

Tibia-Tribune

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President's Message

Langdon A. Hartsock, MD



Dear Colleagues,

The Annual Meeting of Southern Orthopaedic Association is only a few months away and it promises to be truly outstanding! The Scientific Program is complete and has an excellent combination of clinical review symposia, as well as top-notch scientific papers and new "rapid fire" sessions devoted to individual subspecialties. The program offers an excellent review of multiple issues including sports medicine, adult reconstruction, pediatrics, trauma, upper extremity, foot and ankle, and hand, shoulder and elbow, and tumors. The scientific

papers were chosen from a large number of abstracts and will present a wide spectrum of new ideas. The Distinguished Southern Orthopaedist will be Lamar Fleming, MD of Atlanta, GA and the Presidential Guest Speaker will be Andy Burgess, MD of Houston, TX.

The North Carolina mountains in July offer a perfect location for outdoor activities, either as a family or individually, and a welcome relief from the hot and humid July days in the rest of the South! We promise this will be a meeting which will be memorable for the camaraderie and the locale, as well as a stellar Scientific Program. Please



make your plans to join us in July in Asheville at the Grove Park Inn.

Sincerely,

Langdon Hartsock

Langdon A. Hartsock, MD
President

Register Now for the 2015 Annual Meeting



The SOA Annual Meeting will be held July 15-18, 2015 at The Omni Grove Park Inn in tranquil Asheville, North Carolina. For meeting information, view the Preliminary and Scientific Programs online at www.soaassn.org.

There's a reason guests have been staying at The Omni Grove Park Inn for one hundred years. They come for relaxation, rejuvenation and to breathe in the clean mountain air, not to mention the countless activities available including golf at the legendary Donald Ross designed course, treatments at The Spa, programs for the kids, outdoor adventures, restaurants and shops. And don't forget to check out some of what the Asheville area has to offer. *Frommer's* named it a must-see global destination, after all. From its rich history to modern energy,

the city is a hip blend of art, nature, culture and mountain flavor. Explore the lively downtown, unique shopping, architectural marvels and thriving arts scene with performing arts, galleries and events. Known as an art colony, a healing resort and a home to notable luminaries, statesmen and bohemians, Asheville is one of the most welcoming, vibrant cities in America.

For everyone's convenience SOA has reserved a block of sleeping rooms. Call the Omni Grove Park Inn at 800-438-5800 or make a reservation online at <http://www.groveparkinn.com/SouthernOrthopaedicAssociation7>. Please mention that you are with *Southern Orthopaedic Association* to get the discounted rate. Register for the meeting online at www.soaassn.org.

Cutoff for SOA Room Rates is June 15, 2015.

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70+ CME Credits Available Per Year to SOA Members

SOA members can earn 70 plus CME credits each year. CME Credit opportunities available to members include:

- SOA Annual Meeting – 25+ CME credits per year
- SEC Meeting – Up to 12 CME credits per year
- *Journal of Surgical Orthopaedic Advances* (JSOA) – 24 CME credits per year
- Self-Assessment Exam – 10 CME credits per year

In addition to the CME credits available, SOA members receive a substantial discount to attend the SOA Annual Meeting and SEC Meeting. The *Journal of Surgical Orthopaedic Advances* is available online as well as printed. SOA offers numerous awards every year including Resident Awards, Distinguished Southern Orthopedist and SEC Team Physician of the Year. Other benefits for SOA members include: Tibia Tribune, discounts to regional organizations' Annual Meetings and Ortho-Preferred® Professional Liability Insurance.

Bylaws Changes

The following Bylaws changes will be presented to the membership for approval at the 2015 Annual Meeting at The Omni Grove Park Inn in Asheville, NC, July 15-18, 2015. The copy in red is recommended additions and copy struck through is to be removed.

ARTICLE III MEMBERSHIP

(d) Affiliate – Affiliate members shall be by invitation and have the following qualifications:

3. Practice profile is exclusively (100%) ~~musculo-skeletal~~ **the traditional practice of orthopaedic surgery.**

(g) Emeritus Members - An Active member that has paid dues for ten years and does not have an ~~clinical practice~~ **active traditional practice** of Orthopaedic Surgery shall be transferred to Emeritus Membership status, upon directing a written request for said transfer to the Membership Committee.

Upcoming SOA Meetings



32nd Annual Meeting

July 15-18, 2015
Grove Park Inn
Asheville, NC



Southern at the SEC Sports Injury Update and Pearls 2016

March 10-12, 2016
Nashville, TN



33rd Annual Meeting

July 27-30, 2016
Naples Grande Beach Resort
Naples, FL

The SOA

The Southern Orthopaedic Association (SOA) was founded in 1983 for physicians who are engaged in the specialty of orthopaedic and trauma surgery. Its mission is to develop and foster the art and science of medicine in the specialty of orthopaedic and trauma surgery. SOA operates exclusively for charitable, scientific and educational purposes.

