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AMERICAN THORACIC SOCIETY MEMBERSHIP

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We help the world breathe
PULMONARY • CRITICAL CARE • SLEEP

Mission statement

To improve global health worldwide by advancing research, patient care and public health in pulmonary disease, critical illness and sleep disorders

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Welcome to the ATS community!



We help the world breathe
PULMONARY • CRITICAL CARE • SLEEP

The American Thoracic Society is an international community made up of people like you—physicians, biomedical scientists, allied health professionals and others who want to make a difference in patients' lives.

Today, one third of ATS members live and work outside of the United States, representing 120 countries around the world.

Our goal is to discover better ways to treat and prevent respiratory diseases, critical illnesses and sleep disorders, and to disseminate that knowledge worldwide.

The Society fosters discussions among members, crossing national and international boundaries to bring to the table the most knowledgeable and dedicated scientists and clinicians to write an important clinical guideline, or to plan an ATS International Conference symposium.

The ATS traces its roots to 1905, when a group of physicians and scientists formalized the collegial partnerships they had developed around the treatment of a seemingly incurable disease—tuberculosis. These founders knew that they had to share their knowledge with their colleagues if they were to provide any hope to their patients.

While the Society has grown in size and scope over the last century, that philosophy still guides us today. Members, who today represent more than a hundred countries, prize the interactions made possible within a society that has integrated the perspectives of basic scientists, translational and clinical researchers, clinicians, and, most recently, patients, into virtually everything it does.

We hope you will consider joining our community.

An organization dedicated to its members

The ATS is committed to helping its members professionally. We do this by publishing the best medical science in the fields of pulmonary, critical care and sleep; sponsoring symposia, lectures, and workshops by world-renowned experts; and providing opportunities to participate in the diverse projects that the Society undertakes.


As members become engaged in the life of the ATS, they typically form a professional network that they rely upon in many ways. Some find colleagues with whom they collaborate on research. Others rely on their fellow members to help them diagnose a difficult case or treat an intractable illness. And still others find mentors, practice partners and new faculty members.

The ATS is especially committed to helping build the careers of its younger members. The Society offers opportunities for members in training and transition to learn about career pathways in the fields of pulmonary, critical care and sleep; receive grants to support their research; and contribute to the dissemination of the latest relevant scientific and medical information.





Practice at the forefront of medicine



The ATS is the preeminent respiratory society for healthcare professionals. Many of its members are recognized nationally and internationally as leaders in their respective fields. The *American Journal of Respiratory Medicine and Critical Care* has the highest impact factor in the field of respiratory medicine. And the ATS International Conference is widely regarded as a forum where the “best” science in pulmonary, critical care and sleep medicine is presented.

The ATS excels because its members want to improve patients’ lives. They encourage excellence in all the Society does, because they know, firsthand, what is at stake.

Our members want to know not only what are the most effective

diagnostic methods and therapies for their patients, but why they are recommended. They want to learn from—and question—the researchers themselves who are responsible for translating scientific breakthroughs into clinical advances. And they want to know about more fundamental discoveries that may change the future of medicine.

The majority of ATS members are clinicians, but the Society also attracts a large contingent of researchers. These individuals value the interactions the Society fosters among clinicians, basic scientists, and translational and clinical researchers—interactions that may lead to new areas or applications of their research and stronger grant applications.

Patients and public health are central to the ATS

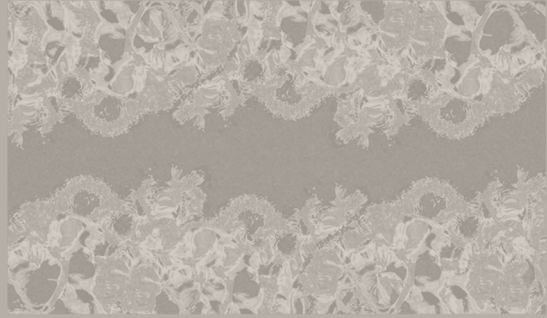
Since 2001, patients and their advocates have been an integral part of the American Thoracic Society through the Public Advisory Roundtable (PAR), the arm of the ATS that incorporates the patient and family perspectives into all of the Society's activities. The roundtable comprises a rotating group of 15 public interest organizations that are involved in the Society's International Conference, its clinical guidelines and its Board of Directors and other governing entities.

