President’ Corner

Dear friends,

Happy New Year. I hope you all had a great holiday season.

The AABIP has been making progress in many directions. After a splendid success of the Inaugural Conference of the AABIP in Denver last year, our Board of Directors has unanimously approved the organization of the AABIP’s annual conference. The 2nd AABIP Conference will be held at the Denver Convention Center again on Aug 15-17, 2019. We are working hard to make this conference even more exciting and comprehensive. We plan to have three major academic themes for the educational component of the conference. These will include advanced diagnostic bronchoscopy, therapeutic bronchoscopy, and pleural diseases. We will also have several interactive and pro-con debates within each discipline. Evening activities during the conference will include a Welcome Reception, Gala Dinner, and the ever-popular Convocation Ceremony for all new and previous graduates who could not participate in last year’s event. Each day we will have several plenary sessions with world-renowned speakers and think tanks of IP. I am sure you remember the fantastic plenary session lectures by Professor’s Dumon, Colt, Mehta and many others last year. Session proposals for this conference have already far superseded last year, and we continue to receive new submissions. I would urge you all to take advantage of an Early Bird Special and block your calendar. If you can, take some time after the Conference on Saturday afternoon and Sunday to visit the gorgeous mountain resorts and lakes around Denver. Some of them are barely an hour drive from downtown. I am looking forward to seeing you all in Denver soon!

Our Research Committee and the Board of Directors has decided to have only one Research Symposium every year to be held at our annual conference. We will have an AABIP research-oriented “chalk-talk” session during the ATS Conference and a social event after the Postgraduate Course at CHEST conference in lieu of those Research Symposia.

We have sent out the request for the nomination for the co-chair of AABIP Post Graduate course to be held at CHEST conference in October 2019. The accepted nominee will serve as the co-chair in 2019 and chair in 2020 for the AABIP postgraduate course. Please go to our website (https://aabronchology.org) to nominate candidates.

The 2018 board certification examination was held in December. We congratulate the 45 newest AABIP Diplomates who passed the exam. These fresh graduates of IP fellowships around the country had a success rate of 90%, which speaks volumes about the robust training and rigorous curriculum of IP fellowships. I
could not be more proud of our IP fellowship directors and their dedication to training excellent future interventional pulmonologists. We are indeed #1 in the world for formal training and board certification in IP.

The IP fellowship accreditation process has begun in full swing. Provisional accreditation has been granted to 36 fellowships around the country, and final reviews are underway. Official accreditation status for these programs will be determined and announced before the start of the next IP fellowship application cycle. Beginning with the AY2018-2019 fellowship class, only IP fellows graduating from accredited programs can sit for IP boards. The accreditation standards are consistent with other subspecialty training programs, are in line with ACGME guidelines, and have been developed through the joint efforts of the ATS, ACCP, APCCMPD, AIPPD, and AABIP. We hope to eventually pass the baton of accreditation of IP fellowships to the ACGME and board certifications to the ABIM as soon as possible.

Recently the AABIP Board of Directors approved inception of a Certificate of Added Qualification (CAQ) for Advanced Diagnostic Bronchoscopy. Further details of this test along with timelines will be announced soon. The AABIP is committed to raising the standard of the practice of bronchoscopy in the country regardless of formal IP training. The AABIP has been and will continue to help educate, train, certify and advocate for all bronchoscopists who have been performing or would like to perform advanced diagnostic bronchoscopy. We believe in advocating for everyone regardless of IP training or IP certification status. We will use all our resources including up-to-date educational materials via our website, seminars, newsletters, webinars, annual postgraduate courses, research symposia, and Annual AABIP Conference for this purpose. We also believe in the expertise and added value provided by our member physicians with training external to a formal IP fellowship as much as those with dedicated IP training and board certification. We are firmly convinced that CAQ will offer legitimacy and due recognition of your expertise by your institutions and colleagues. It will help you negotiate better contracts for new jobs and more resources commensurate with your skills for setting up advanced diagnostic programs in your institutions. It will also provide you with the confidence and legal support for your clinical practice. We are already seeing a massive wave of support for this endeavor from advanced diagnostic bronchoscopists and IP physicians from around the country. We are working hard to have the first CAQ conducted this year.

