Leading The Way For 60 Years

2007 ANNUAL REPORT
Mission Statement

The American Academy of Neurology is a medical specialty society established to advance the art and science of neurology, and thereby promote the best possible care for patients with neurological disorders by:

- Ensuring appropriate access to neurological care.
- Supporting and advocating for an environment which ensures ethical, high quality neurological care.
- Providing excellence in professional education by offering a variety of programs in both the clinical aspects of neurology and the basic neurosciences to physicians and allied health professionals.
- Supporting clinical and basic research in the neurosciences and related fields.

On the cover:
Russell N. Dejong, M.D., FAAN (1907–1990)  
A.B. Baker, M.D., FAAN (1908–1988)  
Adolph L. Sahs, M.D., FAAN (1906–1986)  
Francis M. Forster, M.D., FAAN (1912–2006)  

“Abe gathered around him a number of disciples. Russ Dejong, Ady Sahs, and I were proud to be associated with him in these ventures. It was thus we became known as the Four Horsemen.”

Francis M. Forster, 1988
Prologue

Lieutenant Colonel Joseph A. Resch came home from the war in 1946. The young man from Wisconsin had served seven years in the U.S. Army Air Force and managed the hospital services for a fighter wing in New Guinea. Now, at age 32, he was at the University of Minnesota, working on his residency in neurology and looking forward to settling down with his family and establishing his career.

But Joe Resch was concerned about the future. Neurology had been something of a stepchild to psychiatry in the United States. Could he make a go of it in private practice? Would he need to find an academic position? How would he continue training and stay current as neurologic research advanced? He could not join the New York-based American Neurological Association; it was a closed group devoted primarily to East Coast academics.

Resch pressed the University of Minnesota neurology department chair A.B. Baker: Why wasn’t there a neurology organization that young professionals like him could join? Where could a resident or practicing neurologist congregate with his or her peers and receive continuing education to sharpen the skills necessary to treat patients effectively?

Baker knew that Resch was right. The times were changing. The recent world war had left tens of thousands of American soldiers wounded in body and psyche. Many had brain injuries that required ongoing treatment and rehabilitation. They needed more neurologists.

If neurology was to move from its symbiotic relationship with psychiatry and stand as a distinct practice of medicine, it must organize and grow. Baker seized the moment, and the American Academy of Neurology was born in 1948.
We also established the AAN Staff Leadership Academy, which identified emerging leaders on the Academy’s staff and trained them to use research to determine members’ needs, how to use and share data in the decision-making process, and how to scan the neurology profession for any needed course corrections. These office leaders worked with staff throughout 2007 to share and implement these processes. The result is a more knowledgeable, focused, and effective work environment. Together with the member leadership program, the Academy is taking the necessary steps to evolve into a more nimble and responsive organization.

Another remarkable event from 2007 was designed to grow the strategic influence of our profession in the location where it matters most: Washington, DC. The membership of the AAN voted to establish the American Academy of Neurology Professional Association (AANPA), a companion organization focusing on practice-related issues. All AAN members were automatically made members of this new entity. Creation of the AANPA made it possible to launch a political action committee, called BrainPAC, which will amplify the voice of neurology in the halls of Congress. Given A.B. Baker’s extensive personal lobbying on Capitol Hill, we think he would agree with the wisdom of this organizational change.

The American Academy of Neurology Foundation seeks to be the leading funding organization for neurologic research outside of the National Institute of Neurological Disorders and Stroke. To move the Foundation closer to achieving that goal, the AAN committed $1.9 million to the Foundation to support clinical research fellowships. The funds will be distributed starting in 2008, helping us increase the number of available fellowships to young investigators who show great potential to be counted among the prominent researchers of tomorrow.

AAN Enterprises, Inc., (AEI) continues to be a leader for the Academy, with publication revenues bringing in nearly $10.5 million in 2007, a 12.6-percent increase over 2006. We generated record revenues with Neurology®, Neurology Today®, and Neurology Now®. Neurology remains the most widely read neurology journal, as new Editor-in-Chief John H. Noseworthy, MD, FAAN, deftly picked up the reins from predecessor Robert C. Griggs, MD, FAAN. The publication moved to a weekly schedule, complemented by audio podcasts. Chinese, Spanish,
and Korean editions of the journal were added. New high quality diagnostic tools and resources were available through the AAN Store, and members continued to take advantage of savings on products and services through the AAN Partners Program. Income generated by AEI helps keep membership dues low, so we encourage you to take advantage of these opportunities to save money and support the Academy.

Now, as we celebrate the anniversary of the founding of the AAN in 1948 and our achievements of 2007, we wish to call your attention to a few key leaders who, with many others, made an indelible mark on the AAN and our profession. Collectively, we are the beneficiaries of the vision and hard work of those who came before us. Individually, we should strive to emulate their leadership, whether in the Academy, our professional work, or our communities.

Stephen M. Sergay, MB BCh, FAAN
President, American Academy of Neurology
President, American Academy of Neurology Professional Association

Austin J. Sumner, MD, FAAN
Chair, American Academy of Neurology Foundation

Steven P. Ringel, MD, FAAN
Chair, AAN Enterprises, Inc.

Catherine M. Rydell, CAE
Executive Director and Chief Executive Officer
American Academy of Neurology
American Academy of Neurology Professional Association
American Academy of Neurology Foundation
A.B. Baker knew the value of a good education. He received four degrees from the University of Minnesota by age 23 and completed his PhD three years later, in 1934. He assumed the chair of the neurology department in 1946 following the stroke that brought down his mentor, J.P. McKinley. Baker remained on the faculty of the university’s medical school until mandatory retirement in 1977.

Fellow neurologist and educator Milton Ettinger, M.D., saluted Baker’s teaching style in a 1988 tribute in Neurology: “His genius can be fully appreciated only by the thousands of former students who sat riveted to their seats on any given Saturday morning while he established in his inimitable style that ‘there could only be one diagnosis,’ demonstrated a variety of gait disturbances, or, perhaps most memorable of all, invited them to ‘tell me the first sentence of the history and we will begin to think about this case together.’ His teaching style was unique and effective; his commitment to teaching was awesome. I once came upon him in his office late on a Friday night, preparing a medical student lecture for Saturday morning on a topic he must have lectured about hundreds of times in his teaching career. When I commented to that effect and suggested he quit for the
Dr. Baker answered, ‘My medical students deserve my best effort.’ Those few simple words summarized the lifelong philosophy of a dedicated and inspiring teacher.”

Baker’s dedication to education was brought to the fore in the AAN, as he pressed to have education courses offered at the Annual Meeting in 1951. As Francis Forster, MD, recounted, “At one point, Abe felt the need for continuing education and that was long before the term was used or CME became a force in graduate medical education. He pushed for a course in neuropathology. We were concerned about the expense. How could the Academy afford it? Abe offered to make the slides in his own laboratory. So with his insistence we agreed. With bated breath, we waited the results of that first course of the Academy. We were all in Abe’s room when he came in to report that the course was solvent. While we were taking deep breaths of relief, he immediately announced that ‘next year we are going to have three courses!’”

“Abe was something else again,” recalled former AAN President Joseph M. Foley, MD, FAAN, in 2008. “He was a contentious type. I got very fond of him before the end. But in the early days, there were difficulties. He was a little guy. And he was chronically complaining about something. But on the other hand, while he complained he had a sense of vision. He had a sense that neurology should be more prominent in the medical community than it was. I think he saw the future of neurology more clearly than most of the people did in those days. He was persistent. By God, he never let go. Once he got a hold of an idea, he hung on to it. He would pursue it and he would pursue it right to the end. Most of the ideas, fortunately, were very good in an organizational sense. It’s just that you could depend on it, no matter what—even when you agreed totally with Abe—you knew there was going to be some contention along the way.”

Baker’s presence loomed large throughout the neurology community. “Abe was intensely loyal to his friends and his students,” said Forster. “They could do no wrong. When his former residents failed or conditioned the American Board of Psychiatry and Neurology, Abe would be furious with the board. So Ady Sahs and I were in a position to place Abe on the board from the old Section on Nervous and Mental Diseases of the American Medical Association. This created quite a furor among the board members, especially the psychiatrists and their colleagues. They were afraid of Abe, and to no small extent of Ady and myself as well. Ady and I felt that if Abe were on the board he would see things differently. I recall well the first meeting where one of Abe’s residents failed. Abe was indignant and wanted to know ‘Why?’ So the cards were read (each director kept a card of each candidate’s performance). Abe’s comment: ‘He should have been flunked!’ So, despite his loyalty, he was fair and just and always saw the broad picture.”
That sense of vision made Baker a formidable lobbyist for our profession. “Abe could see the political future of neurology depended upon the establishment of an Institute,” said Forster. Baker and Pearce Bailey led a group who pressed Congress for a single institute within the National Institutes of Health dedicated to neurology research. The NIH established the National Institute of Neurological Disorders and Blindness in November 1950.

“About the time of the Virginia Beach meeting [in 1951], the director of the NIH, who was a biochemist and nutritionist, was invited to attend the meeting,” said Forster. “He was cultivated by Abe and the rest of us and the main thrust was to have Pearce Bailey, then in the VA Central Office, become the first director of the NINDS. This was accomplished.”

After Baker’s term as AAN president ended in 1951, he directed the Annual Meeting Special Course Program for the next decade. He was a continual presence at Academy meetings and functions while educating two generations of neurologists and editing the three-volume Clinical Neurology, published beginning in 1955. In 1959, Baker was awarded the Fulbright Teaching Professorship at the University of Oslo. The University of Minnesota honored Baker with the prestigious Regent’s Professorship in 1973, “a highly coveted and rarely granted acknowledgement of outstanding academic achievement bestowed by his fellow academicians.” Baker was appointed Professor Emeritus in 1975 and then became Chief of Neurology at Mt. Sinai Hospital in Minneapolis until 1983.

Baker was a pillar in the neurology community and his leadership skills were valued. He served as chair of the National Committee for Research in Neurological Disorders (1952–1969), president of the American Board of Psychiatry and Neurology (1963), president of the American Neurological Association (1970–1971), and president and chair of the board of the Epilepsy Foundation of America (1971–1973).

