

President's Message

Andras Koser, MD, MBA, FAPCR, CPI
President, APCR



It has been 16 months since the secession of the Academy of Physicians in Clinical Research (APCR) from the Association of Clinical

Research Professionals. I'd like to extend my gratitude to our leaders who revived the organization and whose tremendous efforts made this transition possible. I would also like to thank our management team for helping us bring our ideas to life.

We have made great strides throughout the past year after secession. We put together a board of trustees and formed vital committees to help govern the organization. We held our first independent annual meeting in over a decade last October in Jacksonville, Fla. Thanks to our members' participation and our collaboration with the Encore Research Group, the meeting was a great success. We are in the midst of planning our second annual meeting and expect it to be an even bigger success. The board and committee members are working tirelessly to ensure our upcoming meeting is both appealing and informative. As always, we ask for your attendance at the

annual meeting being held October 20-22, 2017 at the Wyndham Grand Orlando Resort Bonnet Creek in Orlando, Fla., and we encourage you to inform your colleagues in the clinical research field and pharmaceutical industry about this opportunity.

In addition, we created a pathway to achieve the Fellow of APCR designation and over 50 members have requested and met the criteria for this designation with more members being accepted monthly.

We succeeded in reconnecting with former APCR physicians, and have identified areas in which we can improve member recruitment, retention, and participation. We continuously strive to improve the APCR as a whole and enhance the benefits offered to our members.

We have established lasting relationships with industry partners, and we salute these new and loyal corporate members whose support allows us to achieve our goals.

We look forward to continuing to bring

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together pharmaceutical industry physicians and principal investigators within one organization to promote collaboration between the two groups that otherwise may not have engaged with one another.

I am optimistic that you will find APCR to be an organization where your motivation and passion for research will be cherished and shared with all members.

For more information, visit the APCR website at apcrnet.org.

Meet the 2016–2017 APCR Board of Trustees



PRESIDENT

**Andras Koser, MD, MBA,
FAPCR, CPI**

After graduating summa cum laude from Uzhgorod National University

Medical School in 1981 in Uzhgorod, Ukraine, Andras Koser, MD, became a medical director of a rural medical clinic in Ukraine. In 1987, Dr. Koser became a hospitalist in a community hospital, in Vac, Hungary and started a private internal medicine practice. In 1991, Dr. Koser was offered a position of cardiovascular toxicologist for preclinical pharmaceutical research at White Eagle Laboratories in Doylestown, PA. He completed residency training in internal medicine in 1997 and started working at Piedmont Internal Medicine in Spartanburg, SC. In 2001, Dr. Koser became the founder and medical director of a hospitalist group at Spartanburg Regional Hospital. In 2008, he founded a private hospitalist group that provided internal medicine care for patients at Carolina Medical Center in Gaffney and Chester Regional Medical Center. Beginning from his career in Hungary, Dr. Koser was always involved in pharmaceutical research, initially as a sub-investigator, and for the last 13 years as a principal investigator. He is the founder of multiple clinical research sites in the Carolinas. Dr. Koser has been the principal investigator for more than 130 pharmaceutical trials in multiple therapeutic areas. He is board certified in internal medicine and is a certified physician investigator.



VICE-PRESIDENT

**Michael Koren, MD,
FACC, FAPCR, CPI**

Dr. Koren directs activities at Jacksonville Center for Clinical Research,

a multispecialty research organization with eight locations that has conducted more than 1,500 trials involving over 100 investigators. He also is a practicing cardiologist with the Apex Cardiovascular Group. Dr. Koren is an honors graduate of Brandeis University and Harvard Medical School. During his medical school training, he completed additional course work at the Harvard School for Public Health and wrote an M.D. thesis involving computer decision analysis. More recently, he was awarded a U.S. patent for developing the software system Ask100Doctors. Dr. Koren received his postdoctoral training at New York Hospital/Memorial Sloan-Kettering Cancer Center/Cornell University Medical Center in internal medicine and cardiology. During his postdoctoral training, Dr. Koren served as a third-year chief resident, held a faculty position, and published several papers and abstracts. In recent years, he has served as the international lead principal investigator for several large multiple-centered trials including ALLIANCE (a pivotal statin study), ROLE (ranolazine safety study), MENDEL (evolocumab), and OSLER (evolocumab). His scientific work, numbering over 100 abstracts and manuscripts, has been published in leading medical journals such as the *Journal of the American College of Cardiology*, *New England Journal of Medicine*, *Postgraduate Medicine*, and *The*