SEC Team Physician of The Year

A. Brent Bankston, MD

One of the highlights of the SOA SEC Program is a special presentation honoring the outstanding SEC Team Physician of the Year, chosen by the SEC Head Athletic Trainers. Congratulations to A. Brent Bankston, MD, who received the award at the meeting. In addition, the LSU Athletic Training Staff received a check for \$1000.00 to be used for student athletic trainer education, courtesy of DJO Global, who has sponsored this stipend since the award's inception in 2003.

Dr. Bankston practices orthopaedics in Baton Rouge, Louisiana and specializes in adult reconstructive surgery of the hip and knee and sports medicine. He is the current head team orthopaedic surgeon at Louisiana State



Pictured left to right, Drs. Darren Johnson, A. Brent Bankston, and Peter Indelicato

University and has been for the past 20 years.

Dr. Bankston received his MD from LSU Shreveport. He did his orthopaedic residen-

cy at the University of South Alabama and did a fellowship in adult reconstructive surgery at the Center for Hip and Knee Surgery in Mooresville, Indiana.

He is a member of numerous medical organizations and is also a participant in Operation Walk. Operation Walk is a Latin orthopaedic mission group which performs joint reconstructions in underdeveloped countries.

Dr. Bankston has been married to his wife, Kelli, for 31 years and they have five children.

The SOA SEC Team Physician of the Year Award is sponsored by DJO Global and the Southern Orthopaedic Association.

SEC Exhibitor Recognition

The Southern Orthopaedic Association would like to thank the exhibitors of the Southern Orthopaedic Association's meeting, "Southern at the SEC: Sports Injury Update & Pearls 2015."

Without the unrestricted educational support of the companies listed below, we would not have been able to provide this symposium. In addition, a special note of thanks to DJO Global for sponsoring the 2015 Southern Orthopaedic Association's SEC Team Physician of the Year Award.

DJO Global, Inc.

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Program Chair's Message



Dear Fellow SOA Members, Spouses, and Guests:

On behalf of the SOA Board of Trustees, President Langdon A. Hartsock, MD, and myself, I look forward to welcoming you to the Southern Orthopaedic Association Annual Meeting to be held July 15-18, 2015 in Asheville, NC. The quality of the scientific submissions this year was truly impressive and the Program Committee has worked hard to assemble an exciting academic program. In addition to the podium presentations and posters, there will be a number of symposia led by leaders in the field addressing complex trauma, shoulder reconstruction, updates on ACL reconstruction, controversies in adult reconstruction, and many other topics relevant to the care of your patients. The program offers an exceptional educational opportunity for the general orthopaedist as well as the subspecialist. This year we are offering an exciting "rapid fire" format for abstract presentation which will be a dynamic way for the audience to engage the speakers. The SOA meeting will allow attendees to earn up to 25.75 credits of CME. It would be difficult to find such a

valuable educational opportunity in any other meeting.

This year's Distinguished Southern Orthopaedist is Lamar L. Fleming, MD of Emory University who will be honored by several orthopaedic surgeons, the Presidential Guest Speaker, Andrew R. Burgess, MD, will speak on '*Automotive Crash Research: The Effects on Orthopaedic Practice*'. These will certainly be two highlights of the meeting. The program will also provide an opportunity to keep up with the current state of our professional organizations. There will be an OREF report by Ramon Jimenez, MD and an AAOS report given by President, David Teuscher, MD.

The location of Asheville and, in particular, The Grove Park Inn, are sure to provide plenty of activities for the entire family. The social program will kick off with the Welcome Reception Thursday evening and conclude with the Gala Dinner on Saturday night. Highlights include an epicurean tour of downtown Asheville, tour of breweries and distilleries, local artists and craftsman, fly fishing, rafting, and a tour of the famous

Program Committee

The Southern Orthopaedic Association gratefully acknowledges the following orthopaedic surgeons for their contribution to the development of the scientific program.

Lee R. Leddy, MD, Chair
L. Andrew Koman, MD
Scott D. Mair MD
Richard S. Moore, MD
Robert D. Zura, MD

Biltmore Estate. The afternoons will give attendees ample time to enjoy all the outdoor activities that Asheville has to offer including whitewater rafting, hiking, golfing, tennis, a sporting clay tournament, mountain biking, and fly fishing. This promises to be a memorable venue and experience for the entire family.

