



2004 - 2005
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Robert A. Roth, M.D.

EXECUTIVE DIRECTOR

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HIGHLIGHTER

March, 2005

From the President

Peter C. Albertsen, M.D.

On behalf of the New England Section of the American Urological Association, I would like to invite you to attend our 74th annual meeting to be held on November 2-6, 2005 at The Fairmont Southampton Hotel in Bermuda. The Northeastern section will be joining us for this exciting event so block your calendars now!

Dr. John Denstedt, President of the Northeastern Section and I have planned several significant changes to our traditional scientific format. Each day will have a plenary session featuring state of the art lectures and debates covering topics of interest to the general urologist. The second part of the morning will be devoted to specialty sessions that will run concurrently. We plan a number of innovative sessions that will ensure audience participation. We think that you will find it fun and informative.

Bill and Mary Bihrlle have helped Pam and me plan an outstanding social program. In addition to the traditional golf tournament, we plan a croquet tournament for those who are hesitant to wander the links. Ample time will be available to enjoy the beach, but we are still looking for recruits to the join the New England Section Beach Olympics team. Please practice your three legged race skills and the all important tug of war! The New England Section won these events at our last combined meeting and we need to uphold this tradition.

Thursday evening we will hold a reception on the beach at The Fairmont Southampton. On Friday we will sail for the dockyards on the western tip of the island for an exciting evening exploring several historic sites. We have plans for a special treat for the Saturday night banquet.

This promises to be a fabulous meeting. Please join us!

We plan a number of innovative sessions that will ensure audience participation. We think that you will find it fun and informative.

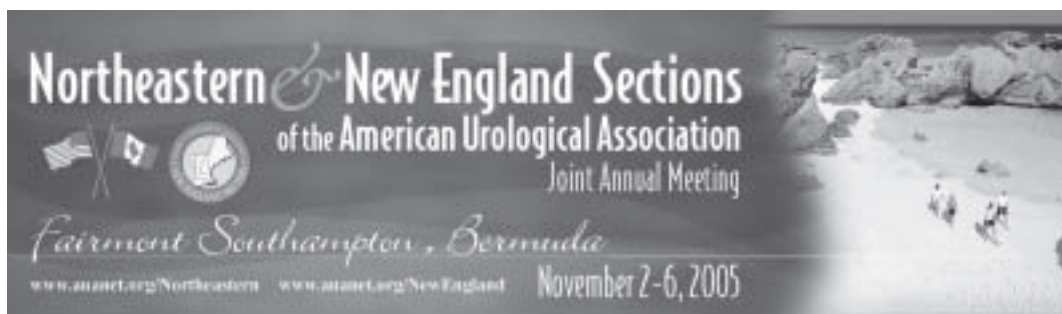
From the Secretary

Kevin R. Loughlin, M.D.

Section Newsletter

A recent issue of the Highlighter featured short articles on incontinence by Section members. We will continue to periodically publish "topic" oriented issues of the Highlighter and will send out a survey to Section members regarding future content of the Highlighter.

(continued on page 3)



NEW ENGLAND SECTION of the AMERICAN UROLOGICAL ASSOCIATION

Highlights of the BOARD OF DIRECTORS MEETING, September 9, 2004

Report of the President

Dr. Green distributed a newspaper article regarding a physician charged with illegal Lupron sales; he felt the Section has a responsibility to raise this matter with the AUA. It was agreed to send the issue to the Section's Judicial and Ethics Committee for an opinion.

Dr. Green appointed Dr. Jeffrey Bennett to serve as Chair of the Socioeconomics Committee.

An industry supporter had contributed \$1,000 to the Annual Meeting to support resident travel awards. A mechanism to distribute the funds fairly was discussed and it was voted to hold a lottery at the Welcoming Dinner and award \$500 stipends to two of the residents attending the Annual Meeting. There was consensus that the issue of resident travel awards required further investigation, and that the Treasurer would be the appropriate individual to report back to the Board.

Dr. Green noted that he had been approached by many industry representatives for assistance in putting industry sponsored programs or speakers on the Annual Meeting Program. Staff has a procedure to work with industry, but at times the representatives prefer to work with the physicians. It was agreed that Dr. Green would serve as Chair of an *ad hoc* Development Committee, along with two additional Section members, to prepare a written set of guidelines for the Section to follow with regard to industry relations.

Report of the Secretary

Dr. Loughlin outlined the current membership as of August 3, 2004: 337 Active, 194 Senior, 31 Associate, 3 Honorary, 13 Affiliate and 50 Candidates for a total of 633 members.

