

WHAT'S A WHAT'S HAPPENING IN

Volume XVI, Number 1/Spring 1991

Interim to Focus on State Action

Legislative action will once again be the focus of AMWA's Interim Meeting, scheduled for June 28–30 in Louisville, Kentucky. In an effort to organize and encourage grass roots activity, the program will stress working at the state level. AMWA's state directors are especially encouraged to attend to gain new skills for their important new roles as AMWA's legislative coordinators at the state level.

The legislative training sessions will take place on Sunday morning, June 30 (Friday and Saturday are reserved for Board and committee meetings). Legislative Committee Chair Marjorie Braude, MD, will open the program with an update on federal legislation AMWA is supporting, with an emphasis on state-federal relationships. (Family and medical leave, for example, is one area where there is action in both state and federal legislatures.)

Dr. Braude will also introduce a new focus for 1991: passing prochoice resolutions in state medical societies around the country. A panel will feature speakers from New York and Colorado describing tactics and strategies used in passing their state society resolutions, as well as the impact the resolutions have had on local and federal reproductive health laws. The panel will also present the results of AMWA's national survey of state medical society positions on reproductive rights.

Other workshops will focus on the importance of working in coalitions (there's strength in numbers!) and a how-to on effectively presenting your position, whether in a one-continued on page 2

Award Winners Chosen

The 1991 winners of the Bertha Van Hoosen and Calcium Nutrition Education Awards have been selected. Immediate Past President Susan Stewart, MD, will receive the Van Hoosen Award and nationally noted nutritionist Elaine Feldman, MD, will be the CNE Award winner. Congratulations to both of these remarkable women physicians; their honors are richly deserved. A final decision on AMWA's highest honor, the Elizabeth Blackwell Medal, will be announced after the Interim Meeting. Watch for coverage in *IAMWA*.

Strategic Plan Revised

AMWA's Board of Directors "retreats" early each year for a weekend of brainstorming, setting priorities and goals, and making plans as well as socializing and getting (re)acquainted. This year, the Board gathered in Alexandria the weekend of February 1–3 to take up a very special agenda. It was time to revisit, rethink, and, possibly, revise AMWA's strategic plan. To help with such an ambitious task, facilitator Jane Arsenault led the Board and staff.

To give the Board some sense of the needs of the membership as a whole, Executive Director Eileen McGrath opened with a presentation of preliminary findings from the member survey. In January, 1,500 AMWA members received a questionnaire asking them to describe their participation in AMWA activities and to evaluate its programs. The following programs were identified as most important: women's health, gender equity, legislation, maternity in medicine, employment assistance, local/regional activities, and association publications (*JAMWA*, newsletter).

With this background in mind, the Board went on to identify opportunities and threats, weigh association strengths and weaknesses, and name critical issues for AMWA. Because nonprofit organizations are highly value driven, Ms. Arsenault next led the group in a values clarification exercise. Working in small groups and reporting back, the Board identified the following values as corporate goals:

l) To train and promote women physicians for positions of leadership.

continued on page 2



Staff members Erma Logan, left, and Lois Schoenbrun, right, backs to the camera, and Board members Janet Freedman, MD, left, and Nancy Church, MD, right, at work during the retreat.

STRATEGIC PLAN REVISED, continued

- 2) To provide a unique voice for women's health.
- 3) To foster a mutually supportive environment.
- 4) To emphasize the excellence of women physicians and to promote equality for them.
- To be a primary resource for and about women physicians.
- 6) To enhance membership services with an emphasis on meeting the needs of a multigenerational and multiethnic membership.
- 7) To establish strong ties with organizations having similar goals.

In addition to these "public" goals, three institutional goals were identified as necessary for survival:

- 1) Ensure the financial health of AMWA.
- 2) Develop and implement a marketing plan.
- 3) Improve the management and governance of AMWA.