Six of our Board members will be completing their terms of service in October 2019. My sincere thanks to Drs. Rabih Bechara, Erik Folch, Tom Gildea, David Hsia, Shaheen Islam, and Otis Rickman for their excellent and selfless services to the AABIP. We will be sending out nomination forms for new Board members in the next couple of months. Please nominate yourself or someone you know who is passionate about IP and the AABIP. We will also be requesting a nomination for the new Secretary/Treasurer. We hope to conduct elections during the late summer of 2019 and have the new Board members and Secretary-Treasurer installed in October 2019.

The AABIP appreciates your unwavering support for our field. We encourage and look forward to your continued participation in all aspects of our organization.

Ali I. Musani
President, AABIP
#AABIPCON
Aug/15-17/2019
Denver, CO

Join us at the Second Conference of the AABIP

- Interventional Pulmonologist
- Thoracic Surgeon
- Advanced Diagnostic Bronchoscopist
- Advanced Practice Provider
- Fellow or Resident
- Anesthesiologist
- Woman in IP

@ahalraiyes
The AABIP research committee has been working hard to foster translational and clinical research within the membership. The research committee currently comprises the following individuals: Samira Shoajee (VCU), Christine Argento (Northwestern), Kamran Mahmood (Duke), Lonny Yarmus (Hopkins), Fabien Maldonado (Vanderbilt) and Matt Kinsey (Vermont). In addition, Rabih Bechara (CTCA) continues to play a prominent part in the committee as an advisor.

The AABIP Research Symposium, previously held at our two national conferences, ATS and ACCP in May and October, respectively, will now occur at ATS and during the AABIP annual conference in August. They will have distinct formats, tailored to answer the specific needs of the membership and patients we serve. The ATS iteration of the symposium will focus on the presentation of high-quality, investigator-initiated clinical trials, designed to assess the clinical utility of the various technological advances now reaching the market. There has been in recent years an unprecedented increase in technologies available to interventional pulmonologists, yet most of these have been and are being launched with little or no data. Given the competition in the field, robust comparative studies are needed to inform clinical practice, and are now being developed and conducted by clinical investigators, often with support from industry in the form of unrestricted grants. This symposium will consist of presentations of three randomized controlled clinical trials: one completed, one ongoing and the other in an early phase of developments.

Finally, we would like to remind the membership that the AABIP Board of Directors remains committed to supporting IP research, and the research committee is proud to announce an upcoming request for application to our annual research award. One award of up to $20,000 per year with a possibility of renewal for one more year will be offered to the most meritorious application. The application process has been simplified and we encourage basic, translational and clinical researchers to apply early. The deadline for submission is February 28, 2019. Please visit the AABIP website for further details.

https://aabronchology.org/raa-funding-opportunity/
Southeast Chapter:

The Southeast Chapter of the AABIP had its first meeting on November 9, 2018. The meeting was graciously hosted by members at Vanderbilt University and well attended by 13 AABIP members representing 8 different institutions. Over the course of the event, there was fruitful discussion on a wide range of topics including improving regional communication, developing collaborative research relationships amongst the Interventional Pulmonology programs in the region, and hosting a bronchoscopy course for first year pulmonary/critical care fellows. Creating one central database of selected interventional procedures was met with the great enthusiasm and was set as the top priority for the chapter. Tentative plans for a future meeting in early 2019 are now in the works. Michal Senitko was elected to act as the lead representative for the Chapter. Any members interested in joining the Southeast Chapter are encouraged to contact him at msenitko@umc.edu. We hope this meeting is the successful start of a robust and energetic Southeast AABIP Chapter!

Advanced Practice Provider Chapter:

The Advanced Practice Provider (APP) Chapter is growing! The APP Chapter had successful meetings during the Inaugural AABIP Conference in Denver and at the ACCP CHEST meeting in San Antonio. We have been discussing ways to disseminate the collective career and professional experience of our group with the rest of the APP's in the IP community.

