**Please Submit By:**

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| Liaison To: |  | |
| **Official Liaisons**: |  | |
| **Prepared By**: |  | |
| **E-Mail Address:** |  | |
| **Report Date:** |  | |
|  | | |
| **Current Activities/Meetings Attended:** | | *Please tell us about recent activities and meetings that you have attended on behalf of AAPM&R* |
|  | | |
| **Work Group Status** | | *If there is work group activity please update as to the status…preliminary/ ongoing / completed and schedule date of completion* |
|  | | |
| New Opportunities Discovered: | | *Please tell us about new ideas, strategies, etc. resulting from your activities/meetings* |
|  | | |
| Liaison Value to AAPM&R: | | *Please give examples of how this relationship is of benefit to the Academy* |
|  | | |
| **AAPM&R**  **Strategic Goals** | | *Please indicate which strategic goal (s) this activity supports.* |
| **Patient Care:** x **Evidence Based Research:** x  **Professional Identity:** x **Education:**        **Awareness:**       **Organizational Health:** | | |
| Issues and Challenges: | | *Please describe any issues/challenges that you have discovered in your role as liaison that affect the goals and objectives of the Academy* |
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| **MEETING ASSESSMENT:** | **YES** | **NO** |
| ? |  |  |
| **ACTIONS TO BE TAKEN:** | **By Whom?** | **When?** |
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| **Distribution:** | *Please indicate which AAPM&R Committees & Councils should receive copy of this report* |
| \_\_\_\_Executive Committee \_\_\_\_Reimbursement  \_\_\_\_Medical Education Committee \_\_\_ \_Evidenced Based Practice  \_\_\_\_Program Planning Committee \_\_\_\_Evidence Committee  \_\_\_\_CME Committee \_\_\_\_Clinical Practice Guidelines  \_\_\_\_SAE-P Committee \_\_ \_\_Performance Metrics  \_\_\_\_SAE-R Committee \_\_\_\_Awards Committee  \_\_\_\_Knowledge Now \_\_\_\_Nominating Committee  \_\_\_\_Membership Committee \_\_\_\_Corporate Relations  \_\_\_\_Resident Physician Council \_\_\_\_Investment Committee  \_\_\_\_Public and Professional Awareness \_\_\_\_Audit Committee  \_\_ \_\_Quality Practice Policy & Research \_\_\_\_Finance Committee  \_\_\_\_Health Policy & Legislation \_\_\_\_History Preservation Committee  \_\_\_\_Medical Practice \_\_\_\_Journal Oversight Committee | |

**Thank you for your service to AAPM&R**