Joe Foley sums up the passion and vision of A.B. Baker with diagnostic precision: “He had an enormous enthusiasm for the study of the nervous system, and he felt it was only a matter of time before American neurology would take its place as European neurology had long before.”

---

1952
Annual Meeting convenes in Louisville, KY, where 22 scientific papers and 12 exhibits are presented

1953
Neurology publishes monthly; Annual Meeting is held in Chicago: 35 scientific papers are read and eight courses examine episodic disturbances, neuroophthalmology, language disabilities, brain tumors, and neuroanatomy

1954
Annual Meeting convenes in Washington, DC, with seven special courses and 20 exhibits; Neurology surpasses 2,000 subscribers
The 59th Annual Meeting in Boston featured 197 ABPN-approved education programs and attracted 12,681 attendees, breaking all previous records. Education programming was offered every day throughout the entire week.

The Academy launched the Self-Assessment Examination in Clinical Neurology (NeuroSAE) to provide members with an important new educational option for neurologists to fulfill the self-assessment component of the ABPN’s Maintenance of Certification program. The online examination is designed to help neurologists determine their strengths and areas for improvement in 20 subspecialty areas.

The AAN’s premier CME publication, Continuum: Lifelong Learning in Neurology (Continuum), was enhanced with an online site for subscribers, where they can access and search all issues back to the first one in 1993. They may also download and print documents, answer the CME questions online, and participate in Quintessentials, the practice improvement program that accompanies Continuum twice a year.

Through expanded programming and topics, efforts to revitalize the regional conferences yielded success as the Fall Conference in Las Vegas drew record attendance. Special attention to the needs of those nearing Maintenance of Certification was welcomed by attendees. The conference was popular with members who had not yet attended an Annual Meeting and offered education and networking opportunities that will strengthen their careers.

A new K-12 outreach initiative of the Subcommittee on Education for Non-neurologists was proposed and approved to take place at the 2008 Annual Meeting in Chicago. The purpose of the outreach is to develop fun and interesting lesson plans that promote the importance and understanding of neurology and neuroscience in the classroom, and inform students about the role of neurologists in medicine.

To be more responsive to the needs of the 11,149 members of AAN Sections and improve communications among the 30 sections and with Academy leadership, a new Executive Committee of the Committee on Sections (COSEC) was formed and held its inaugural meeting in March 2007. The COSEC will serve as a clearinghouse for section resources, hold sections accountable for activities, serve as a sounding board and provide direction for sections, identify annual key initiatives, and increase section visibility throughout the AAN.

The AAN’s online continuing medical education (CME) transcript tool—which allows users to keep track of CME credits earned through the AAN—was improved to enable users to track credits earned outside the Academy. The CME tracker allows users to print out a customized report showing Academy CME credits, non-AAN CME, or both at the same time.
Clinical Practice and Medical Economics

In the eyes of John P. Conomy, MD, JD, FAAN, “Nelson Richards changed the nature of the AAN as an institution, literally from its historic past to its dynamic present.”

When Nelson Richards joined the AAN in 1957, the growing ranks of practicing neurologists were beginning to establish themselves as full-time clinicians and not part-time psychiatrists. Their needs differed from those of the academicians who dominated the Academy. There were rumblings that the AAN was too tied to the ivory towers and not responsive to the clinics. Separate clinician societies began to form. Finally, in 1967, Herbert Rosenbaum, MD, FAAN, and Past President Joseph Foley, MD, FAAN, convinced the Academy leadership to establish a Committee on Practice, with Rosenbaum as chair. The committee’s charge soon expanded to include ethics, legal affairs, federal health policy and legislation, quality standards, and technology assessment.

By the time Richards chaired the committee in 1978, he had spent 11 years at the Cleveland Clinic as an associate professor and another nine years in private practice in Virginia. He also had served as the AAN’s assistant secretary-treasurer in 1968, and secretary-treasurer the following year. As Practice Committee chair, Richards helped get practice management courses introduced to the Annual Meeting in 1981. According to Laura Powers, MD, FAAN, “Nelson by himself extracted all the ICD-9-CM (diagnosis) codes pertaining to neurology for the first edition of ICD-9-CM for Neurologists, a book very popular with members. At that time, software wasn’t available to do this by computer and the task of getting the book together was significant. I know of no other organization that did this on its own.”

1958
The Robert Wartenberg Lecture introduced at Annual Meeting in Philadelphia; long-term reserves reach $13,000

1959
Los Angeles is first west coast city to host Annual Meeting—86 scientific papers are read, including first by a visiting scientist from Soviet Union

1960
Annual Meeting convenes in Miami Beach
When Richards became the first practicing neurologist elected president of the AAN in 1983, he continued to champion the needs of the clinicians. But he also knew the whole of the organization was greater than the sum of its parts.

“Nelson is responsible for the current cohesion and much of the ongoing growth of the AAN,” says Conomy, who served with Richards as First Vice President. “He brought the community of practicing neurologists into the mainstream of the organization and eventually into the leadership and conscience of the AAN. In doing this, he exhibited formidable courage, great foresight, and impressive dedication to the causes of high professional standards and shared destiny for all members of the neurological community. Nelson saw neurology as a single entity, interconnected across venues, interests, institutions, individual pursuits, and nations. He realized and acted upon (in spite of formidable resistance and no little criticism) the necessity of connection of our specialty with broad communities: patients and governments; research enterprises and public action enterprises; teachers and thought leaders; educators and their parent institutions and nations—and he, more than anyone, doggedly established the communicative tentacles among them. And he did it by swimming upstream, against often heavy (and understandably traditional) resistance.”

Richards had to convince the Board of Directors (then known as the “Executive Board”) to adjust the Annual Meeting to better accommodate the work schedules of practitioners by moving the science presentations to the middle of the week, with education courses available during the first and last days of the meeting. Though controversial, the idea ultimately proved popular.

At various times, Richards sat on the Education Committee, chaired the Nomination Committee, served on the Executive Board for a decade, and was a longtime member of the AAN’s delegation to the American Medical Association.

“He was instrumental in our relationship with the AMA, especially in the areas of CPT© and the Relative Value Update Committee,” says Powers. When the Resource Based Relative Value System (RBRVS) was implemented in the early 1990s to determine the worth of visits and procedures, Richards helped organize a half dozen regional crash courses to help members understand and use these new codes. RBRVS also required that the relative

---

1961

Annual Meeting convenes in Detroit; Baker steps down as director of Special Course Program

1962

Accountant Stanley Nelson hired to oversee AAN finances; first essay contest for undergraduate medical students in North America encourages interest in neurology as a profession

1963

Minneapolis hosts 15th Annual Meeting; AAN has 2,162 members
values for work and practice expense be determined by committees made up of specialties. Richards enabled the AAN to gain a permanent seat at the Relative Value Update Committee (RUC). “This was really quite an achievement considering the size of our society,” according to Powers. “He also established the precedent that the AAN comes to this body with such reliable numbers and presentation that our society maintains a significant leadership role there to this day. Our reputation for good presentations and representation to CPT continues as well.”

Marc Nuwer, MD, FAAN, agrees. “Nelson was prepared. He knew where we should go, and he organized people and resources to achieve those ends. He wanted actions to be well planned in advance, thoroughly vetted with interested parties, and with the right backup information available. With those in hand, his efforts were generally successful.”

To John Conomy, Richards “was (and is) the Harry Truman of American neurology. He did not waste words. Cajolery, argumentation, inspiration, and no little natural hauteur were prominent features of Nelson’s undeniable ability to lead.”

“Nelson doesn’t readily take ‘no’ for an answer,” says Nuwer, who was talked into attending one Medical Economics Subcommittee meeting, and then another. “Before long, I ended up at each meeting and activity. I believe I was with the committee for about four years before I ever actually agreed to join the committee. Such was Nelson’s gentle persuasiveness and persistence.”

Richards’ ability to identify and nurture talented leaders has had a lasting effect on the Academy. “More than anything else,” says Powers, “there are many current members of the Medical Economics and Management Committee and its subcommittees who credit Nelson’s mentorship for their current leadership roles in CPT, RUC, and other bodies where the AAN remains well represented and its members benefit from the gains they have achieved over the years. Nelson was skilled at training us, smoothing the way for us politically, then handing over the reins for continued success. His mentorship is an important part of his legacy.”
2007 Clinical Practice and Medical Economics Highlights

- The AAN published evidence-based clinical practice guidelines on the clinical and radiographic impact of neutralizing antibodies to interferon-beta; the use of epidural steroid injections to treat radicular lumbosacral pain; medical treatment of ocular myasthenia; treatment of nervous system Lyme disease; a reassessment of neuroimaging in the emergency patient presenting with seizure; and evaluating an apparent unprovoked first seizure in adults.

- Work continued on the development of guidelines in the seven areas identified by physicians and patients as the biggest gaps in the care of people with multiple sclerosis.

- The Academy published the second edition of its EHR vendor report to help guide members as they investigate and choose electronic health records systems.

- The AAN continued to foster relationships with national quality alliances, including measure developers, endorsers, implementers, and evaluators. This has prepared the AAN to support member initiatives in performance measurement and improvement.

- The AAN prepared members to participate in the Physician Quality Reporting Initiative (PQRI) program, and encouraged future participation in pay-for-performance initiatives.

- The Payment Policy Subcommittee of the Medical Economics and Management Committee (MEM) began direct contacts with four large private insurance companies—UnitedHealth Care, WellPoint, Humana, and Aetna.

- The MEM worked with the Stroke Systems Work Group to develop a stroke coding guide for members.
Neurology researchers and patients are very fortunate Roger Rosenberg has found the brain so inspiring.

As President Elect of the AAN in 1989, Rosenberg seized on the upcoming Decade of the Brain as the catalyst for an opportunity to raise funds for neurologic research. Rosenberg approached President Lewis P. Rowland with the idea of developing a foundation to raise funds for fellowship and research grants, and in late 1989, a task force to develop a foundation was formed, including Rosenberg as a member. After two years, the group put forth a plan to create the American Academy of Neurology Education and Research Foundation, a new non-profit organization that would work to improve patient care by providing financial support for neurologic education and research programs. Paperwork was filed with the Internal Revenue Service in 1993, and the Foundation raised more than $600,000 the following year. Cumulatively through the 2007 fiscal year, the American Academy of Neurology Foundation (as it was later renamed) raised $15,628,171—most significantly to support young investigators through clinical research fellowships. One would have to say Rosenberg's brainstorm has paid off handsomely.