A very interesting session on Sunday looked at which current AMWA programs fulfilled these goals, and, most importantly, *how well* they did so. Ms. Arsenault reminded the Board several times of the need for "strategic abandonment"—learning to let go of programs that do not support current priorities so that resources can be funnelled into activities that do. Among the programs identified as important by several work groups were *JAMWA* and the newsletter, workshops at local/regional/national meetings, the membership directory, and the legislative program.

In the weeks since the retreat took place, Ms. Arsenault has worked with the national office staff to incorporate the results into a specific plan. This will give staff and Board the outline necessary to redefine job responsibilities, set new work priorities, and begin to see how some of the programmatic changes might fit into the 1992 budget. Watch future newsletters for more details.

Lobby Day

In keeping with the high priority given to AMWA's legislative program, a general invitation was issued to the membership to join Board members in a "Lobby Day" in conjunction with the retreat. A total of 17 AMWA members gathered on Sunday evening and Monday morning for briefings (see "Legislative Alert" for information on specific bills) and then spent the afternoon talking to members of Congress and their staff health specialists.

Speakers echoed the messages that AMWA members have heard in past legislative training sessions: legislators listen to their constituents, physicians have tremendous credibility, women physicians bring a uniquely valuable perspective—especially on women's health issues. The truth of this advice was borne out by the impact AMWA members made during their brief visits. Several representatives planned to join the Tobacco Task Force after hearing about it from AMWA members and others who were "leaning" toward the AMWA position were clearly influenced to lean a little further. Plans were made to put AMWA members on mailing lists and committees, thus solidifying these important relationships.

Mark Y	our Calendar
April 27, 1991	Region XII Conference San Francisco, California
June 28-30, 1991	Interim Meeting Louisville, Kentucky
August 23-25, 1991	Region X Conference San Juan Islands, Washington
November 13-17, 1991	Annual Meeting Dallas, Texas
March 8-14, 1992	MWIA Congress Guatemala
TBA 1992	Interim Meeting Columbus, Ohio
TBA 1992	Annual Meeting San Diego, California

INTERIM TO FOCUS ON STATE ACTION, continued

on-one meeting with a legislator, in a committee setting, or in giving testimony. A special session for student members will train them in public speaking. Social activities and Sunday's luncheon speaker are yet to be confirmed.

If you've been meaning to get involved, AMWA's 1991 Interim Meeting will get you off to a good start. Join us! Just complete the registration form below and send it in today.

	– – – – – – Registration 1	
Yes, register	me for the 199	1 Interim Meeting.
Name		
Address		
City, State, Zip _		
Phone/Office	Home	
	Full Program	Partial Program*
Regular	\$225	\$85
MIT/Retired	\$150	\$65
Student	\$100	\$50
*Sunday only,	Kentucky resid	lents only
Enclosed is my ch	neck for \$	·
Return this form Suite 400, Alexand		North Fairfax St,

LEGISLATIVE ALERT

1991 promises to be a busy—and, we hope, progress-filled—year for AMWA's legislative agenda. Activity will focus on five areas: family and medical leave, reproductive rights, to-bacco, women and biomedical research, and medical student loans. A full article on biomedical research is planned for an upcoming issue of *JAMWA* and information on student loan legislation appears on page 5 of this newsletter. Status/action reports on the first three bills follow.

Family and Medical Leave Act

This may be the year that American families finally get the family and medical leave they so desperately need. The FMLA passed both houses in 1990, but Congress was unable to override President Bush's veto. The bills (HR 2 and S 5) were reintroduced in January and, according to Jackie Ruff, staff member to the Senate Subcommittee on Children, Families, Drugs and Alcoholism, "the atmosphere is even more favorable this year than last, especially in the Senate." With many state legislatures considering similar bills, it seems that Congress is finally getting the message.

What we need are the extra votes necessary to override a presidential veto. If any of your Congresspeople are on the fence, urge them to support this bill.

