

Meet Your AAAAI Board of Directors Candidates



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IMPACT Editorial Team

Executive Vice President

Thomas A. Fleisher, MD, FAAAAI

Executive Director

Rebecca Brandt, CAE

Publication Manager

April Presnell

For address changes, contact the AAAAI,
555 E. Wells Street, Suite 1100,
Milwaukee, WI 53202-3823
telephone (414) 272-6071
fax (414) 272-6070
email info@aaaai.org

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VOTE



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Dear Colleagues,

Toward the end of every year, the AAAAI Board of Directors election is held, where eligible AAAAI members cast their votes to select the newest Board representatives. The AAAAI is proud of this tradition to hold an annual democratic election to elect future leaders to our Board. The Board members who are elected are then officially installed during the AAAAI Annual Meeting in order to begin their terms. Specifically, three new At-Large Directors and a Secretary-Treasurer are elected during each Board

election. The individual who is elected Secretary-Treasurer ascends to serve as AAAAI President—once they serve a year as Secretary-Treasurer, they become President-Elect for a year, and then President—so that position is particularly noteworthy.

Learn About the Candidates Running in the 2022 Board Election

You can meet the slate of candidates running in the 2022 Board of Directors election by heading to [page 6](#). Our Secretary-Treasurer candidates were also asked to respond to a few strategic questions, including what their presidential initiatives would be and why they want to serve as AAAAI President. We include all of this coverage in *Impact* so that every member, even if they are not eligible to vote, can feel informed about who is running in the election. Eligible voting members are also able to learn about the candidates by logging into the official voting center at aaaai.org/vote.

Who Is Eligible to Vote and Why Every Eligible Voter Should Make Their Voice Heard

As described in the [AAAAI Bylaws](#), you must be a current full member or Fellow to vote in the Board election. Those with allied health or emeritus status are not eligible.

It is both a privilege and a responsibility to vote in the AAAAI Board election, which is why **I urge every eligible voting member to take this opportunity to make their voice heard**. Remember that the candidates you elect will be working on *your* behalf to lead the AAAAI into the future. Casting your vote at aaaai.org/vote is simple and will take less than 5 minutes. Voting opens December 7, 2021, and closes January 4, 2022, at 5:00 pm CT. An easy option to return your vote by mail or fax, if that is your preferred method of voting, is also explained on [page 12](#).

Understand How the Nomination Process Works

It is important for AAAAI members to be aware of how the candidate slate comes together for the Board election. The AAAAI employs a unified nomination process across the constituency groups responsible for selecting nominees for the At-Large Director positions. Having a unified process enables us to cast a wide net in the search and recruitment of the most qualified candidates, and ultimately allows us to strive to reflect the diversity of our members and the patients we serve.

There are four primary constituencies that are responsible for developing a list of potential candidates for At-Large Director positions: the Federation of Regional, State and Local Allergy, Asthma & Immunology Societies (RSLA AIS) Assembly, the Program Directors

Assembly (PDA), the Interest Section Coordinating Committee (ISCC), and the Nominating Committee. The overall purpose of the Nominating Committee is to work with each of the three other groups to help identify eligible candidates, develop an independent list of potential candidates and to coordinate the nomination process with the candidates from all constituency groups. Each year, the Nominating Committee is also responsible for recommending to the Board of Directors two candidates for nomination as the Secretary-Treasurer. As noted in the Bylaws, "Only a Fellow who has previously served for one term as an At-Large Director shall be entitled to stand for election for, and serve as, Secretary-Treasurer."

To better understand how this overall nomination process works, please turn to [page 11](#) where the process is drilled down and explained in a simple way.

Why Pursue Leadership Roles?

I can vividly recall how excited I was to first be elected to serve as an At-Large Director, and then more recently, when I was elected Secretary-Treasurer and knew I would have the honor of serving as AAAAI President. Of course, these are not the only leadership positions available to pursue. At some point in time, you might consider serving as a committee chair or vice chair, or be asked to help with a work group report, or mentor someone participating in the Leadership Institute Mentorship Program. These are all examples of leadership roles.

When the AAAAI worked with a consultant to conduct a strategic member survey in 2020, we included a question asking members if they were likely to pursue a leadership position within the AAAAI in the next 3 years, followed by an open-ended question asking them to tell us a little more about why they were making this choice. A variety of answers for why members were likely to pursue leadership positions emerged and included:

- wanting to give back, contribute or make a difference
- the desire to be involved
- a strong positive feeling about the organization
- wanting to offer a valuable or unique perspective
- expanding their professional network
- the desire to advocate on behalf of the specialty

Many of these reasons were ones that also compelled me to pursue leadership roles in the AAAAI, but is there anything missing you would add? Please reach out to me at president@aaaai.org if you have any additional thoughts as we continue to attempt to understand both the sources of motivation and potential barriers of serving in leadership roles.

Finally, as we quickly come to the end of 2021, I want to wish each of you a healthy and peaceful holiday season with your family and loved ones. Thank you for providing optimal care to your patients over another difficult year navigating the COVID-19 pandemic.

Sincerely,

Giselle S. Mosnaim, MD, MS, FAAAAI
AAAAI President
president@aaaai.org

American Academy of Allergy, Asthma & Immunology

An allergist / immunologist membership organization dedicated to advancing the knowledge and practice of allergy, asthma and immunology for optimal patient care.



What's New at aaaai.org

Share Our New Patient Videos

We have added [three new videos to the Video Library that we encourage you to share with your patients to educate them on A/I topics](#). You will find videos from Mitchell H. Grayson, MD, FAAAAI, that explain pollen and mold spores, as well as allergic rhinitis. You will also find one from Thomas B. Casale, MD, FAAAAI, that covers anti IL5 and indicators for use.

New Conditions Added to the Allergy, Asthma & Immunology Patient Glossary

We have added some new conditions to our [Allergy, Asthma & Immunology Glossary](#) including: Acute Generalized Exanthematous Pustulosis (AGEP), Drug Induced Hypersensitivity Syndrome (DIHS), Drug Reaction with Eosinophilia and Systemic Symptoms (DRESS), Drug Induced Lively Injury (DILI), Fixed Drug Eruption (FDE), Symmetrical Drug-Related Intertiginous and Flexural Exanthema (SDRIFE), and Severe Cutaneous Adverse Reaction (SCAR).

Search the New Coding Question Archive

AAAAI members now have access to a new coding tool. Visit [this page](#) to search commonly asked coding questions submitted by our members to find the help you need. Questions and answers are updated monthly. If you have a coding question that has not been answered, email it to coding@aaaai.org.

Physician Wellness Toolkit Updates

The AAAAI recognizes that physician wellness and burnout prevention are critical for providing the best care for our patients and allowing physicians to thrive in practice. This [wellness toolkit](#) has new resources on a variety of topics.

Access More Resources in the Telemedicine Toolkit

We have added resources to our [telemedicine section](#) for the practicing allergist/immunologist. So much has changed since COVID-19 and we are helping you stay updated on the latest changes.

Featured CME Opportunities

Access 2021 Virtual Practice Management Workshop Recordings

This year's AAAAI Virtual Practice Management Workshop was packed with educational content for new A/I professionals and veterans alike. If you didn't attend our live event, you can still [register for the recordings, which cover a variety of areas related to managing an allergy practice](#).

Provide Optimal Care for PIDD Patients

"[Providing Enhanced Medical Support for Patients with Primary Immunodeficiency Disorders \(PIDD\)](#)" helps address knowledge gaps in PIDD. The program consists of four online modules that will provide you with information about best practices for diagnosing, treating and communicating with patients, and offers MOC part IV credit.

Demystifying IgE-Mediated Cow's Milk Allergy: Diagnosis and Management: 2021 Update

Diagnosis and management of cow's milk allergy can be challenging and impact quality of life. This [online module](#) is designed to help you diagnose and manage cow's milk allergy in your practice.

Oral Immunotherapy (OIT) for Treatment of Food Allergy: 2021 Update

[This interactive course](#) provides information about the different types of food immunotherapy. Examine the current evidence supporting OIT's use, and the importance of shared decision making with patients and families to identify which patients might benefit most from this therapy.

