

Fellow Program

AAMI VISION

AAMI advances the safe and effective use of technology to improve health.

AAMI MISSION

AAMI leads global collaboration in the development, management, and use of safe and effective health technology.

PURPOSE

The purpose of the AAMI Fellow Program is to recognize AAMI members who have provided substantial service and contributions to AAMI and to the health technology field. Individuals who attain AAMI Fellow status are recognized by their commitment to the AAMI mission and vision, the depth and breadth of their accomplishments in six core areas (professional experience, education, presentations and publications, professional participation, certification, and technical contributions, awards/honors, and community service), the quality of their personal statement, and two letters of recommendation.

Application/Nomination Process

- ✓ All applicants must hold an active membership with AAMI.
- ✓ Applicants may self-nominate or be nominated by an AAMI member or other key AAMI supporter. In the latter case, individuals who are nominated will be contacted by AAMI to determine their interest in applying to be considered for the Fellow designation.
- ✓ All applicants must submit an application, a personal statement, a resume or CV, proof of the highest degree earned, proof of current certification credential(s) and licensures, and two letters of recommendation, one of which must be from a current AAMI member.
- ✓ A one-time, non-refundable fee of \$100 is required to process a Fellow application.

Selection Process

- ✓ The AAMI Fellow Selection Committee reviews all applications and makes final selections based on materials submitted and quality of the application. Incomplete application packets will not be considered. The decisions on an application is considered final. Candidates who are not selected may reapply the next year.
- ✓ Candidates who are not initially accepted as a Fellow have up to three years to resubmit their application without paying another application fee.
- ✓ Selected candidates must submit to a background check before their Fellow designation is finalized.
- ✓ All Fellows receive an AAMI Fellow certificate and a commemorative pin, and will be recognized at the annual AAMI Exchange, in AAMI publications and on social media.

Fellow Program 2022 Application

APPLICATION PROCESS

A. Current AAMI members seeking Fellow designation must submit the following:

- ✓ A completed AAMI Fellow application. An applicant may receive a maximum of 300 points on their application.
- ✓ A personal statement of no more than 1,000 words that must include a minimum of two concrete examples of the impact the applicant has had in the health technology field, how the applicant has contributed to AAMI's vision and mission, and how he/she will contribute, or continue to contribute, to AAMI and the field if selected as an AAMI Fellow. The applicant's personal statement may receive a maximum of 50 points.
- ✓ Two letters of recommendation, one of which must be from a current AAMI member. Letters of recommendation should clearly state the affiliation of the recommender, the relationship between the recommender and the applicant, and the length of time they have known one another. It should include specific examples of how the applicant has grown in his/her career, how the applicant has supported AAMI's vision and mission, and what contributions and/or impact the applicant has had on the health technology field. Letters of recommendation may receive a maximum of 20 points each for a maximum 40 points total.
- ✓ Current resume or CV, proof of highest degree earned, and proof of current certification credential(s) or licensure(s).

B. Please PDF all application materials listed above and email them to aamifellow@aami.org no later than **5:00 PM ET, Friday, January 21, 2022**. Candidates should keep a copy of their application and all supporting documents for their files.

C. Candidates must pay a one-time, non-refundable application fee of \$100. Payment must be received by the application deadline of **Friday, January 21, 2022**. Payment may be made by credit card by calling 1-800-332-2264, ext. 2114, or by sending a check, made payable to AAMI for \$100, to AAMI Fellow Program, Membership Department, 901 North Glebe Road, Suite 300, Arlington, Virginia, 22203.

D. Candidates will be notified of the final selection by telephone and email by **Friday, April 1, 2022**.

Any questions about the application process should be directed to John Sloan, VP of Membership of AAMI, at aamifellow@aami.org, or by phone at 703-253-8262.

First and Last Name: _____

Job Title: _____

Company/Organization: _____

Preferred Mailing Address: _____

City: _____ State/Province: _____

Zip/Postal Code: _____ Country: _____

Phone: _____ E-mail: _____

SECTION 1: EXPERIENCE

- ✓ Include positions held for a minimum of one year or more in a health technology-related field, including your present position.
- ✓ Multiply the point value by the number of years in each position.
- ✓ A maximum of 70 points will be carried forward.