We look forward to seeing you all at the SOA Annual Meeting in Asheville. Please make every effort to attend this once in a lifetime event.

Lee R. Leddy, MD
2015 Program Chair

Scientific Program Highlights

Thursday – July 16, 2015

GENERAL SESSION 1: Total Joint Outcomes
GENERAL SESSION 2: OREF Report and Presidential Guest Speaker

RAPID FIRE SESSIONS 3A-D: Total Hip, Sports/Knee, Foot and Ankle, Trauma

SYMPOSIUM 1: What's New In ACL Reconstruction?

SYMPOSIUM 2: Oncology

GENERAL SESSION 4: Sports Medicine 1

POSTERS (Open daily to all participants before and after the Scientific Program.)

MULTIMEDIA EDUCATION SESSION (Available each day following the Poster Session.)

Friday - July 17, 2015

GENERAL SESSION 5: Trauma

GENERAL SESSION 6: AAOS Report and Distinguished Southern Orthopaedist

RAPID FIRE SESSIONS 7A-D: Mixed Topics/General Orthopaedics, Total Knee, Hand, Shoulder/Elbow Reconstruction

SYMPOSIUM 3: Shoulder

SYMPOSIUM 4: Medical Liability

GENERAL SESSION 8: Pediatrics

POSTERS (Open daily to all participants before and after the Scientific Program.)

MULTIMEDIA EDUCATION SESSION (Available each day following the Poster Session.)

Saturday - July 18, 2015

GENERAL SESSION 9: Sports Medicine 2

SYMPOSIUM 5: Trauma

RAPID FIRE SESSIONS 10A-D: Mixed Topics/General Orthopaedics, Total Joint Arthroplasty, Spine, Hip

GENERAL SESSION 11: BOC Report and Presidential Address

SYMPOSIUM 6: Young Arthritic Patient

GENERAL SESSION 12: Hand and Upper Extremity

POSTERS (Open daily to all participants one hour before and after the Scientific Program.)

MULTIMEDIA EDUCATION SESSION (Available each day following the Poster Session.)

Multimedia Education Sessions

The SOA will provide multimedia education sessions Thursday, Friday and Saturday afternoons, July 16-18. A comprehensive selection of AAOS DVDs will be available for your individual education. These DVDs will highlight surgical procedures and current concepts in Orthopaedics. Registered attendees should find these DVDs informative and helpful in their practice.

2015 Presidential Guest Speaker

Andrew R. Burgess, MD



The SOA 2015 Presidential Guest Speaker is Dr. Andrew R. Burgess, Professor and Vice-Chairman of the Department of Orthopaedic Surgery at The University of Texas Medical School at Houston, where he also serves as Chief of Orthopaedic Trauma. Dr. Burgess received his medical degree from Albany Medical College in New York, where he also completed his orthopaedic residency training. He completed trauma fellowships at the Shock Trauma Center at the Maryland Institute for Emergency Medical Services System in Baltimore, Maryland, and a second AO Trauma Fellowship in Chur, Switzerland.

Dr. Burgess served as Professor and Chief of Orthopaedic Surgery at the University of Maryland Shock Trauma Unit from 1982 to

2002. He has been a Professor of Orthopaedic Surgery (part-time) at Johns Hopkins University School of Medicine since 1998. Immediately before joining The University of Texas Health Science Center at Houston, he was Academic Chairman and Director of Trauma at Orlando Regional Hospital from 2004 through 2010. Responsible for educating military orthopaedic residents from both Bethesda and Walter Reed at Maryland's Shock Trauma Unit, he held the rank of Adjunct Professor at the Uniformed Services School of Medicine from 2001 through 2004.

He has been active in crash injury research and motor vehicle design, and was a leader of University of Maryland's CIREN (Crash Injury Research and Engineering Network) center. He has been selected as a Landstuhl

Scholar to educate staff and participate in the care of our wounded warriors at Landstuhl Regional Medical Center, Germany, 2007 and 2011.

Dr. Burgess is a founding member and past President of the Orthopaedic Trauma Association (OTA). He is a member of numerous medical societies and committees. His affiliations include the Motor Vehicle Safety Research Advisory Committee and The American College of Surgeons, where he also served on the Committee on Trauma. He was named in "Best Doctors in America", first elected in 1992. He has won "teacher of the year" awards at Johns Hopkins University, the University of Maryland and Orlando Regional Hospital. Dr. Burgess is board certified by the American Board of Orthopaedic Surgery.