According to Jasper R. Daube, MD, FAAN, who served on the task force that developed the Foundation, Rosenberg's approach to building consensus among the parties was critical. "There is no question in my mind that his success was in large part due to his very personal 'style.' He visited with people individually on each of the issues that I was aware of in creating the Foundation. He talked with us privately at meetings, by
phone, or anywhere that he might find us. The discussions could be for five minutes or 20 minutes, but in each case I left feeling that he had heard and understood my thoughts and concerns. He was then able to fuse these into proposals that met the need of all the stakeholders, without the need for endless debate at formal meetings, where each of us might have felt compelled to stand by positions that we might have taken early in the discussion.”

Bespectacled and bow-tied, Rosenberg presents the quintessential aura of the consummate neurology professional. His career has encompassed the exam room, the classroom, the boardroom, and the lab. It is easy to understand Rosenberg’s passion to support research, as it stems from his passion to conduct research.

At the Neurological Institute of New York he studied under two legends, H. Houston Merritt and G. Milton Shy, as well as two future AAN presidents: Robert A. Fishman and Lewis P. Rowland. He moved on to the National Institutes of Health, where a fellowship in biochemical genetics brought him to the laboratory of Nobel laureate Marshall Nirenberg for two years. In 1973, he was appointed professor and first chair of the new department of neurology at the University of Texas Southwestern Medical Center, where he has been a valued teacher, clinician, and researcher for more than 30 years.

Rosenberg has authored or edited such books as Atlas of Clinical Neurology, Clinical Companion to the Molecular and Genetic Basis of Neurological Disease, The Molecular and Genetic Basis of Neurologic and Psychiatric Disease, Comprehensive Neurology, Molecular Biology of Neurological Disease, Neurogenetics: Principles and Practice, The Treatment of Neurological Diseases, and several books in the Clinical Neurosciences series. He also has published more than 200 original scientific papers, chapters, or reviews.

Amid these responsibilities, Rosenberg has been a vital force in the AAN. “Roger Rosenberg is...
a demonic workaholic,” says Rowland. “If you ask him a question or assign him a task, he never says ‘no’ and responds immediately. He is devoted to the Academy.”

Rosenberg chaired the Scientific Program Committee for six years in the late 1970s and early 1980s. His efforts helped to double the number of scientific presentations at the Annual Meetings. He also chaired the Potamkin Prize Subcommittee from 1988 to 1999. He served four years on the Executive Board of the Academy prior to becoming president in 1991.

During his term, he worked on improving emergency management and intensive care of neurologic patients and their subsequent rehabilitation. He also promoted geriatrics, neuroradiology, and neuroimaging on behalf of members and patients.

Rosenberg has served on the Editorial Board for Neurology. From 1982 to 1988, he was editor-in-chief of the Journal of Neurogenetics. “As editor of the Archives of Neurology, he has rejuvenated a major journal that was in trouble until he started in 1997,” says Rowland.

Since 1991, Rosenberg has occupied the Abe (Brunky), Morris, and William Zale Distinguished Chair in Neurology at University of Texas Southwestern Medical Center. He continues his research on Alzheimer’s disease as well as genetic neurological diseases. He also maintains his directorship of the NIH-funded Alzheimer’s Disease Center at the University of Texas Southwestern Medical Center at Dallas.

Rosenberg continues to make significant contributions to the Academy and neurologic research. Says Rowland, “Roger has surely been one of the more important leaders of American neurology.”

---

1976
Annual Meeting convenes in Toronto, ON, Canada, attendance exceeds 2,000

1977
Annual Meeting convenes in Atlanta; International Affairs Committee established; AAN is a founding member of the National Coalition of Research for Neurological Disorders

1978
Staff grows to five; operating budget stands at $500,000; long-term reserves reach $350,000
2007 Science and Research Highlights

- The 59th Annual Meeting in Boston had an added emphasis on science. A record number of 1,600 scientific presentations were offered, including an all-new Future of Neuroscience Conference: Therapy of Genetic Disorders, a fresh series of six Integrated Neuroscience programs, additional poster sessions, and five plenary sessions.

- Neurology was redesigned, increased publication to a weekly schedule, and reduced issue length. It continues to be the most widely read and highly cited neurology journal in the world.

- To help fulfill the AAN Foundation’s mission to strengthen the corps of researchers investigating treatments for neurologic disorders and be the largest supporter of research outside NINDS, the AAN committed $1.9 million to the Foundation for clinical research fellowships. The funds will be distributed starting in 2008.

- The AAN Foundation established three-year fellowship award partnerships with the Parkinson’s Disease Foundation; the ALS Association; and with the Alzheimer’s Association for a fellowship honoring research pioneer Robert Katzman, M.D.

- The AAN Foundation awarded eight fellowships in 2007.

- The annual AAN Staff Campaign raised more than $25,000 to support research efforts.

---

1979

Annual Meeting attendance in Chicago surpasses 2,400

1980

Headquarters moves to 4,000-square-foot office space in Minneapolis; Annual Meeting goes to New Orleans

1981

Budget reaches $1 million; Annual Meeting in Toronto expands to 62 programs, including full and half-day courses and breakfast and dinner seminars; practice management courses introduced
Donald M. Palatucci left us too soon, but he left us with a marvelous legacy that goes beyond the award-winning advocacy training program that bears his name.

“Don single-handedly pushed the Academy’s agenda to expand the AAN’s involvement in helping state neurological societies get established,” said then-President Stanley Fahn, MD, FAAN, following Palatucci’s death to colon cancer in November 2002. “Spurred by Don, the AAN established a new standing committee on State Affairs in 2002. Don contributed wisdom, enthusiasm, humor, and decency to all the committees and task forces he served on. The establishment of the State Affairs Committee will be a lasting memorial to Dr. Donald Palatucci.”

Nearly six years later, Palatucci’s legacy is undiminished in the eyes of Mark Yerby, MD, MPH, FAAN. “Don had inexhaustible energy and his enthusiasm was infectious. Without his efforts not only would there be no neurological society in California but the entire AAN State Affairs program would probably not exist.”

Palatucci was a driving force in California neurology, where he was a private practitioner and clinical professor of neurology at the University of California San Francisco Medical Center. He was the founding president of the Association of California Neurologists and the California NeuroAlliance, an organization of California neurologists and patient advocacy groups seeking to create a common force for patients on legislative, regulatory, and policy issues.
He was also active on numerous AAN committees over the years. He inspired members and staff alike with his belief that organizing, involving, and strengthening neurologists on a state and local level was just as necessary to the Academy as representing them on a national level.

“I first knew Don when we both served on the Legislative Affairs Committee of the Academy,” says John Booss, MD, FAAN. “What came across immediately was his incisive nature, seeing into the crux of a matter very quickly. That capacity was embedded in a gregarious personality with a marvelous sense of humor. Greatly respecting his judgment, I intuitively listened for his opinion. He had personal grace. Once, after I had spoken up in committee in support of his and Eric Hauth’s pioneering work in California, he made a point of seeking me out to thank me. It was not a routine political thank you, but rather one of a strongly felt personal nature.

“Later we joined the Academy’s Board at the same time. On an introductory trip around St. Paul for new Board members, we sat together on the bus and regaled each other with clinical stories and our fascination for the practice of neurology. He clearly was well trained and had had great experience, but he also had that ineffable quality, not teachable, of a master clinician’s intuition. During his Board tenure, his tumor aggressively re-emerged, but his passion and creative thinking for neurology never flagged. If anything they grew more powerful as he had to focus his energies. His last appearance at a Board meeting was both intensely moving and greatly motivating for his colleagues.”

He did not live to see the first class of aspiring neurology advocates gather in January 2003 to learn how to be effective agents of change. But the seeds sown by Don Palatucci are now thriving. Over the ensuing years, the Donald M. Palatucci Advocacy Leadership Forum has graduated more than 150 advocacy leaders from 39 US states as well as Austria, Canada, Guatemala, China, Georgia, India, Ireland, Japan, Pakistan, and the Philippines. These members are carrying on Palatucci’s mission to improve health care in their communities.

While he reaped numerous awards and honors as a teacher and physician, what he gave was much more important to him than what he gained.
2007 Advocacy Highlights

- The AANPA established the political action committee BrainPAC, which surpassed its initial fundraising goal of $50,000 to support candidates for federal offices who are sympathetic to neurology issues.

- Direct involvement of AAN members in advocacy continued to grow in 2007, as 31 neurologists from 20 states and three countries participated in the Palatucci Advocacy Leadership Forum and Neurology on the Hill attracted its largest group to date—108 members—to visit Capitol Hill.

- As Congress considered numerous health policy issues, AAN members contacted their representatives and senators in record numbers.

- The AAN worked with legislators to draft a bill creating Epilepsy Centers of Excellence, introduced in both the House and Senate.

- On behalf of the AAN, two members testified before Congress on the effects of traumatic brain injury (TBI) and the link to post-traumatic epilepsy in veterans of the wars in Iraq and Afghanistan, as the Senate considered a bill to improve rehabilitation, training, and assisted living services for veterans with TBI.

- The AAN helped draft legislation to improve screening for TBI in combat veterans, enhance telehealth services, and establish better training programs for injured veterans and their families as they manage the effects of TBI.
1991
Staff grows to 36; Boston is the site for the Annual Meeting

1992
Legislative Affairs Committee moves all legislative meetings to Washington, D.C.; Annual Meeting held in San Diego

1993
American Academy of Neurology Foundation established; Continuum: Lifelong Learning in Neurology self-assessment program debuts; New York hosts Annual Meeting
Membership

If there is such a thing as an “über-member” of the Academy, Kenneth M. Viste, Jr., is surely a leading contender to top the list. In spite of being confined to a wheelchair since a childhood bout with polio, Viste was indefatigable, constantly involved, always on the move.