Meet the Candidates For the 2022 AAAAI Board of Directors

AAAAI Fellows (those who have achieved the FAAAAI credential) and full members are responsible for shaping the future of the AAAAI and the specialty by voting to elect AAAAI leaders. Voting opens for the 2022 AAAAI Board of Directors Election on December 7, 2021, and closes January 4, 2022, at 5:00 pm CT.

In addition to the At-Large Director positions, Fellows and full members will also vote for the next Secretary-Treasurer. This position ascends to the presidency. Because of the importance of this role, these candidates had the opportunity to answer strategic questions related to the AAAAI and the A/I specialty, as well as what their presidential initiatives would be and why they want to be AAAAI President. Turn to [page 9](#) to read their responses.

How do I cast my vote?

Online: The online voting center is the quickest and most confidential way to cast your vote. If you're a Fellow or full member, simply visit aaaai.org/vote and log in with your member credentials. You'll have access to in-depth biographic information for the candidates including videos. Each candidate was offered the opportunity to record a short video telling you more about themselves and their vision for the AAAAI.

Printable Ballot: For those who prefer to vote by mail or fax, a ballot that can be printed and instructions for returning it to the AAAAI executive office are included on [page 12](#).

Continue reading for the slate of candidates and their official vision statements.



2022-2023 Secretary-Treasurer

Christopher C. Randolph, MD, FAAAAI



*CEO and Sole Proprietor, Center for Allergy, Asthma and Immunology
Clinical Professor in Pediatrics, Allergy and Immunology, Yale*

In the context of four pandemics—1) COVID-19, 2) racial inequity, 3) misinformation, and most importantly, 4) mental and physical health and fitness—I, as a synergy of academic and practice communities, envision shaping the AAAAI into a more nimble organization. This could entail an AAAAI division devoted to preparedness or prophylaxis that will unify and coordinate programming, research funding and task force recruitment for our current and evolving crises including pandemics, but particularly that of mental and physical health fitness. This organization would convene an expert team in response to current and evolving pandemics or crises to generate suggestions or algorithms for A/I practice, as with the provision for pulmonary function and adaptation with telemedicine for the COVID-19 pandemic.

An interdisciplinary cooperative approach with public health and specialty academies including mental health will be necessary to address the present and future crises and pandemics from a population standpoint. My prescient predecessors have already provided a structure for response to the pandemics of COVID-19 and racial inequity. My vision for the AAAAI would be to particularly address the fitness pandemic.

Paul V. Williams, MD, FAAAAI



Emeritus Director, Northwest Asthma & Allergy Center

The delivery of optimal allergy care depends on three foundations: research, training, and practice. These foundations do not operate independently, but depend on each other. For too long we have made distinctions between academics and practitioners resulting in a division that is unnecessary and occasionally counter-productive and seems to be emphasized in our two societies. I believe the AAAAI has the potential to be the best home for all allergists, from basic bench researchers to practitioners. As President, I would continue to emphasize advocacy for research funding, retain a home for division heads and program directors, and offer strong support for the practicing allergists, our largest constituency. My goals would be to use the communications team to develop methods to promote the importance of allergists to the public, primary care, payers, research funders and academic departments; establish communications with CMS and private insurers to proactively define appropriate allergy services; strengthen the interactions between academia and practice by promoting the Clinical Residency Curriculum in community practices; and continue strong practitioner support and education.

2022-2026 At-Large Director

Priya J. Bansal, MD, FAAAAI



*Founder, Asthma and Allergy Wellness Center
Faculty, Northwestern Feinberg School of Medicine*

I am honored to be a nominee for the At-Large Director. COVID-19 has strained our specialty in many ways. However, beyond these demands, I have seen first-hand the innovation and perseverance of my colleagues with rapid adoption of telemedicine platforms, increased social media advocacy, and creative clinic modifications to accommodate procedures such as spirometry in our clinics. As At-Large Director, I will passionately forward initiatives in practice management, advocacy for our specialty, advances in technology, and further awareness of healthcare disparity issues for both my private practice and academic colleagues. I firmly believe that FIT and NAIA members are the pipeline for the future of our specialty. I would like to continue to promote that connection and enhance engagement with the AAAAI. I also plan to facilitate work on communication initiatives to rapidly notify members of progress and advocacy in our field, as well as resource development. Additionally, I would like to forward expansion of public communication in order for patients to learn all that an allergist and immunologist has to offer.

Anil Nanda, MD, FAAAAI



Physician, Asthma and Allergy Center

I am honored to be nominated for consideration for the position of AAAAI At-Large Director. As a solo general allergist and immunologist in community-based private practice, I have seen the evolution of healthcare from the “ground level” perspective, with multiple challenges existing in health care today, particularly for our specialty. The AAAAI is already an outstanding organization, and I wanted to become more involved in the AAAAI, leading me to complete the AAAAI Leadership Institute course. Through the course and involvement with multiple committees, I learned so much about the organization and worked with tremendous staff and colleagues. Promoting wellness of our entire membership and patients will further improve advocacy for our specialty. As allergists and immunologists, we have incredible personal and professional diversity. My plan is to utilize that diversity to further enhance the AAAAI at every stage, starting from membership and committee levels. I plan on encouraging additional involvement and facilitating innovative leadership, thus promoting the generation of new ideas from all allergists and immunologists, including those of us in community private practice.

2022-2026 At-Large Director

Anna H. Nowak-Wegrzyn, MD, PhD, FAAAAI



ANNA NOWAK-WEGRZYN

Professor of Pediatrics, NYU Grossman School of Medicine

My career goal is to improve the health of patients with allergic and immunologic diseases through clinical care, research and education. Involvement in AAAAAI is the perfect opportunity to fulfill this goal. Since becoming a fellow-in-training, I engaged in AAAAAI committees, work groups and the Leadership Institute. Election to the Board of Directors would allow me to further serve our specialty.

My vision is to advance our specialty through enhanced involvement with all of our stakeholders, including those in practice as well in academics, our patients and the public in general. I am especially focused on engaging early career allergists, fostering leadership skills and finding novel approaches to interactions with international A/I societies. These challenges will continue to grow in this rapidly changing landscape of health care. Serving on the AAAAAI Board of Directors is therefore an opportunity to advance the agenda of excellence, innovation, education, as well as diversity for our A/I community and for our patients. Being able to contribute to shaping the future of our specialty would be an enormous privilege.

Sharmilee M. Nyenhuis, MD, FAAAAI



S. Nyenhuis

*Associate Professor of Medicine, University of Illinois at Chicago
Section Chief of JBVA Allergy, Jesse Brown VA Medical Center*

The AAAAAI has meant more to me than just my professional home—it is a place I can give back and better serve our profession and the patients we care for. I have seen first-hand the impact that this professional organization has had at multiple levels. From helping change school-based asthma policies, contributing to educational successes through online and in-person CME content, and providing crucial funding to support early-stage investigators. My personal and professional experiences working with diverse populations and commitment to service makes me an ideal candidate for the Board of Directors. Now is the time for me to share my skills and experiences to make the AAAAAI a stronger organization. If elected to the Board, I would like to expand education and research/training opportunities for diverse populations (e.g., urban, rural, economically disadvantaged, minority) through strategic planning efforts and supporting initiatives aligned with these goals. I am ready to give back and help shape the future of the organization that has had an immense impact on my life in so many ways.

2022-2026 At-Large Director

Cem Akin, MD, PhD, FAAAAI



Cem Akin

Professor, University of Michigan

A meaningful contribution to the Board of Directors requires understanding the three pillars of any academic medical specialty as patient care, research and education. I have been fortunate enough to have significant experience in all of these areas, and I would be honored to bring this experience to the Board, if elected. There are many opportunities and challenges for the allergy specialty in the next decade. I would like to be involved in promoting ways to emphasize the role of the academic institution, not as competitors to smaller private practices, but as hubs of research, innovation and teaching, through partnering with other medical subspecialty organizations. We have to attract the best and the brightest to our specialty. This is only possible through increased visibility of allergy/immunology in medical school curricula and internal medicine, and pediatric departmental educational programs. We should emphasize and explain the exciting development of targeted therapies and biologics to our colleagues and students, while partnering with industry to test and solve the problems related to drug allergy and immunologic reactions presented by this expanding era of new therapeutics.

