

# 2025 AUGS Voter Guide: Board of Directors

## Vice President Candidates

### **Robert Gutman, MD (Vice President Candidate)**



#### **Biosketch:**

Board certified in Ob/Gyn, Urogynecology and Reconstructive Surgery (URPS), Professor of Ob/Gyn and Urology at Georgetown University and Urogynecology Fellowship Program Director at MedStar Washington Hospital Center/Georgetown University. Prior to joining MedStar in 2008, I was assistant professor at Johns Hopkins University, where I completed my Urogynecology fellowship in 2005. I am committed to furthering the knowledge and understanding of pelvic floor disorders through education, research and peer collaboration. I worked to develop our interdisciplinary fellowship training program that directly incorporates female urology. I have mentored numerous Ob/Gyn and Urology fellows that have gone on to positions at AUGS with successful academic and private practice careers. I am currently completing my final year as a board member at large for AUGS, working as the education council liaison. Recently, I participated as member of the AUGS *Urogynecology* journal editor-in-chief search task force. I currently serve as a senior advisory board member for the AUGS/SGS Fellows Pelvic Research Network and member of the AUGS registry committee (prior vice chair). I am a former director of AUGS FPMRS Fellows Cadaver Course for 8 years and still attend as a faculty member. I have served for several years as AUGS foundation grant reviewer and AUGS research committee abstract reviewer and am a former member of the AUGS Urogynecology journal editorial board. I am a current member of the Society of Gynecologic Surgeons (SGS). I served multiple years on the SGS research committee and as a member of the SGS executive committee as the Scientific Program Chair for the SGS 2017 annual meeting. Since 2017, I have been an ABOG subspecialty URPS oral board examiner and involved in the last ABOG standard setting for the URPS qualifying examination. I regularly present my research at the AUGS annual meeting, participate in postgraduate courses, panel discussions, moderate scientific sessions and publish in the AUGS Urogynecology journal. My primary research interests involve surgical outcomes and multicenter research including the role for uterine conservation, apical support procedures and perioperative complications. Over the past 20 years with the International Organization for Women and Development (IOWD), I performed complex fistula repairs during annual missions to Africa and serve on their medical advisory board. I also served as a site PI for the FDA vaginal mesh research, an expert reviewer and defense witness for the class action lawsuits against midurethral slings and a member of the Boston Scientific strategic advisory board.

**Organization/Institution:** MedStar Health/Washington Hospital Center, Georgetown University

**Current and/or past involvement with AUGS:**

AUGS board member at large (current), education council liaison. Member AUGS Urogynecology journal editor-in-chief search task force. Senior advisory board member AUGS/SGS Fellows Pelvic Research Network (current). Member AUGS registry committee (prior vice chair). Former director AUGS FPMRS Fellows Cadaver Course for 8 years, still faculty member. Prior AUGS foundation grant reviewer and AUGS research committee abstract reviewer several years. Former member AUGS Urogynecology journal editorial board. AUGS annual meeting postgraduate courses, panel discussions, moderator of scientific sessions.

**Candidate Statement:**

I plan to use my credible and expansive experience in leadership, education and research to promote AUGS as the premier urogynecology organization in the world and secure its future. I bring to the board and executive committee 18 years of service to AUGS, over a decade and a half experience as a Urogynecology program director and leadership experience with organizations such as SGS, ABOG and IOWD. As Urogynecology program director, I am responsible for training our next generation of leaders in the field. While I have strong opinions, I understand the importance of being a team player and believe in consensus building to arrive at mutual decisions that are in the best interest of the organization. My international work with IOWD as well as multicenter research through the AUGS-SGS Fellows Pelvic Research Network and the Foundation for Female Health Awareness will be invaluable as we pursue important collaboration with other societies to advocate globally for women's health. My clinical leadership and experience is also complimented by roles with industry leaders that will be critical for future collaborations. I am currently a strategic advisory board member for Boston Scientific, investigator on an implantable tibial nerve stimulator for Coloplast and the former Clinical Events Committee Chair for the Pelvalon Eclipse device.

**What do you believe are the major challenges facing AUGS?**

AUGS continues to face financial challenges even after successfully emerging from the post COVID crisis. The high costs from inflation are being felt by all AUGS members who practice in large health systems, university settings and private practices. We are unable to raise rates and face constant threats of decreased reimbursement. Physician salaries are stagnant and many physicians do not receive cost of living increases or have suffered pay cuts as the large health systems take more control of the market. Urologists who perform similar procedures on men are being paid higher rates than urogynecologists that operate on women. This gender inequity is also being felt by our female colleagues based on historical salary gaps. NIH funding for women's health research is overall declining. Additionally, industry support is crucial yet has declined following COVID. All

these issues have put AUGS in a difficult position to maintain financial stability without passing on excessive fee increases to its membership. AUGS already relies on membership for so many initiatives through volunteer service. In person attendance at meetings has decreased despite the recent rebound, and many of our members need to attend virtually to save on travel expenses and time away from their practices. Finally, the name change of our journal to *Urogynecology*, which should be cause for celebration, resulted in resetting our impact factor that may negatively affect high quality submissions.