The APP Chapter has also continued our efforts to expand the APP Enrichment Series. Please find these pre-recorded sessions on pertinent IP topics on the AABIP website.

Advanced Practice Providers Enrichment Series

They are free to download for AABIP members. Recent additions to the series include discussions on COPD as well as Pleural Effusions by Margy Gaynor, APN, CNP, and Chest Tubes by Kelsey Cameron, PA-C.

In the spirit of teamwork, the APP Chapter would like to invite RT's, RN's, and any other Allied Health Professionals in IP to join our Chapter. We hope that we can grow collectively and in the future differentiate Chapters that address all of our unique professional goals. We hope that all physicians in the AABIP can encourage the Allied Health Professionals that you work with at your institutions to join the AABIP and the APP Chapter. Please contact Kelsey Cameron for further information.

kelsey.cameron@ynhh.org
AABIP Chapters Updates

Please contact the AABIP Chapter Representatives if you are interested in joining. For information on starting a new chapter, please refer to the Charter for AABIP Chapters or contact the Membership Committee Chair for more information.

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AABIP Research Grant

The American Association for Bronchology and Interventional Pulmonology (AABIP) is inviting applications for research awards. The deadline for application submission is 11:59 PM ET February 28th 2019.

For inquiries and general questions please contact Matthew Kinsey, MD, MPH: Director of Interventional Pulmonology – Matt.Kinsey@uvmhealth.org

Submit your application
AABIP Advanced Practice Provider Chapter

Do you work with Advanced Practice Providers (APP's), RTs or RNs in your Interventional Pulmonology practice? Did you know there is a Chapter for APP's and Allied Health Professionals in the AABIP? The chapter offers many benefits to members including educational webinars, recommended reading materials, resource sharing, networking, access to Journal of Bronchology, and professional growth and development opportunities. Please encourage your APP's to sign up with the AABIP and start enjoying the benefits of being a member today!

@ahalraiyes

To join the AABIP visit https://aabronchology.org/ and click on the link to register. Contact Kelsey Cameron, PA-C for membership to the APP and Allied Health Chapter or questions.
George Eapen, MD
Chair of AABIP Education Committee

As usual the Education Committee has been very busy and working hard on behalf of our membership. Fresh off the successful inaugural conference held in Denver, Colorado last year we started our plans for the upcoming 2nd Annual AABIP Meeting to be held in Denver on August 15-17th, 2019. We sent out a request for applications to join the Planning Committee and have received an overwhelmingly enthusiastic response from you guys. The energy, vigor, expertise and insights our dedicated AABIP members are bringing to bear on this endeavor portends an even more spectacular conference this year. Make sure you either take time off or quit your job and find your way to Denver to attend the conference. It is going to be that good!!

The AABIP KAT, our (and we might add, the only) board review and self-assessment app has been refreshed this year under the direction of Ara Chris-sian. Several new questions have been added so be sure to check it out.

The AABIP Fellows toolkit has also been refreshed this year by our outstanding fellow members, Ala Edin Sagar and Matthew Aboudara. This handy little pamphlet provides the graduating IP fellow with all the tips, tricks and tools to look for a job, negotiate for resources, set up an IP service and jump start their careers. If you have not seen it, head over to the AABIP website and get yourself a copy.

Last but not least, we would like to congratulate the incoming IP Fellows for next year. You have chosen the best specialty under the sun and we look forward to all the wonderful accomplishments we are expecting from you guys/gals over the next 40 years. The AABIP IP Fellowship bootcamp will be held in Minnesota in July 2019 and the site Director for this year is Dr. Erhan Dincer. We would like to express our deep gratitude to Dr. Dincer for stepping up to the plate and undertaking this important effort.

