Tell members a little bit about yourself.

Your Practice
I am the Chief Clinical Officer of US Physiatry. We provide physiatric care throughout the continuum (acute care, LTACH, IRF, SNF, home health, hospice, outpatient) throughout the country. As CCO, I assist with vision-casting, education/training, protocol development, quality initiatives, mentoring and acting as a liaison with healthcare facilities and networks.

Your Life Outside of Work
I am married to Ames Smith, a breast cancer surgeon, and have two kids. The youngest one will be going to college in September, so we will officially be empty nesters. We are looking forward to having more time for the activities we enjoy, such as gardening, cooking, hiking, SUP, hanging out at our homesteads in Northern Idaho and Texas with family, friends and our dog, Poppy. I also plan to take up fishing. We are trying to create a homestead that is completely self-sustaining.

What accomplishments/honors are you particularly proud of that you would like to share with members?
I’ve been privileged to be a part of the US Physiatry team essentially since its start up. Seeing it grow in size, scope and vision has been a blast.

I love that I’ve had the opportunity to do virtually everything in Physiatry, including inpatient rehab, acute care consults, trauma team, IRF, SNF, LTACH, SCI research/recovery center, starting a residency/medical school programs as Chair, interventional/pain program, specialty outpatient clinics, sports/spine, academics, and medical director for the Austin Marathon. I’m grateful I haven’t had to do all these things at the same time, but have been able to space them out since 1990. I started my own private practice and have been self-employed for the majority of the last three decades in private practice, except for approximately four years when I was employed by the UT/Austin (Chair) and UW (Clinical Associate Professor) academic programs. I’ve reinvented myself many times.

I am a lifelong learner and love to grow my knowledge and expertise. In the last three years, I have recertified in SCI, obtained BIM board certification, and become certified in Life Care Planning.

I’ve done three facility/program start-ups and three turn-arounds (and lived to tell about it).

I’ve been awarded the Outstanding Alumnus for the UT/Baylor Medical School programs (twice, which I think was a mistake...).

For more than two decades, I was privileged to be in key leadership roles with the Texas Medical Association, American Medical Association (AMA), and Travis County Medical Society (Board Member for several years and President in 2009). As the Resident Physician Delegate to the AMA, I had one vote that represented every resident physician in the USA. I was able to pass the first AMA resolution related to resident work hour reform (which was a miracle). This has given me the opportunity to promote Physiatry to other physicians and the community. I’ve also learned a lot about professional organizations through these experiences.
What have you advanced in your local community outside of or in conjunction with your medical practice?
I was the medical director of the Lone Star Paralysis Spinal Cord Recovery Center. It was one of the first neurorecovery programs in the country. Anyone with an SCI in the Central Texas region had access to advanced neurorecovery programming, including advanced technology such as FES bikes, Lokomat, Autoambulator, Gieger, Zero G, etc., for as long as desired, regardless of their ability to pay (due to the phenomenal fundraising done by the Lone Star Paralysis Foundation and Tito’s Vodka). This is probably the most satisfying and rewarding thing I’ve done in my entire career.

My husband and I have been mentors in faith-based programs designed to support and strengthen families.

I have become intimately involved in advocacy groups to help find solutions for the homelessness/addiction/mental health crisis that is epidemic in Seattle.

What special skills or unique attributes do you bring to the Board of Governors?
The diversity of my practice, being both in private and academic worlds and my involvement with USP physiatrists throughout the country have allowed me to have a unique perspective and have direct experience with many aspects of physiatry. My experience as a pioneer in physiatric post-acute care will be helpful in identifying leaders outside of the normal candidate circles.

I’ve been on a multitude of AAPM&R committees and initiatives over the years, starting with Membership and Legislation (as a resident) to Medical Education, Annual Assembly Program Planning Committee, Board of Governors, PM&R BOLD, Corporate Relations, etc. I understand what is needed.

I led the Resident Program/Early-Career education tracks at AAPM&R’s Annual Assembly for more than two decades and have had the opportunity to mentor many young physicians, allowing me to see how the practice of physiatry has evolved and impacted physicians at various stages of their practices. I continue to teach residents and young physicians about private practice, post-acute care and other topics as part of my role with US Physiatry.

All of these experiences have allowed me to meet my physicians at different stages of their careers all over the country and to identify shining stars.

What do you most look forward to in your service on the Board?
This is a critical time for our Academy. Professional associations are all facing increasing challenges and AAPM&R is especially challenged because of its broad scope and small numbers. Choosing the best leaders for our Academy is incredibly important. The right or wrong leaders can make or break an organization. These leaders will have to make hard decisions as they balance the needs of our members and our mission. There will be many things that must be considered and balanced. I look forward to having input to finding the best possible people to lead our Academy into the future so that it thrives as an organization.

What have we not asked you that you think members should know about you? Why am I doing this at this stage of my career?
I have a very different background than most physicians. The experiences and challenges I have lived through, and the knowledge gained have given me a unique perspective. If I am chosen to be a member of the Nominating Committee, you will get honest and potentially divergent opinions.