Lancet. Dr. Koren has become interested in “the research of research.” He has presented abstracts on this subject at national meetings and served as a past president and board member for the Academy of Physicians in Clinical Research and twice as co-chair of the Ponte Vedra Cardiovascular Symposium. He serves on the leadership council of the Society of Clinical Research Sites and is president-elect of the First Coast Metro Board of the American Heart Association.



IMMEDIATE PAST PRESIDENT

**Robert Hardi, MD, AGAF,
FAPCR, CPI**

Dr. Hardi serves as medical director of Chevy Chase

Clinical Research for the Metropolitan Gastroenterology Group division of capital digestive care. He completed his training in internal medicine at Semmelweis University Medical School in Hungary, Hannover University Medical School in Germany, and the University of New Mexico Medical School in Albuquerque. He also completed a fellowship in hematology/oncology at the University of New Mexico Medical School and a fellowship in gastroenterology at Cornell Medical College/The New York Hospital in New York, NY. Dr. Hardi has been in the private practice of gastroenterology and internal medicine since 1984 and is a part of the clinical faculty of George Washington University and Georgetown University. He is board certified in both internal medicine and gastroenterology and is a certified physician investigator

(CPI). His principal professional interests are inflammatory bowel diseases (he has served on the National Board of the Crohn's and Colitis Foundation of America), clinical research, procedural sedation, colon cancer surveillance, and pancreatic and biliary disorders.



TREASURER

Cara East, MD, FAPCR

Dr. East has been involved in clinical trial research since 1987, working as a principal investigator for over 70 trials. She has also participated as a sub-investigator in more than 20 trials. Such studies have included the use of stem cells in cardiomyopathy and as an adjunct to heart surgery, studies of renal artery nerve ablation as an alternative treatment for hypertension, the use of mipomersen and the PCSK9 inhibitors in familial hypercholesterolemia, the development of novel oral anticoagulants for the prevention of thromboembolic events in atrial fibrillation, the need for repeat ablation following cryoablation for atrial fibrillation, and the gender of authors in a local journal. She has over 48 articles published in peer-reviewed journals and serves as a reviewer for several journals. She is currently a clinical professor at Texas A&M College of Medicine and a cardiology staff attending for Baylor University Medical Center Internal Medicine teaching program. She served on a general medicine IRB and as the cardiologist on an oncology IRB. She currently is a national leader of the Paradise trial and is the chairman of the Data Safety Monitoring

Committee for the NIH trial "Exercise and intensive vascular risk reduction in preventing dementia."



SECRETARY

Daniel Weiss, MD, FAPCR, CPI

Dr. Weiss is a medical director with Celgene's hematology/oncology pediatric drug development team. In this role he conducts clinical research in pediatric leukemias and brain tumors. Prior to his current role, Dan was associate director of clinical pharmacology at Celgene serving in the capacity of clinical research physician, medical monitor and clinical pharmacologist. Dan is board certified in emergency medicine and prior to joining Celgene, he practiced as an attending emergency room physician at JFK Medical Center in Edison, NJ, and Trinitas Hospital in Elizabeth, NJ. He also served as a principal investigator for MDS/ Celerion at their dedicated Phase 1 clinical pharmacology unit in Neptune, NJ. Dan obtained his medical degree at Rutgers - New Jersey Medical School in Newark, NJ, (formally University of Medicine and Dentistry of New Jersey) and completed his emergency medicine residency at Drexel University College of Medicine in Philadelphia, PA. Dan has a passion for clinical research and is a certified principal investigator (CPI). When not at work, he can be found at the Jersey Shore making repairs to his 100-year-old home, bathing in the sun at Seven President's Beach or surf fishing for striped bass.