TYPE	SUBMISSION DATA REQUIRED	POINT VALUE
Senior Leadership/Executive positions: Includes CEO, COO, CIO/CTO, Senior or Executive Vice President, and Vice President levels with broad financial and human resources responsibility.	<ul style="list-style-type: none"> ▪ Organization ▪ Position Title ▪ Dates ▪ Location (City, State) 	15
Consulting, Business Owner, Full Professor or Director positions: Includes department director with responsibility for establishing policy and procedure, budget responsibility, and/or hire and termination authority.	<ul style="list-style-type: none"> ▪ Organization ▪ Position Title ▪ Dates ▪ Location (City, State) 	10
Managerial, Associate/Adjunct Professor or Supervisory positions: Includes manager/supervisor of one or more employees for whom you determine task assignments or a project manager with budget management responsibility.	<ul style="list-style-type: none"> ▪ Organization ▪ Position Title ▪ Dates ▪ Location (City, State) 	7
Individual Contributor	<ul style="list-style-type: none"> ▪ Organization ▪ Position Title ▪ Dates ▪ Location (City, State) 	3

ORGANIZATION	POSITION TITLE	DATES	LOCATION (CITY, STATE)	POINTS X # OF YEARS
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Total Points for Experience _____ **(maximum of 70 points carried forward)**

SECTION 2: EDUCATION

- ✓ Only list the highest degree earned and provide proof of the degree. Only count your highest degree once (i.e. if you hold two Bachelor’s degrees, only list one for 20 points). Honorary degrees are not considered.
- ✓ A maximum of 40 points will be carried forward from this section.

TYPE	SUBMISSION DATA REQUIRED	POINT VALUE
Doctorate	<ul style="list-style-type: none"> ▪ Name of school ▪ School location (City, State) ▪ Degree completed ▪ Date degree completed 	40
Master’s degree	<ul style="list-style-type: none"> ▪ Name of school ▪ School location (City, State) ▪ Degree completed ▪ Date degree completed 	30
Bachelor’s degree	<ul style="list-style-type: none"> ▪ Name of school ▪ School location (City, State) ▪ Degree completed ▪ Date degree completed 	20
Associate’s degree	<ul style="list-style-type: none"> ▪ Name of school ▪ School location (City, State) ▪ Degree completed ▪ Date degree completed 	10

NAME OF SCHOOL	SCHOOL LOCATION (CITY, STATE)	DEGREE COMPLETED	DATE DEGREE COMPLETED	POINT TOTAL
1.				
2.				
3.				
4.				
5.				

Total Points for Education _____ **(maximum of 40 points carried forward)**

SECTION 3: PRESENTATIONS AND PUBLICATIONS

- ✓ Each publication/presentation may be counted only once even if it appeared in different publications or was presented at two different events.
- ✓ A maximum of 60 points will be carried forward from this section. Please record publications and presentations only up to the maximum points allowed.

PRESENTATIONS/PUBLICATIONS	SUBMISSION DATA REQUIRED	POINT VALUE
Primary author on an entire book or chapter related to health technology	<ul style="list-style-type: none"> ▪ Book or chapter title ▪ Date 	35
Published a peer reviewed scientific or technical paper or article	<ul style="list-style-type: none"> ▪ Title of presentation ▪ Date ▪ Organization ▪ Location 	30
Podium presenter of a scientific or technical paper at a major conference	<ul style="list-style-type: none"> ▪ Title of presentation ▪ Date ▪ Organization ▪ Location 	20
Panelist or workshop presenter at a major conference	<ul style="list-style-type: none"> ▪ Title of presentation ▪ Date ▪ Organization ▪ Location 	20

TITLE OF BOOK, ARTICLE, PAPER, PRESENTATION, ETC.	TITLE OF PUBLICATION	DATE	ORGANIZATION AND LOCATION	POINT TOTAL
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

Total Points for Presentations and Publications _____ (maximum of 60 points carried forward)

SECTION 4: PROFESSIONAL PARTICIPATION

- ✓ Count each full year of professional participation in AAMI-specific or non-AAMI activities only once for each position listed.
- ✓ Only national and international health technology-related activities should be included.
- ✓ A maximum of 60 points will be carried forward from this section. Please record positions only up to the maximum points allowed.