Reproductive Rights

With guarantees of reproductive freedom being steadily eroded by the courts, prochoice strategy has shifted to Congress. The Freedom of Choice Act (HR 25 and S 25) would, essentially, codify the protections of Roe v Wade. "This is the flagship bill," according to Lisa Kaeser, JD, of The Alan Guttmacher Institute. It would prevent the states from restricting a woman's right to abortion before fetal viability or at any time if the procedure is necessary to protect her life or health. AMWA also supports the Rape and Incest Victims' Choice Resolution (HRes 40) and other efforts that would

allow indigent women to obtain Medicaid funding for abortion. Write or call to express your support of both measures.

Tobacco

When it comes to smoking, the full support of the medical community is needed to combat the tremendous financial resources of the tobacco industry. AMWA supports the Tobacco Product Education and Health Promotion Act, soon to be introduced, because it offers a comprehensive approach to protecting the public health



To Write

Honorable John or Jane Doe US House of Representatives Washington, DC 20515

Honorable John or Jane Doe US Senate Washington, DC 20510

against this leading, *preventable* cause of death. In brief, the bill would:

Expand federal education and research efforts on tobacco use and cessation;

Give a new Center for Tobacco Products regulatory authority over tobacco products, like that held by the FDA over other products;

Fund a national program of public service announcements, advertisements, and counter-advertising to discourage tobacco use;

Provide incentive grants to states to encourage enactment and enforcement of laws that prohibit the sale of tobacco products to minors;

Add tobacco to the curriculum program required in the Drug-Free Schools and Communities Act of 1986.

Your voice can be especially effective on this issue, particularly if you can tie it directly to your practice. Let your legislators know that their constituents are dying from tobacco use.

RU 486 Action

Politics and medicine don't always mix, and the RU 486 situation is certainly a case in point. Antiabortion sentiment, primarily in the US, has stymied research into and distribution of this important new contragestational drug. The makers of RU 486 need to know that the mainstream of responsible medical opinion in this country strongly supports its use and development. Letters should be sent—on your letterhead—to both Roussel Uclaf, creator of RU 486, and its parent company Hoechst AG. A sample letter and the addresses follow.

Dear

I write to urge continued research and development of the antiprogestational drug RU 486. As a safe, effective means for nonsurgical termination of very early pregnancies, this drug has been termed the most important breakthrough in reproductive medicine since the birth control pill. Further, the World Health Organization has claimed that antiprogestins have potential applications not only for fertility regulation, but also in treating such serious diseases as breast cancer and endometriosis.

The fact that a small number of Americans, on the basis of their personal beliefs—along with their threats of political, physical, and psychological harassment—have controlled my patients' (and my) access to this or any potentially beneficial drug is appalling. This vocal minority is impeding the development of RU 486 not only for use in the US, but also in developing countries, where it could save the lives of hundreds of thousands of women for whom unsafe abortion is a leading cause of death. Control of this drug by this vocal minority in the world must end.

In considering a US market for RU 486, please know that mainstream medical, scientific, family planning, public health, and other organizations will applaud your positive action in continued on page 6

STUDENT SENATE

The Main Events

Interim Meeting

June 28–30, 1991 Louisville, Kentucky "How to Influence Legislation at the State Level"

Structure of Meeting:

Friday: Committee meetings Saturday: Assertiveness training

Public speaking workshop

Committee meetings

Sunday: Legislative Program

All students are invited. We especially encourage all regional coordinators and committee members to attend.

Annual Meeting

November 13–17, 1991 Dallas, Texas "Women Taking Care: Health for the Nation"

Major themes include access to health care and dependent care. This promises to be fun, exciting, and informative.

Start raising money now! AMWA student members have many funding sources available to them, such as their medical schools, pharmaceutical companies, local and regional AMWA branches, and local and state medical societies. You can also raise a lot of money directly by holding fundraisers.

Regional Recap

A major function of the "Student Senate" section of the newsletter is to keep AMWA student members across the country informed of what others are doing. So, from time to time, we bring you a round-up of regional activities. Here goes:

Region I: Members of Region I are planning a regional conference and have activated two branches, one at New England College of Osteopathic Medicine in Biddeford, Maine and the other at Brown University in Providence, Rhode Island.