The ATS recognizes that a patient's health is increasingly determined by

the health of the larger community in which he or she lives. This is one reason why the ATS advocates on issues ranging from clean air, tuberculosis control, smoking cessation, patient access to effective medical interventions and fair reimbursement for physician services.

These public health efforts, whether undertaken in Washington, Geneva or Jakarta, carry special weight with policymakers because of the Society's reputation for arriving at its positions after a careful review of the most credible scientific studies.





IN THIS ISSUE

- Altered Asymmetric Dimethyl Arginine Metabolism in Allergically Inflamed Mouse Lungs
Doreen Albrecht, Elagorathan Moolanigal, Balaram Obach, et al.
- Potential Role of Endothelin-1 in Pulmonary Fibrosis: From the Bench to the Clinic
Bryan Ross, Pedro D'Almeida, Jarric, and Adel Gaid



AMERICAN JOURNAL OF
Respiratory and
Critical Care Medicine

American Thoracic Society Document
**An Official Research Policy Statement on
Standards for Quantitative Assessment
of Lung Structure**

Authors: Hsia, Dallas M., Hyde, Matthias, Ochs, and Ewald R. Weibel, on behalf of the American Thoracic Society (ATS) and the European Respiratory Society (ERS), 2009, and the ERS Executive Committee, Annals 33

Task Force was to critically review the use of these methods in lung research, define quantitative studies, and recommend a standard methodology.

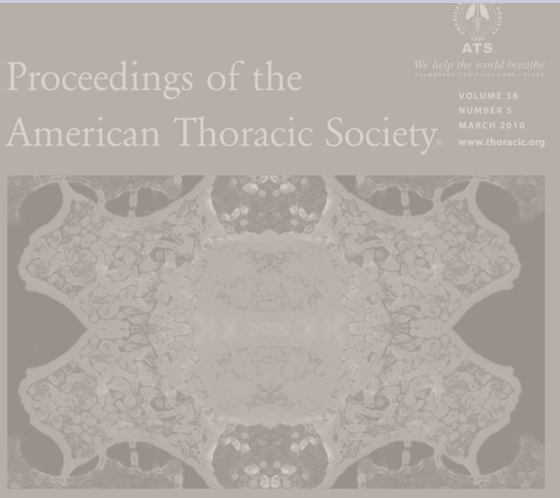
Recommendations for morphological methods:

1. Morphological methods must be used to measure lung structure, not CT scans, unless CT scans are used to measure lung structure.
2. Morphological methods must be used to measure lung structure, not CT scans, unless CT scans are used to measure lung structure.
3. Morphological methods must be used to measure lung structure, not CT scans, unless CT scans are used to measure lung structure.
4. Structures that are not well defined on CT scans require special sampling.
5. Structures that are not well defined on CT scans require special sampling.
6. Structures that are not well defined on CT scans require special sampling.
7. Stereological methods must be used to measure lung structure, not CT scans, unless CT scans are used to measure lung structure.
8. Absolute surface area can be measured using 3D volume rendering of CT scans, but not from single-section stereological areas in uninfused lungs.
9. Alveolar number and size must be measured using 3D volume rendering of CT scans, not from single-section stereological areas in uninfused lungs.
10. Stereological measurements of lung structure must be used to measure lung structure, not CT scans, unless CT scans are used to measure lung structure.
11. Morphological methods must be used to measure lung structure, not CT scans, unless CT scans are used to measure lung structure.
12. Morphological methods must be used to measure lung structure, not CT scans, unless CT scans are used to measure lung structure.

TECHNOLOGY USED TO PREPARE THIS DOCUMENT: The Task Force met in a public session and was open to all interested individuals. More than 100 people attended the meeting. The most pertinent and most pertinent recommendations were discussed and approved by the Task Force and distributed to the members of the Society.