Nick L. Rider, DO, FAAAAI



Nick L. Rider

Associate Professor of Pediatrics, Associate Chief Medical Information Officer, Baylor College of Medicine/Texas Children's Hospital

Over the next 20 years, healthcare and allergy/immunology practice will require massive improvements in systems of care delivery and a shift-of-focus towards care quality. I want to help pervasively enable true learning healthcare system (LHS) development to facilitate this change. An LHS requires intentional structuring of data to make it available for inference and decision support throughout the electronic health record. As a member of the AAAAAI Board, my principal goal will be to help shape changes which foster the realization of value-based care and reproducible research methodologies via initiatives that drive practical data use. I will look to extend AAAAAI QCDR Registry functionality to enable specialty-specific quality improvement projects, research initiatives and publication of outcomes to underscore importance of our specialty in a data-driven manner. Additionally, I want to support educational programming and funding opportunities that facilitate digital health innovations within allergy/immunology. I will look to initiate and advocate for opportunities along these lines as a Board member. Thank you for considering my application.

Secretary-Treasurer Candidates' Responses to Questions

Beyond your involvement with the AAAAI, list below what you consider to be the five major contributions you have made to the field of allergy/immunology involving clinical care, medical education, research, and/or service.

Dr. Randolph:

1. Serving as CEO for the Center for Allergy, Asthma and Immunology full time since 1986, with educational affiliation with Yale, Waterbury and Chief Allergy Clinic at St. Mary's Community Hospitals with an internal medicine residency and allergy fellow rotation in office from 1986-2020.
2. Serving as Clinical Professor in Pediatrics, Allergy and Immunology at Yale and training allergy/immunology fellows since 1986.
3. Society and committee involvement, including serving as Treasurer and President of the New England Allergy Society and Connecticut Allergy Society, as well as serving as a Superdelegate for the House of Delegates, a Board member, and Chair of the Sports Committee for the ACAAI.
4. Annual abstracts and seminar presentations at national meetings particularly on exercise-induced bronchospasm (EIB).
5. Serving as a member of the Joint Task Force on Practice Parameters from 2004-2018 and one of the chief editors of the EIB practice parameters.



Dr. Williams:

Clinical: 30 years of clinical practice in the premier allergy group in the Pacific Northwest, a practice that included two former AAAAI Presidents and one ACAAI President. Clinical instruction of pediatric residents, allergy fellows and a few years on the Allergy Fellowship Committee for the University of Washington, and Director of the Allergy Elective for the University of Washington Department of Pediatrics. Ongoing work with nurses in several state school districts on allergy and asthma protocols. AMA representative to the National Asthma Education and Prevention Committee (NAEPP) from 1993-2016, and member of the NAEPP School Asthma Subcommittee, serving as author and consultant for several publications for this subcommittee.

Research: Principal investigator for the Seattle site for the NHLBI-funded Childhood Asthma Management Program (CAMP). Principle and sub-investigator for over 100 clinical research studies. Over 40 peer-reviewed publications, and numerous local, regional and national presentations.

Service: President, Washington State Allergy, Asthma and Immunology Society; President, Puget Sound Allergy Society; Chair, Section on Allergy/Immunology; Chair, Section Forum Management Committee, AAP (senior leadership position reporting directly to the Board).



Please describe your qualifications and skills for moving into the Secretary-Treasurer position, which ascends to President. Include executive/administrative experience outside of AAAAI and involvement with your local/state/regional community, media interactions, mentoring, lay organizations, industry, political advocacy and/or teaching.

Dr. Randolph:

My executive, teaching, mentoring, advocacy and administrative experience outside of the AAAAI includes:

1. Performing weekly lectures and clinic training for allergy fellows, and educating medical students and Yale pediatric residents about allergy and immunology in my role as Clinical Professor in Allergy, Immunology and Pediatrics at Yale from 1986-2021.
2. Involvement with the Pollen Count Center at Waterbury Hospital Community Hospital of Yale from 1986-2021 and counting for the National Allergy Bureau (NAB™), NIH studies on climate change, abstract presentations with a Yale fellow in 2021, and frequent Connecticut TV and radio station interviews related to allergy, asthma and immunology since 1986, including serving as media expert for AAAAI and ACAAI.
3. Lay organization involvement such as giving HAE lectures featuring HAE patients arranged with HAE lay organizations, and receiving an HIV lay organization award for dedication to patients.
4. Participating in political advocacy for allergy profession concerns related to making telemedicine compensation equitable with in-person visits, and sterile compounding.
5. Serving as Treasurer and President for the Connecticut and New England allergy societies. Industry in-person local, regional and national AAAAI and ACAAI lectures for pharmaceutical concerns.



Dr. Williams:

Leadership positions outside of the AAAAI include serving as Chair of the Section Management Forum Committee and Section on Allergy/Immunology for the AAP, and I participated in and helped organize leadership programs and reported directly to the AAP Board. In my local community, I have served on the Board and as Chair for a preschool program for disabled children, as an Administrator for Little League Baseball, as a Unit Commissioner for Boy Scouts of America, and currently serve in an elected position as a county Fire District Commissioner. I have served as a spokesperson for the AAP, and have done media interviews on behalf of the AAP and AAAAI. I have been involved in the mentoring of students, trainees, and colleagues in all these programs, and strongly involved with advocacy for the AAP and as a Fire District Commissioner. I have also had leadership training as part of my role in the AAP and the Fire District. Several years of insurance policy review have provided a unique perspective on allergy policy among payers.



If elected, describe your initiative(s) and your plan to achieve it/them during your presidential year. In the context of your presidential initiative(s), what would be your overall theme and how do you consider this to be important to our field to our field?

Dr. Randolph:

My plans if elected would be to make the AAAAI more interdisciplinary with cooperative ventures with other national organizations such as public health, cardiology, pulmonary and infectious disease, and create a division of AAAAI devoted to prophylaxis or preparedness for epidemics and other crises to address and achieve mental and physical fitness and health maintenance for our allergy, asthma and immunology patients and our planet or human community. My overall theme would be fitness and optimal health maintenance in allergy, asthma and immunology providers, patients and the planet.



No health concern is more significant or more neglected in the United States than mental and physical fitness, and optimal health maintenance with proper diet and exercise and planetary conditions. We learned from the COVID-19 pandemic that we were poorly integrated as a highly specialized medical community to meet the public health emergent challenges of a pandemic and the ongoing inequality of healthcare and challenges of climate change. To meet these challenges requires a more integrative interdisciplinary approach to human health from a public health or population standpoint that is devoted to mental and physical fitness of our patients with proper exercise and diet as well as atmospheric or climatic conditions. Addressing the crisis of health fitness with programming, research and convening of a task force would enhance the image and role of the AAAAI and allergist in the broader national and international medical community.

Describe the strategy you would employ to help increase the visibility of allergy and immunology in the medical community and to the public.

Dr. Randolph:

My strategy to increase visibility of the allergist/immunologist to the public and medical community would be to advertise the essential role of the allergist in the pandemic and health fitness, as well the evidence-based studies that demonstrate the allergy/immunology specialist provides optimal care at a lower price.



The pandemic has provided an opportunity to highlight the skills of the allergist/immunologist in the lifesaving procedure of vaccination and reassuring patients by skin testing and expertise that allergy to vaccines is highly unlikely. Promotion of the essential role of the allergist/immunologist in the management of the pandemic should also be included in programming at the AAAAI Annual Meeting, state, regional, and national allergy and primary care meetings, and webinars.

Additionally having the AAAAI program and fund research on mental and physical fitness will increase the visibility of the practicing allergist in the huge arena of fitness. Inclusion of health maintenance in the EMR of the practicing allergist will remind patients that the allergist is holistic and inclusive of the total mental and physical health of the patient.

