

ASNM Newsletter

November 1991

ASNM - Raison D'etre

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Intraoperative monitoring of cardiovascular status has long been considered a necessity to minimize the risk of myocardial infarction. It is surprising, therefore, that monitoring *neurophysiologic* function of nerves, brain and spinal cord has only been applied in more recent years. As a surgeon, I became interested in monitoring early during my training as I saw acoustic tumor patients awake with facial paralysis despite an anatomically intact nerve. Clearly, the visual and tactile feedback that a surgeon ordinarily depends on were inadequate to routinely assure normal facial nerve function rather than simply anatomic integrity.

As neurophysiologic monitoring began to achieve increasing acceptance, I became concerned about developing a means to assure a high quality of monitoring technique and interpretation. Quality assurance, however, appeared to be an elusive goal because there was no existing means for physician, physiologist or technician to obtain appropriate clinical training. This problem was compounded by the simultaneous evolution of neurophysiologic monitoring throughout many fields which set the stage for potential territorial conflict. Fortunately, after sampling the opinions of the nation's most experienced individuals, it became evident that there was in fact a consensus regarding the need to assure the quality of operative monitoring through education and training.

Founding of the Society

With the help of Aage Moller, Don York, Malcolm Graham, Gene Balzer, Dan Schwartz and many others, the American Society of Evoked Potential Monitoring was founded in 1989 as a multidisciplinary association to help unify guidelines for training and clinical practice. In that year, I was elected as the Society's first president by the founding executive council who requested that I remain in office for the first two years in order to "maintain continuity" during the Society's laborious gestation.

Society Accomplishments

As child is father to the man, I have learned a great deal during these last two years and am personally grateful to the Society's founding officers, executive council and advisory board.

The accomplishments to date of the Society are many and include 1) adoption of Bylaws, 2) incorporation of the Society, 3) revising the name to American Society of Neurophysiological Monitoring to more accurately reflect the comprehensive nature of the organization, 4) two national scientific meetings (Detroit and Minneapolis), 5) a Society Newsletter (with plans for a journal) and 6) a preliminary "core curriculum."

Future Goals

Despite these achievements, there is still much work to be done. The ASNM will need to further address the issues of education, quality assurance and the Society's possible role in certification. Committee work on standardizing intraoperative documentation and demonstrating the efficacy of monitoring to assist in consistent patient reimbursement will have to be continued.

The Society is fortunate to have Dr. Aage Moller as the newly elected ASNM president. Dr. Moller is internationally recognized as a major advocate for the clinical application of neurophysiologic monitoring and an outstanding researcher. With your support, I am confident that Dr. Moller and the executive council will further strengthen the Society to establish a foundation that will serve well in the years to come.

Sincerely,

Jack M. Kartush
Immediate Past President - ASNM
Michigan Ear Institute

September 1, 1991

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