvement and the personal pride that comes with the effort is referred to as “kaizen” in Japanese culture. It’s a characteristic that describes the members of your Board and is an important reason why we are well-equipped to address whatever issues come our way.

When I think about the members of our committees and the AAOMS staff that supports them, I am reminded of the words of Viktor Frankl. When Sigmund Freud suggested that the primary desire of man is to pursue pleasure, Frankl countered that the primary desire of every person is to experience a deep sense of meaning. I believe that AAOMS offers real life evidence of Frankl’s theory. Frankl believed there were three keys to living a life that had meaning:

1. **Work on projects that demand your attention.** Simply put, engage in something important. The AAOMS is in the business of developing projects and programs that make a difference in the practices of its members. This is the core of your association’s primary agenda 365 days a year.

2. **Surround yourself with people who you respect and who motivate you.** Consider the people in this room and those attending this meeting. These people define the AAOMS culture.
3. Have a redemptive perspective on setbacks. To work in healthcare today is to invite challenges and setbacks. We must redeem these difficulties by perceiving them in ways that better our lives. While we as OMSs recognize that there are many things we cannot control, the resilience and determination honed by our rigorous training and work ethic have equipped us to transcend discouragement and meet the consequences head-on.

The quality of our membership also encourages my optimism. Over the last two decades, the AAOMS membership has changed from one that was very homogenous, to one with great diversity. This diverse group of individuals has changed the face of oral and maxillofacial surgery and reinvigorated our relationship with other specialties and our patients.

Clearly, AAOMS cannot solve the problems of every fellow and member. In some instances, the most effective solution may be achieved at the state or local level. But when it comes to broad-based issues that threaten us as individuals and as a specialty, AAOMS is and will continue to be our best national resource.

In order to fully realize our potential as a specialty, we must employ wise and effective strategies. Such strategies may include:

1) Collecting data;
2) Telling our story;
3) Building liaisons; and
4) Constantly re-examining our efforts.

The Board, in its wisdom, authorized the creation of a registry to collect patient clinical data related to quality reporting and outcomes. Having a mechanism to collect and control this treasure trove of information will help us establish credibility. But data are not enough. The essence of persuasion is the ability to take and package our information in a compelling way. As Daniel Pink notes in his book “A Whole New Mind,” our society is moving beyond the age of information and into the conceptual age, where the detail-oriented left brain approach of appealing to the rational and logical (which is more or less who most of us are) is not as effective as the right brain’s big picture approach.

Since perceptions are based on the information available, choices and behavior, no matter how crazy or counterproductive, have a logical basis in the minds of the chooser. In the absence of good information, people accept assumptions as truth. Therefore, it is critical that we as a specialty collect good information to help make our case.

This leads me to the next, and perhaps most important strategy, “Telling our Story.” If we want to distinguish ourselves as the recognized leaders in surgery of the face, mouth and jaws, it isn’t enough to be good at what we do. We need more than a lot of data and a good marketing strategy. We must tell a compelling story. People understand stories. A good story has a lasting impact that can change opinion and belief. More importantly, if we don’t tell our story, others will substitute their version in a way that may subvert our truth.

I believe that when we tell our story, we must do it in a way that focuses on Value – the Value of our unique and comprehensive training, the Value of the services we provide, and the Value in the way we provide those services.

How important is a compelling story? Our Third Molar Clinical Trials may be an example of a project where we did not tell as compelling a story as we might have. As you recall, these well-designed studies generated copious, well-documented papers that were published in well-respected journals. Yet I am not sure we were able to package and disseminate this compelling information to the public as well as we might have.

An issue where we would do well to tell our story is the “blurring of the lines” (actually, in many cases crossing well over the lines) of who is best qualified to perform important surgical procedures. The areas of particular concern to us are those in which OMSs are and have long been the best in the world. These include the surgical placement of implants, management of third molars, and administration of sedation and general anesthesia. These are also the three procedures most commonly performed by most of our members.

The reasons for this blurring of the lines are many. Economics surely play a role when, for example, a specialty other than oral and maxillofacial surgery claims a surgical procedure even though their training and surgical experience are significantly less than our own. Nowhere was this more in evidence than during the recent CODA vote to approve a change in training standards for Prosthodontics, after several previous failed attempts to do so.

It is also true that our influence in some dental schools has been marginalized and, as a result, many students are less aware of what OMSs do, how well they do it, and the potential consequences when someone of lesser training and expertise ventures into the surgical arena. We need to boldly tell our story if we are to combat these destructive forces to patient care.
We share common interests and concerns with other organizations. It is true - there is power in numbers. Accordingly, we should actively seek out and partner with other healthcare organizations when it advances our specialty’s credibility and enhances our stature.

We can see the positive outcomes of this strategy in our recent collaborations with the British Association of Oral and Maxillofacial Surgeons to revamp the National Institute for Health and Care Excellence Guidelines on the Management of Third Molar Teeth. We have seen similar success in our efforts to reach out to other dental specialty organizations in support of our statements on Third Molar Management.

I recently had the pleasure of attending a lecture by noted face transplant surgeon Bernard Devauchelle titled “The Analytic Re-education of a Surgeon.” The Professor emphasized the importance of paying attention to outcomes. During his presentation, Professor Devauchelle said “Whether we make human tissue is not so much the question as can we make it work?” In our world, this translates into, “it is not so much whether we can complete a project, but whether that project achieves its purpose that matters most.” To ensure we are on course to achieving our goals, we must apply Dr. Deuvauchelle’s advice and remain vigilant. The ability to use a dream to create a process is what separates exceptional people from mere dreamers. As Mark Twain once said, “It ain’t what you don’t know that gets you into trouble. It’s what you know for sure that just ain’t so.”

At the risk of quoting too many dead people, permit me to refer to the words of Zhuge Liang who offered this timeless advice, “The wise win before they fight, while the ignorant fight to win.” I pledge to you that no matter how much this Board is occupied with ongoing projects, we will never lose sight of this advice.

Optimism and process aside, I would like to mention a few other priorities. I believe it is important for us to support leadership development; I believe is it important to support, in whatever form necessary, research that makes a difference in how we care for our patients; I believe we should develop and disseminate Treatment Guidelines for key procedures; I believe we should fine tune our important public information program; I believe we should be a “big tent” organization in every way possible; I believe we should do everything we can to distinguish ourselves from others in the Value of the care we provide; and I believe we must do all the above with an eye toward fiscal responsibility.

Success in achieving our priorities will not be accidental; it will result from a habitual devotion to improvement, the kind that is routine in this organization.

I leave you with these words from James Collins regarding the benefits of giving a good effort:

“You might gain that rare tranquility that comes from knowing that you’ve had a hand in creating something of intrinsic excellence that makes a contribution. Indeed, you might even gain that deepest of all satisfactions: knowing that your short time here on this earth has been well spent, and that it mattered.”

I thank you for your time and attention and for this remarkable opportunity to make a difference.