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I am a Professor of Surgery at the University of Nebraska Medical Center in Omaha Nebraska. I've been actively practicing bariatric surgery since completing my Fellowship in 2002. My clinical practice is 80-90% bariatrics with a vast leaning towards revisional surgery. I serve locally as the Division Chief of General, Minimally Invasive and Bariatric Surgery as well as and the medical director for The Bariatric Center. I am a Vice-Chair for Surgical Informatics. My interest in Surgical Informatics has led me to become a physician builder for Epic®. And I am the past chair the Bariatric Steering Board for Epic® where our goal was to improve the bariatric content within the electronic medical record. During my tenure as chair we developed both preoperative and postoperative tracking mechanisms for surgical patient's as well as improved the 8 trending options with an Epic®.

I have engaged in many of the ASMBS committees including the Research Committee, the Rural Committee, the Flexible Endoscopy Committee, the Program Committee, and the Membership Committee; however most people associated with the with the Bariatric Surgery Training (BST) Committee. When I was the chair of the BST we undertook several very large projects including redesign of the Bariatric Curriculum, and the initiation of Entrustable Professional Activities (EPA). Because of this work ASMBS is considered a leader in postgraduate education area, the EPA work by ASMBS was the foundation for all of the EPA work of the Fellowship Council. Because my interest in education I have served as an ASMBS representative to the Fellowship Council for over a decade on various of their subcommittees and task forces as well.

I'm currently now chairing a task force evaluating the bariatric surgery credentialing requirements. The last paper is over a decade old so we are working on recommendations for a new white paper to include credentialing related to initial credentialing, re-credentialing, bariatric endoscopy, and robotic bariatric surgery.

I have served as an out large elected member to the ASMBS Executive Council for the past 3 years. During this time the leadership of the ASMBS has had to tackle multiple significant issues that has been a privilege to serve help make the decisions that of guided our organization. I would be honored to be re-elected as an ASM BS at-large member so we can continue to work on the very critical issues facing our profession including GLP-1 agonists and the appropriate usage for pre-and postoperative Bariatric Surgery patients, Bariatric Endoscopy, and of course access to care. Like many of you, I practice in a state where Bariatric Surgery is not part of the Essential Benefits Package the majority of our citizens do not have bariatric coverage. I believe we need to continue to work to get everyone bariatric medical and surgical coverage and to ensure that the coverage plans do not put unreasonable non-evidence based obstacles in our patient's path.