**What suggestions do you have to respond to these challenges?**

As the leader in urogynecology, AUGS must maintain strong financial stability, increase advocacy efforts and expanded education/research initiatives. It all starts with financial stability! During my 3 years on the board, we worked hard to turn around a large budget deficit and are now profitable. We made difficult decisions and consistently evaluate current and future AUGS programs making sure to avoid losses. If elected as the Vice President and future President, I will continue to build AUGS reserves and maintain a strong financial position. The board will explore new revenue streams. We need to take a more collaborative approach to how we partner with industry since they are critical to education, research and development in urogynecology. Membership value proposition of the utmost importance as AUGS members are the glue that holds our organization together. My hope is that all members feel the value and return on investment when they pay AUGS dues and attend the AUGS annual meeting and other courses. PFD Week must continue to be a can't miss event with the highest quality research, educational offerings, debates and lectures. Members should be encouraged to attend in person to collaborate, learn and engage with leaders from around the world. AUGS must maintain and grow our current offerings of billing and coding resources, patient handouts through voices for PFD, educational webinars, fellows lecture series and foundation research grants. We must support all our members including physicians and advanced practice providers at various stages in their careers that practice in a wide variety of settings such as academics, private practice, basic science, etc. Our recent investment in a new online member platform with advanced capabilities will enable us to better engage with our member communities. Reimbursements will improve if AUGS advocates and helps establish a 2-digit taxonomy code for urogynecology. We also need to increase funding for women's health research specifically for pelvic floor disorders through advocacy work at the NIH. I plan to work with organizations such as the American College of Surgeons, the American Medical Association, ACOG, SGO, etc. to improve pay inequity. We have already taken the first step towards making *Urogynecology* the go to journal for pelvic floor disorders by appointing Dr. Rebecca Rogers as the new editor-in-chief as we transitioned from Dr. Linda Brubaker's leadership. I will work with Dr. Rogers and provide all the support necessary to grow our impact factor and enhance the success of the journal which is crucial to the AUGS mission.

## Megan Schimpf, MD (Vice President Candidate)



### **Biosketch:**

I have served AUGS as:

- Chair of PFD Week 2023 in Portland after serving as Vice Chair for the combined meeting with IUGA in Austin in 2022
- Member and then chair of the AUGS Public Education Committee, including producing a series of more than 20 patient education handouts available on the website
- Assistant and now Associate Editor of *Urogynecology*, the AUGS Journal, where I design and help produce visual abstracts in addition to working with manuscripts, our mentorship program and the team in general
- Contributing author for AUGS' guide to postpartum health, *Pelvic Floor Health: Your Guide to Pregnancy and Postpartum Care*

Other national roles of note:

- SGS Annual Meeting chair and board member 2021
- SGS Systematic Review Group

At home in Michigan, I am a professor of ObGyn and Urology. After completing my Masters of Health Services Administration in Health Management and Policy in 2020, I am now the interim Associate Chief Clinical Officer for Primary Care ambulatory care operations and management. Encompassing all of primary care including general medicine, family medicine, geriatrics and pediatrics, this role involves strategy, staffing decisions, budget management, coding/billing, reimbursement, collaboration with administration and nursing, quality measures, and working with a centralized contact center and nurse triage phone hotline.

### **Education and Training**

Undergraduate: B.S. with distinction in Biology, University of Michigan, Ann Arbor, MI

Medical School: M.D., University of Michigan Medical School, Ann Arbor, MI

Residency: University of Connecticut Department of Obstetrics & Gynecology, Farmington, CT

Fellowship: Female Pelvic Medicine & Reconstructive Surgery, Harford Hospital, Hartford, CT

Master's Degree (MHSA): University of Michigan School of Public Health, Executive Health Management and Policy

**Organization/Institution:** University of Michigan

**Current and/or past involvement with AUGS:**

I have served AUGS as:

- Chair of PFD Week 2023 in Portland after serving as Vice Chair for the combined meeting with IUGA in Austin in 2022
- Member and then chair of the AUGS Public Education Committee, including producing a series of more than 20 patient education handouts available on the website
- Assistant and now Associate Editor of *Urogynecology*, the AUGS Journal, where I design and help produce visual abstracts in addition to working with manuscripts, our mentorship program and the team in general
- Contributing author for AUGS' guide to postpartum health, *Pelvic Floor Health: Your Guide to Pregnancy and Postpartum Care*

**Candidate Statement:**

I first presented on the podium at the American Urogynecology Society meeting in Palm Springs, CA, in 2006. Since then, I have always found my participation in AUGS to be rewarding, valuable and dynamic. In this time, I been able to contribute in many roles for AUGS, learning a great deal and meeting so many people. I hope my contributions have made a positive difference for members and for the public. With a background in journalism, I found my role on the public education committee very important and continue to use my writing skills as an Associate Editor for *Urogynecology*. Communication is a major part of the role I have at Michigan in primary care ambulatory operations, working to notify thousands of people as to initiatives. I have a strong track record of attendance on conference calls and participating actively in group work. I meet deadlines and I finish projects.

After completing my Masters of Health Services Administration in Health Management and Policy in 2020, I am now the interim Associate Chief Clinical Officer for Primary Care ambulatory care operations and management. Encompassing all of primary care including general medicine, family medicine, geriatrics and pediatrics, this role involves strategy, staffing decisions, budget management, coding/billing, reimbursement, collaboration with administration and nursing, quality measures, and working with a centralized contact center and nurse triage phone hotline.

I would be honored to continue to serve AUGS in the leadership track and would do all I can to advance the field and organization. AUGS can serve patients and care providers in a way no other organizations can.