The following members had passed away during the previous year and a moment of silence was observed:

Trudeau Horrax, M.D., *Dataw Island, South Carolina*
William S. Klutz, M.D., *Harmony, Rhode Island*
Robert Moylan, M.D., *Cambridge, Massachusetts*
Alan D. Perlmutter, M.D., *West Yarmouth, Massachusetts*
Bernard R. Sears, M.D., *Boston, Massachusetts*
John K. Shearer, M.D., *Bloomfield, Connecticut*

Update on Section Town Meetings

Dr. Loughlin reported on the results of an electronic Town Meeting survey; respondents had very favorable comments regarding the Town Meetings program and that they supported its continuance. It was agreed that the Town Meeting initiative should be continued for another year.

Legislative Roster

Dr. Loughlin addressed a printed *New England State Legislative Roster*, which had been prepared for all Section members. Board members congratulated Dr. Loughlin on the roster, indicating that they felt it was a useful and needed tool.

Report of the Treasurer

Dr. Eyre distributed a financial report for the period January 1 through July 31, 2004 and noted that the total assets of the Section were \$732,171. On the Income Statement, receipts totaled \$197,195, versus disbursements of \$133,158, for a net surplus of \$64,037. Yamanouchi has reaffirmed its commitment to the Section to support

the Post Residency Awards for an additional two years.

Investment Committee Report

Dr. Eyre introduced Mr. Joel Blau, financial advisor from Mediquis, to explain several investment proposals. Mr. Blau reviewed the Statement of Objectives and Guidelines for the New England Section AUA Reserve Account and explained both conservative and growth-oriented options. Following extensive consideration, the Section chose the more aggressive option for investment.

Dr. Eyre noted that the Section has the highest reserve of assets in history. He recommended that approximately 50% of the assets currently being held in the Section's Scudder Premium Money Market fund be invested with Mediquis. In the alternative, he suggested that the Section adopt a policy whereby at least \$200,000 would be kept in the liquid accounts to cover operating expenses. The theory would be to keep at least one year's operating expenses available in a conservative liquid vehicle.

The Section will consider forming an independent Audit Committee to review the investments and ensure that the Section was performing due diligence with regard to its fiduciary obligations. It was voted unanimously to authorize the transfer of \$300,000 from the Scudder Premium Money Market Account to Mediquis, Inc. for investment and to require that the Section always keep at least one and one-half times its annual operating budget in conservative liquid accounts.

Report of Representatives to the AUA

Board of Directors

Dr. Roth indicated that the AUA had discussed the petition of pediatric urology for a Certificate of Added Qualification (CAQ). It was noted that this would pose problems for some local urologists who provide coverage at area hospitals and for regional practices, which did not specialize in pediatric urology. The Board voted to inform the AUA that the Section Board of Directors will not support American Board of Urology Plans for a Certificate of Added Qualification in pediatric urology. (Editor's Note: A summary of Dr. Roth's entire report appears on page 5.)

Journal of Urology Editorial Board

Dr. Kevin Loughlin had distributed an Editorial Committee Report as well as a summary of journal content handling between January 1 and April 2, 2004. Lag time from submission to disposition remained at 4 to 5 weeks and there remained a 4-month interval from acceptance to publication. The AUA had decided not to renew its contract with its current journal publisher and is entertaining RFP proposals from several large publishers.

Judicial & Ethics Committee

Dr. Ann Gormley indicated that six of the eight AUA members who had been expelled from the AUA in January regarding felony offenses related to the marketing of Lupron or Zoldex had appealed their expulsions, and that those appeals had all been denied; two of the appeals had been from New England Section members. It was also noted that an investigation had been made into a complaint by

(continued on next page)

Thermatrix regarding an AUA presentation and the Council had found that there was appropriate action and disclosure with regard to the presentation.

Old Business

Dr. Green reported that he had continued to investigate the Section's formation of a 501(c)(6) corporation which would be able to conduct socioeconomic and legislative activities not within the constraints of the current 501(c)(3) corporation. After conferring with legal counsel, the Board voted to proceed with the formation of a 501(c)(6) corporation for the New England Section.

Secretary's Report

(continued from page one)

Town Meeting

The Town Meetings have continued this year. For logistical reasons, the New Hampshire and Maine Town Meetings could not be held in the spring and they will be held this fall after the annual meeting. We sent out a survey to the members regarding the town meetings and the results are attached. It would appear that there is a strong feeling that the Town Meetings should continue and we will try to incorporate the suggestions that we received into future planning.