Region II: A student regional con-

ference on "Women and AIDS" was held on January 12 at Columbia College of Physicians and Surgeons and another region-wide conference is planned for April 27 in Buffalo, New York. This one will focus on battered women and abused children.

Region III: Student and physician members joined forces for a regional conference at George Washington University on April 7. At press time, Regional Coordinator Kyle Durham was attempting to bring all living winners of AMWA's Elizabeth Blackwell Medal to the meeting for a special session. The student branch at Howard University in Washington, DC has been reactivated.

Region IV: This region has four inactive branches and Regional Coordinator Laura Roebuck is working on getting them *all* back to life!

Region V: Students gathered for a regional conference on March 23, 1991 in Atlanta, where the student branch at Emory University has been reactivated. AMWA President Roselyn Payne Epps, MD, was a speaker at this meeting.

Region VI: A joint conference with Region IV took place on April 12–14 in Chicago. The theme was "Women's Health in the 1990s: Our Patients, Ourselves."

Region VII: A presentation on limiting malpractice risk was presented at Tulane University on January 23, 1991. Regional Coordinator Lisa Ericksen is working with Regional Governor Diana Dell, MD, to reactivate the student branch at Tulane.

Region VIII: Another regional meeting, this one is scheduled for July 13–14 in Minneapolis. Conference planners hope to have Susan Love, MD, and Jane Hodgson, MD, as speakers. Newly activated branches in this region include Washington University in St. Louis, Missouri.

Region IX: Regional Coordinators Lisa-Ann Lancaster and Monica Morris are putting together a handbook on what regional coordinators and branch presidents can do to help program staff when a national AMWA meeting is scheduled for their area.

Region X: On August 23–25, the members of Region X will gather in the beautiful San Juan Islands of Washington state for a regional conference.

Region XI: The student branch at the University of Utah in Salt Lake City has been reactivated. In February, AMWA Director of MITS Jeanne Arnold, MD, presented her workshop on "Transition to Residency" to region members at the University of Colorado in Denver.

Region XII: The Third Western Regional Conference was held on April 6, 1991 in San Francisco. The theme was advances in health care for women.

—Frieda Hulka

Award Deadlines

The Carroll L. Birch Award, a cash prize of \$500, is given to an AMWA student member for the best original research paper. Three copies of the manuscript, a letter from your faculty research sponsor, and a cover letter with your medical school, graduation date, and permanent mailing address must be received by June 30, 1991.

The Janet M. Glasgow Essay Award is given to an AMWA student member for the best 1,000-word essay about a significant woman physician role model. The author of the winning essay will receive a cash award of \$1,500. Essays are due **May 15, 1991.**

If you have questions about any of the above or want to submit your entries, contact Marie Glanz, AMWA, 801 North Fairfax St, Suite 400, Alexandria, VA 22314; 703-838-0500.

Graduating Seniors

We know that you have many other things on your minds right now, but please take a minute to send your new address to the AMWA national office. We lose contact with many of our student members when they become residents and this year, plan to take steps to reverse that trend. Becoming an intern may feel like walking into the void, but it doesn't have to. Let AMWA help. Keep in touch!

Message From the Director of Students



Disturbing news arrives every morning as I awake to the radio. Each day the Persian Gulf is the first issue addressed. We are all wearing yellow ribbons "to support the troops." Patients and nurses are solemnly concerned about what's happening. Patients are showing more symptoms of stress than usual. We physicians must add this concern to the many others we address with patients and colleagues.

A new concern has emerged about the backlash against women in medicine. Several students have told

me that in several schools, groups of men are staging mock terrorist attacks and "taking women hostage." It is described by the men as "all in fun"; they say that AMWA is "overreacting." Has this happened in your school? I am concerned that this behavior is l) just another form of violence against women and 2) indicative that this is part of the expected backlash against women assuming strong roles in medicine.