AT-LARGE TRUSTEES



Peter Rheinstein, MD, JD, MS, FAPCR

Severna Park, MD



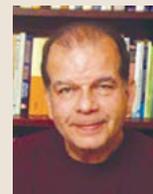
Lyndon Mansfield, MD, FAPCR, CPI

El Paso, TX



Harry Sarles, MD, FAPCR

Richardson, TX



Honorio Silva, MD, FAPCR

Newark, NJ



Samuel Simha, MD, FAPCR

Memphis, TN



Michael Ybarra, MD, FAPCR

Washington, DC



APCR

ANNUAL MEETING 2017

October 20-22 | Orlando, FL | Register: apcrnet.org/meeting

Annual Meeting Preview

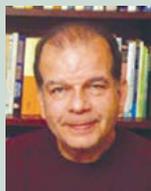
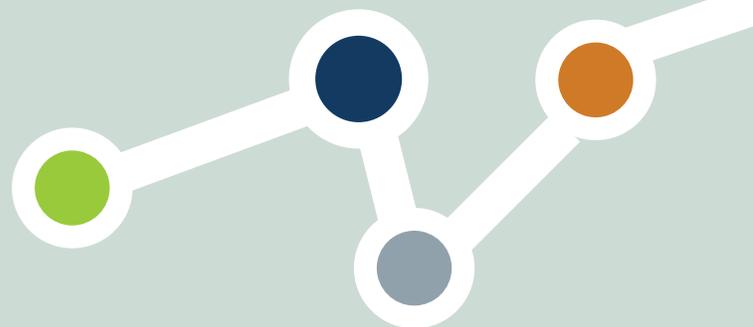
The APCR will host its 2017 Annual Meeting October 20–22 at the Wyndham Grand Resort Bonnet Creek in Orlando, Fla. Join your colleagues from around the country as expert faculty present insights on a diverse range of topics geared towards physicians engaged or wishing to engage in clinical research.



Meeting Highlights

- Getting Started in Clinical Trials
- Conducts of Clinical Trials
- Innovations in Clinical Trials
- Patient Involvement in Clinical Research
- Drug Discovery and Development
- Legal and Ethical Issues
- Access to New Medicines
- The Changing World of Medicine Development & Clinical Research
- Investigator Initiated Studies

Annual Meeting Chairs



Honorio Silva, MD, FAPCR

At-Large Board of Trustee Member, APCR
Adjunct Professor, BioPharma Educational Initiative
Rutgers University School of Health Professions
Newark, NJ



Michael Koren, MD, FACC, FAPCR, CPI

Vice President, APCR
CEO and Director, Jacksonville Center for
Clinical Research
Encore Research Group
Jacksonville, FL

Annual Meeting Featured Events

APCR Town Hall: The Prescription Drug Price Dilemma

Friday, October 20, 2017

The increasing cost of prescription drugs in the United States has become a source of concern for patients, prescribers, payers, and policy makers. This session will address the current trends, future directions, challenges, and solutions to this spiraling problem affecting every segment of healthcare.

Robert Califf, MD, former commissioner of food and drug for the United States Food and Drug Administration, will provide the keynote lecture during this session. Following his lecture, an interactive panel discussion with stakeholders representing both industry and academia will take place. Attendees will also be able to join in on this important discussion.

Welcome Reception

Friday, October 20, 2017

Network with your fellow colleagues and exhibitors on Friday evening immediately following the opening session.