Dr. Williams:

While things may very well change in medicine over the next 3 years, my overall theme would be to promote the practice of allergy to help all AAAAI members. These issues are critical to the survival of the specialty. I would do this in the following ways:



1. Promote the specialty of allergy and immunology to primary care, the public, research funders and academic departments. I would involve AAAAI communication staff to develop speaking points and media outreach with tailored messages for each group.
2. Encourage adequate payment and coverage for services provided by holding a summit conference with insurance company leadership and CMS to develop evidence-based protocols for office procedures, and utilize our practice parameters to determine proper criteria for diagnosis and treatment of allergic and immunologic disease.
3. Strengthen the AAAAI connection with local allergists and develop advocacy skills among membership that can be used at the state and local levels.
4. Unite the silos of the AAAAI to work more as one unified organization.

Dr. Williams:

As mentioned in my response to the third question, I would utilize AAAAI communications staff to craft educational messages for the public, primary care providers, academic leaders, research funding agencies and payers. Since we cannot comment on the credentials of other "allergy" providers, we need to emphasize the unique abilities and training of AAAAI members to the public and payers, as well as educate payers about appropriate allergy services using our practice parameters and proactive recommendations based on the most current science. Messages would be developed by our Research & Training Division to emphasize the importance of allergy divisions to academic leaders. I would continue to utilize the RSL Governors to maintain connections with local society leaders and establish better communication pathways for them. I would emphasize the AAAAI as the best home for all types of allergists by increasing internal communications, bringing training programs and community allergists together through the Resident Rotation Curriculum and establishing a fellowship community curriculum as well. All the pillars are there, we just need to bind them together.



Why do you want to be President of the AAAAI?

Dr. Randolph:

I want to be President of the AAAAI with the mission to harness the synergistic energy of the clinical and academic community to enable the AAAAI to become more nimble in crises like the pandemic of health fitness or COVID-19. This mission would involve the creation of a division of preparedness that will address crises such as the pandemic with an interdisciplinary task or strike force for the provision of recommendations to the practicing allergist, and programming and funding of research.



Additionally there is a need for broadening the policies and activities of the AAAAI fields of inclusion to include public health and climate change, but most importantly, mental and physical fitness of the broader human community with interspecialty Annual Meeting programming on climate change, as well as public health maintenance, and mental and physical fitness for patients and providers. There is a need for a strike force to provide recommendations for health fitness, adaptation of CDC and OSHA guidelines for pulmonary functions as per our Asthma, Cough, Diagnosis and Treatment Committee, COVID-19 testing challenges, skin testing desensitizations, mandatory vaccination, and telemedicine driven by the pandemic.

Dr. Williams:

Throughout my career I have always been attracted to specialty society work and leadership. I feel that this complements my practice. The AAAAI has played a fundamental role as my professional home, thanks to the guidance and modeling of my former partners. At this stage of my life, recognition is not so important, but continued service is. I feel strongly that a single allergy society can unite and serve all allergists in the best way, eliminate duplication and competition, and focus on the goal of promoting the specialty to the public, potential referral sources, academic department heads and payers to guarantee the success of allergy researchers and practitioners, and ultimately provide the best allergy care for our patients. My experience in the AAAAI as Chair of the Office of Medical Education, the RSLAAIS Assembly, Advocacy Committee and payer relations, as well as my years of community practice and academic ties, has provided me with the skills and desire to accomplish this job. I want the opportunity to do so.



AAAAI Nomination Process For At-Large Board of Directors Positions

Step 1

The Constituency Nominating Workgroups from The Federation of Regional, State and Local Allergy, Asthma & Immunology Societies Assembly (RSLAAIS), Program Directors Assembly (PDA), and Interest Section Coordinating Committee (ISCC) sends out a general call for nominations to their constituencies.



Step 2

The Nominating Committee, chaired by the Immediate Past President, invites all Fellows to either nominate a Fellow or self-nominate for an At-Large Directors position.

Step 3

The Nominating Committee offers guidance to be used by all constituencies in selecting and vetting possible candidates. Each constituency group and the Nominating Committee select three names for a total of 12 candidates.



Step 4

The Nominating Committee narrows the field to three pairs of candidates, and the three pairs are forwarded to the Board of Directors for review and approval. One of these pairs is required to be an RSL pairing to ensure broad representation.



Step 5

Approved candidates are placed on the ballot for At-Large positions. The electronic ballot is sent to all Members and Fellows in December.

How the Secretary-Treasurer Candidates Are Selected

Each year, the Nominating Committee recommends to the Board of Directors two candidates for nomination as the Secretary-Treasurer. Candidates are selected from the list of past At-Large Directors of the Board of Directors.

2022 Board of Directors Election Ballot

Vote for one candidate for 2022-2023 Secretary-Treasurer and one candidate in each of the three 2022-2026 At-Large Director position sections. Ballots must be received **no later than 5:00 pm CT on January 4, 2022**. Ballots received or postmarked after this date will not be counted. Multiple votes for one position will invalidate the vote. Emailed votes are invalid.

Faxed and mailed ballots must include your membership ID number. Ballots that do not have a membership ID number will be invalid. This number can be provided by emailing membership@aaaai.org.

Membership ID: _____ **(required)**

2022-2023 Slate of Officers

Approve

President: David A. Khan, MD, FAAAAI

Do not approve

President-Elect: Jonathan A. Bernstein, MD, FAAAAI

Immediate Past-President: Giselle S. Mosnaim, MD, MS, FAAAAI

Please vote for one candidate in each of the sections below:

2022-2023 Secretary-Treasurer

Christopher C. Randolph, MD, FAAAAI

Paul V. Williams, MD, FAAAAI

2022-2026 At-Large Director

Priya J. Bansal, MD, FAAAAI

Anil Nanda, MD, FAAAAI

2022-2026 At-Large Director

Anna H. Nowak-Wegrzyn, MD, PhD, FAAAAI

Sharmilee M. Nyenhuis, MD, FAAAAI

2022-2026 At-Large Director

Nicholas L. Rider, DO, FAAAAI

Cem Akin, MD, PhD, FAAAAI



To vote online,
scan this QR code with your smartphone
or visit: aaaai.org/vote.

Fax completed ballots to (414) 272-6070, or mail to:

AAAAI

Attn: Senior Membership Manager

555 E. Wells Street, Suite 1100

Milwaukee, WI 53202-3823

According to the AAAAI Bylaws, you must be a current full member or Fellow (FAAAAI) to vote (those with allied health or emeritus status are not eligible).



AAAAI Foundation *Annual Benefit* —2022—

Join us

for an evening of fine food, great music and the presentation of our

2021 Faculty Development Awards

Hyatt Regency Phoenix • 7:00 pm - 10:00 pm • Cocktail Attire

Ticket Prices: \$300 - Patron

\$3,000 - Table of 10

\$200 - NAIA/Allied Health

\$125 - Student

Registration available with your Annual Meeting registration or by visiting
www.aaaaifoundation.org/special-events/benefit

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Member Spotlight

Region 4 Midwest RSL Governor Joel S. Klein, MD, FAAAAI



What are you doing to support the field of A/I?

On a daily basis, I believe that our professional actions always reflect upon our specialty—whether that be in or out of the workplace. A special connection and duty exists when a patient trusts us with their health. Our commitment to discovering or applying a concept or treatment advances that solemn duty and supports the A/I specialty. In our role as educators about the field, I believe that a national organization has the platform to reach the public and I try to contribute in any way I can.

What are some of the biggest challenges you are trying to address in the Midwest Region when it comes to A/I?

The main challenge is the time available to the state society officers to contact me about issues that I can discuss at our monthly conference calls. Providing my mobile phone number facilitates that communication. One such issue that I discussed recently was denial of claims for 95165 by one of the major commercial insurers, when the president of one of the Midwest state societies contacted me about it just before the meeting. When I mentioned this on the conference call, another RSL governor said this is now the fourth state to report this specific problem from the same insurer. The plan is to talk to representatives of the insurer about it, similar to what occurred recently surrounding the issue of this insurer requiring home administration of omalizumab. Awareness by the AAAAI's membership of the RSLs is perhaps another difficulty. At my state society's meetings, even when virtual, I have the opportunity to speak to those in attendance and ask for feedback.

How has COVID-19 impacted your work as a physician? What about your role as an RSL Governor?