Future Projects

I would like to offer the following proposals for consideration by the Board of Directors.

- ♦ Residents' Day-Should the Section organize an evening or day-long conference directed to resident interests?
- ♦ Board Review and Recertification Preparation-Should the Section organize an educational conference to prepare for the Board exams?
- ♦ Practice Skills and Management Day-Should the Section expand the effort started at this year's annual meeting into a separate day long seminar?
- ♦ Future meeting with British Association of Urologic Surgeons. In 1990 the Section traveled to Scotland and England for a joint meeting with the British Urologists. Should we consider inviting them to North America for a joint meeting sometime in the future?

New Members

ACTIVE

- Michael J. Curran, M.D.**
Norwood, Massachusetts
- Morice P. Dennery, M.D.**
Littleton, New Hampshire
- Scott Matson, M.D.**
Manchester, Connecticut
- Lawrence Muldoon, M.D.**
Bridgeport, Connecticut
- Jonathan I. Telsey, M.D.**
Ellsworth, Maine

ASSOCIATE

- Johnny A. Chang, M.D.**
Torrington, Connecticut
- Carlos R. Estrada, Jr., M.D.**
Brookline, Massachusetts
- Joseph F. Lopes, M.D.**
Oakland, Maine
- Michael J. Michaels, M.D.**
Dover, New Hampshire
- William A. Selleck, M.D.**
Manchester, New Hampshire
- Ingolf Tuerk, M.D., Ph.D.**
Burlington, Massachusetts
- Michael J. Zachareas, M.D.**
Beverly, Massachusetts

HONORARY

- William T. Maloney**
Manchester, Massachusetts

TRANSFER INTO THE NEW ENGLAND SECTION

- Ajay Nangia**
Lebanon, New Hampshire
- John D. Seigne**
Lebanon, New Hampshire

**FUTURE MEETINGS of the
NEW ENGLAND AUA**

November 2-6, 2005
Joint Meeting with Northeastern Section, AUA
The Fairmont Southampton
Bermuda

September 28-October 1, 2006
Rhode Island Convention Center &
The Westin Providence
Providence, Rhode Island

September 26-30, 2007
World Trade Center &
The Seaport Hotel
Boston, Massachusetts

Gn RH Against Issues in 2005

David M. Chadbourne, M.D. and Peter N. Tiffany, M.D.

As everyone knows, the reimbursement for medications given in physicians' offices has changed as of 1/1/05. For urologists, the greatest economic impact will be reductions in Medicare reimbursement for GnRH agonists. The system of paying 85% of the "Red Book" price has been dropped in favor of pricing equal to the average sales price plus 6% (ASP+6%).

Because of the troubled history of GnRH agonists with the Medicare program, the CMS is watching urology practices closely. The Office of the Inspector General (OIG) for CMS is on record stating that urologists who switch their GnRH prescribing practices so as to begin using longer acting GnRH medications will be in legal jeopardy. Switching your patient from a 3 or 4 month drug to a 12 month drug could invite review from the OIG. Do not do this unless you have a very good clinical, not economic, reason. If you do change formulations, document your reasons in a clear and timely fashion.

There are other issues that are still unresolved. Although CMS has said that medications purchased at 2004 prices and administered in 2005 may qualify for additional reimbursement, it is not clear, at the time of this writing, what documentation will be required to receive additional funds, how long it will take to be paid or how much will be paid.

It is suggested that all Section members go to the AUA website (auanet.org) and login and then go to the advocacy section. All members should have a look with their office manager or practice administrator at the AUA letter dated 9/24/04. This letter summarizes the federal LHRH reimbursements changes now in effect as mandated by CMS as part of the Medicare Modernization Act.

The changes are complex and ongoing. Urologists will need to continually assess the business value of maintaining a pharmacy function for LHRH and various vendors. If members decide to write prescriptions for their patients who will then "brown bag" their drugs, those members will need to consider the possibility of loss of quality of the agent as it transits between pharmacy or vendor and the doctor's office. Those members should also consider who (pharmacy, vendor, patient, urologist) might be liable for any decrease in quality in the transit process. The letter above also summarizes the summer AUA survey of the affect of reimbursement changes on urologic practices.

Urologists will need to continually assess the business value of maintaining a pharmacy function for LHRH and various vendors.

Members should certainly be aware that two administration codes are available for injection of LHRH: 96400 and 90782. The former seems most appropriate.

The reimbursement issues here are complex and not straightforward. All members are encouraged to review the national AUA's response to this difficult situation.