### **What do you believe are the major challenges facing AUGS?**

- National trends that challenge women's health care on multiple levels, which could impact reimbursement and research funding for all fields in this space.
- Tight margins for health care in general that challenge both care and then members to be away from work to attend meetings.
- Ongoing challenges with specialty visibility to patients and primary care providers.
- Ensuring all AUGS members of varying backgrounds and practice settings feel engaged and that they have a role to play in AUGS.

### **What suggestions do you have to respond to these challenges?**

- Support the billing/coding committee in their work to broaden reimbursement and advocate as much as possible with governmental agencies.
- Partner with industry to gain a strong voice in national affairs as well as look at opportunities for financial solvency.
- Collaborate with partner organizations such as SUFU, AUA, ACS, and ACOG to stand together.
- Grow the research grants that AUGS can provide if federal funding is tenuous.
- Based on my experience as a meeting chair, work with the committee to make the meeting a vital event for all members to attend, ensuring everyone has something they want to participate in.
- Collaborate with recent fellowship and residency graduates to grow the population of trainees interested in a career in urogynecology.
- Rooted in my experience in the public education committee, work to increase awareness of the field to grow patient trust as a way to maintain strength.

## **Treasurer Candidate**

### **Jerome Yaklic, MD**



#### **Biosketch:**

Jerome (Jerry) Yaklic, MD MBA currently serves as Professor and Chair of the University of Texas Medical Branch Department of Obstetrics and Gynecology. Dr Yaklic completed his MD and Ob/Gyn residency at Wayne State University/Detroit Medical Center and his MBA with a concentration in Finance at Wright State University. Dr. Yaklic has extensive experience as a physician leader and in financial management.

Following residency, Dr Yaklic served on active duty as an Obstetrician Gynecologist in the USAF at Wright Patterson USAF Medical Center and as a faculty member in its integrated Ob/Gyn residency program with Wright State University. During his time at Wright Patterson, he served as Director of Outpatient Ob/Gyn Services and as Chief of Gynecology. Following discharge from the Air Force, Dr. Yaklic started a rural private practice in Michigan. During his almost 10 years in private practice (5 as a solo practitioner), he served as senior and managing partner of Lake Huron Ob/Gyn LLC. He also served as Chief of Staff for Huron Medical Center and on the hospital's Board of Directors. In 2010, he left private practice to rejoin the faculty at Wright State University. He took over as chair of the WSU Department of Obstetrics and Gynecology in 2012 and Associate Dean for Clinical Affairs and President of Wright State Physicians, the WSU faculty practice plan, in 2017. Dr. Yaklic started his current role as Chair of Obstetrics and Gynecology at the University of Texas Medical Branch in Galveston, Texas on May 1, 2020. He was appointed to the Board of Directors for UTMB HealthCare Systems, Inc. in 2024.

**Organization/Institution:** University of Texas Medical Branch at Galveston

#### **Current and/or past involvement with AUGS:**

Site PI for the AUGS Quality Improvement/Outcomes Research Network from 2015-2019  
Member of the AUGS Finance Committee 2021-present

#### **Candidate Statement:**

It would be my honor to serve as Treasurer for AUGS. I have been a member of the AUGS Finance Committee for the past 3 years and enjoyed the opportunity to learn more about the organization, its challenges, and future opportunities. I completed my medical school

and Ob/Gyn residency at Wayne State University/Detroit Medical Center. I currently serve as Professor and Chair of the Department of Obstetrics and Gynecology at the University of Texas Medical Branch at Galveston. Over the course of my career, I have had the opportunity to work in small community hospitals, military hospitals, and large academic medical centers. I worked in private practice for almost 10 years and have worked in academic medicine for over 18 years. I understand the unique challenges and opportunities each of these environments bring. I think this makes me uniquely able to represent the full scope of AUGS membership. In my current role, and as a physician leader in many healthcare organizations and professional societies, I have gained considerable experience in operational and financial management. The desire to expand this skill set prompted me to earn my Master in Business Administration with a concentration in Financial Management in 2012 from the Sooin College of Business at Wright State University.

Serving on the AUGS Finance Committee for the past 3 years, I have learned a lot about our organization and its financial challenges. Despite Urogynecology being a more recently recognized subspecialty with a smaller number of practitioners than other Ob/Gyn and Urology subspecialties, AUGS faces significant competition from other subspecialty societies (IUGA, SUFU, ICS, SGS, AAGL, FIGO, etc.) in attracting and retaining members. If AUGS is going to be successful and grow our membership, we must be financially strong and provide value to our members. Carefully picking where we choose to invest our resources and making sure those investments provide value to our members is essential if AUGS wants to be the “Voice of Urogynecology” in the United States. I hope you will give me the opportunity to continue to serve AUGS as its treasurer.

**What do you believe are the major challenges facing AUGS?**

I believe the major challenge facing AUGS is remaining relevant to our members and being fiscally responsible to ensure the organization is financially secure and has the funds needed to provide programming and services that are relevant and valuable to its members. Increased financial pressure at academic institutions is limiting professional development dollars available to their faculty and academic Urogynecologists are being forced to make difficult choices about which professional societies they belong to and what meetings they attend. An increasing number of Urogynecologists are in private and employed practices outside academics and many other societies are competing for their membership as well.