The past year and a half has affected me professionally in ways that were unimaginable before March 2020. From the first months with patients being told to shelter-in-place and a staff member fleeing from my office when a patient suspected of having COVID-19 came to be evaluated, to the recent heightened and ongoing precautions against COVID-19 infection, this pandemic has made me more aware of patients' tolerance for risk, and I hope I have become a better physician by being more understanding of it. Throughout this time, the British adage "keep calm and carry on" is vital. I suspect the pandemic's effect on in-person state society meetings decreases the amount of feedback that each society's officers receives and forwards to one of the RSL governors.

What inspired you to get involved with the AAAAI's RSL Assembly?

I was asked in late 2019 if I was interested in completing the 4-year term in the Midwest Region because the current governor had transitioned to the pharmaceutical industry. I was eligible because I had served as a past President of the Illinois Society of Allergy, Asthma and Immunology and continued to be active on its executive Board for close to 15 years afterward. I accepted the invitation because I wanted to try to be helpful to colleagues and to give back to a specialty whose mentors were kind and helped me greatly. When the term expired earlier this year, I wanted to continue because I also found that I am learning useful clinical and administrative pearls in a very cordial setting.

What's one thing—either related to A/I or not—you learned in the last month?

I learned from the September issue of JACI that whole exome sequencing of a cohort of children, mostly without a preexisting medical condition and who developed multisystem inflammatory syndrome (MIS-C) with positive SARS-CoV-2 testing, identified hemizygous defects in three genes—suppressor of cytokine signaling 1, X-linked inhibitor of apoptosis, and cytochrome b-245 beta subunit—in some of these children. This finding supports the belief that genetic risk factors for MIS-C may be incompletely penetrant and that whole exome sequencing is becoming increasingly available to diagnose causes of autoinflammation.

I also learned of the existence of nanobots in the past week when I went back to a cinema for the first time in a long time and saw it used in the plot of the latest film starring Daniel Craig.

What is the Federation of Regional, State & Local Allergy, Asthma & Immunology Societies (RSLAAIS) Assembly?

The AAAAI's RSLAAIS Assembly (also known as the RSL Assembly for short) consists of more than 70 regional, state and local societies (RSLs) who promote, support and advocate for allergist/immunologists at a grassroots level. The assembly assists in providing support, tools and effective methods to ensure allergist/immunologists are recognized as the premier providers of quality A/I care.

The assembly is led by a leadership team of nine physicians representing seven distinct geographical regions of the country. This enables the AAAAI to more easily connect with local societies and provides an open line of communication between the organization, local, and state societies. It also allows the AAAAI to learn more about the concerns of our members, from state legislation to training programs, and in recent months, even PPE supply levels. RSL Governors are an integral part of the work done by the AAAAI.



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How AAAAI Members Are Tackling Penicillin Allergy Delabeling

Penicillin is the safest and most effective antibiotic for many infections, but about 10% of the U.S. population reports being allergic to it. Only nine out of 10 of those who report being allergic actually are, which has severe ramifications for both patient outcomes and public health.

For years the AAAAI has taken a leading role in encouraging verification of patient-reported penicillin allergy, and we ramped up our advocacy efforts around National Penicillin Allergy Day on September 28. Here several AAAAI members who continue to prioritize this important issue—in their practices, through research and advocacy efforts—on National Penicillin Allergy Day and beyond tell their stories.



Kimberly G. Blumenthal, MD, MSc, FAAAAI, is doing research and forming a drug allergy registry.

I am an allergist/immunologist at Massachusetts General Hospital pursuing a career as a physician-scientist. My expertise is in drug allergy, and I recently completed my 2016 AAAAI Foundation Faculty

Development Award, “New approaches to beta-lactam allergy research,” and a National Institutes of Health/National Institute of Allergy and Infectious Diseases K award, “The clinical and economic impact of penicillin allergy.” While funded by these awards, I led more than 30 research projects related to drug and penicillin allergy.

My research used large observational data to define the harms associated with unverified penicillin allergies: increased broad-spectrum antibiotic use (Blumenthal KG et al, *JAMA Intern Med*, 2020), surgical site infections (Blumenthal KG et al, *Clin Infect Dis*, 2018), methicillin-resistant *Staphylococcus aureus* and *Clostridioides difficile* infections (Blumenthal KG et al, *BMJ*, 2018), healthcare utilization (Blumenthal KG et al, *Am J Manag Care*, 2020), and death (Blumenthal KG et al, *J Gen Intern Med*, 2019). By defining these adverse consequences, I have helped to build the case for penicillin allergy delabeling.



I designed the Mass General Brigham (MGB) Penicillin and Cephalosporin Allergy Pathways, a clinical approach to hospitalized patients with reported beta-lactam allergies. Through algorithms, clinical decision support, and electronic health record enhancements, clinicians can more effectively treat patients with verified or unverified beta-lactam allergy labels. These care innovations were implemented and evaluated across nine MGB sites in the northeastern U.S. and studied in seven original manuscripts. Versions of these algorithms are currently included in *UptoDate* and used at a number of other U.S. hospitals to optimize antibiotic choices in patients with penicillin or cephalosporin allergy histories.

I also formed the [United States Drug Allergy Registry](#) to prospectively study the impact of drug allergy testing on patients' healthcare and quality of life. As of July 31, 2021, it has enrolled 1,421 patients from seven U.S. allergy/immunology sites. This registry data provides a unique opportunity to broadly advance penicillin allergy research and clinical care.



Allison Ramsey, MD, FAAAAI, is changing her workplace culture to regularly perform penicillin allergy testing.

I am an employed physician at Rochester Regional Health. In our practice, we first focused on inpatient penicillin allergy delabeling through collaboration with our antimicrobial stewardship team. Over the past six years, this has resulted in

a culture change at our 528-bed hospital. Now, the majority of patients receiving antibiotics undergo a penicillin allergy evaluation. We have demonstrated that direct challenges are safe in low-risk inpatients, and now employ e-consultations to risk-stratify inpatients appropriate for direct challenges.

In the outpatient setting, we offer same-day penicillin allergy evaluations for patients. We are incorporating direct challenges in low-risk pediatric and adult patients, but continuing skin testing when necessary. We also have a direct line for obstetrics offices to call to make penicillin evaluation appointments for pregnant patients in a timely manner. We are also working to raise awareness regarding the benefits of penicillin allergy delabeling among hospital-affiliated private practices and geriatric practices.



David A. Khan, MD, FAAAAI, AAAAAI President-Elect, is partnering with pharmacists.

At Parkland Hospital in Dallas, our Allergy Division has established a partnership with our Department of Pharmacy to have allergy-trained pharmacists perform penicillin skin tests and challenges on inpatients. This penicillin allergy testing consult service has

tested over 1,000 patients and has delabeled approximately 95% of these patients. Recently we have applied a similar system to our outpatient allergy clinic. Our allergy pharmacist performs penicillin skin testing and challenge (or direct challenge) in patients who are scheduled for our allergy clinic, typically for other reasons. While the

program is relatively new, the success rate at delabeling patients remains very high. We hope to show the utility of partnering with other healthcare providers, such as pharmacists, to assist in penicillin allergy delabeling in both inpatient and outpatient settings with added convenience for the patient.



Frank S. Virant, MD, FAAAAI, is talking with patients about past penicillin allergic reactions.

As clinicians, we are asked by patients to assess whether allergy is playing a role in their rhinosinusitis, asthma, gastrointestinal symptoms or dermatitis, as well as clarifying

risk for systemic reactions to foods, insects and therapeutics. While demonstrating the presence of allergy is important in directing approach to treatment, it is equally useful and reassuring to patients to prove the absence of allergy with negative results.

When a patient gives a history of "penicillin allergy", it's important to clarify what occurred in the past, as penicillin and related antibiotics, e.g., amoxicillin, remain clinically useful, inexpensive antibiotics. Based on retrospective research and evolving clinical experience, we now know that over 90% of patients who were told they were allergic to penicillin based on a history of nonspecific rash, are not truly allergic. This can be easily proven by skin testing or in many cases a simple graded oral challenge in clinic.