NE AUA Upcoming TOWN MEETINGS

Western Mass

Tuesday, March 15, 2005, 6:30 pm

Beechwood Hotel, Worcester

Guest Speaker: **Joe Olivo**

Specialty Practice Mergers: A Competitive Strategy for Urologists

Local Host: David M. Chadbourne

Rhode Island

Tuesday, March 29, 2005, 6:30 pm

The University Club, Providence

Guest Speaker: **Joseph R. Wagner**

Robotic Laparoscopic Prostatectomy

Local Host: Arnold A. Sarazen

Eastern Mass

Wednesday, June 29, 2005, 6:30 pm

Location to be determined

Guest Speaker: **Harvey Feinberg**

Patient Safety and the Electronic Medical Record

Local Host: Peter N. Tiffany

AMERICAN UROLOGICAL ASSOCIATION EDUCATION AND RESEARCH, INC.

Highlights of 2004 Board of Directors' Meetings

Robert A. Roth, MD / Section Representative

Audit Committee Report The committee recommended following the Sarbanes-Oxley recommendation that an outside financial expert serve on the committee and agreed on the need for a defined educational process for every voting member. The committee suggested a lay member to serve in an ex officio capacity.

Investments Report The market values of AUA's long-term investment portfolio as of March 31, 2004, the total was \$42,332,691.

Opinion Dynamics Membership Survey Survey data indicate strategic findings on how to prioritize programs and resources, with domestic and international members viewing the AUA in different ways

- ♦ The *Journal of Urology* is the most important aspect of membership to international members
- ♦ Increased efforts in the areas of Government Affairs and Practice Management are likely to pay dividends in the form of increased member satisfaction among domestic members.
- ♦ Increased effort in the area of Clinical Practice Guidelines is likely to be noticed and appreciated by both international and domestic members
- ♦ Most members can identify areas that would benefit from increased efforts, but few members can identify areas in which efforts should be decreased

Funding of Urology Researchers Dr. Anthony Schaeffer, AUA Research Council Chair, and Dr. Monica Liebert, AUA Director of the Office of Research, presented an AUA initiative to facilitate R01 funding of young investigators. They reported that while the current AFUD research scholars program has been successful in attracting trainees to careers in academic urology, these young investigators have been less successful in going on to apply for and receive independent investigator R01 funding.

Dr. Schaeffer proposed that an AUA task force assess various factors and initiate a plan to attract, develop and maintain funded urologists. Multiple components would require coordination between the applicant, mentor, institution, funding agency, and sponsoring organization to ensure the program's success. The AUA led task force would include leaders from NCI, NIDDK, and the National Institute of Aging (NIA). Dr. Schaeffer reported on meetings underway and future meetings planned with Dr. Allen Spiegel, Director, NIH, and Dr. Andy von Eschenbach, Director, NCI.

Disclosure Policies and Procedures The Board formalized its January 2004 agreement to enforce the rule that any individual who fails to submit a Disclosure record will be excluded from participating in AUA activities, including committees.

Joint Section/National Election of First-Time Active/Associate Nominees The Directors discussed a Section Secretaries Committee recommendation to change AUA Bylaws to allow for simultaneous Section and AUA election of first-time nominees for Active and Associate members at the time of the Section meeting. The new process would allow members to receive benefits earlier and the AUA to process dues earlier in the annual cycle.

Judicial & Ethics Council – Disciplinary Proceedings regarding Member Expulsions Since February 2004, expulsion and rebuke notification letters were sent to eight AUA members. Of the eight, five expelled members submitted appeals. Each were invited to attend the May 10th Council meeting to present their appeals. After discussion, the Board recognized the complicity of the behavior of pharmaceutical companies, however concluded that the culpability of these individuals should not be shielded because of the behavior of these companies.

1. The Directors agreed to uphold the expulsions of six AUA Members who had appealed since receiving notice of membership expulsion in February 2004.
2. The Directors agreed that letters from the AUA should be sent to the CEOs of TAP Pharmaceuticals and Astra-Zeneca Pharmaceuticals informing them that a number of AUA members had been expelled because of felony convictions related to the company's improper marketing practices. The letters are to express AUA's disappointment in the behavior of the company-marketing representatives.
3. The Directors agreed with the J&E Council recommendation to publish notice of the member expulsions in *AUANews* noting that these individuals had been convicted of felony charges related to improper marketing practices for the cancer drugs Lupron and Zoladex. The Directors agreed not to include the names of the individuals, or their Sections or City/State locations.