Pre-Conference Course

Good Clinical Practice and Beyond

Friday, October 20, 2017

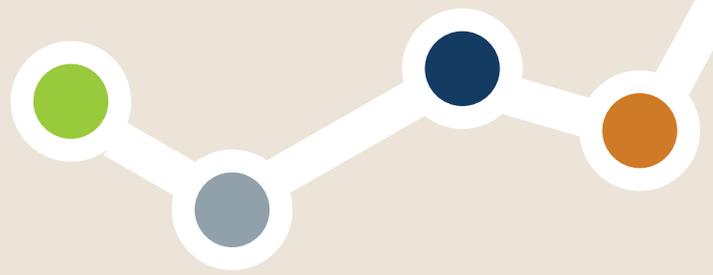
Good Clinical Practice (GCP) and Beyond is a unique CME course taught primarily by physicians for physicians. This course reviews the skills necessary to succeed in the clinical research field including patient care, clinical research site management techniques, patient recruitment, and leadership skills. GCP and Beyond features innovative, interactive case presentations of real life clinical research scenarios. This course will also present ideas to help research sites operate more efficiently and become more profitable and ethically sound.



Course Director:

Michael Koren, MD, FACC, FAPCR, CPI

Vice President, APCR
CEO and Director, Jacksonville Center for
Clinical Research
Encore Research Group
Jacksonville, FL



Editorial Commentary

Michael Ybarra, MD, FAPCR

At-Large Board of Trustee Member, APCR



Prescription Drug User Fee Act

Physician researchers can take action this year to advocate for 21st century care for the millions of patients and their families waiting for better treatments and cures. How? By learning more about the Prescription Drug User Fee Act (PDUFA) and its role in providing access to thousands of new drugs and biologics as well as ensuring a safe and effective human drug review process.

What is PDUFA?

PDUFA was enacted in 1992 to address concerns about unacceptable delays in the Food and Drug Administration's (FDA) regulatory review of new medicines for patients. At that time, the United States had one of the slowest, least efficient drug review and approval processes in the world, and as a result, patients suffered.

Over the past 25 years, PDUFA has provided the FDA with stable and predictable funding by supplementing Congressional appropriations with pharmaceutical manufacturer user fees that allow the FDA to more quickly bring new medicines to patients. PDUFA has helped to decrease drug review periods by nearly 60 percent while enhancing the FDA's high safety and efficacy standards. It has provided patients timely access to more than 1,500 new drugs and biologics, including treatments for cancer, rare

diseases, cardiovascular, neurological, and infectious diseases, without compromising safety.

PDUFA must be reauthorized by Congress every five years. In 2017, Congress will consider and hopefully reauthorize PDUFA VI. This act builds upon the success of previous PDUFA agreements with continued focus on ensuring patient safety, maintaining the FDA's high standards for regulatory review, and promoting timely access to safe and effective innovative medicines for patients.

Among its many provisions, PDUFA VI will provide:

- resources to prioritize the development of breakthrough medicines for patients with serious and life-threatening diseases,
- efforts to advance the science of patient input and incorporate patient perspectives into drug development and review,
- advancements in the use of real-world evidence for regulatory decision making, and
- assurance that the FDA can hire and retain a strong scientific and medical workforce to advance its public health mission.

As science advances at a pace like never before, so must the methods and approaches used by the FDA to regulate drug development and review new drug applications. PDUFA VI will continue to

facilitate the development and use of today's modern approaches to drug development.

How can you make a difference?

As physician researchers, it is important that APCR and its members work to ensure that Congress reauthorizes PDUFA and its initiatives that are critical to serving the research industry's mission and work to help the FDA protect and promote public health.

Together we can improve the future of science so that patients and their families have the chance to live longer and better lives.

Call for AMA Resolutions

Peter Rheinstein, MD, JD, MS, FAPCR

At-Large Board of Trustee Member, APCR



Now is the time for APCR members to submit proposed resolutions for the annual meeting of the American Medical Association (AMA) House of Delegates (HOD). The meeting will be held June 10-14 at the Hyatt Regency Hotel in Chicago, IL.