A board-certified allergist can perform an important service for patients by often disproving the chart label of "penicillin allergy"—don't ignore this opportunity.

What Did the AAAAI Do for National Penicillin Allergy Day?

The AAAAI took a number of actions leading up to National Penicillin Allergy Day and on the day itself, including:

- Launching the new [Penicillin Allergy Center](#).
- Developing informational social media posts and posters you can share or print.
- Sending a letter to 667 offices on Capitol Hill to share information about how penicillin allergy testing can improve patient outcomes, reduce healthcare spending and help fight antimicrobial resistance.
- Releasing a new [podcast episode](#) about the latest on penicillin allergy.
- Posting informational videos about adult and pediatric penicillin allergies.

Register Now for the 2022 AAAAI Annual Meeting in Phoenix



AAAAI American Academy of
Allergy Asthma & Immunology
ANNUAL MEETING
PHOENIX, AZ · FEBRUARY 25-28, 2022

Registration for the 2022 AAAAI Annual Meeting in Phoenix is open for all delegates. We look forward to welcoming you back to an in-person event in 2022. The AAAAI Annual Meeting provides you with the latest A/I education, with sessions featuring some of the most accomplished A/I experts in the field, enabling you to provide the best possible care to your patients. The AAAAI hopes to see you in 2022, so we can continue to foster connections and share groundbreaking research that advances your career and understanding of the field.



Health and Safety Protocols

The AAAAI is committed to the health and safety of our members, staff and other attendees. We will continue to monitor the COVID-19 pandemic and follow all local, state and federal recommendations to ensure a safe, enjoyable and productive Annual Meeting.

For those individuals attending the 2022 Annual Meeting in Phoenix, these are our current Health and Safety Protocols. Health and Safety Protocols are subject to change at any time and will be [posted here](#).

- All attendees are required to be **fully vaccinated** and will be asked to **show proof of vaccination** when they pick up their registration badge.
- **Masks** will be required at all times in meeting rooms and common areas.
- **Social distancing** protocols of at least three feet will be honored.
- **Standing and/or congregating** in the back of meeting rooms is not allowed.
- Food distribution will follow CDC guidelines.
- **Spouses/guests** may attend AAAAI events after showing proof of vaccination when picking up their registration badge.
- **International Attendees** will need to show proof of full vaccination with one of the [eight vaccines approved by the World Health Organization](#).
- Visiting the Exhibit Hall to talk with representatives about A/I services and products
- Joining a workshop for interactive learning experiences
- Attending highly interactive seminars
- Enjoying spending time in the beautiful city of Phoenix

Virtual Components Offered in 2022

The AAAAI understands that not everyone will be comfortable attending an in-person event in 2022. We are pleased to offer virtual options this year, which allow you to access high quality A/I education from anywhere in the world.

There will be 69 pre-recorded sessions available to attendees joining us virtually. For the first time, we will also be livestreaming select sessions, so you can join us in real-time, including the keynote and all of the plenary sessions. A select number of additional sessions will be recorded during the live event and uploaded online at a future time.

Due to popular demand, a virtual Exhibit Hall and virtual Poster Hall will also be available, though they may have a slightly different format compared to last year.

Your In-Person Favorites Return

Attending the in-person event allows you to participate in your favorite Annual Meeting activities onsite, including:

- Networking and reuniting with your colleagues and other A/I professionals between sessions or at any of the AAAAI social events
- Signing up for the AAAAI Foundation Benefit
- Staying active in Phoenix by participating in the AAAAI Foundation 5K Run/Walk
- Participating in hands-on training stations
- Meeting with abstract authors to ask questions about their latest research

Don't Miss Our Thursday Sessions

Five programs will be held on Thursday, February 24 before the 2022 AAAAI Annual Meeting officially gets underway. Registration for these programs, aside from the 2022 ABAI Literature Review Course, requires separate registration.

The 36th Annual Harold S. Nelson Military Allergy/Immunology Symposium will expand your knowledge of relevant areas of A/I as they present in the unique military environment. The symposium begins at 7:20 am MT and runs until 3:15 pm MT.

Breakthroughs in Understanding and Treating Eosinophilic Gastrointestinal Diseases (EGID): Organized by CEGIR and TIGERS will comprehensively review the basic biology and pathogenesis of the diseases, clinical features including diagnostic approaches, and clinical treatments currently available and on the horizon. It begins at 8:00 am MT and ends at 5:00 pm MT.

Practical Workshops to Jumpstart Your Drug Allergy Assessments will prepare the general allergist/immunologist to evaluate drug allergy in 2022. The course kicks off at 8:00 am MT and will wrap up at 1:15 pm MT.

The Basic Aeroallergen Course aims to train prospective National Allergy Bureau™ (NAB) station heads, counters, clinicians, and FITs, as well as those with a general interest in the field of aerobiology, with both didactic and hands-on instruction. This course will begin at 8:30 am MT and run until 5:00 pm MT.

The 2022 ABAI Continuous Assessment Program Literature Review Course will help to prepare ABAI diplomats to participate in the Continuous Assessment Program. The course will start at 2:00 pm MT and end at 4:30 pm MT.



How You Can Help Schools Prepare for Allergy Emergencies

Targeted Education About Medicine for Schools (TEAMS) Anaphylaxis: The Allergist's Guide to Equipping Schools for Allergy Emergencies, is a new course developed by Alice E.W. Hoyt, MD, FAAAAI, with the assistance of her 2020 [AAAAI Educator Development Award](#).

The course is designed to teach allergy professionals how to apply allergy expertise to school-targeted allergy education. You will learn how to navigate the multiple cultures and chains of command at schools, while gaining understanding about legal issues and indemnification, so you can serve your community while minimizing anxieties of potential liability. Content throughout the course will equip you to teach at your local K-12 schools to improve the lives of your patients and the community.

Dr. Hoyt talked with us about how the program came to be and why it is so important. "We go into healthcare because we want to make a difference. We want to share our expertise with our communities, especially in the A/I field, which is often a misunderstood specialty. Working with schools is an important way we can do that."

Children spend much of their time in school, and those who have chronic medical conditions deserve to feel safe without being alienated. Children who have food allergies may sometimes be seated at special "allergy free" tables, for example, which can impact mental health and make them feel socially isolated. While steps like these have good intentions, schools may be implementing policies like this without putting together a comprehensive medical emergency procedure. "By working with schools, we can help them develop policies that keep children safe without alienating them," added Dr. Hoyt. "Schools lacking comprehensive medical emergency policies leave families feeling anxious and can have tragic outcomes. We have the knowledge and capabilities to assist our schools, and that's why I developed this course."

Many schools lack a planned emergency response plan for medical emergencies, and not all schools have a school nurse on staff. If staff members cannot recognize a medical emergency, it can be fatal. This new online learning experience was designed to help A/I professionals understand how to translate their A/I expertise into information for non-medical professionals in a school setting. It will help you learn how to teach and present information to this specific audience. "Most healthcare professionals are used to explaining this information to parents, but there's a big difference between talking with the guardian of a child with food allergy, and a school teacher who has no experience with it," said Dr. Hoyt.

The online course will also help you answer common questions from schools and teachers, as well as how to develop effective lesson plans, measurable objectives, and how to navigate the school setting both legally and in terms of assessing your audience. Examples, templates and handouts are provided throughout the course.

Dr. Hoyt has been working with schools for decades. "I've been passionate about medical education since my fellowship training. During that time, I started Code Ana to equip schools for medical emergencies. I also started a nonprofit, The Teal Schoolhouse, to implement Code Ana in schools across the country."

Dr. Hoyt was the first recipient of the AAAAI Educator Development Award. The award nurtures aspiring leaders in education so they



Dr. Hoyt teaching early childcare providers how to use epinephrine autoinjectors.

may more successfully contribute to the education of A/I physicians and other healthcare professionals, develop curriculum and programs for AAAAI meetings and online resources, and improve outcomes of AAAAI educational forums. When asked how the award has helped her with this project, she said, "The first half of the award gave me the protected time I needed to become a better medical educator. I took a lot of classes on medical education and earned Cleveland Clinic's Essentials for Healthcare Professionals Education certificate. I was blessed to get this award and receive the right tools I needed to improve my skills. The other half of the award allowed me to develop this important online educational program, which will allow us to keep our patients and communities safe."