**What suggestions do you have to respond to these challenges?**

We need to make sure AUGS membership continues to provide relevant education and services which provide value to our members and grows its influence to ensure that it is



THE organization representing Urogynecologists in the US. This will require that we offer continuing medical education which is relevant and meets the needs of our membership. To do this, we need to continually seek input from members who practice in academic, employed, and private practice settings as well as Ob/Gyn residents and Urogyn fellows who represent our future membership. Meetings need to be at times and in locations that fit the membership's schedules and offer topics that meet their needs including CME related to narcotic prescribing, medical ethics, and other requirements for licensing. Hybrid meetings and on demand courses will continue to grow and remain an important part of AUGS educational offerings. AUGS needs to continue to engage APPs and other allied health professionals such as physical therapists to grow and expand our membership. AUGS also needs to continue to provide and expand its patient education and practice guideline offerings. These are important to help communicate best practice in our field and to help establish AUGS as the authoritative source of information in our field to patients, physicians, trainees and other providers alike.

## **Director at Large: Designated Candidate**

This position requires the candidate to have a background in DEI work

### **Marcella Willis-Gray, MD**



#### **Biosketch:**

Dr. Willis-Gray is an Assistant Professor in the Department of OBN/GYN at the University of North Carolina at Chapel Hill. She received her Bachelor's Degree from Xavier University of Louisiana which is a historically black college/university in New Orleans. After receiving her MD from the University of Virginia, she completed a residency in Obstetrics and Gynecology at Duke University. Her fellowship training in Urogynecology and Reconstructive Pelvic Surgery was completed at UNC-Chapel Hill. She joined the faculty at UNC in 2018 and was appointed Division Director in 2023.

In an effort to continue her growth as an academic physician she completed the Harvard Macy Institute's Program for Educators in Health Professions in 2023. She has been able to take advantage of leadership development programs at UNC including the Leader as Coach, Teaching Scholars and Clinical Leadership Programs.

Since 2019, she has served as the Medical Director for her office practice which has been awarded as a Top 5 Clinic at UNC based on Press Ganey Scores. Dr. Willis-Gray has also received multiple individual awards for her excellence in clinical care.

She has a passion for teaching and is the Director of the UNC School of Medicine Reproduction and Genitourinary Course for 1<sup>st</sup> year medical students. She is able to collaborate with basic scientists and clinicians in order to deliver educational content with a focus on peer-peer and teamed-based learning. Dr. Willis-Gray also serves as the Urogynecology Rotation Director for the Medical Students and OBGYN Residents. From 2020-2022, Dr. Willis-Gray and colleagues developed the *Woke Wednesday Series: A Practical Curriculum for Addressing Social Inequities in Clinical Encounters*, with the primary aim of having a practical, module-based curriculum to help learners build concrete skills to facilitate patient-centered communication with those experiencing negative social determinants of health.

Dr. Willis-Gray acknowledges how fortunate she has been to have incredible mentors throughout her medical journey and the importance of paying it forward to the next generation of physicians. She volunteers her time to mentor others, especially those from

disadvantaged and non-traditional backgrounds. Since 2020, She has served as a mentor for the Students in Training, Academia, Health, and Research (STAHR) Mentorship, which is a yearly, multi-session mentoring program for those underrepresented in the medical and research communities.

Since attending her first AUGS meeting in 2014, she has had 20 oral presentations at various PFD meetings with 9 of those being either first or last author. At the AUGS PFD week in 2022, she participated as Moderator for an Abstract Session and was an Expert Roundtable Presenter on the topic: Supporting Underrepresented Minority Faculty in Academic Medicine. From 2020-2022, she was a member of the AUGS Diversity and Inclusion Task Force that worked to identify areas for improvement related to DEI among members, leadership, research programs and patient advocacy within AUGS. In addition, she has served on the Postoperative Opioid Use and Postoperative Voiding Dysfunction Writing Groups, and the AUGS Quality Improvement and Outcomes Research Network, all of which resulted in publications in *Urogynecology*. She is currently a member of the AUGS SAFE Question Committee Writing Group.

She is hoping to use her experiences and knowledge to continue her service to AUGS as the Director-at-Large, designated DEI-role.

**Organization/Institution:** University of North Carolina at Chapel Hill

**Current and/or past involvement with AUGS:**

2022-Present Member of the AUGS SAFE Question Committee Writing Group June 16th, 2022 Moderator: Abstract Session- Endoscopic Surgery and Surgical Complications: AUGS/IUGA 2022. Annual Scientific Meeting. Austin, Tx. June 15th, 2022 Expert Roundtable Presenter: Supporting Underrepresented Minority Faculty in Academic Medicine: AUGS/IUGA 2022. Annual Scientific Meeting. Austin, Tx. 2020 – 2022 Member of the AUGS Postoperative Voiding Dysfunction Writing Group 2020 – 2021 AUGS Diversity and Inclusion Task Force 2020 –2021 Member of the AUGS Postoperative Opioid Use Writing Group 2018- 2020 AUGS Quality Improvement and Outcomes Research Network

**Candidate Statement:**

I attended my first AUGS Scientific Meeting in 2014 and I recall feeling welcomed and accepted, even as a resident. What stood out most was the sense of community amongst those in attendance. I remember seeing engaged members from all over the world,

passionate about learning from one another in order to improve the health of those with pelvic floor disorders.