Among more than 120 national medical specialty societies and over 50 state and territorial medical societies represented in the AMA House of Delegates,¹ APCR is the only organization for which pharmaceutical and medical device research is the primary focus. AMA requires that all members of the HOD also be members of AMA. Through their delegates, however, all physicians who are members of one or more of these societies, even if they are not AMA members, can participate in determining AMA policy.

APCR was incorporated as a professional non-profit membership organization in 1993. A stated purpose was “to enhance relationships between our members and other members of the medical profession and to achieve recognition of our field of work as a medical specialty.”² By the late 1990s, APCR had obtained membership in AMA’s Specialty and Service Society. The June 2017 annual meeting of the HOD will mark the 15th anniversary of APCR’s delegate status – organized medicine’s formal recognition that APCR represents a field of medicine that has recognized scientific validity.

Resolutions must be submitted by Wednesday, May 3 to be included in the Delegates’ Handbook. The final deadline for “on-time” resolutions to be included in the Handbook Addendum is Thursday, May 11. Once a resolution is received by AMA, it is posted on the AMA website.³ Resolutions that are currently posted can provide potential templates for drafting your own resolution. AMA requires that resolutions cite existing AMA policy on the topic of the resolution. You can find existing AMA policies here: bit.ly/2mQl4aq. APCR’s HOD delegate, Peter Rheinstein, MD, JD, MS, FAPCR, and alternate delegate, Hugh Tilson, are available to help with drafting and editing. Posting resolutions early allows time for coalition building and addressing the concerns of any opposition. You can email Dr. Rheinstein at phr@jhu.edu and Dr. Tilson at htilson1@gmail.com.

The Importance of APCR’s Relationship with AMA

At the November 2015 meeting of the House of Delegates, APCR sponsored a resolution entitled “Removing Financial Barriers to Participation in Clinical Trials for Medicare Beneficiaries” developed by Kenneth Braunstein, MD, a hematologist, oncologist, and APCR member from Atlanta, GA. APCR won support for our resolution from the Medical Society of Georgia, the Section Council on Preventive Medicine, and the Specialty and Service Society. The HOD accepted the Reference Committee recommendation to refer the matter for decision to the AMA board of

trustees. The board prepared a report that was adopted at the June 2016 meeting of the HOD. This report added two important provisions establishing AMA policy in favor of helping secure coverage for the out of pocket costs that can deter patient participation in clinical trials.⁴

These provisions stated:

- (i) Legislation and regulatory reform should be pursued to mandate third party payer coverage of patient care costs including co-pays, co-insurance, and deductibles of nationally approved (e.g., NIH, VA, ADAMHA, FDA), scientifically based research protocols or those scientifically based protocols approved by nationally recognized peer review mechanisms;⁴
- (ii) Legislation and regulatory reform should be supported that establishes program integrity/fraud and abuse safe harbors that permit sponsors to cover co-pays, coinsurance, deductibles, and otherwise not covered clinical care in the context of nationally approved clinical trials.⁴

AMA plays many other important roles to physicians in clinical research as well.

As the world’s largest medical publisher, AMA members can access content and continuing medical education from the *Journal of the American Medical Association* (JAMA) and the 11 JAMA specialty journals on the JAMA Network website.⁵

A HOD resolution introduced by the American Academy of Child and Adolescent Psychiatry and supported by APCR was among the first to call for public registration of clinical trials prior to enrollment of subjects. The resolution was adopted. The editors of JAMA and other major journals made registration of trials a prerequisite to publication, Congress made it a law, and the National Institutes of Health established **ClinicalTrials.gov**.

AMA's Current Procedural Terminology (CPT) Editorial Panel⁶ is tasked with ensuring that CPT codes remain up to date and reflect the latest medical care in new and emerging technologies provided to patients. The panel solicits the direct input of practicing physicians, medical device manufacturers, developers of diagnostic tests, and advisors from over 100 medical and other health care organizations. CPT codes can be pivotal in reimbursement decisions regarding a medical device or diagnostic test. The group has the final authority to decide on assigning a code's category. APCR member, Grant Bagley, MD, has been our official observer at Editorial Panel meetings.