Learn more about TEAMS Anaphylaxis: The Allergist's Guide to Equipping Schools for Allergy Emergencies, by visiting [the course website](#).

Another Resource to Help Schools Prepare for Allergy Emergencies

Improving health and school-related outcomes for children with asthma requires the use of school-based partnerships that focus on integrated care coordination amongst families, clinicians and school nurses. The AAAAI created the [School-Based Allergy, Asthma and Anaphylaxis Management Program \(SA³MPRO™\)](#), in collaboration with [others](#) to help students with asthma and allergies and their families practice consistent management of their conditions at school. SA³MPRO™ details the elements necessary for the education of children, families, clinicians, and school-based personnel based on a "circle of support" and standardizes recommendations for school-based allergy and asthma management. It also provides websites and resources, such as asthma action plans, which are useful for the care of children with asthma and allergies in the school setting. The [SA³MPRO™ toolkit](#) will help you implement this program at your local school or organization.

In Memory: Lyndon E. Mansfield, MD, FAAAAI



Photo provided by Allergists for Israel.

Lyndon E. Mansfield, MD, FAAAAI, passed away July 14. He was born in Philadelphia and earned his medical degree at Thomas Jefferson Medical School. He practiced medicine for over 50 years, including time serving as a physician in the U.S. Army.

Dr. Mansfield authored or co-authored more than 90 medical manuscripts and over 100 research presentations during his long and active career. He was a pioneer of oral immunotherapy, performing it in the early 2000s and developing protocols for its use. He is remembered for his efforts as a mentor, his research work in the field and his dedication to his patients.

In Memory: Martin D. Valentine, MD, FAAAAI



On September 15, Martin D. Valentine, MD, FAAAAI, Professor Emeritus of Medicine, passed away. He graduated from Tufts Medical School and discovered his passion for A/I during his Harvard fellowship. He dedicated nearly 50 years to the specialty, including serving on the Editorial Board for the JACI. Of Dr. Valentine's many contributions to the field, his most

well-known is likely his research on insect sting allergy. He helped develop the diagnosis and treatment protocols for treating insect allergies which remain the standard of practice to this day.

In addition to his research contributions, he had a reputation for helping his patients feel comfortable through his sense of humor and sympathetic ear.

In Memory: Andrew G. Weinstein, MD, FAAAAI



Andrew G. Weinstein, MD, FAAAAI, a longtime AAAAI Fellow, recently passed away. He earned his medical degree in 1973 from the University of Pennsylvania School of Medicine and later completed a fellowship in pediatric allergy at Children's Hospital of Philadelphia.

Dr. Weinstein worked as a practicing allergist with Asthma & Allergy Care of Delaware for 35 years, during which time he treated thousands of patients and published research related to medication adherence in severe asthmatics. During his long career, he took on additional leadership duties by serving as President of the Pennsylvania Allergy Association. He will be remembered as a physician who always put his patients first and advocated for treating not just the disease, but engaging with the patient and patient's family.

In Memory: Thomas A. Waldmann, MD, FAAAAI



Thomas A. Waldmann, MD, FAAAAI, an Honorary Fellow of the AAAAI, passed away September 25. A giant in the field of clinical immunology, his career spanned more than 60 years.

Dr. Waldmann made numerous high-impact discoveries, including defining a lymphatic loss disorder that is often referred to as Waldmann's disease. His lab developed the first monoclonal antibody to a cytokine receptor that also became the first monoclonal approved for use as a human therapeutic. Over the years, he was elected to the National Academy of Science, the National Academy of Medicine, and the National Academy of Arts and Sciences. During his career, he trained dozens of young clinician scientists, many of whom have become leaders in the field of clinical and basic immunology.

Don't Miss Important Member Updates

The Member Updates page on the AAAAI's revamped website is the perfect place to see what's new at the AAAAI. It is where you can find the latest AAAAI news in case you missed any of our recent emails. You will find a link to it on the [My Membership page](#), or you can [click here](#) to visit the Member Updates page directly. Make sure to check back frequently.

Highlights from the Virtual Faculty Development Program



The 2021 AAAAI Faculty Development Program was held October 1-2 virtually over Zoom. A total of 17 mentees and eight mentors participated in the program, which allowed mentees to present their current research and receive feedback from some of the top researchers in the field. Mentees also had the opportunity to discuss each other's research, share new ideas, and discuss research techniques. Presentations during the event covered important topics such as work/life balance, grant writing, negotiation tactics and more.

The 2022 Faculty Development Program will be held September 22-25, 2022, in Milwaukee, Wisconsin. The application site will open in February 2022.

AAAAI's Website Redesign Wins MarCom Gold Award

The redesigned AAAAI website—boasting a fresh look with clean, modern page layouts and improved navigation—makes it easier to access the resources you need to serve your patients and provide optimal care. In October, the AAAAI redesign was recognized with a MarCom Gold Award.

"I'm delighted to announce that the newly redesigned AAAAI website is a Gold Award winner in the 2021 MarCom Awards, an internationally judged competition that honors excellence in marketing and communication," said AAAAI Website Medical Editor Andrew D. Moore, MD, FAAAAI. "This impressive achievement acknowledges our commitment to convey timely and accessible information in allergy and immunology to our members and the general public."

MarCom Awards judges are industry professionals who look for companies and individuals whose talents exceed a high standard of excellence and whose work serves as a benchmark for the industry. The Gold Award is presented to those entries judged to exceed the high standards of the industry norm.

Members on the Move: Benjamin Bolaños Rosero, PhD



Benjamin Bolaños Rosero, PhD, the head of the National Allergy Bureau™ (NAB) Puerto Rico stations, was honored at the American Association for the Advancement of Science 2021 Annual Meeting. He was invited to present at the Annual Meeting about the important work he has done, both in terms of his research and the public tools he has helped

to develop to improve patients' quality of life. Congratulations, Dr. Bolaños Rosero!

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How COVID-19 Has Impacted A/I Training and Job Prospects



COVID-19 has changed the way all of us live and work, and has brought extraordinary changes to the way fellow-in-training (FIT) members study, complete rotations and find jobs.

The 2020 FIT Exit Survey addressed these changes by asking a number of questions regarding job hunting during COVID-19. When asked if FITs were offered a position, 82% stated they had been, while 11% stated they had, but the offer was rescinded due to COVID-19. A total of 7% stated they had not received an offer at all.

Over a quarter of survey respondents reported experiencing difficulties due to COVID-19, including delayed start dates, rescinded job offers, hiring freezes and a lack of in-person interviews. The full survey results can be found [here](#).

The Exit Survey data is not the only way the AAAAI has examined the impact of the pandemic on FITs. According to a recent AAAAI work group report, 21% of FITs who had responded to a separate survey were concerned they may lack clinical experience for independently practicing allergy and immunology, and 38% were

concerned they may not finish their research projects before graduating. FITs who used telehealth reported lower concern regarding clinical experience compared with those who did not use telehealth. The survey also showed that A/I trainee experiences have changed significantly since the COVID-19 pandemic began. For example, telehealth and virtual learning was reported more often, with mixed opinions on if it allowed for more or less time for nonclinical work.

Additionally, according to the work group report, 12% of FITs surveyed reported being reassigned from their A/I fellowship duties to COVID-19-related clinical responsibilities. More details about these findings can be [found here](#).

What are recent FIT graduates saying?



"I graduated in June of 2019 and started my job in October of 2019, which was before the pandemic started. I think the pandemic affected FITs and new allergy attendings in different ways. FITs had to navigate finding a job in unprecedented times and new allergy attendings had to build an allergy practice during a time when epidemiologic guidelines were very fluid. It was hard, but the AAAAI and the collective allergy community were very supportive. The AAAAI COVID-19 Response Task Force was a life saver! At this point, I think we are coming out of this wiser and stronger." - Canting Guo, MD, Secretary of the AAAAI New Allergist/Immunologist Assembly (NAIA)

"Early on, like many providers, I faced concerns about PPE and the fear of catching COVID-19. As the pandemic continued, I adjusted to accommodating patients with telemedicine visits and providing the most up-to-date care by aggressively reading articles and our allergy society's emails. One of the hardest things I dealt with during fellowship was my grandma passing from COVID-19. I was very fortunate to have supportive faculty during such a trying time and I'll always be grateful to them for their understanding.