Viste presided over the AAN as President from 1995 to 1997, chaired the AAN Foundation from 2003 to 2005, and served on the Boards of both organizations. His committee memberships included Legislative Affairs, Practice, Education, Finance, Meeting Management, Bylaws, Audit, Investment, Nominations, Long Range Planning, Ad Hoc Investment, Potamkin Prize, Public and Professional Information, AAN Office, and Committee on Sections—as well as several Foundation committees.

He also volunteered for the Commission on Subspecialty Certification, ANA/AAPM&R Joint Task Force, Stroke Systems Task Force, Public Leadership Award Celebrity Task Force, Quality Issues Work Group Task Force, and the Physicians Workforce Task Force—to name just a few. His Sections memberships included Stroke, Spine, Multiple Sclerosis, General Neurology, and Neurological Rehabilitation.

Viste, the second practicing neurologist to be elected AAN President, maintained a clinic in Oshkosh, WI, for 35 years, and his patients inspired his efforts to take on the socio-economic and health care inequities that further challenge people with neurologic disorders. Recalls his close friend Jay H. Rosenberg, MD, FAAN, “I had the privilege of making rounds with him one day, and it was clear patients could relate as they felt he was one of them.”
His advocacy skills honed as chair of the Wisconsin Physicians Political Action Committee and president of the Wisconsin Medical Society, Viste chaired the legislative committees of both the AAN and the AMA. “Ken was an extraordinary renaissance man,” says Rosenberg. “He had vision of what health care needed to consist of but also had the political knowledge to implement what he could and compromise where he needed.”

Viste was a regular visitor to Capitol Hill, whether testifying in Congress or chairing the Practicing Physician’s Advisory Council of the Health Care Financing Administration. “Washington, DC, was his second home!” says Kapil D. Sethi, MD, FRCP, FAAN, who served with Viste on the AAN Board of Directors. “He worked tirelessly to lobby the decision makers in Washington to improve reimbursement for neurologists. Ken was tenacious, focused, and pragmatic. He looked for younger people who could be leaders one day.”

“Ken was successful as a leader because of his commitment to improving the lives of others, his enthusiasm, his intelligence, and his uncanny ability to forge consensus among disparate perspectives,” said former President Steven P. Ringel, MD, FAAN.

“On a personal level, Ken was simply loads of fun,” said Ringel. “He was perpetually in motion, whether swimming laps at a hotel pool or racing through an airport to catch a plane. Just as many people never realized that Franklin Roosevelt was unable to walk, so it was with Ken. I took it for granted he could go anywhere because he did—often at a pace that was difficult to match. He participated in every event even if it meant entering a restaurant via the kitchen’s loading ramp. I can still see his sparkling eyes as he was being hoisted, chair and all, onto a small cruise ship for a reception he hosted.”

Sethi agrees. “He was a genius at maneuvering the wheelchair while having a glass of wine and eating hors d’oeuvres—all at the same time!”

After his untimely passing from the effects of gall bladder cancer in August 2005, the Neurology Public Policy Fellowship was renamed in his honor as a testament to his tireless work in advocacy for the Academy. And the Kenneth M. Viste, Jr., MD, Patient Advocate of the Year Award was created to honor AAN members who exemplify Viste’s leadership and commitment to advocating for the patient community.

Along with selflessly donating his time to the AAN, Viste picked up the tab on his expenses. “Ken was generous and very supportive to the
Academy. His entire career expenses were pro bono,” says Rosenberg. Viste was among the first to sign up for the AAN Foundation’s Neurology Heritage Society. Upon his passing, his estate gifted nearly $63,000 to the Foundation. Said his wife Jan, “Just as he wanted to make sure that his family was taken care of if he was not with us, he also wanted to do what he could for the AAN. His profession and the people he worked with—and the patients he worked for—had given him so much. This was his way to give something back.”

During the AAN Foundation Gala at the 2006 Annual Meeting, attendees paused to remember the spirit of this man as a spotlight shone on the vacant wheelchair. He never let himself be held hostage to the notion of “impossible.”

Said Ringel, “We can only hope to measure up to his high standards in trying to improve the lives of others. Although in a wheelchair and unable to walk, Ken stood taller than the others and left his footprints in our hearts.”

Ken Viste’s brave determination and limitless generosity should be a legacy that all AAN members can embrace.

---

2000
AAN Enterprises, Inc., (AEI) formed; The Brain Matters supplement is published in USA Today; Annual Meeting attendance in San Diego exceeds 10,000; AAN successfully advocates for changes in Medicare Fee Schedule to increase 2001 reimbursements by $54 million

2001
Neurology Today debuts as monthly publication; Contemporary Clinical Issues Plenary Session introduced, Attorney General Janet Reno and actor Michael J. Fox address Annual Meeting in Philadelphia; HIPAA compliance manual aids members in complying with new privacy regulations

2002
First AAN Regional Conference held; Annual Meeting includes program on biological and chemical threats and neuropsychiatric effects of terrorism; Vocus introduced to speed member communications to Congress; second generation of AAN.com launches
2007 Membership Highlights

- Membership stood at 21,358 at the end of 2007, a five-percent increase over 2006. With the establishment of the American Academy of Neurology Professional Association, AAN members automatically became members of the AANPA.

- The AAN Leadership Development Program was launched to identify, train, and nurture members who have demonstrated the potential to become significant leaders. The first class of 18 members increased their understanding of the AAN and the roles, responsibilities, key principles, and disciplines for effective association leadership.

- The new AAN Staff Leadership Academy identified emerging leaders and trained them to research members’ needs, use and share data in the decision-making process, and scan the neurology profession for any course corrections.

- AAN.com was redesigned to provide more information about AAN programs and services; highlight important news from the science, research, practice, and advocacy areas; and enable members to customize the home page to suit their particular interests.

- Neurology and Neurology Today continued to be the best read publications in the profession. Patient and caregiver subscriptions to the patient magazine Neurology Now reached 160,000, with an additional 300,000 readers per issue through distribution by AAN members.

- The Academy strengthened the public’s awareness of neurology and understanding of brain disorders with more than 400,930,000 media impressions—double the number from 2006.

<table>
<thead>
<tr>
<th>MEMBERSHIP CATEGORIES</th>
<th>2006</th>
<th>2007</th>
<th>1-year growth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honorary</td>
<td>67</td>
<td>68</td>
<td>1%</td>
</tr>
<tr>
<td>Senior</td>
<td>1,100</td>
<td>1,210</td>
<td>9%</td>
</tr>
<tr>
<td>Fellow</td>
<td>1,715</td>
<td>1,686</td>
<td>-2%</td>
</tr>
<tr>
<td>Active</td>
<td>8,655</td>
<td>8,667</td>
<td>0%</td>
</tr>
<tr>
<td>Associate</td>
<td>3,830</td>
<td>3,387</td>
<td>-13%</td>
</tr>
<tr>
<td>Affiliate</td>
<td>691</td>
<td>832</td>
<td>17%</td>
</tr>
<tr>
<td>Junior</td>
<td>2,404</td>
<td>3,451</td>
<td>30%</td>
</tr>
<tr>
<td>Medical Students</td>
<td>1,084</td>
<td>1,298</td>
<td>16%</td>
</tr>
<tr>
<td>Corresponding Fellow</td>
<td>282</td>
<td>273</td>
<td>-3%</td>
</tr>
<tr>
<td>Corresponding Active</td>
<td>405</td>
<td>486</td>
<td>17%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>20,233</td>
<td>21,358</td>
<td>5%</td>
</tr>
</tbody>
</table>
What Are the Qualities of a Good AAN Leader?

The AAN has been led by 30 presidents over its 60-year history. Several share their thoughts on the leadership qualities they believe are valuable when members step to the front of this organization to direct its activities and fulfill its promise.

“A leader in the Academy must be ambitious for neurology and its constituents alone, and must enter the arena as an honest and believable person, who is inclusive, and must be a consensus builder who always seeks coalition formation. From this starting point, the leader must be determined and must always encourage open dialogue and must never be defensive. Though a leader must follow the lead of our membership, most often deferring a decision to the majority, at other times the leader must recognize the need to be a visionary thinker, and must be comfortable taking the risk of being ahead of the membership. My AAN experiences have taught me that fear of change, fear of confrontation, and fear of loss of control are our most common pitfalls, and to be a leader in the Academy is to recognize and work beyond these feelings.”

Stephen M. Sergay, MB BCh, FAAN
AAN President, 2007–2009

“I don’t think any single set of qualifications applies for AAN leadership as the main reason the AAN has done so well is that each president has brought in a unique set of skills and experience which has melded effectively with those preceding and those to come. This is a tribute to a very effective nomination and election process and to a very effective staff. Of course, dedication is essential, often requiring a realignment of one’s priorities.”

Theodore L. Munsat, MD, FAAN
AAN President, 1987–1989

Membership surpasses 20,000; Washington, DC, office opens; first report on electronic health records vendors released; Neurology Today goes biweekly; attendance at San Diego Annual Meeting sets new record; Virtual Annual Meeting provides online access to missed programs

American Academy of Neurology Professional Association established; BrainPAC created to strengthen advocacy efforts; Future of the Profession and the AAN Task Force formed; Neurology publishes weekly; third-generation AAN.com goes online; record attendance at Annual Meeting in Boston surpasses 12,000
"The president is a not a full-time, onsite position, so he or she needs to rely heavily on the executive director and staff for day-to-day operations and avoid becoming a micromanager. The president has to have an understanding of the diverse interests and needs of members and should encourage as many members as possible to become involved in organizational decisions and activities. Attributes that help include communication skills, high energy, optimism, flexibility, punctuality, organizational ability, and, most importantly, insight into future needs of the profession."

Steven P. Ringel, MD, FAAN
AAN President, 1997–1999

"I think, first of all, a good leader is somebody who can bring the organization to some kind of realistic work program and get it to work effectively. Somebody who has the vision to imagine where the organization is going and what contribution the organization can make both to its discipline and to society in general. Somebody who can also deal with the inevitable differences of opinion and action that are likely to arise in any effective organization."

Joseph M. Foley, MD, FAAN
AAN President, 1963–1965

"Perhaps if the future existed, concretely and individually, as something that could be discerned by a better brain, the past would not be so seductive: its demands would be balanced by those of the future. Persons might then straddle the middle stretch of the seesaw when considering this or that object. It might be fun."