AN OFFICIAL JOURNAL OF THE AMERICAN THORACIC SOCIETY
Advancing Pulmonary, Critical Care, and Sleep Medicine
The American Thoracic Society proudly participates in the 2010 Year of the Lung

The American Journal of Respiratory and Critical Care Medicine has the highest impact factor in the field.



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IN THIS ISSUE

- Systemic Inflammation in Chronic Obstructive Pulmonary Disease and Asthma: Relation with Comorbidities
Hugo Magnussen and Henrik Watz
- Intrauterine Effects of Maternal Smoking on Sensitization, Asthma, and Chronic Obstructive Pulmonary Disease
Machoud N. Yankovic and Margareta J. Blacquiere
- Measurement and Impact of Remodeling in the Lung: Airway Neovascularization in Asthma
Robert J. Bachof, Jane E. Bourke, Stuart E. Harris, et al.

The benefits of membership

ATS members are physicians, biomedical scientists, advanced practice nurses, behavioral scientists, respiratory therapists and other healthcare professionals who work in academic institutions, private practices, hospitals and scientific research settings around the globe. The ATS is continuously working to make ATS membership valuable by meeting members' professional needs through education, research and advocacy.

High-impact journals, clinical guidelines and practice information

- Print and/or online subscriptions to the three ATS journals*: the *American Journal of Respiratory and Critical Care Medicine (AJRCCM)*, *American Journal of Respiratory Cell and Molecular Biology (AJRCMB)* and *Annals of the ATS*.
- Discounts on page and color art fees for those publishing in the Society's journals;
- Subscriptions to the *ATS Morning Minute*, a daily digest of news important to the respiratory community; the *ATS News*, the Society's monthly newsletter; *ATS Stat* weekly; the weekly *Washington Letter*; as well as the *ATS Coding and Billing Quarterly*;
- Access to more than 80 *ATS Patient Education Series* flyers;
- Access to over 150 clinical statements and guidelines.

International Conference & educational programs/products

- Members pay reduced rates when attending the **ATS International Conference** and the **Methods in Epidemiologic, Clinical and Operations Research (MECOR)** course.
- Receive discounts when submitting an abstract or when purchasing online "Best of ATS Conferences" and other continuing medical education (CME) and maintenance of certification (MOC) offerings.

ATS Assemblies

- Membership in ATS Assemblies (interest groups) within the broad fields of respiratory disease and critical care medicine.

* *AJRCMB* and *Annals* are online only, *AJRCCM* is printed for US members and online for international members.



One of the ATS's most important international programs is the MECOR—Methods in Epidemiologic, Clinical and Operations Research—program. Begun in Latin America in 1994, the program has expanded to Africa and Asia, where physicians and others are learning how to conduct research that will improve respiratory health in their countries.

Global- and U.S. -based advocacy efforts

- The ATS advocates for cleaner air, smoking cessation and tuberculosis control, among other public health issues in the United States and around the world.
- In the United States, the ATS champions legislation that assures patients access to care and fair reimbursement for physicians.
- Membership in ATS Assemblies (interest groups) within the broad fields of respiratory disease and critical care medicine

Society leadership rights and privileges

- Right to hold ATS-wide office (Full members).
- Right to vote for ATS leaders, or serve as an ATS committee chair (Full and Trainee members).
- Right to belong to an ATS assembly and to vote for assembly leaders, serve as an ATS-wide committee member, and to be recognized/to receive ATS-wide awards.

The ATS Foundation Research Program and Career Development Opportunities

- The ATS Foundation Research Program - celebrating 10 years of success! - has aided more than 180 young investigators by providing over \$11 million in grants.
- ATS offers opportunities for early career professionals including the Fellows Track Symposium and Resident Boot Camp at the International Conference, and the Fellows Toolkit and other resources throughout the year.
- The Job Board and related National Healthcare Career Network serve as great resources for those seeking new positions, or offering them.



Membership categories

First-time trainee members join free

First-time domestic and international trainee members are eligible to join the ATS free for one year. After this first year, trainee membership continues at a reduced cost and includes most of the benefits and value of full membership.