Medical student abuse is real. Research confirms that there is emotional, physical, and sexual abuse against medical students of both sexes. The abuse is most prevalent in the third year, when students are struggling to develop their clinical identities. Tolerance of this abuse implies that it is an acceptable way to treat people. Those who say "everyone does it" and "it's part of the process" encourage the student to adopt the same behaviors. We then are hardened to the impact of abuse and violence and, ultimately, are more likely to treat patients and staff in similar ways.

If you are concerned about these issues, I'd like to hear from you. Write to me, Jeanne F. Arnold, MD, at Mercy Hospital, 1000 Mineral Point, Janesville, WI 53545. Or call me at 608-757-2846. Or let us talk about these issues at the Interim Meeting in Louisville this June; the focus of the meeting will be "Making Your Voice Heard."

—Jeanne F. Arnold, MD

Branch President Alert

Are you forgetting your third- and fourth-year members? You *can* keep them involved; here are some suggestions:

l) Make sure juniors and seniors receive all your branch announcements concerning meetings and AMWA events. Even though they may not be able to attend, it keeps them informed about what the branch is doing.

2) Sponsor a panel discussion made up of juniors and seniors to discuss the clinical years. Sophomores will find this especially helpful during the spring when third-year schedules are being organized.

3) Have at least one of your branch

meetings at the hospital to facilitate attendance.

4) Sponsor an end-of-the year potluck dinner and invite all the female physicians, residents, professors, and medical students at your school. Send the invitations out at least one month in advance so that call schedules can be rearranged.

—Julie Zimmerman

Recruit a Physician

Do you have a female physician or resident mentor who's *not* a member of AMWA? Tell her about all the special benefits of membership. Join the new movement of "students recruiting

physicians." Remember, the strength and uniqueness of AMWA lies within its membership.

Student Loan Legislation

AMWA strongly supports legislation that would allow medical students to temporarily defer payment of their loans and that would restore the tax deductibility of interest paid on student loans. HR 179, which would amend the Higher Education Act of 1965, and S102 would give medical students the option of delaying loan repayment until they are through residency regardless of duration. A bill to restore the tax deductibility of interest paid on student loans was introduced in the House (HR 747) and an identical bill is expected soon in the Senate.

On AMWA's Lobby Day, February 4, Legislative Chair Marjorie Braude, MD, and Regional Coordinator Cynthia DeMeester visited legislators from California. Ms. DeMeester explained the hardships she—and other medical students—would face if these pieces of legislation were to fail. Many legislators did not realize that postgraduate education continues for several years after medical school and that residencies do not pay enough for residents to live and repay loans.

AMWA student members could have a strong impact if each one sat down and wrote a letter to her representatives and senators describing the importance of these bills to her own life and career.

Cool T-Shirts

Student branch presidents will receive information soon about a new T-shirt to be used as a branch fundraiser. The T-shirt has a license plate on the front, available in your state color, that says "MD2B." On the back is a list of reasons to be a medical student (in the spirit of David Letterman's lists). Students are encouraged to use T-shirt sales activities as opportunities for membership recruitment. For more information, call Flora Danque at 714-856-2974 or Jennifer Tuteur at 314-443-6408.

RESIDENT ROUNDS

Pregnancy During Residency

"Pregnant?!?" The word echoes hollowly in your mind, forces knots to form in your gut. You're in your second year of residency and you've just had a positive urine hCG test. You weren't planning on having a baby until two or three years after residency. "How did this happen?" you ask yourself. Actually, you know how it happened, but what do you do now?

How to handle an unexpected pregnancy during residency can be a very real dilemma. Your first instinct may be to tell your program director right away, but will your contract be terminated? Or, you may fear that announcing your condition too soon will only prolong the repercussions. Will you be "punished" by being assigned extra call at a time when you are already emotionally and physically stressed? Waiting until you show will create real scheduling problems, but you feel caught on the horns of a dilemma. What are the facts? Is pregnancy still the problem it once was? Have attitudes begun to change?