That AUGS meeting was as a springboard for my career in Urogynecology. I have benefited from various fellows' courses, post-training educational seminars, and opportunities to present my research. I've made it a priority to give back to AUGS by volunteering on multiple committees. In 2020, I served on the AUGS Diversity and Inclusion Task Force. This was a 12-person group that worked to identify areas for improvement related to DEI among the organization, research programs and patient advocacy. The Task Force published our process in hopes of helping other national organizations do the same. As a member of the Task Force, I learned the importance of engaging with various populations within AUGS. Examples include those underrepresented in medicine based on race and ethnicity, LGBTQ+ communities, private practice providers and those with various resource limitations. We must also support those in all phases of their education and careers, from medical students to those nearing retirement. Everyone has something they can contribute to make AUGS a top medical organization. I have also volunteered in AUGS Writing Groups on Postoperative Opioid Use and Postoperative Voiding Dysfunction. I am currently a member of the AUGS Safe Question Committee Writing Group. I have truly enjoyed collaborating with experts in our field from around the country to provide helpful information that will benefit our members and patients.

At my home institution, I serve as a mentor for the Students in Training, Academia, Health, and Research (STAHR) Mentorship Program. STAHR is a year-long, multi-session mentoring program for those underrepresented in the medical and research communities. Within the Department of OBGYN at UNC, I was a founding member of the Diversity Task Force and was appointed Liaison for Personnel Recruitment and Retention. I also served on the Department's Strategic Planning Committee and the Executive Leadership Committee. In addition, I mentor several medical students, residents, and fellows, many of which come from underrepresented and non-traditional backgrounds.

I have two leadership positions I want to highlight because the knowledge I have gained from these roles will serve me well if elected to be on board. In 2023, I took the role as the Urogynecology Division Director. I lead an extremely talented and caring group of surgeons, fellows, Advanced Practice Providers, nurses and administrative team members. In this role, I must maintain the "big picture" vision for the group while also prioritizing the viewpoints and concerns of every individual on the team. I am also the Director of the Reproductive Medicine Course for the first-year medical students at my institution. This role provides the opportunity to collaborate with clinicians in various specialties, basic

scientists, administrative leadership and medical students. I must process continuous feedback from all stakeholders in order to deliver high-quality educational content.

Throughout my career I have learned the importance of effective communication and building relationships in order to achieve a common goal. In the designated DEI-role, I will learn from others' experiences and use my voice to express my viewpoints with the goal of making all AUGS members feel valued and respected.

### **What do you believe are the major challenges facing AUGS?**

1. **Growth and engagement of AUGS membership:** With differences in generational thoughts and ideals, it will be important for AUGS to be multifaceted in how we recruit new members to the organization, while also sustaining engagement amongst current members. I think we will experience continued growth as a subspecialty but will need to be proactive and intentional in how we present our organization to medical students and residents. We must also continue to highlight and honor those that have worked tirelessly to make our specialty what it is today.
2. **Equity and Inclusion:** With DEI efforts being attacked in many states across our nation, it is more important than ever for AUGS to show support and a commitment to those in underrepresented communities. In addition, AUGS must be mindful of other aspects of diversity including differences in geographical locations, resources, types of practices and our non-physician members.
3. **Organizational Growth:** It is clear that AUGS has made changes to sustain its presence as a top-tier organization world-wide. We need to continue this momentum by making wise decisions regarding finances while also being aggressive in finding new sources of funding both within AUGS and outside of the organization.

### **What suggestions do you have to respond to these challenges?**

#### **Growth of AUGS membership**

- Maintain a consistent and intentional presence on all forms of social media
- Highlight the work of various AUGS members including junior/mid-career faculty, APPs, and those working in non-academic settings
- Although it is important to maintain a virtual presence to allow for maximum access, we must push in-person meetings and events in order to build and foster relationships amongst members

## **Equity and Inclusion**

- Acknowledge and support research addressing social determinants of health and have educational content focusing on this topic
- Recognize AUGS members doing important work in non-academic settings such as those in private practice and those practicing in low-resource settings
- Commitment to having a presence at other national meetings including those that focused on underrepresented or lower-resourced communities such as: the National Medical Association, the National Hispanic Medical Association, and the National Rural Health Association
- Ensure our patient-educational information is broad in content and accessible to various communities

## **Organizational Growth**

- Determine innovative initiatives to promote philanthropy from AUGS membership and also searching for philanthropic funding sources outside of the organization
- Engaging with Industry in ways that will benefit the organization while also improving the care we provide to our patients
- Promote organizational and member advocacy in areas of access to care, payment reform, and other public health issues

## **Director at Large Candidates**

### **Abbas (Art) Shobeiri, MD** (Director-at-Large Candidate)



#### **Biosketch**

S. Abbas Shobeiri, MD, MBA, is the INOVA Health System Chief of Benign Gynecology, a professor of Obstetrics and Gynecology, Medical Education, and an affiliate biomedical engineering faculty at George Mason University. Dr. Shobeiri is an international authority in pelvic floor ultrasonography, medical device development, and robotics. He obtained his bachelor's degree from the University of Washington, a Medical Doctorate from Tufts University, and an MBA from Brandeis University. He completed his residency and fellowship at Tulane and Louisiana State University. He pioneered the Endovaginal Pelvic Floor Ultrasonography discipline and believes this skill should be a core competency for urogynecologists. Dr. Shobeiri is involved with the INOVA

Center of Excellence for Continence, an IUGA/ICS-sponsored fellowship program, and the Ultrasound of Pelvic Floor Investigation and Translation (UPFIT) group. Dr. Shobeiri has received numerous Research and educational awards, including the APGO award. He is a frequently invited national and international speaker. He has served on many Research and Program committees, grant reviews, manuscript reviews, and national and international society leaderships. He has authored >200 articles in scientific journals and chapters for textbooks standard to medical device development, imaging, and robotics. He is the editor of the textbook "Practical Pelvic Floor Ultrasonography," "Innovation and Evolution of Medical Devices," and "The New Science of Medicine and Management."