In other news, our webinar series are also proceeding full steam ahead under the leadership of David Hsia and Ara Chrissian. Every month a world-renowned expert spends an hour with you talking about important and challenging aspects of Interventional Pulmonology. Think about that! You get to ask questions and debate about the issues we all face in our clinical practice with your colleagues.
The 26th AABIP Postgraduate Course took place at the CHEST International Conference in San Antonio, Texas on October 6, 2018. The intensive schedule included interesting morning lectures by world-renowned experts on a wide variety of trending issues including the successful implementation of IP in private practice, the early data on robotic bronchoscopy, and updates in lung cancer.

The morning session started with the McLennan award bestowed on Dr. Fabian Maldonado for his contributions to the field of Interventional Pulmonary. We then were treated to an engaging presentation by Drs. Fernando Santacruz and Bobby Mahajan who illustrated how to successfully implement Interventional Pulmonary in private practice and how to make it financially sustainable while promoting multidisciplinary collaboration. Dr. Colleen Keyes reviewed the published data in cryobiopsies and shared her secrets for reducing bleeding and pneumothorax complications during the procedure. Dr. Mino-Kenudson elaborated on the ever-increasing value of collaboration between IP and Cytopathology. The audience was exposed to the latest published data in immunotherapy and driver oncogene-based therapy for lung cancer by Dr. Patricia Rivera.

One of the highlights of the morning was the presentation by Dr. Michael Machuzak who described the initial published data on robotic bronchoscopy and his personal experience with the available platforms. He dissected the benefits of each and the potential future applications. He also covered the highly anticipated FDA-approval of valves for lung volume reduction and how this will shape into a new area of treatment for patients with emphysema and dynamic hyperinflation.

In the afternoon, the hands-on experience allowed the participants to apply many of the techniques available to Interventional Pulmonologists. They also had a chance to interact one-on-one with highly experienced users and exchange ideas.

The course was rated as highly successful by participants and outside reviewers. We are excited about the growing interest of our members and the potential it holds for many future collaborations. We look forward to seeing all of you in 2019.
Submit your abstract for the Second Conference of the AABIP Deadline 03/31/2019

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Denver, CO

Write to us!
If you have comments on this issue or suggestions for upcoming editions write to
ah.alraiyes@gmail.com &
“Are you an RN?” My patient asks me as I am placing a tourniquet around her arm. “No, I’m a Respiratory Therapist.” I reply as I look for a good vein to place my IV. “A respiratory therapist,” She replied. “What is that?” I smile, and explain, “Well, I’m like an RN but concentrate on the heart and lung.” Sad but true, this a typical conversation most respiratory therapists have with patients and family members.

I am a Registered Respiratory Therapist (RRT) and one of my passions (I have 3) is Interventional Pulmonary (IP), the others are cooking, I’m a foodie, and my photography. I graduated RRT School in Michigan in 2006 and have worked in both Critical Care and Pulmonary Diagnostics. I have also worked in very large institutions and rural ones. I have also lived in several different states that I have had the privilege of working as an RRT. Each working environment has been unique and has supplemented my professional development. I have always felt at home in pulmonary diagnostics but did not find my passion until by chance (or fate) if you will, I found IP! I was enthralled. I leapt in with both feet. This was probably too quick for some of the people I worked with but it wasn’t fast enough for me. I was hungry and IP was on my plate. I wanted to learn everything I could! Fast forward five years, and I’m still hungry for IP and would love to see more of RRT’s involvement in IP.

