



Alpha
Omega
Alpha
Honor Medical Society

*“Be Worthy to
Serve the Suffering”*

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With a distinguished history of 116 years of service to medicine and society, Alpha Omega Alpha (AΩA) is the nation's interdisciplinary honor medical society, recognizing, advocating for, and inspiring physicians in the care of patients and the promotion of health. Members may be elected throughout their career. They epitomize academic and clinical excellence, professionalism, leadership, education, scholarship, service, and "being worthy to serve the suffering."

AΩA is dedicated to improving care for all by recognizing high educational achievement; honoring gifted teaching; encouraging the development of leaders in academia and the community; supporting the ideals of humanism; and promoting service to others.

As the honor medical society, AΩA's members promote scholarship and research in medical schools; embody a high standard of character and medical excellence; and are servant leaders in medical science, patient care, and community health. AΩA physicians exhibit the qualities of excellent doctors through their knowledge, skills, attitude, compassion, empathy, altruism, and teaching.

The function and influence of a society depends on the wisdom with which its members are elected. Membership in AΩA may be attained as a medical student, resident, fellow, faculty member, alumni, clinician, or distinguished leader in medicine. The criteria for nomination includes, but is not limited to, scholastic achievement, demonstrated professionalism, leadership capabilities, adherence to ethical standards, fairness in dealing with colleagues, achievement in medicine and/or research, and a record of service to school and community.

Physicians or scientists who have attained distinction in any endeavor related to medicine, and who are not eligible for election by other means, may be elected as honorary members.

For medical students, the Dean of the School of Medicine or his/her designee identifies a pool of candidates

who approximate in number the upper quartile of the class expected to graduate, and who have excelled in the criteria for nomination to AΩA membership—scholastic achievement, professionalism, leadership, community service, and research. Scholastic achievement refers to the qualities of becoming, and being, an excellent doctor—knowledge, skills, trustworthiness, demeanor, care of the patient, proficiency of the doctor-patient relationship, decision-making, compassion, empathy, altruism, values of the profession, teamwork, life-long learning, and servant leadership. Each of AΩA's 132 Chapters in medical schools across the country, in Puerto Rico, and Lebanon develop the metrics and rubric to weight the criteria as best fits its medical school, keeping in mind the Association of American Medical Colleges (AAMC) Liaison Committee on Medical Education (LCME) approved curriculum and evaluation, and then select 16 percent of its graduating class, 25 residents/fellows, three to five faculty, and three to five alumni as new members of AΩA.

All members of each medical school's Chapter are eligible to vote for nominees at a meeting of members convened for that purpose. Selection as a nominee shall require a majority vote of those in attendance. Once nominated, election to membership in AΩA occurs when the nominee registers with the AΩA National Office and submits a dues payment for the first year.

AΩA is committed to improving diversity in the medical profession based on evidence that inclusion of talented individuals from different backgrounds benefits patient care, population health, education, and scientific discovery. AΩA is dedicated to overcoming bias—implicit/unconscious and conscious bias—as well as discrimination at all levels throughout the organization. It values a diverse, fair, and equitable work and learning environment for all, and supports the medical profession in its work to achieve a welcoming, diverse, inclusive environment in teaching, learning, caring for patients, and collaboration.

AΩA advocates for diversity in all of its forms—identity, cultural, geographic, experiential, sexual orientation, ancestry, ethnicity, gender, age, economic and social status, physical abilities, and religious beliefs.

AΩA works with its members, Chapters, medical schools, residency programs, and health organizations to improve diversity within the organization and throughout the medical profession. No candidate for membership shall be denied election because of age, race, color, ethnicity, national origin, sex, pregnancy status, gender, identity or expression, sexual orientation, language, physical or mental disability, marital, civil union or domestic partnership status, veteran status, socioeconomic status, or religious or political beliefs.

Fostering excellence

Since AΩA was established in 1902, more than 185,000 members have been elected. Today, there are more than 120,000 living members with 4,000 new members elected each year. AΩA is primarily supported through member dues and contributions.

AΩA publishes a one-of-a-kind, interdisciplinary, peer-reviewed medical humanities journal called *The Pharos*. Published since 1938, it was named for one of the seven wonders of the ancient world, the Pharos lighthouse of Alexandria. *The Pharos* is a quarterly journal that publishes scholarly essays covering a diversity of nontechnical medical subjects, including medical history, ethics, medical-related literature, and other topics. Peer-reviewed by an Editorial Board composed of medical experts and prolific physicians, authors, and educators, *The Pharos* has been described as a unique journal:

In an age of rapidly evolving technology and forced efficiency, *The Pharos* continues to emphasize the artistic, the literary, and the place of music, language, and culture in medicine. Although themes may shift—now touching upon the economics or the ethics of times—humanism is the enduring content of our AΩA journal.