The AMA Code of Medical Ethics, originally adopted in 1847, has the force of law in many states. The most recent edition, adopted by the HOD in June 2016, is the culmination of an 8-year project. Opinions on research and innovation typically come from the idea that "physicians who are involved in clinical research have special responsibilities as investigators to protect the rights, safety, and welfare of research participants that include matters of study design, informed consent, and selection of participants."⁷

The United States Adopted Names (USAN) Council⁸ assigns the generic names for the active ingredients in all drugs marketed in the U.S. AMA co-sponsors the USAN

Council along with the U.S. Pharmacopeia (USP) and the American Pharmacists Association (APhA). Dr. Rheinstein and former APCR board of trustees member Dr. Judith Jones⁹ are the only two physicians among the five USAN Council members. Dr. Rheinstein has been the Council Chairman since 2012.

REFERENCES:

1. Member organizations of the AMA House of Delegates
<https://www.ama-assn.org/member-organizations-ama-house-delegates>
2. *Qual Assur J* 2002; 6, 249–250
<http://onlinelibrary.wiley.com/doi/10.1002/qaj.197/pdf>
APCR was originally called the American Academy of Pharmaceutical Physicians.
3. 2017 HOD Reports & Resolutions
<https://www.ama-assn.org/about-us/2017-hod-reports-resolutions>
4. *AMA Policy H-460.965* (Viability of Clinical Research Coverages and Reimbursement) Paragraphs 1 and 11
<https://searchpf.ama-assn.org/SearchML/searchDetails.action?uri=%2FAMADoc%2FHOD.xml-0-4213.xml>
5. JAMA Network® <http://jamanetwork.com>
6. Current Procedural Terminology (CPT®) Editorial Panel
<https://www.ama-assn.org/about-us/current-procedural-terminology-cpt-editorial-panel>
7. AMA Code of Medical Ethics Chapter 7: Opinions on Research & innovation
<https://www.ama-assn.org/sites/default/files/media-browser/code-of-medical-ethics-chapter-7%20.pdf>
8. https://en.wikipedia.org/wiki/United_States_Adopted_Name
9. Dr. Jones is also President of the Pharmaceutical Education & Research Institute.
<http://peri.org/message-from-the-president>
APCR and PERI collaborate to offer APCR member discounts on PERI educational offerings
https://www.apcnet.org/peri_offerings

Member Spotlight

Leigh J. Mack, MD, PhD, FAPCR, CPI



Leigh J. Mack, MD, PhD, FAPCR, CPI, is the director of clinical research for Emergency MCG Inc. focusing on cardiology diagnostics. He is also

the director of clinical research for Aspen Laser Systems, LLC and the CEO of Mack Biotech, Corp. in which he manages product development of medical robotics and nanomedicine projects. Dr. Mack recently accepted a position as an adjunct instructor for Indiana State University teaching a class on the principles of clinical research.

His career in clinical research began out of necessity. Before medical school, Dr. Mack worked for a few biotech and medical device companies and always had to seek out an investigator to run a trial. "I was really intrigued by the process," Dr. Mack said. "I guess my time as a civilian paralegal and legal specialist in the U.S. Army

National Guard gave way to the appeal of the regulatory aspects of research." He said that finding better solutions to extend life for the masses rather than treat one patient at a time is another factor that lead him to his clinical research career. The icing on the cake for Dr. Mack was the fact that clinical research goes hand-in-hand with product development – something he was very interested in.

Dr. Mack enjoys developing a strategy to employ the most effective methods to control variables in a study as well as streamline the process to effectively and cleanly execute the study. "I love product development," he said. "I have a unique set of skills to be able to speak firsthand about personal experience in medicine and surgical procedures and how a new device might work in the hospital environment. From that standpoint, I can design a much more accurate study to support the development of the new medical device."