For professional women generally, there is still no "good" time to be pregnant. This is especially true for women physicians. Residency is a period when time demands and work pressure are very high, when many women and men make large personal sacrifices in exchange for training as physicians. For these reasons, maternity policy during residency is somewhat different than for nonmedical professions with a 40-hour work week. Nevertheless, physicians bearing children during residency do it most often during PGY 1 or PGY 2 whether it is their first or second child. The evolution of maternity policies for residents reflects a growing recognition of the actualities surrounding our dual roles as professionals and as child bearers.

Your primary professional goal is to complete residency training and become board certified. You should, therefore, seek to balance the smallest possible interruption in your training

with the realities of pregnancy and child rearing. Special considerations made for pregnant housestaff are not an argument against women in medicine, nor against pregnancy in residency. Maternity policies are a recognition of the contributions of women to medicine and a recognition of the unique biological role of women in society. They help to safeguard your health and your baby's, assure completion of your training, and see that patient care is uninterrupted by your absence. AMWA continues to make recommendations to residency directors about maternity leave and special considerations for pregnant residents (see March/April 1988 JAMWA, page 85).

The heart of any maternity policy concerns leave time. A recent AMWA survey found that most of the specialty boards recommend maternity leaves averaging four to six weeks per year, although there are some notable exceptions on both ends of the scale. (See the March/April 1987 *JAMWA*, page 70, to see how your specialty stacks up.) In many cases, the paid leave is made up of vacation and sick leave; additional leave may be unpaid and may have to be made up.

The best time to investigate maternity leave policies is *prior* to becoming pregnant. If you are planning on or even thinking about pregnancy during residency, you should inquire about maternity policies (perhaps discreetly, since many program directors still do not enjoy dealing with this issue). But if you weren't exactly planning on pregnancy during residency and it happens anywhay, you need to arm yourself with practical plans and information.

According to guidelines published by both the American College of Obstetricians and Gynecologists and the American Academy of Family Physicians, you should notify program directors as soon as pregnancy is confirmed. Find out if it is possible to design home study or reading electives around your due date or leave period to minimize time away. Efforts should be made to schedule the most demanding rotations early in pregnancy and leave the least strenuous ones for the last month. You also want to avoid rotations in which you are essential to the service at this time. If you can, arrange to have no call scheduled around the time you are due or on leave. (However, be prepared to make this call up before or after delivery so as not to disadvantage other residents.) If you follow these guidelines, you should be able to return without a loss of training status.

Finally, be prepared for diverse reactions. Many people will show concern and sympathy, others will react with amusement, and there will be some whose responses are totally inappropriate. You should not forget that you have come this far by virtue of your academic and intellectual prowess. Your choice to bear children during residency does not denigrate your achievements, it enhances them.

—Nancy R. G. Church, MD MIT Board Representative

RU 486, continued

bringing the drug here, and media and general public attention will be very favorable. I add my voice to many other voices in urging you to pursue development and distribution of RU 486 both in France and elsewhere. Failing this, we urge you to sell or relinquish rights to the drug so that its testing and progress may continue elsewhere.

Send letters to: Dr. Edouard Sakiz, President Roussel Uclaf 102, 111 Route de Noisy B.P. 9 Romainville 93230 FRANCE

Dr. Wolfgang Hilger, Chairman Hoechst AG Burningstrasse 64 Main D'6230 Frankfurt, GERMANY

President Hoechst Celanese PO Box 2500 Somerville, NJ 08876

Bulletin Board

Breast Cancer Support Group

At the 1990 AMWA Annual Meeting, plans were made to put women physicians with breast cancer in touch with each other. A phone network will be available so that a woman who is newly diagnosed with breast cancer, undergoing therapy, considering reconstructive surgery—whatever—can discuss her situation with others who have faced the same things. Breakfast sessions at interim and annual meetings are being planned so that women can meet face to face as well. If you'd like to find out more, call organizers Margaret (Peggy) Ryan, MD, (313-540-7028) or Kathryn Bemmann, MD, (414-542-4544).