—Faith T. Fitzgerald, MD, (AΩA, University of California, San Francisco, 1969) *The Pharos* Editorial Board Member, and AΩA Distinguished Teacher

Consistent with the AΩA mission, 12 national fellowships, grants, and awards that support leadership, professionalism, teaching, research, scholarship, and community service for medical students, faculty, medical schools, and medical communities have been developed. In 2017, AΩA provided nearly \$2 million to students, residents, faculty,

physicians, and medical professionals at medical schools having an active Chapter.

The Carolyn L. Kuckein Student Research Fellowship supports and promotes basic and clinical research in medical fields, social sciences, or health services conducted by medical students with mentors. This is a peer-reviewed grant program that in 2018 awarded research fellowships of \$6,000 to each of 69 medical school students.

Each year, in collaboration with the Association of American Medical Colleges, AΩA selects four outstanding teachers—two basic science and two clinical—and recognizes them as the best medical school teachers in the country. There have been 101 AΩA Distinguished Teachers since the award’s inception in 1992. These Distinguished Teachers are selected by former award honorees, and receive \$10,000 each, with an additional \$2,500 provided to the recipient’s school, and \$1,000 to the AΩA Chapter at the recipient’s school.

Each year, AΩA provides each Chapter the opportunity for a Visiting Professorship. Chapters may select an acclaimed teacher or speaker to serve as a Visiting Professor for the school, students, and community. AΩA provides a modest honorarium for the speaker and reimburses all travel costs. In the last academic year, AΩA supported 65 Visiting Professors.

Leadership

Leadership in medicine, medical education, and health care is more complex in the 21st century than ever before. It is a core value of AΩA, and is a tenet of the organization’s mission, as well as criteria for membership.

The medical profession and the country are in need of leadership that represents and personifies what is best for patients, and is inspiring, insightful, engaging, and humble, leadership that both understands and represents the needs of patients, physicians, medical educators, trainees, communities, and society.

Leadership is an integral part of the professional life of a physician. Physicians are effective servant leaders in medicine, medical education, and health care because of their professional knowledge, skills, and experiences. To best utilize these professional attributes, qualities, and experiences, physicians should aspire to become servant leaders who lead based on caring, service, and professional values.

Each year, AΩA selects and supports three mid-career physicians as Fellows in Leadership to further develop outstanding leaders in medicine. Each Fellow is provided \$25,000 to participate in leadership development, and to complete an institutional leadership project, with the

institution providing 25 percent protected time for them to work on the fellowship and project. The AΩA Fellow in Leadership emphasizes servant leadership, ethics- and values-based leadership, and the inward journey which teaches that effective leadership results from knowing oneself and aspiring to lead others.

Fundamental leadership principles are critical to building a better future by recognizing that the work of leadership involves an inward journey of self-discovery and self-development; establishing clarity around a set of core values that guides the organization as it pursues its goals; communicating a clear sense of purpose and vision that inspires widespread commitment to a shared sense of destiny; building a culture of excellence and accountability throughout the entire organization; and creating a culture that emphasizes leadership as an organizational capacity. Leadership and learning are inextricably linked.¹

Experiential learning in leadership with role models, mentors, and coaches, and development of a leadership community of practice are core to the Fellowship.

Professionalism

Professionalism in medicine has been a core value for AΩA since the society's founding. AΩA is committed to serving as a leader and catalyst to improve professionalism in medicine.

Medical professionalism stands on the foundation of trust to create an interlocking structure among physicians, patients, and society that determines medicine's values and responsibilities in the care of the patient and improving public health. A combination of leadership and professionalism can have a synergistic and positive impact on AΩA members and the medical profession.

AΩA is focused on learning about, and teaching, best practices in medical professionalism. With grant support from the Josiah Macy Jr. Foundation, AΩA has published two monographs—*Medical Professionalism Best Practices*, in 2015, and *Medical Professionalism Best Practices: Professionalism in the Modern Era*, in 2017—both of which are distributed widely to all interested parties without charge.

In addition, AΩA promotes the Edward D. Harris Professionalism Award, which recognizes and honors outstanding faculty and programs that have demonstrated the best practices in medical professionalism education. Up to three awards of \$10,000 are provided annually.

Recognizing and assisting medical students, residents, clinical faculty, and administrators

Medical Student Service Leadership Project grants fund medical student leaders, faculty mentors, Chapters, and medical schools that establish innovative, unique community projects incorporating experiential leadership for the students. Selected projects are funded for three years.

AΩA also funds peer-reviewed postgraduate (resident/fellow) research/scholarly projects that fulfill Accreditation Council for Graduate Medical Education scholarly activity requirements for residency training programs.

