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thereof). I have their assurance that, when the final expense budget is completed, this figure will provide us with the financial stability we need. Of course, I intend to work with Bob Napolitano on this budget, in the weeks to come.

#### Speaker Handouts:

It is the policy of AAOS to pay \$.50 per registrant per presentation to speakers who supply their own handouts. However, Kay Boles strongly recommends that we try to acquire all presentations in advance and reproduce them for distribution to all registrants. I assume you and Dr. Dawson would firmly approve this objective, but will await a final judgment, pending conversation between the two of you.

### Distribution of Revenues:

I believe it is equitable that distribution of any net revenue which may be acquired as a result of this program, should be based upon the ratio of neurosurgeon and orthopaedist attendance. We have tentatively agreed that this ratio should be based upon AAOS members vs. AANS/CNS members. Any revenues acquired from non-member registration should be divided on the basis of this ratio. As you are likely aware, this arrangement was utilized in connection with the Intradiscal Therapy Program series.

# Publicity and Announcements:

It is agreed that all publicity and announcements will name Dr. Dawson and yourself as Co-Chairmen. Sponsors will be identified as the AAOS Spine Committee and the Joint Spine Section of the AANS/CNS. The logos of AANS, CNS and AAOS will appear on preregistration materials, etc..

#### Administration and Staff Involvement:

Although I had hoped to involve AANS staff in the administration of this program, our obligations connected with the CNS and WFNS annual meetings (in addition to the AANS annual meeting) disallow me from doing so. Therefore, we will rely on day to day administration by the AAOS staff. As this sort of program is routinely handled by the AAOS staff (upwards of 45 such programs per year), their administrative costs are quite predictable, and related budget figures should be very accurate. Obviously, the neurosurgical organizations will share these costs on the same ratio as revenue is shared. It is planned that AANS will handle as much of the printing as possible in its printing facility, in order to keep the cost of printing down. It is planned as well that AANS will share on-site responsibilities, in order to train our key people in the handling of targeted education programs. Similarly, our key staff will audit the pre-meeting registration of the program, in order to upgrade their knowledge of such matters. These latter two functions are undertaken with the complete blessings of the AAOS



## THE AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS

(FOUNDED AS THE HARVEY CUSHING SOCIETY IN 1931)
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October 17, 1984

Russell W. Hardy, M.D. Cleveland Clinic 9500 Euclid Avenue Cleveland, Ohio 44106

Dear Dr. Hardy:

It is certainly good to know that plans are receiving well for the joint program on acute spinal injury -- particularly that a satisfactory balance has been attained in the eyes of your committee.

Today I met with Bob Napolitano (AAOS Comptroller) and Kay Boles (AAOS Director of Education) to set the basic fiscal and logistical framework for the support of this meeting. I would like to review for you several policies which were agreed upon.

## Reimbursement of Faculty:

As we did with the Intradiscal Therapy Program, Orthopaedics and Neurosurgery will independently handle the reimbursement of their respective faculties. The reason for this is that AAOS reimbursement policies vary markedly from ours.

#### Registration:

It is planned that there will be both member and non-member registration categories. Member registration categories will be limited to members of AANS, CNS, and AAOS. All other individuals will be considered non-members. Unless there are strong feelings to the contrary, we do not believe there should be any other category of registration -- specifically, no reduced rate for residents, due to the specific objective of this program to provide maximum exposure to practicing neurosurgeons. Relying on the long established experience of AAOS in offering programs of this nature, and providing budgets which ensure that they remain self-supporting, I feel we should accept their recommendation to set the registration fee at \$440.00 (representing \$110.00 for each day, or fraction

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One question came up at this meeting which causes me to ask you for a specific confirmation. This has to do with honararia which may be paid to speakers. It is the AAOS policy to not pay honoraria to any orthopaedists; that is, to limit the payment of honoraria to non-members of their specialty (such as radiologists, etc.). As this is in harmony with AAOS policies (and, I believe, CNS policies as well), I assume we will take the same position. However, considering the length of the meeting, and the fact that speakers are likely to be asked to participate in both meetings, I wonder if you have any reserve about this policy?

When you have had an opportunity to review the foregoing, I would very much appreicate your comments. I have copied this letter to both Drs. Goldring and Ratcheson, to ensure that the leadership of our two participating organizations remains up-to-date on current developments. In addition, I will place this letter before the AANS Board when it meets in December, and will pass on to you any comments which it generates. I suspect that Drs. Goldring and Ratcheson will discuss this program in general, prior to the AANS Board Meeting.

May I have your thoughts on these matters?

Yours very truly,

Carl H. Hauber, CAE Executive Director

CHH/sm

cc: Sidney Goldring, M.D.
Robert A Ratcheson, M.D.

Care H. Hanker (15)