**Organization/Institution:** Inova Health System

**Current and/or past involvement with AUGS:**

AUGS Member since 1998 Scientific, AUGS Foundation, and the other Committees

**Candidate Statement:**

Administratively, I have been a proven healthcare leader at the Inova Health System in Northern Virginia, and I am passionate about program building and process improvement. I have built the pelvic floor program at Inova and worked with various service lines to work through multiple operational meltdowns involving operating rooms, COVID, and provider-related matters. By inspiring a culture rooted in a commitment to excellence, service to others, and improving the community's health, under my leadership, Inova Gynecology rose to the #6 program in the country.

Clinically, I am an international authority in robotic surgery, biomedical engineering educator, and researcher in the field of pelvic floor ultrasound and urogynecology. I transformed the field of urogynecology with the introduction of my studies involving Pelvic Floor Ultrasound, which has become central to the practice of diagnosing and healing physical and psychological aspects of pelvic floor trauma. My practice pivots between a clinic consulting room, the operating rooms, and the health system meeting rooms. As a servant leader, I engage in crucial dialogues to improve processes, resolve conflict, and create a cohesive culture.

Socially, I promote emotional literacy and break social taboos surrounding childbirth and mental health. Harnessing my first-hand experience as a healer working with mothers for

the past 30 years, I brought an empathetic lens into the complex experience of being a mother. I leverage my knowledge of anatomy, maternal mental health, and post-traumatic stress disorder to amplify diverse voices from different ages, cultures, gender identities, and abilities.

Personally, I have been blessed to be with my wife for the past thirty years and to raise three amazing and successful daughters together. My wife is a nationally known physician and a professional singer. In my “spare” time, I paint ([www.ShobeiriArt.com](http://www.ShobeiriArt.com)). My painting exhibitions, “Do You See Me? Paintings of Postpartum Trauma and Healing,” received outstanding reviews from the Washington Post and ABC News. I concentrate on stories and general motifs of post-traumatic stress disorder that postpartum patients convey. I am passionate about advocating for vulnerable populations.

### **What do you believe are the major challenges facing AUGS?**

AUGS comprises its members, and the question of how AUGS can serve its members needs to be reframed. Urogynecologists navigate a complex and dynamic environment where it’s imperative to respond to changing market conditions, industry regulations, and competitive pressures, all while providing quality care to patients in need and supporting the staff that do this meaningful work. Like all healthcare services, AUGS struggles to remain relevant in an ever-changing environment with the emergence of AI and regulations that allow competition to intrude into the field of urogynecology.

### **What suggestions do you have to respond to these challenges?**

AUGS has done a great job providing various educational venues for trainees and members, but when I asked one of my friends if she would attend AUGS this year, she asked, “What for?” Having to decide between caring for family, paying the bills, and keeping up with work environment changes, AUGS has to meet its members at their level to bring value to the individual member.

I possess the interpersonal skills to ensure successful relationship-building with various internal and external stakeholders, including physicians, APPs, nurses, health system and society leaderships, foundations, and affiliated organizations. I have been accountable for translating organizational priorities into operational tactics. I have played a key role in promoting excellence in collaborative practice, developing integrated clinical care systems across hospitals and ambulatory environments, and advocating for high reliability, patient safety, and workplace safety. I can work closely with the board members and operational



leadership to ensure that AUGS provides outstanding outcomes, experience, and value for the members.

## Scott Smilen, MD (Director-at-Large Candidate)



### **Biosketch**

I am originally from Brooklyn, New York where I attended public schools through High School. Growing up, I loved sports (especially baseball), math and science. I graduated from Yale University, where I was pre-med while majoring in Economics and Mathematics. I received my medical degree from New York University School of Medicine, where I subsequently did my Obstetrics and Gynecology and Urogynecology training, under the tutelage of Dr. Robert Porges, a consummate professional and great vaginal surgeon. I remained at NYU as an attending for many years and served in various leadership roles, including Residency Program Director in the Department of ObGyn (for 18 years), Chief of Gynecology and Urogynecology at Bellevue Hospital and Director of the Division of Urogynecology at the NYU School of Medicine. At NYU, we were fortunate to have an excellent group of female Urologists and were able to cut across traditional departmental boundaries and collaborate by creating a unified practice between our two divisions. We all worked together with residents from both Departments and trained fellows from ObGyn and Urology residencies, a very fulfilling endeavor.

I was honored to receive recognition in several ways while at NYU, some of my favorites being:

- Constantine Award: given by the Department of ObGyn for the best research paper by a medical student (1988)
- APGO Excellence in Teaching Award (1993)
- Gordon Watkins Douglas Faculty Teaching Award (2003, 2009, 2011)
- CREOG Excellence in Teaching Award (2007)
- Distinguished Alumnus Award, Department of ObGyn (2010)
- CREOG National Faculty Award (2015)

I left NYU in 2019 to take on my current position as Chair of the Department of Obstetrics and Gynecology at the Jersey Shore University Medical Center in the Hackensack Meridian Health (HMH) system, a role which has expanded to Regional Chair of the HMH South Region hospitals. During this time, I have expanded my administrative and leadership skills, collaborated with full-time academic and part-time community physicians, along with nursing and hospital leadership to grow our department, emphasizing high-quality, safe care in a supportive environment focused on the well-being and diversification of our team members. During the 5 years that I have been here and despite the Covid pandemic beginning 6 months into my tenure (indicating that I cannot list “good timing” as a

strength!), we have seen Gynecology volume grow by 30% and Obstetric volume by 50%. During this time, we established new programs in Family Planning and Pediatric and Adolescent Gynecology, while augmenting our subspecialty divisions in Urogynecology, Maternal-Fetal Medicine and Gyn Oncology. The academic output of a department which historically had been community-based, has more than tripled in terms of publications and presentations at national meetings. We also applied for and were granted a permanent increase in our residency complement. On a personal note, this year, I received the "Physician of the Year" award from the medical center, which was especially gratifying in that it is voted upon by nursing.