In recognition of their indispensable services, and excellent teaching and mentoring, AΩA provides awards to clinical faculty in community practices who volunteer to teach students and residents. AΩA also provides Administrative Recognition Awards for services provided by administrative personnel who work tirelessly in support of students, local Chapters, and Councilors.

To support and promote writing and scholarly publications as a professional responsibility, AΩA supports several writing awards including the Helen H. Glaser Student Essay Award, *The Pharos* Poetry Award, and the Robert H. Moser Essay Award. Each year, three student essay and three student poetry award winners are published in *The Pharos*, as is the Moser essay, which must be written by a physician.

The organization

AΩA is governed by a board of directors with elected officers who each serve limited terms. The AΩA Board of Directors consists of nine at-large members, who are distinguished AΩA members; three Councilor members; three medical student/resident members; one organizational representative; and one membership initiative representative. The direction of the society is vested in its elected officers: President, President-elect, Immediate Past President, Secretary/Treasurer. The national office is directed by an Executive Director, who is chosen by, and reports to, the Board. He/she is responsible for implementation of all activities of the society, including the day-to-day operations of the office, and is Editor of *The Pharos*. The national office consists of six employees, including the Chief of Staff and Managing Editor of *The Pharos*, the Director of Member and Chapter Services; the Programs Manager, the Controller, and the Executive Assistant/Office Manager.

Chapters

Upon receiving their Liaison Committee on Medical Education accreditation, medical schools may apply to AΩA to establish a Chapter. Each Chapter has a Councilor who must be a member of the medical school’s faculty and an active member of AΩA. On the recommendation of the Chapter’s members, Councilors are appointed by the Dean of Medicine and are responsible for the operation and well-being of the Chapter. Each Chapter has elected medical student officers—President, Vice-President, and Secretary-Treasurer—who are members of AΩA. All AΩA members, including medical students, residents, faculty, and alumni, are eligible to participate in Chapter functions, activities, and elections.

The Chapter officers along with the Councilor provide leadership and work to generate social, educational, and service projects. Each Chapter must submit an annual report to the AΩA national office detailing their activities, programs, and support of the AΩA mission.

A history of leadership

AΩA was established before the *Flexner Report* and prior to the establishment of the AAMC LCME. At the time, most medical schools were proprietary and independent for-profit institutions. Medical education was essentially an apprenticeship program.

AΩA was established in response to the need for recognition of academic achievement and professionalism in medical education and the medical profession. It contributed by developing and promoting values that were implemented, recognized and upheld through Chapters in medical schools. In the early 1900s, there were only a few internships. Some new doctors underwent a year of post-graduate experience, but most began medical practice upon graduation.

After the *Flexner Report*, as medicine and medical education advanced and became more scientifically- and scholarly-based, medical education responded and internships became a requirement for medical licensure. Medical school accreditation was required to recognize and confer a medical doctor degree.

As medicine and clinical practice advanced, the requirements to become a physician also progressed. Medical schools also evolved and began teaching a new language of science and medicine, knowledge, skills and attitude. Medical students grew from novice to competent to expert with the qualifications to receive the medical doctor degree. However, clinical experience and increasing experiential learning from accrued clinical responsibility

was required to be prepared to practice medicine. With these increased educational opportunities came additional experiential learning in the form of a post-doctoral year of internship.

Advances in medicine continued and medical specialization evolved, which required even more education and empirical learning. Specialty residencies and post-residency fellowships were established.

Throughout this evolution AΩA has been at the forefront of confirming and affirming the core values of medical professionalism, by supporting and promoting physicians who exemplify leadership, are role models and mentors, who generate new ideas, teach others, serve as innovators, provide excellent care for patients and their communities, and are worthy to serve the suffering.

A life-long responsibility

AΩA is the national honor medical society for medical students, physicians in post-graduate training, medical school faculty, practicing clinicians, and scientists. It promotes scholarship and research in medical schools, encourages a high standard of character and conduct among medical students and physicians, and recognizes meaningful contributions in medical science, practice, and related fields.

AΩA membership is the best recognized medical school award for achievement in medicine. As most members are elected in medical school and before medical specialization, the membership is interdisciplinary and represents all fields of medicine. It represents more than 116 years of hard work, perseverance, and high ideals.

AΩA expects members to commit to a life-long responsibility of high quality clinical care, academic achievement, exceptional leadership, noteworthy professionalism, and remarkable service. Members serve as role models, mentors, coaches, and leaders throughout their communities of practice and in society.

AΩA is committed to working with medical schools, AΩA Chapters, and the medical profession as a whole to achieve an inclusive environment embracing diverse colleagues in teaching, learning, scientific discovery, and caring for patients.

“Be worthy to serve the suffering” is our commitment to our profession and the patients we serve.

Reference

1. Souba W. Building our future: a plea for leadership. *World J Surg.* 2004 May; 28(5): 445–50.