While his various roles take up much of his time, he has continued to be an active member in APCR even through the ACRP transition. Dr. Mack is a newly recognized Fellow of the APCR and a member of the communications committee. He joined APCR because it caters specifically to physician investigators and he considers the organization "a place to call home."

Dr. Mack hopes to see APCR develop a joint program with other organizations such as the American College of Cardiology, the American College of Surgeons, and the American College of Physicians to help further the clinical research field by reaching residents.

In his spare time, he can be found cycling and getting flight hours in to receive his pilot's license. Dr. Mack enjoys cooking with his wife, Joanne, and their four children.

Stay Connected

APCR has an interactive website at apcrnet.org that incorporates many member-only features such as latest news and updates, member directory, career portal, and much more. You can also view your member account and keep your contact information up-to-date. Please feel free to email webmaster@apcrnet.org for assistance, or membership@apcrnet.org for login information.

Be sure to "like" us on Facebook and follow us on Twitter and LinkedIn to stay up-to-date on important news and upcoming events.

Also, be sure to "share" and "retweet" our posts to share information with your friends, colleagues, and patients!



facebook.com/AcademyPCR



twitter.com/AcademyPCR



linkedin.com/company/academy-of-physicians-in-clinical-research

Fellow of the APCR

Fellow of the APCR (FAPCR) is a recognition reserved for APCR members who have demonstrated their achievement, commitment, and dedication to the organization. The fellow program offers APCR members a new way to show their commitment and achievement in the field of clinical research.

Benefits of FAPCR

- Authorized to use the designation FAPCR (Fellow of the Academy of Physicians in Clinical Research) as a professional designation
- Recognition fellow ribbon when attending any APCR meeting
- FAPCR certificate confirming designation
- Inclusion in a quarterly published roster of new fellows on the APCR website

Eligibility Criteria

1. Certification in clinical research
 - a. Clinical research training
 - b. Non-clinical research advanced degrees and board certifications
2. Publications in peer-reviewed journals
3. Contributions to national or international conferences
4. Leadership in professional associations related to clinical research
5. Participation as PI in clinical trials
6. Member of a medicines development team
7. Fostering clinical research and medicines development in the community
8. Academic positions related to clinical research
9. Work in regulatory agencies related to clinical research and medicines development
10. Recognitions for contributions to the discipline of clinical research and medicines development
11. Innovation/patents granted
12. Member of APCR (requires MD, DO, MBBS or equivalent)



FAPCR Dues

Fellows are required to maintain their active membership status and be up-to-date on dues. Membership dues for fellows are \$300.

Renewal of FAPCR

Once approved, a fellow must stay up-to-date on annual dues to keep the designation. A failure to pay dues may result in the loss of FAPCR designation and require reapplication for fellow status.

To apply to become a fellow of APCR, fill out the online form at apcrnet.org/membership/fellow-apcr.

Domain Inclusion Criteria and Maximum Allowance:

DOMAIN	ACCEPTED CRITERIA	POINTS	TOTAL ALLOWANCE
1- Certification	Academic degree in clinical research/medicines development (MS, PhD)	PhD- 50 MS- 30	70
	ACRP certification or NBME certification	CPI- 25 NBME- 25	
	GCP certification	RAP, FPM- 25	
	Others	Other- 10	
1a.- Clinical research training certificates	GCP training courses	GCP- 2 per course	30
	PERI training courses	PERI- 5 per course	
	Drug development course	Drug development course- 2 per course	
1b.- Other advanced degrees and board certification	Other clinical research CME courses	Other- 2 per course	30
	Non clinical research advanced degrees	2 points per degree	
2- Publications in peer reviewed journals	American Board of Medical Specialties board certifications	10 points per board certification	120
	Papers published since 1995 Peer reviewed/Indexed journals	4 points per paper	
3- Contributions to national/international conferences	Speaker	2 points per item	60
	Poster		
	Abstracts		
	Chair		
4- Leadership in professional associations related to clinical research	Board member or chair of committee/work group	4 points per year	20
5- Participation as PI or subinvestigator in clinical trials	Phase I-IV clinical trials	6 points per trial as PI	120
	Registered at final report	3 points per trial as subinvestigator	
6- Member of a medicines development team/medical director of clinical research site	Work in the pharmaceutical industry/contract research organization/research site in clinical Research related positions	4 points per year	60
7- Fostering clinical research/medicines development in the community	Participation at EC/IRB	2 points per year	60
	Work in patient organizations		
	Education to the lay public		
8- Academic positions in clinical research	Teaching clinical research related matters at accredited/recognized academic institutions	4 points per year	60
9- Work in regulatory agencies related to clinical research and medicines development	Work at FDA, EMA, or other national regulatory agency	4 points per year	60
	Work in WHO, WMA, WFME		
10- Awards and recognitions for contributions to clinical research and medicines development	Granted by academic, nonprofit, regulatory or professional associations	5 points per award	40
11- Innovation	Patents or equivalent granted	10 points per item	40
12- Membership at APCR	Active membership	2 points per year	20

Threshold to Achieving APCR Fellowship Status: 75 points

Important Resources

ORGANIZATIONAL

Academy of Physicians in Clinical Research

apcrnet.org

Find a Member

apcrnet.org/find-a-member

ADMINISTRATIVE

Board of Trustees

apcrnet.org/about/apcr-board-trustees

Bylaws

apcrnet.org/about/values

ADVOCACY

Advocacy Efforts

apcrnet.org/content/advocacy

EDUCATION

GCP and Beyond

Annual Meeting

apcrnet.org/meeting

PERI Collaboration

apcrnet.org/peri_offerings

MEMBERSHIP

Join APCR

apcrnet.org/membership/application

Fellow of the APCR (FAPCR)

apcrnet.org/membership/fellow-apcr

Refer a Colleague

apcrnet.org/membership/refer-a-colleague

INDUSTRY

Careers

apcrnet.org/content/careers

Clinical Trials

apcrnet.org/news/clinical-trials

apcrnet.org



Academy of Physicians
in Clinical Research

6816 Southpoint Pkwy., Suite 1000
Jacksonville, FL 32216

GET INVOLVED

Help make a difference within APCR and show your commitment to the organization by joining a council. APCR is always looking for new leaders, and joining a council is a great way to get involved in the organization. There are six different councils to choose from so you are sure to find something that fits your interests.

APCR councils include the following:

ADVOCACY

Chair: Peter Rheinstein, MD, JD, MS, FAPCR

The Advocacy Council is responsible for advocacy efforts and working with other organizations, such as the American Medical Association (AMA), to best advocate for physicians in the field of clinical research.

CERTIFICATION

Chair: Lyndon Mansfield, MD, FAPCR, CPI

The Certification Council is responsible for guiding members to the best opportunities for physicians' certification in the industry.

COMMUNICATIONS

Chair: Daniel Weiss, MD, FAPCR, CPI

The Communications Council is responsible for overseeing all communication efforts by APCR. This includes all marketing efforts, publications, website content, and any other public dissemination of information coming from the organization.

EDUCATION

Co-Chairs: Michael Koren, MD, CPI, FAPCR; Honorio Silva, MD, FAPCR

The Education Council is responsible for organizing and developing CME-related activities for the APCR membership.

INDUSTRY

Chair: Robert Hardi, MD, FAPCR, CPI

The Industry Council is responsible for working with industry partners and identifying opportunities to appropriately collaborate in growing and developing the clinical research enterprise.

MEMBERSHIP

Chair: Samuel Simha, MD, FAPCR

The Membership Council is responsible for generating initiatives that focus on the organizational value proposition, membership recruitment, and membership retention.

To apply for a council, visit apcrnet.org/content/join-council and fill out the online form.