PARTICIPATION	SUBMISSION DATA REQUIRED	AAMI ACTIVITY POINT VALUE	NON-AAMI ACTIVITY POINT VALUE
Chair, Vice Chair or Executive Committee Member of a Board of Directors	<ul style="list-style-type: none"> ▪ Name of organization ▪ Year ▪ Position ▪ Indicate if board was national or international 	35	20
Director, Board of Directors	<ul style="list-style-type: none"> ▪ Name of organization ▪ Year ▪ Position ▪ Indicate if board was national or international 	25	15
Chair of a Standards or non-Standards Committee	<ul style="list-style-type: none"> ▪ Name of organization ▪ Year ▪ Position ▪ Indicate if board was national or international 	20	10
Member of a Standards or non-Standards Committee	<ul style="list-style-type: none"> ▪ Name of organization ▪ Year ▪ Position ▪ Indicate if board was national or international 	15	5
Thought leader on digital learning	<ul style="list-style-type: none"> ▪ Name of organization ▪ Year ▪ Position 	10	5

NAME OF ORGANIZATION	YEAR	POSITION	NATIONAL OR INTERNATIONAL	POINT TOTAL
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Total Points for Professional Participation _____ (maximum of 60 points carried forward)

SECTION 5: CERTIFICATION AND LICENSURE

- ✓ Please list any health technology-related certification credential and/or licensure (registered professional engineer, registered nurse, etc.), or international equivalent achieved, and submit proof.
- ✓ Ten points are awarded for each certification earned and twenty points are awarded for each licensure.
- ✓ A maximum of 30 points, regardless of the number of certificates or licenses obtained, will be carried forward.

CERTIFICATION/LICENSURE EARNED	DATE RECEIVED	POINT TOTAL 10 points per certification/20 Points per Licensure
1.		
2.		
3.		
4.		
5.		

Total Points for Certification and Licensure _____ (maximum of 30 points carried forward)

SECTION 6: TECHNICAL CONTRIBUTIONS, AWARDS/HONORS AND COMMUNITY SERVICE

- ✓ Count each award/honor, technical contribution and community service leadership role only once.
- ✓ Twenty points is given for each patent awarded.
- ✓ A maximum of 40 points will be carried forward from this section.

TYPE OF AWARD/ROLE	SUBMISSION DATA REQUIRED	POINT VALUE
Patent	<ul style="list-style-type: none"> ▪ Name of award ▪ Organization giving award ▪ Date 	20
Professional Society Award or Honor	<ul style="list-style-type: none"> ▪ Name of award ▪ Organization giving award ▪ Date 	15
Civic, Religious, or Employer Award	<ul style="list-style-type: none"> ▪ Name of award ▪ Organization giving award ▪ Date 	10
Community Service Leadership Role	<ul style="list-style-type: none"> ▪ Role ▪ Organization ▪ Date 	5

Continued on next page

SECTION 6: TECHNICAL CONTRIBUTIONS, AWARDS/HONORS AND COMMUNITY SERVICE (CONTINUED)

TYPE OF AWARD/ROLE	ORGANIZATION GIVING AWARD	DATE	POINT VALUE
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			

Total Points for Technical Contributions, Awards/Honors, and Community Service _____ (maximum of 40 points carried forward)

FINAL POINT TOTAL

- ✓ Add up the total points from each of the six areas and total below.

AREA	TOTAL POINTS FROM AREA
Experience	
Education	
Presentations and Publications	
Professional Participation	
Certification	
Technical Contributions, Awards/Honors, and Community Service	
Grand Total	

Please direct all questions about the AAMI Fellow Program to John Sloan, Vice President of Membership, AAMI, at aamifellow@aami.org or 703-253-8262.

PERSONAL STATEMENT

In the box below, please provide a personal statement, **not to exceed 1,000 words**, that addresses the impact you have made in the health technology community. The essay must include **a minimum of two concrete examples** of this impact as it relates to AAMI's mission and illustrate how you specifically intend to continue contributing if selected as an AAMI Fellow. Applicants may receive a maximum of 50 points for their personal statement.

PERSONAL STATEMENT (CONTINUED)

LETTERS OF RECOMMENDATION

With your application, submit only two letters of recommendation, one of which must be from a current AAMI member. Letters of recommendation should clearly state the affiliation of the recommender, the relationship between the recommender and the applicant, and the length of time they have known one another. It should include specific examples of how the applicant has grown in his/her career, how the applicant has supported AAMI's vision and mission, and what contributions and/or impact the applicant has had on the health technology field. Each letter of recommendation may receive a maximum of 20 points each, for a total of 40 points. If more than two letters of recommendation are submitted, only two will be sent on for evaluation by the Committee.

Email application and letters of recommendation as a PDF to: aamifellow@aami.org no later than **5:00 PM ET, Friday, January 21, 2022.**