



AASPD  
ASSOCIATION OF ANESTHESIOLOGY  
SUBSPECIALTY PROGRAM DIRECTORS

## APPLICATION FOR AASPD MEMBERSHIP

**Note:** Each department will pay dues (\$825) only once to the Society of Academic Associations of Anesthesiology and Perioperative Medicine (SAAAPM). We will contact you for payment, if necessary.

If you are a Subspecialty Program Director, complete this membership application for AASPD.

**Qualifications for Membership:** AASPD membership shall ordinarily be limited to physician anesthesiologists who are subspecialty program directors of anesthesiology related fellowship programs in the United States that have been approved by the ACGME.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

ASA Membership Number\*: \_\_\_\_\_ ACGME# \_\_\_\_\_

*\*AASPD members, who are anesthesiologists, also shall be active members in good standing of the American Society of Anesthesiologists (ASA) and shall continuously meet the requirements of membership in ASA as set forth in the ASA Bylaws.*

### **ACGME Approved Subspecialty Program – MUST be completed**

- |   |  |
|---|--|
| <input type="checkbox"/> Pain Medicine          | <input type="checkbox"/> Adult Cardiothoracic Anesthesiology             |
| <input type="checkbox"/> Critical Care Medicine | <input type="checkbox"/> Pediatric Anesthesiology                        |
| <input type="checkbox"/> Obstetric Anesthesia   | <input type="checkbox"/> Regional Anesthesiology and Acute Pain Medicine |
| <input type="checkbox"/> Pediatric Cardiac      |  |

### **Associate Membership**

One may become an Associate Member of AASPD if he/she is a physician anesthesiologist with significant roles in anesthesiology education and is otherwise ineligible for membership within SAAAPM. This membership requires nomination for membership by the department Chair, who is an Active Member of the AAAC. If you are not a program director of a subspecialty program, please select the education role that applies to your position:

- Vice Chair of Education
- Program Director of non-ACGME approved anesthesia fellowship
- Associate Program Director of ACGME approved or non-ACGME approved anesthesia fellowship
- Designated Institutional Officer
- Assistant or Associate Dean related to education

### **Sponsorship of Associate Membership by Department Chair**

I am an active member of the AAAC and approve associate level membership in the AASPD for this application.

Department Chair Signature: \_\_\_\_\_

Please send your application to:  
SAAAPM

6737 West Washington Street, Suite 4210 • Milwaukee, WI 53214  
Phone: (414) 389-8619 • E-Mail: info@saaapm.org