Nominations Wanted

The Nominating Committee is charged with selecting and presenting a slate of officers for eight Board positions, to be voted on at the 1991 Annual Meeting. The Nominating Committee invites *you* to participate in this process by identifying AMWA members for the "leadership pool" of potential candidates. The eight offices open are: president-elect; five vice-presidents, one each for program, finance, communication, membership, and career development; director of students; and MIT representative.

To be considered for nomination, candidates must have been active, dues-paying members for the past five years; they will also be asked to complete a candidate questionnaire sent later by the Nominating Committee. Send the names of all nominees and their CVs by **May l, 1991** to: Elinor Christiansen, MD, 4081 South Holly St, Englewood, CO 80111.

Poster Still Available

The "Celebrating Women in Medicine" poster is moving at a fevered pitch. Only a limited number of Ilene Winn-

Lederer's original numbered serigraphs remain, but there is still time for you to purchase a print.

The poster helps increase awareness of the rich contribution women have made to medicine over the centuries by picturing women such as Selkhet, the Egyptian goddess associated with childbirth; Elizabeth Blackwell, the first woman to earn a degree from an American medical school; and our new US Surgeon General, Antonia Novello, MD.

The four-color poster measures 19" by 25" and is available as an offset print (\$12) or as an original serigraph (\$40). Send check or money order (plus \$3 for postage and handling) made payable to AMWA/WIM Commemoration to AMWA/ WIM Commemoration, c/o Barthauer, 2450 Huntington Dr, Pittsburgh, PA 15241.

Community Service Awards

Nominations are needed for the 1991 Community Service Awards. The Awards recognize national AMWA members who have made outstanding contributions to their communities, ideally one from each state. Final candidates are selected by the regional governors in cooperation with state directors; final winners are approved by the Awards Committee. Winners receive a pin and certificate, presented at the Annual Meeting.

To make a nomination, include your nominee's name and address along with her CV and a paragraph describing her accomplishments; also indicate her branch number or that she is a memberat-large. Send the entire nomination package to Marie Glanz, AMWA, 801 North Fairfax St, Suite 400, Alexandria, VA 22314 by May 31, 1991.

Legislative Action Network

As a woman physician, you are an important and influential citizen; by raising your voice and joining with other

AMWA members you can make a significant difference in government policy. If you'd like to get involved in a regular program, join AMWA's Legislative Network. This self-selected group of AMWA members receives action alerts on legislative issues they have identified as important to them. The alerts give you all the information you need to call or write your Congressional representatives, when you need it. To join or for more information call Marcia Saumweber at the national office, 703-838-0500.

Osteoporosis Prevention

The Seventh Annual National Osteoporosis Prevention Week, of which AMWA is a cosponsor, has been set for May 12-18, 1991. The theme, "Changing the Shape of Your Future," stresses the steps that can be taken at all ages—especially the teen and young adult years-to prevent this debilitating bone disease. To make it easy for AMWA branches—or even individual members—to participate, the National Osteoporosis Foundation has prepared an excellent packet of materials. A series of age-related health briefs can be used with patients, school or community groups, and the media. Sample letters and a press release are also included to help insure media coverage of whatever programs you develop. To receive your packet, send a check for \$10 to National Osteoporosis Foundation, 2100 M St NW, Suite 602, Washington, DC 20037.



NATIONAL OSTEOPOROSIS
PREVENTION WEEK
MAY 12-18 1991

AMWA MEMBERSHIP APPLICATION

NAME			
ADDRESS			
CITY		STATE	ZIP
PHONE (HO	ME)	(WORK)	
MEDICAL SC	THOOL		GRAD YEAR
SPECIALTY(S	5)		
LICENSE(S) -			
SPECIALTY E	BOARD CERTIFICATION(S)		
MAIL TO:	AMERICAN MEDICAL WO! 801 NORTH FAIRFAX ST., A		

Regular Member \$175
Member-In-Training \$60
Student Member \$40 four years including subscription to Journal
Check Enclosed
VISA/MC#
(\$40 minimum charge)
Exp. Date
Local Dues

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