Vladimir Nabokov
“The number-one priority of a good association leader must be devotion to the benefit of the members. The leader should have the foresight and courage to assess the needs and opportunities for members and develop plans to fulfill these opportunities. Sometimes leaders have to make difficult and controversial decisions, and must have the courage to make them. The leader must be someone who can work with staff and ensure that the CEO is carrying out the board’s directions, and becomes a good liaison between the CEO and board if necessary. The leader also monitors committees and their output to make sure it’s consistent with the strategic plan and benefits the members.”

Sandra F. Olson, MD, FAAN
AAN President, 2003–2005

“Having good friends helps, listening to them is essential. What you do as an Academy leader is important for the future of neurology, including neuroscience and clinical practice.”

Lewis P. Rowland, MD, FAAN
AAN President, 1989–1991

“I would say the best advice I can give is to get good people and leave them alone. You, as president, do not have to be the bride at the wedding, the widow at the funeral, etc. The only other quality I would see in a leader would be to be open to suggestions.”

Robert J. Joynt, MD, FAAN
AAN President, 1977–1979
“A good leader looks not to his superiors or to becoming famous, but rather empowers people in the organization and then creates in them a sense of responsibility. The leader has the vision but surrounds him/herself with clear thinkers who further refine the vision, at times helping to change the vision or even offering new visions.”

Thomas R. Swift, MD, FAAN
AAN President, 2005–2007
The Other “Horsemen”

Even with his vision and drive, A.B. Baker did not single-handedly create the AAN. The other three “Horsemen” were invaluable allies and esteemed leaders and educators in their own right.

Russell N. DeJong, MD, FAAN

Dr. DeJong was a steady, tireless worker. I suspect he liked editorial duties better than almost anything except perhaps working on The Neurologic Examination, which came from the same typewriter. He was an occasional gardener and historian of neurology with an excellent memory for historical facts. I never knew him to take a vacation in the first 10 years of our association, nor did he miss a day for illness. He was kind, thoughtful, and a gentleman.

He was quiet and shy.... One day Dr. DeJong showed up on the wards at Queen Square in his white jacket, ready to do a clerk’s duties. At the time, he was well known as the editor of Neurology. He had signed up for a clerkship like any American resident and no one there knew he was coming, to their embarrassment. Although he seldom told jokes, he had an impish sense of humor and was a willing participant in the occasional session of fun and gossip at meetings.

Robert D. Currier, MD

Francis M. Forster, MD, FAAN

Frank Forster taught and practiced neurology in an era when none of our current sophisticated neuroimaging techniques existed, an era in which an extensive patient history and a careful neurologic examination were the most valuable diagnostic modalities. Both at the bedside and in the clinic, he always emphasized their importance and instilled this into all his students and residents. He loved his residents and believed that training and mentoring them were among his greatest accomplishments. Dr. Forster’s charismatic personality made neurology exciting and dynamic for those who worked with him, as I did as a resident from 1960 to 1963. Making rounds with him was always an exciting adventure. He was a charming and captivating storyteller who liked nothing better than to go into great detail on any subject. This prompted his beloved wife, Helen, to comment, “Ask Frank the time of day and he will tell you how to build a watch.”

Ludwig Gutmann, MD, FAAN
AAN Board of Directors, 1991–1995

Adolph L. Sahs, MD, FAAN

I did my residency under Dr. Sahs and he was a great teacher. He was popular as a lecturer and at the bedside. He had an intuitive feel for patients and their problems. He took their history by typing as the patient was in the office. He had a quiet sense of humor, and it was rare for him to lose his temper. In his youth, he was a very good baseball player and played in college. He was an excellent ham radio operator. Along with helping establish the AAN and serving as its president, he also was president of the American Neurological Association and of the American Board of Psychiatry and Neurology. I thought he was the best clinical neurologist I ever saw and he was a humble man.

Robert J. Joynt, MD, FAAN
AAN President, 1977–1979
From the yellowing pages of the Academy’s history comes a story that bears repeating:

As the leadership positions in the nascent AAN were being filled at the June 1948 organizational meeting in Chicago, Abe Baker found himself outmaneuvered by cronies of Walter J. Freeman, a prominent and outspoken neurologist from Washington, DC. Freeman was nominated president, seconded, and sealed by a swift motion to close nominations. The founding fathers were apoplectic: how could this interloper, who had had no part in forming the association, become the first president when the mantle should naturally rest on the shoulders of Abe Baker? There was frantic talk of extinguishing the new Academy and starting over.

But upon returning to his office at the University of Minnesota, Secretary-Treasurer (and later President) Joe Brown examined the membership file and discovered Freeman was ineligible—he had not paid his $5 membership dues! Brown contacted Freeman, who graciously relinquished his brief reign, and Baker was elected president by mail ballots. Baker presided as president for two years and continued to be involved with the AAN for the rest of his career. Freeman went on to be president of the American Board of Psychiatry and Neurology and continued his increasingly controversial work performing transorbital lobotomies across the United States.

The moral of the story? Be prepared, pay your dues, and pick your leaders wisely.

Joseph A. Resch, MD, FAAN

Far from being a mere footnote in AAN history, Joe Resch completed his residency at the University of Minnesota and divided his time between the campus and a pioneering neurology practice in the Twin Cities with Dr. Harold Noran.

Resch returned to the U of M in 1962 to manage the operations of the neurology department, and then served as Assistant Vice President of Health Sciences, managing more than 200 contracts for the medical school residents and all affiliated hospitals and clinics. He continued to see patients and research neuroimmunology and cerebral vascular disease. He also served on the AAN’s board of directors in the 1970s.

After A.B. Baker stepped down as chair in 1976, Resch chaired the university’s neurology department until 1982. He continued to practice neurology in California for several years before retiring and returning to Minnesota.

Resch visited the AAN’s headquarters in March 2008, shortly before his 94th birthday, as our honored guest as we celebrated the 60th anniversary of the founding of the AAN.

“I never would have thought this organization could grow so large. Imagine, 21,000 members! I’m sure that would make the old man very proud.”
The Academy and its subsidiaries (AAN Enterprises, Inc., AAN Professional Association, and the American Academy of Neurology Foundation) realized consolidated operating revenues of $31 million in 2007, a 59-percent increase since 2003 when revenues were just under $20 million. The two primary drivers are AAN’s publication *Neurology* and revenue related to continued increases in attendance at the Annual Meeting. This success has allowed the Academy to maintain member dues at the same level for the past five years. It also enables us to provide CME and other educational programs, advocacy training, and additional professional growth opportunities for our members in addition to the plethora of learning activities during our Annual Meeting. This year, the Academy also made a significant commitment of $1.9 million to support the Foundation’s clinical research training fellowships. This commitment provides resources for an additional 14 individuals working in the field of neurology.

### Operating Revenue and Expense ($000s)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member Dues</td>
<td>$5,584</td>
<td>$5,538</td>
<td>$5,498</td>
<td>$5,416</td>
<td>$4,898</td>
</tr>
<tr>
<td>Annual Meeting</td>
<td>9,552</td>
<td>8,573</td>
<td>7,253</td>
<td>7,459</td>
<td>5,672</td>
</tr>
<tr>
<td>Publication Royalties</td>
<td>10,478</td>
<td>9,373</td>
<td>8,573</td>
<td>8,584</td>
<td>4,111</td>
</tr>
<tr>
<td>Grants and Contributions</td>
<td>2,607</td>
<td>1,313</td>
<td>1,972</td>
<td>1,683</td>
<td>1,644</td>
</tr>
<tr>
<td>Products and Special Courses</td>
<td>2,194</td>
<td>1,992</td>
<td>2,495</td>
<td>2,468</td>
<td>2,899</td>
</tr>
<tr>
<td>Other</td>
<td>868</td>
<td>1,101</td>
<td>785</td>
<td>398</td>
<td>401</td>
</tr>
<tr>
<td><strong>Total Operating Revenues</strong></td>
<td><strong>31,283</strong></td>
<td><strong>27,890</strong></td>
<td><strong>26,577</strong></td>
<td><strong>26,008</strong></td>
<td><strong>19,626</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expense</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Membership</td>
<td>3,141</td>
<td>2,763</td>
<td>2,579</td>
<td>2,395</td>
<td>2,254</td>
</tr>
<tr>
<td>Annual Meeting</td>
<td>6,876</td>
<td>6,489</td>
<td>6,339</td>
<td>6,043</td>
<td>5,501</td>
</tr>
<tr>
<td>Publications</td>
<td>2,372</td>
<td>1,863</td>
<td>1,689</td>
<td>1,764</td>
<td>1,015</td>
</tr>
<tr>
<td>Programs</td>
<td>8,603</td>
<td>7,392</td>
<td>7,067</td>
<td>7,112</td>
<td>5,557</td>
</tr>
<tr>
<td>General and Administrative</td>
<td>7,025</td>
<td>6,514</td>
<td>6,132</td>
<td>5,938</td>
<td>5,118</td>
</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td><strong>28,017</strong></td>
<td><strong>25,020</strong></td>
<td><strong>23,805</strong></td>
<td><strong>23,252</strong></td>
<td><strong>19,445</strong></td>
</tr>
</tbody>
</table>

| Net Operating Income     | $3,266| $2,870| $2,772| $2,755| $181  |

In 2007, Boston set yet another record for Annual Meeting attendance and accordingly, revenues were higher than in the previous year. Membership revenue grew slightly, but recruiting and retaining dues-paying members continues to be a challenge. Membership has continually expanded over the last four years while growth in membership revenue has been relatively flat over the same period. This is due primarily to the aging of members and holding dues at 2004 levels. Additional resources have been dedicated to meet the challenges of member retention and recruitment.

### Membership Numbers and Dues Revenue ($000s)

In addition to increased Annual Meeting expenses resulting from increased attendance, the addition of staff and expenses related to *Neurology* added to 2007 publishing expenses. The costs of services related to our advocacy efforts and other programs at the state and federal levels, as well as products offered for practicing neurologists, have also increased this year. General and administrative costs include in-house costs as well as committee costs. Overarching most of the expense categories are travel costs—a continuing challenge.