I am a member of many professional societies and organizations, including ACOG, APGO-CREOG, the Bellevue ObGyn Society, the New York Obstetrical Society, SGS and, of course, AUGS. I served as an oral boards examiner for ABOG for 15 years (2009-2023). For ACOG, I co-authored/collaborated on the Pelvic Organ Prolapse Practice Bulletin (#85, 2007) and then was invited to join the Gynecology Practice Bulletin committee, which I served on for 3 years. During that time, I co-authored/collaborated on the Urinary Incontinence Practice Bulletin (#155, 2015). Prior to my time with ACOG, I was a member of the Systematic Review Group for SGS.

After my term at ACOG, I was appointed to the AUGS Clinical Guidelines Committee and became Vice Chair of that committee one year later (with Paul Tulikangas as Chair). At the start of my tenure as Chair, the Guidelines Committee, along with 2 other committees, was folded into the Publications Committee, which I vice-chaired (with Steve Swift as chair) for 3 years, before becoming chair of that committee, a role in which I currently serve. Thus, I have been on AUGS' committees handling guidelines and publications for the past 10 years. During this time, I've had the opportunity to work with many great AUGS members from around the country and, collectively, we've been able to produce a large number of documents providing guidance on a multitude of topics within our discipline. As chair of the committee, I've also had the chance to collaborate with some of our international colleagues on multi-society projects, which have been extremely satisfying to complete while working across multiple time zones.

My main community service has been through youth sports organizations. I have 3 daughters who all (fortunately for me!) were interested in playing sports, primarily basketball and soccer. As such, I became involved in coaching travel basketball, which I did for 8 years (and 9 teams, having coached 2 teams simultaneously one year). Sports parallels what we do in the professional world in terms of having defined rules and competition, dealing with a variety of different personalities and situations, and having to utilize skills including flexibility, strategizing, teaching, communication and relationship-building. I truly

believe that some of the achievements that have been attained during my time as Department Chair were the result of skills honed from coaching. I also went on to join our town's youth basketball and soccer boards and became President of both (at different times), which not only required the organizational skills that go along with leadership positions, but also the ability to seek funding and establish philanthropic relationships in the community (in addition to the time management necessary in consideration of my day job!).

I am seeking to join the AUGS Board as a Director at Large and would bring the skills and experiences I have developed over time in my various roles, a positive "can do" attitude, the desire and ability to build relationships, an objective metrics-based approach to problem solving and the motivation to continue to move our field and organization forward.

Having been a Residency Director for nearly two decades, I understand and appreciate how to work with people from diverse backgrounds, listen to their needs and involve them in the decision-making process. As a Division Director at a large academic-medical center, I learned much about faculty practice management, including the finances of medicine and intricacies of coding in Urogynecology in particular. I became especially aware of the challenges of blending academic and clinical demands and the importance of emphasizing well-being to avoid burnout. Now as Department Chair, all of these learned skills have coalesced, with the addition of learning about and understanding the needs of community-based physicians, while instituting policies to achieve high quality, safe care across all the divisions in the Department. My time on AUGS Guidelines and Publications committees, especially the past 3 years as Chair of Publications, has enabled me to understand the Society's structure, vision and strategic plan better, align committee members with these goals, formulate strategies to meet the objectives, represent AUGS when working with other societies and ultimately, provide oversight in the development of high-quality content for our members. In all of these roles, an ability to communicate effectively and transparently and facilitate relationships between parties is of paramount importance (between residents and attendings as Program Director; faculty and fellows and mid-level providers as Division Director; private and community physicians and nursing as Department Chair) and I believe lends itself well to the role of liaison for the AUGS board.

I have been attending AUGS meetings since the mid-1990s and, at one of the very first meetings I attended, the inaugural June Allyson Grant was announced--by June Allyson! In the years since, I've seen and appreciated the growth of the Society, the refining of its goals, and the advancements in our subspecialty that it has fostered. I am happy and honored to have served the Society and hope to continue to do so as a Director at Large.

**Organization/Institution:** Hackensack Meridian Health/Jersey Shore University Medical Center

**Current and/or past involvement with AUGS:**

AUGS member 1997-present AUGS Guidelines Committee 2014-2018 Vice Chair 2015-2017 Chair 2018 (committee folded into Publications at start of term) AUGS Publications Committee 2018-present Vice Chair 2018-2021 Chair 2021-2024

**Candidate Statement:**

By way of introduction, I am originally from Brooklyn, New York where I attended public schools through High School. Growing up, I loved sports (especially baseball), math and science. I graduated from Yale University, where I was pre-med while majoring in Economics and Mathematics. I received my medical degree from New York University School of Medicine, where I subsequently did my Obstetrics and Gynecology and Urogynecology training, under the tutelage of Dr. Robert Porges, a consummate professional and great vaginal surgeon. I remained at NYU as an attending for many years and served in various leadership roles, including Residency Program Director in the Department of ObGyn (for 18 years), Chief of Gynecology and Urogynecology at Bellevue Hospital and Director of the Division of Urogynecology at the NYU School of Medicine. At NYU, we were fortunate to have an excellent group of female Urologists, and were able to cut across traditional departmental boundaries and collaborate by creating a unified practice between our two divisions. We all worked together with residents from both Departments and trained fellows from ObGyn and Urology residencies, a very fulfilling endeavor.