Update on AUA Leadership Program More than 50 applications have been received, and several more have been sent directly to the Sections. Outlined components of the program are to include kickoff, online activities and a Spring advocacy conference. AUA staff will focus on outcomes with input from participants. The Directors agreed on the importance of working with the Sections on a process to guarantee that graduates remain involved at the Section level and among committees of the national organization.

Pediatric Urology: Certificate of Added Qualification (CAQ) At ABU meeting there was a unanimous decision to pursue a process where a CAQ would be issued, pending a number details regarding grandfathering, educational requirements and maintenance of certification, etc. Pediatric urologists will have to maintain their urology recertification and MOC as well as their pediatric urology and maintenance of certification. This will continue to solidify over the next 12-24 months.

AUA has received reaccreditations from the ACCME through July 2008.

AUA has been served summons regarding a suit from Neotonus Inc. for not supporting a CPT recoding request regarding extracorporeal magnetic resonance device.

Highlights from the 2004 Annual Meeting



Max K. Willscher Resident Prize Awards

1st Place

Joseph Renzulli, M.D.

Yale University

"Clinical and Histological Significance of the Testicular Nubbin Found on Inguinal Exploration Following Diagnostic Laparoscopy in the Absence of a Patent Processus Vaginalis"

2nd Place

David Rodin, M.D.

Massachusetts General Hospital

"Hydrodissection During Radical Retropubic Prostatectomy: Is There Improved Surgical Margin Status in Patients with T3 Disease?"

3rd Place

Seetharaman Ashok, M.D.

Rhode Island Hospital

"Bioavailable Testosterone and Not Total Testosterone Should be Utilized for the Determination of Androgen Levels in Infertile Men"

2004 - 2005 NE AUA Committees

Arrangements Committee

William Bihrl, III, M.D., Chair
Peter C. Albertsen, M.D.
David F. Green, M.D.
Brian M. Jumper, M.D.
Kevin R. Loughlin, M.D.
Mark Sigman, M.D.
Steven J. Shichman, M.D., Ex-Officio
John A. Taylor, III, M.D., Ex-Officio

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Mark Sigman, M.D.

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Harris E. Foster, Jr., M.D.
Brian M. Jumper, M.D.
Michael P. O'Leary, M.D.

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John A. Heaney, M.D.
Liam J. Hurley, M.D.

Nominating Committee

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Anthony A. Caldamone, M.D.
Grannum R. Sant, M.D.

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Grannum R. Sant, M.D.
David F. Green, M.D.

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E. Ann Gormley, M.D.
Richard T. Kershen, M.D.
Lori B. Lerner, M.D.
Ricardo M. Munarriz, M.D.
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Alice Henderson, Ex-Officio
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Steven I. Cohen, M.D. (RI)
Thomas M. Kinkead, M.D. (ME)
Elizabeth Z. Perez, M.D. (VT)
Jeffrey A. Ranta, M.D. (CT)
William Santis, M.D. (NH)

Ad Hoc Development Committee

David F. Green, M.D.

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REPRESENTATIVES TO THE AUA

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Robert D. Blute, Jr., M.D., Alternate
Richard K. Babayan, M.D., Elect

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Editorial Committee

Kevin R. Loughlin, M.D.

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Robert C. Eyre, M.D.

Judicial and Ethics Council

E. Ann Gormley, M.D.

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Young Urologist Committee

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Mark K. Plante, M.D.

2005 JOINT ANNUAL MEETING

PRELIMINARY HIGHLIGHTS...

Wyland Leadbetter Lecture

Freddy Hamdy
Sheffield, England

State of the Art Lecture

Dr. Gopal Badlani
Long Island, New York

State of the Art Lecture

Michael Droller, M.D.
Mt. Sinai Hospital, New York

Slotkin Lecture

Margaret Pearle, M.D.
UT Southwestern, Dallas, Texas

Panel Discussion – Prostate Cancer

Options: Screening for Prostate Cancer: Who, When, How Often, What Threshold?

Open vs. Laparoscopic vs. Robotic
Case Presentations

Who do you refer for radiation and why?
Seeds vs. External Beam

Panel Discussion – Female Urology

Options: Slings vs. Reconstruction – When and How?

TVT vs. injectable agents?

Point Counter-Point Presentations

One expert from the Northeastern and New England Sections will debate various topics.

November 2-6, 2005

The Fairmont Southampton / Bermuda



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American Urological Association**
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Beverly, MA 01915

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First Class Mail
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