The growth of the Academy and affiliated organizations has been nothing short of phenomenal. Over a five-year period we have gone from a $20-million multi-complex organization to a $30-million one, net assets have increased by 100 percent, long-term investments are more than doubled, and our cash position remains strong. Investments are intended to protect the AAN from major risks such as financial market risk, cancellation of an Annual Meeting due to factors outside our control, and other similar risks.
Because we have been successful financially, we are able not only to support budding neurologists as mentioned above, but also to expand our reach in the political arena. In 2007, the Board and the membership approved the establishment of the American Academy of Neurology Professional Association (AANPA), allowing the formation of a political action committee known as BrainPAC. Our presence in Washington and the ability to make contributions to political candidates widens the influence of the Academy to represent the membership.

**Assets and Liabilities ($000s)**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$11,942</td>
<td>$9,427</td>
<td>$11,314</td>
<td>$7,658</td>
<td>$8,576</td>
</tr>
<tr>
<td>Receivables</td>
<td>4,755</td>
<td>4,034</td>
<td>3,500</td>
<td>5,984</td>
<td>2,167</td>
</tr>
<tr>
<td>Property and Equipment</td>
<td>652</td>
<td>462</td>
<td>394</td>
<td>432</td>
<td>425</td>
</tr>
<tr>
<td>Investments</td>
<td>27,770</td>
<td>25,622</td>
<td>19,116</td>
<td>15,721</td>
<td>12,444</td>
</tr>
<tr>
<td>Other Assets</td>
<td>782</td>
<td>875</td>
<td>823</td>
<td>1,078</td>
<td>1,259</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$45,902</td>
<td>$40,420</td>
<td>$35,147</td>
<td>$30,872</td>
<td>$24,871</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Liabilities and Net Assets</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts Payable and Accrued Expenses</td>
<td>$2,374</td>
<td>$1,994</td>
<td>$1,811</td>
<td>$1,861</td>
<td>$1,364</td>
</tr>
<tr>
<td>Grants Payable</td>
<td>926</td>
<td>1,067</td>
<td>1,351</td>
<td>1,190</td>
<td>100</td>
</tr>
<tr>
<td>Deferred Revenue</td>
<td>6,330</td>
<td>6,378</td>
<td>6,179</td>
<td>5,413</td>
<td>4,893</td>
</tr>
<tr>
<td><strong>Net Assets</strong></td>
<td>36,271</td>
<td>30,982</td>
<td>25,806</td>
<td>22,408</td>
<td>18,514</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td>$45,902</td>
<td>$40,420</td>
<td>$35,147</td>
<td>$30,872</td>
<td>$24,871</td>
</tr>
</tbody>
</table>

Our goal for 2009 and beyond is to become a more strategically driven organization as directed by the Board, implemented by staff, and made possible through careful management of our resources. The complete audited financials are available to members upon request, and we value your participation in shaping the future of the Academy and the profession.

Bruce Sigsbee, MD
Treasurer
**AAN Foundation Treasurer’s Report**

2007 proved to be a successful and encouraging year for the Foundation. The structural realignment between the Foundation and the Academy continues and flourishes.

Net assets increased by $2.5 million, or 66 percent during the year. Late in 2006, the Foundation assumed responsibility for raising all corporate support for the Academy’s Annual Meeting in exchange for a service fee. This successful formula added $900,000 to 2007 revenues, increasing unrestricted (operating) revenue to $5.9 million. All told, the Foundation raised $6.7 million during the year.

The Foundation has committed $1.9 million to fund clinical research training fellowship programs through a grant from the Academy. This means that fourteen individuals will be able to engage in neurological research that otherwise would have been potentially unfunded due to lack of dedicated funding sources. The Foundation is excited to have the ability to fund the work of promising neurologists.

The year ahead promises more challenges for the Foundation. We anticipate increasing our capacity to target non-pharmaceutical resources to diversify our support. An ongoing challenge is to convey an awareness of our mission to both individuals and corporations. We are unable to do it all by ourselves, however, and we rely on you, the member or individual, to support us both in your conversations and your contributions. Thank you for supporting our mission!

Kapil D. Sethi, MD
Treasurer
2007–2009 American Academy of Neurology Leadership

BOARD OF DIRECTORS

President
Stephen M. Sergay, MBCh, FAAN

President Elect
Robert C. Griggs, MD, FAAN

Vice President
Michael L. Goldstein, MD, FAAN

Secretary
Terrence L. Cascino, MD, FAAN

Treasurer
Bruce Sigsbee, MD, FAAN

Directors
Susan B. Bressman, MD, FAAN
Vinay Chaudhry, MD, FAAN
Katherine A. Henry, MD, FAAN
Timothy A. Pedley, MD, FAAN

Past President
Thomas R. Swift, MD, FAAN

Laura B. Powers, MD, FAAN
Ralph L. Sacco, MD, FAAN
Lisa M. Shulman, MD, FAAN
Mark S. Yerby, MD, MPH, FAAN
Catherine Zahn, MD, FAAN

Editor-in-Chief, Neurology
John Noseworthy, MD, FAAN

Chair, American Academy of Neurology Foundation
Austin J. Sumner, MD, FAAN

Chair, AAN Enterprises, Inc.
Steven P. Ringel, MD, FAAN

Executive Director and Chief Executive Officer
Catherine M. Rydell, CAE

Archives Committee
Elan D. Louis, MD, MS, FAAN, Chair

Committee on Sections
Robert C. Griggs, MD, FAAN, Chair

Committee on Sections Executive Committee
John C. Morris, MD, FAAN, Chair

Editors-in-Chief Committee
John H. Noseworthy, MD, FAAN, Chair

Education Committee
Ralph F. Józefowicz, MD, FAAN, Chair

Annual Meeting Subcommittee
Ralph F. Józefowicz, MD, FAAN, Chair

Continuum Editorial Board Subcommittee
Aaron E. Miller, MD, FAAN, Chair

Distance Learning Subcommittee
Peter R. Bergethon, MD, Chair

Education Research Subcommittee
Barney J. Stern, MD, FAAN, Chair

Examination Subcommittee
Frederick G. Flynn, MD

Graduate Education Subcommittee
John Corboy, MD, FAAN, Chair
Program Accreditation and Development Subcommittee
Michael R. Watters, MD, FAAN, Chair

Subcommittee on Education for Non-Neurologists
Linda M. Selwa, MD, FAAN, Chair

Undergraduate Education Subcommittee
D. Joanne Lynn, MD, Chair

Ethics, Law and Humanities Committee
Michael A. Williams, MD, FAAN, Chair

Executive Committee
Stephen M. Sergay, MB BCh, FAAN, Chair

Executive Compensation Committee
Stephen M. Sergay, MB BCh, FAAN, Chair

Finance Committee
Bruce Sigsbee, MD, FAAN, Chair

Grievance Committee
Daniel G. Larriviere, MD, JD, Chair

Investment Committee
Michael L. Goldstein, MD, FAAN, Chair

Journal Arbitration Committee
James L. Bernat, MD, FAAN, Chair

Leadership Development Program Committee
Timothy A. Pedley, MD, FAAN, Chair

Meeting Management Committee
Timothy A. Pedley, MD, FAAN, Chair

Nominations Committee
Sandra F. Olson, MD, FAAN, Chair

Practice Committee
James C. Stevens, MD, FAAN, Chair

Patient Safety Subcommittee
Ellis R. Diamond, MD, Co-Chair
Daniel M. Feinberg, MD, FAAN, Co-Chair

Practice Improvement Subcommittee
Robert J. Baumann, MD, FAAN, Chair

Quality Measurement and Reporting Subcommittee
Christopher Bever, Jr., MD, MBA, FAAN, Chair

Quality Standards Subcommittee
Jacqueline French, MD, FAAN, Co-Chair
Gary S. Gronseth, MD, Co-Chair

Therapeutics and Technology Assessment Subcommittee
Janis Miyasaki, MD, FAAN, Co-Chair
Yuen T. So, MD, PhD, Co-Chair

Public Relations Committee
Robin L. Brey, MD, FAAN, Chair

Science Committee
Stefan M. Pulst, MD, FAAN, Chair

Alliance Awards Subcommittee
Robert T. Leshner, MD, FAAN, Chair

Basic Science Subcommittee
Raymond P. Roos, MD, FAAN, Chair

Bruce S. Scheinberg Award Subcommittee
Joseph R. Zunt, MD, Chair

Clinical Research Subcommittee
S. Claiborne Johnston, MD, PhD, Chair
Robert G. Holloway, MD, MPH, FAAN Vice-Chair

Dresiff-Penry Epilepsy Award
Susan S. Spencer, MD, FAAN, Chair

Dystel Award Subcommittee
Fred D. Lublin, MD, FAAN, Chair

Geriatric Neurology Award Subcommittee
Dennis W. Dickson, MD, Chair

Harold Wolof-John Graham Award
Thomas N. Ward, MD, FAAN, Chair

Jon Stolk Award for Young Investigators in Movement Disorders
Janis Miyasaki, MD, FAAN, Chair

Lawrence C. McHenry Award Subcommittee
Elan D. Louis, MD, MS, FAAN, Chair

Medical Student Essay Award Subcommittee
Nancy L. McNair, MD, Chair

Michael S. Pessin Stroke Leadership Prize Subcommittee
José Biller, MD, FAAN, FACP, FAHA Chair

Movement Disorders Research Award Subcommittee
Cynthia L. Comella, MD, FAAN Chair

Neuroscience Prizes Subcommittee
Lynne P. Taylor, MD, FAAN, Chair

Norman Geschwind Prize in Behavioral Neurology Subcommittee
M. Marsel Mesulam, MD, FAAN, Chair

Potamkin Prize Subcommittee
John H. Growdon, MD, FAAN, Chair

Preuss Award Subcommittee
Lisa M. DeAngelis, MD, FAAN, Chair

Scientific Program Subcommittee
Stefan M. Pulst, MD, FAAN, Chair

Sheila Essey Award Subcommittee
Robert G. Miller, MD, FAAN, Chair

Sleep Science Award Subcommittee
Beth A. Malow, MD, M, FAAN, Chair

TASK FORCES AND WORK GROUPS

Animal Studies Task Force of the Science Committee
Jasper R. Daube, MD, FAAN, Chair