Several medical groups I was initially interested in working for were not hiring or were only hiring part-time allergists due to the pandemic. I sent out at least 40 emails and made multiple phone calls expressing interest in local allergy positions. I was fortunate to find a great position through one of my medical school mentors and am grateful that despite the challenges the pandemic brought, everything has worked out." - Christine M. Panganiban, MD, MS, Chair of the AAAAI FIT Committee



UPDATES *from the AAAAI Journals*

Watch for These Upcoming Theme Issues

The theme of December's JACI issue is Global Issues in Allergy/ Immunology. The JACI: *In Practice* December 2021 theme is Topics in Evaluating Clinical Literature.

There's still time to submit your research for upcoming JACI theme issues. The themes for the first six months of 2022 are:

- Autoimmunity
- Severe Asthma (Presidential Theme)
- Allergen Immunotherapy
- Mast Cells
- Vaccines
- Chronic Rhinosinusitis

Upcoming 2022 themes for JACI: *In Practice* include:

- Food Allergy
- Difficult to Control Asthma
- Respiratory Infections and the Lung
- Health Disparities in Asthma and Allergy
- Eosinophilic Disorders
- Chronic Rhinosinusitis

JACI: *Global* Is Accepting Article Submissions

JACI: *Global*, the AAAAI's new Gold Open Access journal, is [accepting manuscript submissions](#). JACI: *Global* is seeking papers covering basic and bench science, translational studies in early or developmental stages of research, regional studies in A/I, research with an international focus on A/I, case series or case reports that demonstrate a novel, impactful insight, and papers covering new research in A/I.

The first issue of JACI: *Global* will publish in February 2022 during the AAAAI Annual Meeting in Phoenix, Arizona. [Click here](#) to learn more about the new journal.

AAAAI Journals Share Their Diversity, Equity, and Inclusion (DEI) Initiatives

The AAAAI journals are committed to developing and implementing DEI initiatives that have a real impact on the A/I specialty. These initiatives are:

- Publication in JACI: *In Practice* of an Editorial written by the JACI: *In Practice* editors.
- Planned publication of upcoming theme issues on disparities, including the JACI Health Disparities theme issue that was published in November 2021 and the JACI: *In Practice* Health Disparities in Asthma and Allergy theme issue that will publish in April 2022.
- Launch of a new JACI: *In Practice* article type, Case Studies in Health Disparities, which is coordinated by Tamara T. Perry, MD, FAAAAI, and Julie Wang, MD, FAAAAI, in collaboration with the AAAAI Committee on the Underserved.
- Appointment of a DEI Coordinator to the JACI: *In Practice* Editorial Board. Bridgette L. Jones, MD, MS, FAAAAI, will be working with the JACI: *In Practice* Editorial Office to assist in identifying and executing new DEI initiatives.
- Addition of Health Disparities Collections on the [JACI](#) and [JACI: In Practice](#) websites. These Collections gather the articles published in each journal by topic. Readers can search each Collection by author name, title, abstract and keyword and can subscribe to Collections to receive alerts as articles are added.
- Introduction of a Health Disparities classification for use in our peer review systems to identify reviewers with interest and expertise in this area. Classifications allow editors to match reviewers with articles within their areas of interest and expertise. Anyone interested in joining the JACI: *In Practice* reviewer family should contact our Managing Editor, Dawn Angel, at InPractice@aaaai.org.
- Updated author guidelines for reporting of race and ethnicity for the [JACI](#) and [JACI: In Practice](#).



Congratulations to the 2022 AAAAI Honorary Award Recipients

The AAAAI Board of Directors and the Awards Committee would like to congratulate the following individuals for their contributions to the field of allergy/immunology. We are excited to take this time to recognize their research, commitment to patient care and dedication to the AAAAI mission. They will be formally recognized at the 2022 AAAAI Annual Meeting in Phoenix.

Andrea J. Apter, MD, MA, MSc, FAAAAI



AAAAI Mentorship Award

Presented in recognition for a lifetime of service as an allergy/immunology mentor for students, residents, fellows-in-training and faculty.

Lawrence J. Vapniarek Jr., MBA



AAAAI Distinguished Layperson Award

Presented in recognition for work with the American Board of Allergy and Immunology when the Board developed a professional development program that takes into account the needs and desires of busy A/I professionals.

Denise A. DiPrimio-Kalman, DO, FAAAAI



AAAAI RSLAAIS Leadership Award

Presented in recognition of service to the A/I local, regional and national communities as a leader, mentor, advocate and educator.

Marshall Paul Grodofsky, MD, FAAAAI



AAAAI Distinguished Service Award

Presented in recognition of outstanding contributions to the field of A/I, including being instrumental in establishing the Practice Management Committee, as well as developing the first Practice Management Manual.

Dennis R. Ownby, MD, FAAAAI



AAAAI Distinguished Clinician Recognition Award

Presented in recognition of significant clinical contributions to the field, particularly in ad hoc review committees on data safety and monitoring boards, and on committees for the FDA.

Pudupakkam K. Vedanthan, MD, FAAAAI



AAAAI Special Recognition Award

Presented in recognition for outstanding commitment to serving A/I patients in India through International Asthma Services.

Hugh A. Sampson, MD, FAAAAI



AAAAI Mentorship Award

Presented in recognition for a lifetime of service as an A/I mentor for students, residents, fellows-in-training and faculty.

Sandra C. Christiansen, MD



AAAAI Distinguished Clinician Recognition Award

Presented in recognition for being the clinician that other physicians will turn to with complex cases.

Isabel J. Skypala, PhD, RD



AAAAI Allied Health Professionals Recognition Award

Presented in recognition of service to the A/I allied health community as a leader, mentor and educator.

James E. Gern, MD, FAAAAI



AAAAI Distinguished Scientist Award

Presented in recognition of significant contributions to advances in identifying mechanistic pathways by which viral respiratory infections and other environmental and host factors promote the inception of asthma, as well as acute exacerbations of childhood asthma once the disease process has become established.

Now Is the Time to Make Your Nominations for the 2023 Honorary Awards

Honor your colleagues who have worked tirelessly throughout the pandemic by making your nominations for the 2023 AAAAI Honorary Awards. The awards will be presented during the 2023 Annual Meeting in San Antonio, Texas.

AAAAI Fellows and members are encouraged to submit nominations. Honorary Awards are presented at an Annual Meeting luncheon with the AAAAI Board of Directors and past Presidents, and recipients are also recognized at the AAAAI Business Meeting.

Nominations must be submitted by January 17, 2022. [Click here](#) to learn more and make a nomination.

AAAAI Welcomes Incoming Fellows and Members

The following individuals were recently approved by the AAAAI Board of Directors. Eligible voting members have 30 days to comment, in writing, regarding the proposed slate as a whole or a specific proposed member. You may send comments to membership@aaaai.org.

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Robert N. Corriel, MD, FAAAAI
 Stanley Goldstein, MD, FAAAAI
 Mariola B. Kubicka, MD, FAAAAI
 Sharon B. Markovics, MD, FAAAAI
 Mary C. O’Laughlen, PhD, FAAAAI
 Meir Shalit, MD, FAAAAI
 David J. Shulan, MD, FAAAAI
 C. Ross Westley, MD, FAAAAI
 Edward S. Yanowitz, MD, FAAAAI

Member to Emeritus Member

James M. Hildebrand, MS, MT

Fellow

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 Kevin A. Cook, MD
 Nora Daher, MD
 Matthew Germinaro, MD
 Feryal Hajee, MD
 Tiffany Jean, MD
 Atoosa Kourosh, MD
 Timothy Kyin, MD
 Njeri Maina, MD, PhD
 Farheen Mirza, MD
 Vivian C. Nanagas, MD
 Amber N. Pepper, MD
 David A. Petty, DO
 Rajan Ravikumar, MD
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 Jenny Stitt, MD
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