2015 Distinguished Southern Orthopaedist

Lamar L. Fleming, MD



Lamar L. Fleming is the recipient of this year's Distinguished Southern Orthopaedist Award. Dr. Fleming began his medical career in Internal Medicine. He was drafted out of his residency into the Navy and became a Naval Flight Surgeon, serving for three years. Afterwards, he changed his career direction as he soon realized his true passion was in Orthopaedics.

Upon completing his residency at Duke in 1975, he joined Thomas E. Whitesides, Jr. at Emory Orthopaedics in Atlanta, GA. For the next 38 years, Dr. Fleming had a very successful career including serving as Chief of the Orthopaedic program at the VA Hospital, Grady Memorial Hospital, and Emory Hospital before becoming Chairman of the Emory Orthopaedic Department in 1983. During this time, he helped establish Emory

as one of the top Orthopaedic Residency Programs in the country. Dr. Fleming also served as president of the Atlanta Orthopaedic Society, the Georgia Orthopaedic Society, the Eastern Orthopaedic Association, the American Orthopaedic Foot and Ankle Society, and the Southern Orthopaedic Association, and held various Board positions in the American Academy of Orthopaedic Surgery and American Orthopaedic Association. He is currently a Professor Emeritus at Emory University.

Despite his many academic and career accomplishments, Dr. Lamar Fleming has overcome many challenges, which he values as his true success stories. Like King George VI of England, Dr. Fleming suffered with severe stuttering as a child. After a lot of hard work he overcame this as a young man and feels one of his greatest accomplish-

ments is to have been able to speak clearly and be heard by many giving academic/medical presentations without stammering.

He feels that along with helping his many patients, one of the greatest pleasures in his career is to have been part of the training of so many Orthopaedic Residents and to have helped guide their Orthopaedic careers. The greatest honor of his life has been the teaching, training and mentoring of these young men and women into becoming successful Orthopaedic Surgeons.

Dr. Fleming retired in 2013 and now lives on Lake Rabun in Lakemont, GA. with his wife of forty-five years, Sally Hurt Fleming. They have two daughters, Anne Ridley Fleming and Sarah Sibley Fleming. He feels God has blessed him greatly.



Doctors Betrayed By Traditional Financial Strategies

Part 1 of 2

David B. Mandell, JD, MBA & H. Michael Lewellen, CFP

Before you can understand why many strategies and services are not appropriate for doctors, you must understand the dynamic of the “Average American,” for whom these products and services are designed.

Most legal, accounting, insurance and investment strategies have been created for:

1. The average American family whose annual income tax liability is less than 12%.
2. The 98% of American families who will never owe any estate taxes.
3. An employee, not an employer, who will likely never be sued and who has no control over the choice of legal entity or type of retirement vehicles the employer will utilize.
4. Someone whose income is based on productivity, not government regulation.

If the four statements above sound like your life, then “off the rack” planning at most firms is likely sufficient for your needs. For many doctors, most if not all of these characteristics are not true.

As authors of books and articles, we regularly interact with publishers, editors and talk show hosts. Radio and television stations, book & magazine publishers, and internet content editors are looking for content for their “average” reader. In general, they fear that providing content generated for few high-income readers will “alienate” their average readers and the advertisers who pay good money to reach a specific audience. Practically, what this means for physicians is that many financial and legal advice you get from print and online media and from

large national firms is generally not appropriate for physicians.

Doctors who follow advice that is generated for the masses and doesn’t take into consideration their unique challenges should see themselves as the patient who focuses on the results of his own ten-minute internet search over the specialist’s educated diagnosis based on decades of experience and the results of a personal exam and test results.

There is no profession with as large a set of unique challenges as physicians face. For this reason, it is imperative that doctors look for advisors who spend the majority of their time working with physicians. To take it a step further, if you are a high liability or high income specialist, you will want to work with a team of advisors who are acutely aware of these additional challenges. For example, an obstetrician has a much greater need for asset protection than a pediatrician and a surgery center owner has much greater tax challenges than a primary care doctor.

Conventional Wisdom is Not Your Friend.

In the beginning of the article, we pointed out what characteristics are common for U.S. taxpayers. Solutions that are widely-accepted in the media and by advisors are generally tools that work for these people. One hurdle that advisors who specialize in helping high-income doctors face is the fact that the solutions we (as a group) espouse are appropriate for less than 1% of the families in the country. For that reason, doctors who insist on only implementing strategies they have heard over and over again in the media and from their colleagues will miss out on valuable opportunities. Once you

embrace the fact that you are different and require “different” planning than your neighbors, you will have taken one very significant step to significantly improving your financial situation.

In the rest of this article, and in Part 2 of this article (which will be published next month or can be requested via email at Mandell@ojmgroupp.com), we will share a few examples of common mistakes physicians make when listening to bad, but common, advice. These include:

Mistake #1 – “You Don’t Need a Corporation for Your Medical Practice.”