Future of the Profession and the AAN Task Force
Stephen M. Sergay, MB BCh, FAAN, Chair

Governance Task Force
Bruce Sigsbee, MD, FAAN, Chair

Past Presidents' Council
Stephen M. Sergay, MB BCh, FAAN, Chair

Public Leadership Award Celebrity Task Force
John C. Mazziotta, MD, PhD, FAAN, Chair

Stroke Systems Work Group
Lawrence R. Wechsler, MD, FAAN, Chair

2007-2009 American Academy of Neurology Professional Association

AAN Delegation to the American Medical Association
Michael A. Williams, MD, FAAN, Chair
Susan S. McDermott, MD, Vice-Chair

Audit Committee
Orly Avitzur, MD, MBA, FAAN, Chair
BrainPAC Executive Committee
Bruce Sigsbee, M D, FAAN, Chair

Bylaws Committee
Stephen M. Sergay, M B BCh, FAAN, Chair

Executive Committee
Stephen M. Sergay, M B BCh, FAAN, Chair

Finance Committee
Bruce Sigsbee, M D, FAAN, Chair

Grievance Committee
Daniel G. Larriviére, M D, J D, Chair

Legislative Affairs Committee
P. David Charles, M D, FAAN, Chair

Kenneth M. Viste, Jr.,
Award Subcommittee
John Booss, M D, FAAN, Chair

Medical Economics and
Management Committee
Laura B. Powers, M D, FAAN, Chair
Joel M. Kaufman, M D, FAAN, Vice-Chair

Coding Subcommittee
Peter D. Donofrio, M D, FAAN, Chair

Payment Policy Subcommittee
Joel M. Kaufman, M D, FAAN, Chair

Practice Management and
Technology Subcommittee
Orly Avitzur, M D, M BA, FAAN, Chair

Membership Committee
Gregory D. Cascino, M D, FAAN, Chair

Affiliate Subcommittee
Amy R. Borenstein, PhD, Chair

International Subcommittee
Hanns Lochmueller, M D, Chair

Member Demographics
Subcommittee
Katherine A. Henry, M D, M Ed, FAAN, Chair

Retired Member Consortium
Sandra F. Olson, M D, FAAN, Chair

Neurology Public Policy
Fellow Committee
P. David Charles, M D, FAAN, Chair

State Affairs Committee
William H. Fleming, III, M D, Chair
Maureen A. Callaghan, M D, FAAN, Vice-Chair

2007–2009 American
Academy of Neurology
Foundation
Board of Trustees

Chair, AAN Trustee
Austin J. Sumner, M D, FAAN

Vice Chair, AAN Trustee
Lewis P. Rowland, M D, FAAN

Vice Chair, Public Trustee
Eric J. Liebler

Treasurer, AAN Trustee
Kapil D. Sethi, M D, FAAN

Secretary, Public Trustee
Gilles Gallant

Past Chair, AAN Trustee
Jay H. Rosenberg, M D, FAAN

Founding Trustee
Francis I. Kittredge, Jr., M D, J D, FAAN

AAN Foundation Executive Director
Catherine M. Rydell, CAE

AAN Trustees

Darryl C. De Vivo, M D, FAAN

Robert C. Griggs, M D, FAAN

Sandra F. Olson, M D, FAAN

Stephen M. Sergay, M B BCh, FAAN
Board of Directors

Chair
Steven P. Ringel, MD, FAAN

Vice Chair
William E. Madigan

Treasurer
James Meinen

Members

Professor Joan W. Blumberg

Terrence L. Cascino, MD, FAAN

Alan M. Edelson, PhD

AAN President Elect
Robert C. Griggs, MD, FAAN

Ex-Officio Member
Francis L. Kittredge, Jr., MD, JD, FAAN

AAN Executive Director and Chief Executive Officer,
Ex-Officio Member
Catherine M. Rydell, CAE

Executive Staff

Chief Financial Officer
AAN, AANPA, AEI
Timothy J. Engel

Director, Marketing,
Communications and Digital
Jason M. Kopinski

Deputy Executive Director
Director, Center for Health Policy
Rod Larson

Deputy Executive Director
AAN and AAN Foundation
Christine Phelps

Chief Executive Officer
AAN Enterprises, Inc.
Bruce A.F. Polsky

Executive Director and
Chief Executive Officer, AAN,
AANPA, and AAN Foundation
Catherine M. Rydell, CAE

General Counsel
AAN, AANPA, and AAN Foundation
Murray G. Sagsveen, JD, CAE
Corporate Donors

$450,000 +
Boehringer Ingelheim Pharmaceuticals, Inc.

$350,000–$449,000
Biogen Idec
TEVA Neuroscience

$250,000–$349,000
AAN Enterprises, Inc.
Pfizer Inc

$100,000–$249,999
Allergan, Inc.
Bayer Healthcare Pharmaceuticals, Inc.
Eli Lilly and Company
EMD Serono, Inc./Pfizer Inc
Genzyme Oncology
Merck & Co., Inc.
Myriad Pharmaceuticals, Inc.
Ortho-McNeil Neurologics, Inc.
sanofi-aventis
UCB, Inc.

$50,000–$99,999
Novo Nordisk, Inc.
Schwarz Pharmaceuticals, Inc.
Solstice Neuroscience, Inc.
Takeda Pharmaceuticals, Inc.

$25,000–$49,999
AstraZeneca Pharmaceuticals, Inc.
Eisai Inc.
Medtronic, Inc.

$10,000–$24,999
Cardinal Health
Endo Pharmaceuticals, Inc.
Forest Pharmaceuticals, Inc.

The Cornerstone Endowment

Recognizing leaders whose personal gifts were made to support the vision of a strong and lasting Foundation.

James R. Allen, MD
Drs. Deganit and Carmel Armon
American Academy of Neurology Alliance
The A.B. Baker and L.H. Baker Families
Dr. and Mrs. James L. Bernat
Dr. Raspal and Dr. Nasreen Bhumbra
Anthony C. Breuer, MD, FAAN
Gerald Brew
Robin L. Brey, MD, FAAN
Rosalie A. Burns, MD
Dr. and Mrs. Louis R. Caplan
Wesley A. Carr, MD
Robin A. Conwit, MD, FAAN
In Memory of Dr. Philip and Estelle Conwit
Dr. Antonio and Susan Culebras
Dr. and Mrs. Robert B. Daroff
Jasper R. Daube, MD, FAAN
Darryl C. De Vivo, MD
Dr. Vincent and Anna Maria Di Carlo
Stanley Fahn, MD, FAAN
Robert A. Fishman, MD, FAAN
Michael Goldstein, MD, FAAN
J. Clay Goodman, MD, FAAN
Jack O. Greenberg, MD
Dr. Patrick A. and Marcia Griffith
In Honor of H. Richard Tyler, MD, FAAN
Robert C. Griggs, MD, FAAN
John Groom
Dr. and Mrs. Ludwig Gutmann
Vladimir Hachinski, MD, FAAN
Dr. Harris and Barbara Hauser
Howard I. Hurtig, MD
Earl C. Hutchins, MD
Lawrence D. Jacobs, MD
Cynthia L. Joyce
Francis I. Kittredge, Jr., MD, JD, FAAN
Julie Korenberg, PhD, MD, and Stefan M. Pulst, MD, FAAN
Eric and Nicole Liebler
Elliott M. Marcus, MD, FAAN
Dr. Janice and Dr. E. Wayne Massey
Theodore L. Munsat, MD, FAAN
Sandra F. Olson, MD, FAAN
Dr. Timothy A. Pedley and Dr. Barbara S. Koppel
Dr. David and Jeanette Pleasure
Dr. and Mrs. A. Bernard Pleet
Christopher J. Prusinski, DO
Ralph W. Richter, MD, FAAN
Steven P. Ringel, MD, FAAN
Jay H. Rosenberg, MD, FAAN
Roger N. Rosenberg, MD, FAAN
Lewis P. Rowland, MD, FAAN
Catherine M. Rydell, CAE
Dr. Rajesh Sachdeo
Stephen M. Sergay, MB ChB, FAAN
Kapil D. Sethi, MD, FAAN
Dr. Jeffrey C. and Frances Shepard
Bruce Siggsbee, MD, FAAN
Stephen D. Silberstein, MD, FAAN
William H. Stuart, MD, FAAN
Austin J. Sumner, MD, FAAN
Dr. and Mrs. Bharat Tolia
James F. Toole, MD, FAAN
Dr. and Mrs James F. Toole Advised Fund of the Winston-Salem Foundation
Frederick M. Vincent, Sr., MD, FAAN
Kenneth M. Viste, Jr., MD, FAAN
William J. Weiner, MD, FAAN
Dr. Jack and Patricia Whisnant

Foundation Partners

Recognizing organizations that partner with the AAN Foundation on Research Fellowships as of December 31, 2007.

ALS Association
Alzheimer’s Association
American Academy of Neurology
American Academy of Neurology Foundation Corporate Roundtable
American Heart Association/American Stroke Association
Canavan Foundation
National Multiple Sclerosis Society
Spinal Muscular Atrophy Foundation
**Neurology Heritage Society**

Recognizing individuals who have included the Foundation in their estate plans.

Ludek Bares, MD
Raspal Bhumbra, MD, and Nasreen Bhumbra, MD
Robert J. Blankfein, MD, FAAN
Jasper R. Daube, MD, FAAN
Robert and Kay Davis
Nordeli Estronza, MD
Michael F. Finkel, MD, FAAN, and Dina Sewell
Gilles and Alice Gallant
Michael L. Goldstein, MD, FAAN
Elliott G. Gross, MD, FAAN
Kathy Hart
Janet Jankowiak, MD
Eric and Nicole Liebler
Arthur S. Nicholas
Jay H. Rosenberg, MD, FAAN
Lewis P. Rowland, MD, FAAN
Catherine M. Rydell, CAE
Kapil D. Sethi, MD, FRCP, FAAN
Austin J. Sumner, MD, FAAN
Lynne Taylor, MD, FAAN, and Bruce Bagamery, PhD
Raymond Valpey, MD
Kenneth M. Viste, Jr., MD, FAAN

---

**AAN Foundation Major Donors**

Recognizing individual, group, and Foundation gifts of $100 and greater received between January 1, 2007, and December 31, 2007.