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I would be remiss not to mention my main community service which has been through involvement in youth sports organizations. I have 3 daughters who all (fortunately for me!) were interested in playing sports, primarily basketball and soccer. As such, I became involved in coaching travel basketball, which I did for 8 years (and 9 teams, having coached 2 teams simultaneously one year). Sports parallels what we do in the professional world in terms of having defined rules and competition, dealing with a variety of different personalities and situations, and having to utilize skills including flexibility, strategizing, teaching, communication and relationship-building. I truly believe that some of the achievements that have been attained during my time as Department Chair were the result of skills honed from coaching. I also went on to join our town's youth basketball and soccer boards and became President of both (at different times), which not only required the organizational skills that go along with leadership positions, but also the ability to seek funding and establish philanthropic relationships in the community (in addition to the time management necessary in consideration of my day job!).

AUGS Directors at Large serve as Liaisons to one of the 6 councils within the organizational structure. I am seeking to join the Board as a Director at Large and would bring the skills and experiences I have developed over time in my various roles, a positive “can do” attitude, the desire and ability to build relationships, an objective metrics-based approach to problem solving and the motivation to continue to move our field and organization forward.

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**What do you believe are the major challenges facing AUGS?**

My list is below, but what I think the challenges are that are facing AUGS is not as important as what the membership thinks. To successfully identify and respond to the issues, effective communication with the membership at large is critical and I would want to speak

with, poll and/or survey members to gain a better appreciation of what they want to address.

#### 1) Provider Reimbursement

In particular, differences in reimbursement by physician gender exist in Urogynecology as in other medical specialties, with female surgeons receiving lower payments from Medicare. In addition, disparities exist between specialties; e.g., Urologists vs. Urogynecologists.

#### 2) Accessibility to Care

Research by several members of our society has demonstrated that the prevalence of Pelvic Floor Disorders is increasing and one study estimated that approximately 3700 PFD specialists will be needed in the United States by 2030. Currently, we are well short of that number.

#### 3) Finances of the Society

Largely as a result of the pandemic, AUGS' profitability has been impacted and a portion of our reserves depleted in order to finance operations. This has improved in the past 2 years but is an important focus for the Society going forward.

#### 4) Emerging technology

AI tools hold the potential to improve surgical care, including preoperatively (patient selection and preparation), intraoperatively (improving performance and OR efficiency), and postoperatively (potential for reducing complications).

#### 5) Relative lack of Research Funding

Urogynecology still lags many other medical specialties in availability of funding for research.

#### 6) Increasing and diversifying membership/competition with other societies

#### 7) Physician Burnout



### **What suggestions do you have to respond to these challenges?**

First, my standard approach to problem solving is to diligently gain a complete understanding of the issues, which involves information gathering, data analysis and obtaining opinions from a diverse group of stakeholders, before formulating a strategy. Therefore, an inherent aspect of problem solving is being intimately involved in the process, and, if I'm fortunate enough to join the Board, that is how I would go about responding to these issues.

That said, my brief thoughts at this point are as follows:

#### 1) Provider Reimbursement

Support the function of Payment Reform and Coding committees

Advocacy

Utilize published data demonstrating lower reimbursement for female providers in Urogynecology (and all specialties) as well as disparities between Urology and Urogynecology subspecialties

#### 2) Accessibility to care

Raise awareness and education

Increase training programs and incentives for rural practice

#### 3) Finances of the Society

Continue to augment content in user-friendly and interesting formats at the Annual meeting (as has been occurring in the past several years) to drive attendance

Philanthropy

Based on Dr. Bradley's Presidential Address in Portland last year, less than 5% of our membership had donated to the AUGS foundation (this may be the reason why, to my surprise, I received the Donor of the Year award in 2023—there is not a lot of competition when 95% of people are on the sidelines!). We need to continue to promote the important things that AUGS does for its members and ensure that they are aware of them.

#### 4) Emerging technology

Promote and support research on applications of AI in Urogynecology, recognizing its potential impact on more rapid acquisition of information, evaluating the ability of natural language processing platforms to provide accurate information to patients, and assess the ability of AI to improve procedural performance.

Dovetailing with this will be the need to continue to recruit a younger, more diverse membership, as below, who will be more facile with emerging technology and more apt to utilize it

#### 5) Relative lack of research funding

Continued government advocacy, highlighting patient stories to drive the need for more research in this area

Continued well-vetted partnerships with industry

#### 6) Increasing/diversifying membership

We have seen >30% increase in membership over the past 8 years and we need to continue that progress

Marketing

Use of social media

Assuring that fellowship programs have distinct DEI statements (we recently reviewed this and found that < 15% currently have such a statement on their website)

#### 7) Physician burnout

Education on strategies for individuals

Advocacy for organizations, hospitals, medical centers to implement and improve interventions to better support physicians

Address systems issues, including EMR and reimbursement (as above)