Despite what some CPAs may say, in most cases the cost and aggravation of creating and maintaining a corporation (or in many cases, two corporations for most medical practices) are insignificant relative to the asset protection and tax benefits corporations offer physicians. With recent tax law changes and with many new proposals we will see over the next year, the benefits will be compounded. Though these corporate solutions can reduce taxes by \$5,000 to \$50,000 per year for the doctor, these particular strategies are outside the scope of this two-part article.

Mistake #2 – Owning Assets Your Name, Spouse’s Name of Jointly with Your Spouse

We acknowledge that owning assets in your own name or jointly with a spouse are the most common ownership structures for real estate and bank accounts. This is okay for 95% of Americans. Hopefully, by now, you realize that you are not in that common group. You have potential lawsuit risk, probate fee liability, and estate tax risks that

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Money Matters continued...

over 95% of the population do not have. That's why, in most states, owning assets jointly can be a mistake. Something as simple as a living trust or a limited liability company can often solve these problems.

Mistake #3 – Making a Questionable Bet on Qualified Retirement Plans.

This is perhaps the single most important area of planning for doctors to address once they understand that they are different. Typical retirement plans are great for rank-and-file employees because they force employees to put away funds for retirement. Employers may match some percentage of employee contributions (which is free money for the employee). The investment grows tax-free until funds are accessed in retirement (when the employee is living on modest Social Security and these retirement plan funds).

As "the employer," there is no "free money" for you as all the money that ends up in your plan account was yours to begin with. In fact, you are responsible for those matching contributions so the retirement plan does have some "friction" for you if you want to make any reasonable contribution on your own behalf. On top of that, you will not be living on \$25,000 to \$50,000 in retirement like your employees will. You will have taxable investments, much larger retirement plan contributions and greater Social Security income (maybe). In any case, you will be paying very significant tax on your retirement plan withdrawals. Do you think that tax rates will be lower than they are now when you retire?

With rising costs for employees and a possibility that you may actually withdraw funds from your retirement plans at a HIGHER tax rate than the one you received for the original deduction, the real benefit of retirement plans comes into question. When you add the potential costs and aggravation of complying with ERISA, Department of Labor and tax laws surrounding retirement

plans, AND the fact that any unused retirement plan balances will be taxed at rates up to 80% (see chapter on IRD in *For Doctors Only* book), you may find that retirement plans are not all they are cracked up to be. A growing trend among successful doctors is to implement non-qualified planning alternatives instead of traditional retirement plans.

Suggestion: Use a Better Retirement Plan to Support Your Retirement.

Non-traditional planning can offer higher income physicians opportunities to contribute significantly larger annual contributions. Whether you are using non-qualified plans, "hybrid" plans, fringe benefit plans or even a tool primarily designed for risk management benefits, like a captive insurance company, you could potentially enjoy tax benefits up to \$100,000 to \$1,000,000 or more annually. Most of these tools allow you access to the funds before 59½, will not force you to take withdrawals at age 70½ if you don't need the money, and will not be taxed at rates up to 70% or 80% when you pass away. For these reasons, savvy doctors utilize nontraditional plans more than traditional retirement plans.

Note: Non-qualified or "hybrid" plans vary significantly in their design, their scope, and their applicability. Some plans work great for smaller practices with one or two partners. Others work best in practices with 3 to 20 partners. Still others may work best for the larger practices. To determine which one is right for you, contact the authors for a free no-cost consultation offered to readers.

Don't Miss Part 2 of this Article

This is the first of a two part article. More tips on tax reduction and other elements of financial planning that are specific to physicians and unnecessary for Average Americans will come in the subsequent part of this continuing article in the Fall edition of the SOA Newsletter.

SPECIAL OFFERS: For a free (plus \$10 S&H) hardcopy of *For Doctors Only: A Guide to Working Less & Building More*, please call (877) 656-4362. If you would like a free, shorter eBook version of *For Doctors Only*, please download our "highlights" edition at www.fordocctorsonlyhighlights.com.

David B. Mandell, JD, MBA, is an attorney, author of five books for doctors, including *FOR DOCTORS ONLY: A Guide to Working Less & Building More*, and principal of the financial planning firm OJM Group (www.ojmgroupp.com), where H. Michael, CFP serves as Director of Financial Planning. They can be reached at (877) 656-4362 or mandell@ojmgroupp.com.

Disclosure:

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Part 2 will appear in the SOA Fall Newsletter.



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Do You Know a Qualified MD or DO Orthopaedic Colleague Who Is Not an SOA Member?

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