**$100,000-$149,999**
The Potamkin Family

**$50,000-$99,999**
Association of Indian Neurologists in America
Dr. and Mrs. Francis I. Kittredge, Jr.

**$25,000-$49,999**
AAN Faculty Honoraria Donors
The ALS Association and the Essey Family Fund
Kyowa Hakko Co. LTD

**$10,000-$24,999**
George L. and Anne Parke

**$5,000-$9,999**
American Academy of Neurology
Stanley Fahn, MD, FAAN
Dennis B. Gillings
Lineberry Research Associates, LLC
Quintiles, Inc.
Dr. and Mrs. Leonard Sahn

**$1,000-$4,999**
Alzheimer’s Association
Anonymous (1)
David C. Anderson, MD, FAAN
Drs. Carmel and Deganit Armon
Dr. and Mrs. David L. Bachman
Lowell H. Baker, MD, FAAN
Paul E. Barkhaus, MD, FAAN
Russell E. Bartt, MD, FAAN
Jitendra K. Baruah, MD
Peter R. Bergethon, MD
Thomas P. Bleck, MD, FAAN
Robin L. Brey, MD, FAAN
Pei-Yun Chen, MD, MPH, PhD
Cynthia L. Comella, MD, FAAN
Kathe Dahlbom, MD
Robert B. Daroff, MD, FAAN
Dr. Chester R. and Yolanda Dela Cruz
Darryl C. De Vivo, MD, FAAN
Steven T. DeKosky, MD, FAAN
Kamel H. Elzawahry, MD, FAAN
Kenneth H. Fischbeck, MD, FAAN
Denis M. Forster
Kris Fridgen
Gilles and Alice Gallant
Peter Goadsby, MD, PhD
Madeleine M. Grigg-Damberger, MD
Robert C. Griggs, MD, FAAN, and Rosalyne H. Griggs
Michael Goldstein, MD, FAAN
Melvyn L. Haas, MD, FAAN
The Hannon Family Foundation
Linda A. Hershey, MD, PhD, FAAN
Jonathan P. Hosey, MD, and Linda M. Famiglio, MD
Joseph Jankovic, MD, FAAN
Dr. and Mrs. Michael J. Kaminski
Barbara P. Karp, MD
Edgar J. Kenton, III, MD, FAAN
Robert T. Leshner, MD, FAAN
Kimford J. Meador, MD, FAAN
Aaron E. Miller, MD, FAAN
Mircea Albin Morariu, MD, FAAN
Arastoo T. Nabizdeh-Eraghi, MD, FAAN
Sandra F. Olson, MD, FAAN, and the Honorable Ronald Olson
Martin D. Penry
Christine E. Phelps
Cathy L. Pollini
Bruce A.F. Polsky
Scott and Mary Post, CAE
Stefan M. Pulst, MD, FAAN, and Julie Korenberg, PhD, MD
Steven P. Ringel, MD, FAAN
Jay H. Rosenberg, MD, FAAN
Lewis P. Rowland, MD, FAAN
Catherine M. Rydell, CAE
Kristi and Murray G. Sagsveen, JD, CAE
Martin A. Samuels, MD, MACP, FAAN, and Susan F. Pioli
John R. Seals, MD
Dennis J. Selkoe, MD, FAAN
Stephen M. Sergay, MB Ch, FAAN
Kapil D. Sethi, MD, FRCP, FAAN
Bruce Sigsbee, MD, FAAN
Ann and Sylvan Simpkins
James C. Stevens, MD, FAAN
David A. Stumpf, MD, PhD, FAAN
Austin J. Sumner, MD, FAAN
Thomas R. Swift, MD, FAAN
Sarah Tonn, MPH, and Family
White Oaks Parent Faculty Club
Michael A. Williams, MD, FAAN

**$500-$999**
Thomas A. Ala, MD
Dr. and Mrs. Richard J. Allen
Susan Baertlein
José Biller, MD, FAAN, FACP, FAHA
Peter A. Calabresi, MD
Dr. Terrance D. and Jacqueline Capistrant
John Corboy, MD, FAAN
Vinay Chaudhry, MD, FAAN
Tiffany W. Chow, MD
Rosanna L. Di Carlo-Garner, MD
Bruce H. Dobkin, MD, FAAN
Daphne Dreifuss
Wendy Edlund
Eisai Inc.
Andrew G. Engel, MD, FAAN
Marc Fisher, MD, FAAN
Scott Frazier
Deborah I. Friedman, MD, FAAN
Kenneth J. Gaines, MD, FAAN
Kathryn H. Green, MD
Steven M. Greenberg, MD, PhD
Jon M. Gustafson, MD
Vladimir Hachinski, MD, DSc, FAAN
Daragh Heitzman, MD
Daniel B. Hier, MD, MBA, FAAN
Joseph J. Higgins, MD, FAAN
Michael D. Hill, MD
Leigh R. Hochberg, MD, PhD
Archer D. Huott, MD
Todd J. Janus, MD, PhD, FAAN
Jorge C. Kattah, MD, FAAN
Dr. and Mrs. James M. Killian
Frederick G. Langendorf, MD
Rod and Jan Larson
Agustin Legido, MD, PhD, MBA
Richard B. Lipton, MD, FAAN
Alan H. Lockwood, MD, FAAN
Glenn A. Mackin, MD, FAAN, FACP
Elliott M. Marcus, MD, FAAN
Bruce L. Miller, MD
John C. Morris, MD, FAAN
Jonathan Newmark, MD, FAAN
Hillel S. Panitch, MD, FAAN
Timothy A. Pedley, MD, FAAN
Audrey S. Penn, MD, FAAN
Amy A. Pruitt, MD
Linda L. Restifo
Susan K. Rodmyre
Karen L. Roos, MD, FAAN
Robert L. Ruff, MD, FAAN
James Russell, DO, FAAN
Marie-Helen Saint-Hilaire, MD, FRCPC
Jeffrey A. Samuels, MD, FAAN
Saty Satya-Murti, MD, FAAN
Nicholas L. Schlageter, MD, FAAN
Lori Ann Schuh, MD
Lisa M. Shulman, MD, FAAN, and
William J. Wener, MD, FAAN
Harold R. Smith, MD, FAAN
Jeff Sorenson, CAE
Toledo Clinic, Inc.
Leon Weiss
Bert Wallace
Michael Farris Waters, M D
Henry DeF. Webster, MD
Richard L and Lois S Werner Family Fund
Laurie Weyandt
Dr. and Mrs. Elco F.M. Wijdicks
$100–$499
Robert H. Ackerman, MD, FAAN
Cecelia Adams
Cheryl Alementi
Daniel Alter
Mike Amery
Anonymous (10)
Antonio Arana, MD
Orly Avitzur, MD, MBA, FAAN
Robert Baraff, MD
Patty Baskin
Dibyendu B. Basu, MD
Tony and Amanda Becker
Charles P. Benedict, MD
Paul S. Blachman, MD, FAAN
John Booss, MD, FAAN
Mr. and Mrs. Mel Brass
Harry L. Bremer, MD
Linda Y. Buchwald, MD, FAAN
Ann Bunnenberg
Neil A. Busis, MD, FAAN
Keeley and Howard Wettan
Wendy Capetza
Jeromy and Rebecca Carlson
Terrence L. Cascino, MD, FAAN
Seemant Chaturvedi, MD, FAAN
CMGRP, Inc.
Michael and Diane Coats
Bruce H. Cohen, MD, FAAN
Bruce Colglaize Pappas and
Mary Jane Pappas
Patricia Colon-Garcia, MD
Susan Corcoran
Jasper R. Daube, MD, FAAN
William and Pamela Davis
Heather L. Dawley
Nicholas and Arlene Delmonaco
Megan J. DeRoche
Alicia and R. Stewart Douglas
Alexander W. Dromerick, MD
Travis Dunbar
Samuel E. Gandy, MD, PhD
J.K. and Lenora Gray Elbaum
Catherine Elliott
Timothy Engel
Robert A. Esser, MD
Bridget Farley
Edward J. Fine, MD, FAAN
Michael F. Finkel, MD, FAAN, and
Dina Sewell
Jean Ferris
Flower Hospital Medical Staff
Scott Frazier
Marshall C. Freeman, MD
Gloria Galloway, MD, FAAN
Kathy L. Gardner, MD
Thomas and Jackie Denison Getchius
Joy Glenner
Mark A. Goldberg, MD, FAAN
Carol M. Golub, PhD
Robert S. Gould, MD
Joseph B. Green, MD, FAAN
John M. Hannam, MD
Daniel C. Hartnett
Kevin Heinz
Michael Dennis Holic
Donna Honeyman
Renee Houlehan
Erin Jackson
Jeffries & Co, Inc.
Nicole Johns
David A. Josephson, MD
Ralph F. Józefowicz, MD, FAAN
Judy Larson
Melissa Larson
Robert T. Ledner, MD, FAAN
Amy Kaloides
Karen Kasmirski
Judy Katterhenrich
Douglas I. Katz, MD, FAAN
Acknowledgements

We wish to express our appreciation to Drs. John Booss, John B. Conomy, Jasper R. Daube, Joseph M. Foley, Robert J. Joynt, Theodore L. Munsat, Marc Nuwer, Sandra F. Olson, Laura B. Powers, Steven P. Ringel, Jay H. Rosenberg, Lewis P. Rowland, Stephen M. Sergay, Kapil D. Sethi, and Thomas R. Swift for their reminiscences and insights on leadership in the AAN over the past 60 years; to Drs. Lowell Baker and Russ Dejong for providing photos of their fathers; and to Philip Skroska at the Bernard Becker Medical Library at the Washington University School of Medicine for his assistance in accessing materials in the AAN collection.

Annual Report Publication Staff

Marketing, Communications and Digital Director: Jason Kopinski
Writer and Managing Editor: Tim Streeter
Designer: Jim Hopwood
History Timeline: Jay Mac Bride, Tim Streeter
Editor: Sarah Parsons
Proofreader: Ryan Knoke