On the grounds that a lot of people don’t know what a respiratory therapist is, I would like to share with you a little history of RRT’s. We began with Dr Edwin R. Levine. Dr Levine worked at Michael Reese Hospital where he started the department of chest diseases. In his memoirs, Dr Levine wrote, “When I became an attending physician, I insisted that the residents follow cases. We were able to handle some of the patients much better. In general, though, I was still dissatisfied. It was necessary that when these patients received respiratory therapy they simply had to be supervised. I was able to have the residents supervise some of this; the nurses were trained a little better; but the residents were uneven in quality, and the nurses didn’t have the time to handle all of the situations.” Thus he started an “on the job” trained technicians (OJT) to manage his post-surgical patients. He taught his OJT’s in weekly classes on anatomy, chemistry, pulmonary physiology and clinical applications. From this group of people that he taught, they formed the Inhalation Therapy Association (ITA) in 1947. ITA has had its named changed over the years but is now known as the American Association of Respiratory Care (AARC), and the Inhalation Technicians are now known as Respiratory Therapists. Since 1947, Respiratory Therapy has been able to place its self on the national scale with the formation of the AARC. Being on a national scale, allowed the association to be able to develop practitioner roles, functions to be defined and set educational requirement standards. Respiratory Therapy was put on the scientific map when the National Heart and Lung Institute (NHLI) and the American Thoracic Society (ATS) held a conference on the scientific basis of respiratory therapy in 1974. In the 1970’s and 1980’s the AARC tackled state licensure. Currently every state in the Union has Respiratory licensure except Alaska. Every state has different laws that govern respiratory therapy. Here is the link to our scope of practice if you are interested:
RRT’s are required to take national board exams to be able to practice. The National Board for Respiratory Care (NBRC) also has some specialty board exams for respiratory therapists, like the Adult Critical Care Specialists (ACCS) or the Registered Pulmonary Function Technologist (RPFT). My goal is that one day there will be an interventional specialist. Additionally, some states even have an expanded practice regulation that allows RRT’s to perform things like conscious sedation, place IV’s, place arterial lines and some even allow diagnostic ultrasounds. Currently I work in an institution that allows expanded practice roles for RRT’s, which allows me to perform some of the aforementioned procedures. In institutions that are not mega centers, like mine, RRT’s that work in pulmonary diagnostics may have overlapping roles with midlevels. We provide education to patients and their families on tunneled pleural catheter (TPC). We also will take out sutures from the TPC patients and help in troubleshooting the TPCs. Every good team can anticipate the needs and thoughts of each other. Good IP teams are no different. IP physicians need personnel that can perceive and anticipate the objective(s) of their intervention(s) in order to facilitate any changes during procedures. In my experience I have found that RRT’s are a perfect match to work in IP. We already know the airways and the physiology to go with it. RRT’s that work in the pulmonary lab or bronchoscopy suites already know how to assist regular bronchoscopies, therefore, it is a natural evolution for RRT’s, to work in IP.

I am sure, there are RRT’s in your institution that share this same passion towards IP! My hope, is that you are already working with them and if not, that you will be looking for them!

References
http://c.aarc.org/member_services/history.html
http://www.aarc.org/aarc/timeline-history/

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JOBIP Editor’s Choice

The Journal of Bronchology and Interventional Pulmonology, first and only journal dedicated to the specialty, is proud to present a special collection of “Editor’s Choice” articles. These papers provide readers with a wide array of studies destined to become classics in the field. New selections will be added to the collection as new content becomes available, so please check this space periodically for updates. Every issue of the journal will include 1-2 Editor’s Choice article. All articles in the collection may be freely accessed on the Journal’s website for all members and non-members.

Webinar Schedule. Schedule is tentative and subject to change:

- **March 2019:** Anesthesia Considerations for Rigid Bronchoscopy. Basem Abdelmalak, MD, and Sonali Sethi, MD. Cleveland Clinic.
- **April 2019:** Preoperative Anesthesia Evaluation for IP Patients. Angela Selzer, MD. University of Colorado.
- **May 2019:** Generating a Business Plan in IP. Neeraj Desai, MD. Chicago Chest Center.
- **June 2019:** Optimizing Use of Radiographic Adjuncts for Peripheral Bronchoscopy. Michael Pritchett, DO. Pinehurst Medical Center.
- **Sept 2019:** Management of Complications from Therapeutic Bronchoscopy. David Feller-Kopman, Johns Hopkins University.
2nd Inaugural Conference of The AABIP #AABIPCON

Therapeutic Bronchososcopic Sessions

Pleural Disease & Procedure Sessions

Diagnostic Bronchoscopic Sessions

Plenary Sessions

Poster Session

Network Events & AABIP Regional Chapters Meeting

August 15, 2019 @ 8:00 am - August 17, 2019 @ 5:00 pm  @ahalrlyes
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