International members pay reduced rates

Members outside the US pay dues rates based on per capita gross national product (GNP) for their country of residence. Refer to thoracic.org for a country list.

Join today at www.thoracic.org

Questions? Please send an e-mail to membership@thoracic.org

UNITED STATES

Full member – domestic \$375

For individuals living in the United States who are directly interested in the fields of pulmonary, critical care and sleep medicine.

Affiliate – domestic \$200

For individuals living in the United States who are not practicing or conducting research primarily in pulmonary, critical care or sleep-related medicine.

Trainee – domestic (free for first year) \$100

For individuals living in the United States and who are enrolled in any level of training in any accredited degree program or discipline.

INTERNATIONAL

Full member – international high income \$300

For individuals residing in countries with a gross national product (GNP) per capita of more than \$10,000.

Full member – international intermediate income \$100

For individuals residing in countries with a gross national product (GNP) per capita between \$3,000 and \$10,000.

Full member – international low income \$40

For individuals residing in countries with a gross national product (GNP) per capita of less than \$3,000.

Trainee – international (free for first year) \$40

For individuals residing outside of the U.S. and enrolled in any level of training in any accredited degree program or discipline.

US and international members who are fully retired or have an income limiting disability may apply for Senior membership. Members who are 75 years of age or older may apply for Emeritus membership. Individuals cannot join the ATS as Senior or Emeritus members.

Assemblies and Sections: the heart of the ATS



For more than a century, the ATS International Conference has been the place “Where today’s science meets tomorrow’s care.”

The assemblies and sections are at the heart of the Society’s mission. Through these groups, ATS members review, analyze and disseminate the latest basic science and clinical information. This “meeting of the minds” often leads, directly or indirectly, to better patient care, scientific advances and initiatives to reduce the prevalence of disease.

One of the more important functions of the assemblies and sections is programming the ATS International Conference.

ATS member can join one “primary” and up to two “secondary” assemblies at no extra cost. They may join as many sections as they like. One of the easiest ways to get involved is to attend the annual meeting of the assembly or assemblies that you feel best fit your clinical and research interests. Assemblies also offer newsletters, webinars, journal clubs and other activities throughout the year.

Assemblies

Allergy, Immunology and Inflammation (All)

Behavioral Science and Health Services Research (BSHSR)

Critical Care (CC)

Clinical Problems (CP)

Environmental, Occupational and Population Health (EOPH)

Microbiology, Tuberculosis and Pulmonary Infections (MTPI)

Nursing (NUR)

Pediatrics (PEDS)

Pulmonary Circulation (PC)

Pulmonary Rehabilitation (PR)

Respiratory Cell and Molecular Biology (RCMB)

Respiratory Structure and Function (RSF)

Sleep and Respiratory Neurobiology (SRN)

Thoracic Oncology (TO)

Sections

Genetics and Genomics

Medical Education

Terrorism and Inhalation Disasters

Thoracic Society Chapters: Nurturing Local Collaboration

The Thoracic Society Chapters strive to strengthen the knowledge and skills of medical professionals while providing a local forum to their constituents to exchange ideas and improve the respiratory health, critical care and sleep of their patients. Participation in chapter activities provides a valuable opportunity to get to know others in your local medical community. Chapters offer education including many programs that offer continuing medical education (CME) credit, advocacy, and some provide newsletters and an online medical journal.

Chapter involvement can serve as a path to leadership within the chapter, or to the Council of Chapter Representatives (CCR), a body that includes a representative from each chapter and has representation on the ATS Board of Directors. The CCR provides an annual Outstanding Clinician Award program that recognizes exemplary clinicians at the chapter and national (ATS) level. The CCR also presents the popular Great Cases Symposium held each year at the ATS International Conference.

Chapter membership is separate from ATS membership; interested individuals may join a chapter, and may also participate as nonmembers in chapter programs.

Alabama

Arizona

California

Colorado

Metro DC

Hawaii

Louisiana

Michigan

Mississippi

New Jersey

New Mexico

New York State

Ohio

Oklahoma

Oregon

Rhode Island

Washington



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