



# 2025 ANNUAL MEETING DELEGATE RESOURCES



## 2025 Annual Meeting Delegates Resources

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### What is the House of Delegates?

The House of Delegates (HOD) meets annually and serves as the official policy-making body of the Association. Special meetings of either the Association or HOD may be called by the president at his discretion or upon petition of 20 percent of the delegates.

### Who are Delegates?

The Delegates are:

- Members elected by the component societies, all sections of the Association, and qualifying medical specialty societies.
- Ex-Officio Officers
  - Former presidents of the TMA and AMA
  - TMA Delegates to the AMA
  - Elected officials of the AMA, provided such officials are members in good standing of the TMA
  - The Commissioner of Health and the Commissioner of Mental Health and Mental Retardation for the State of Tennessee, or the Chief Medical Officer of either of these departments if the Commissioner is ineligible
  - Delegates elected by medical specialty societies meeting certain criteria
  - Officers of the Association
    - President
    - President-Elect
    - Immediate Past President
    - Speaker, House of Delegates
    - Vice-Speaker, House of Delegates
  - Board of Trustees Sections
    - Young Physician Section
    - Resident/Fellow Section
    - Medical Student Section
  - Judicial Councilors

### How it Works

#### Operation of Parliamentary Procedures

The following excerpts are taken from *Procedures of AMA House of Delegates* and *The Standard Code of Parliamentary Procedure* by American Institute of Parliamentarians. They are used as guidelines by the TMA House of Delegates to assist in a better understanding and operation of parliamentary procedures and the role of the reference committee.

#### *Preface*

The House of Delegates transacts its business according to a blend of rules imposed by its Bylaws, established by tradition, decreed by its presiding officer, and generally pursuant to the dictates of *The Standard Code of Parliamentary Procedure*. No rigid codification of its rules exists.

Parliamentary law serves to aid the House in orderly, expeditious and equitable accomplishment of its desires. Any compulsive adherence to an inflexible set of directives may thwart rather than abet such an objective.

The majority opinion of the House in determining what it wants to do and how it wants to do it should always remain the ultimate determinant. It is the Obligation of the Speaker to sense the will of the House, to preside accordingly, and to hold his/her rulings ever subject to challenge from and reversal by the assemblage. In consonance with the concept, the following outline of procedures is offered as a guide, subject to reasonable modification, in the hope that adherence to its principles will advance smoothness of operation by reducing confusion and misunderstanding.

### **Introduction of Business**

Tradition governs a substantial portion of each formal session of the House of Delegates. Addresses by outgoing and incoming presidents, remarks by the Speaker, recognition of the Outstanding Physician Award, recognition of distinguished guests, and the like are in this category. It is the prerogative of the Speaker to permit so many of these niceties as he/she may feel to be appropriate without unduly intruding upon the time necessary for the House to accomplish its regular business. In general, such items are scheduled in advance in the published order of business. Unscheduled presentation may be arranged, either with the Speaker, or by a request for unanimous consent of the House to hear them. It is to be recognized that the Speaker must usually discourage extraneous unscheduled presentations not because of any lack or merit of the proposals, but because his/her primary obligation to conserve the time of the House of its immediate deliberations.

## **Your Role and Responsibility as an Elected Delegate**

### **Duties Relating to Efficiency of the Work of the House**

The following instructions are intended as a Guide for Members of the House of Delegates. The purpose is to explain some of the major rules and procedures designed to promote maximum efficiency in the work of the House.

### **Credentialing**

Every delegate must be credentialed before being seated in the House of Delegates. In order to be credentialed one must:

- Be a member in good standing of the TMA
- Your component society or medical specialty society must have submitted its list of elected delegates and alternate delegates to the TMA headquarters
- Your component society must have submitted its annual report
- You must place the proper ribbon on your registration badge.

### **Who are Non Certified Delegates**

Delegates from those component societies not previously certified or listed in the handbook must have documentation of election signed by their component society *President* or

*Secretary* to present to the Credentials Committee in order to be seated in the House of Delegates.

### **How to Serve in Place of a Delegate**

If a delegate is unable to attend either of the sessions of the House and desires an alternate delegate to serve in his or her place, the Credentials Committee must certify the alternate delegate as a delegate. This certification must be in writing and presented at the credentials desk prior to the session if possible. Certification forms will be available at the credentials desk during the credentialing process.

### **Special Services Available to Delegates**

The headquarters of the meeting will be located in the staff office. The office and personnel of the headquarters will be available to assist officers, delegates and other meeting attendees for (1) information, (2) secretarial assistance, and (3) preparing motions, resolutions, amendments, etc.

### **Points to Remember**

- **If you wish to speak during any session of the House, If you wish to make a motion or If you wish to second a motion:**  
Please identify yourself by stating your name and your component medical society. This procedure enables the official recorder to make accurate transcription of the House of Delegates. It also makes it easier for the Speaker to call you by name.
- **If you have a Resolution to Introduce to the House**  
It should be presented in the proper form. The resolution will be given its correct number, correct heading and presented to the House for consideration by the Speaker of the House.

### **Responsibilities of a Delegate**

Members of the TMA House of Delegates serve as an important communications, policy and membership link between the TMA and grassroots physicians. The delegate/alternate delegate is a key source of information on activities, programs, and policies of the TMA. Delegates and Alternate Delegates:

- Serve as a direct contact for individual members to communicate with and contribute to the formulation of TMA policy positions, the identification of situations that might be addressed through policy implementation efforts, and the implementation of TMA policies
- Are expected to foster a positive and useful two-way relationship between grassroots physicians and the TMA leadership
- Are expected to make themselves readily accessible to individual members by providing the TMA with their addresses, telephone numbers and email address so that the TMA can make the information accessible to individual members through the TMA website and through other communication mechanisms

- Regularly communicate TMA policy, information, activities and programs to constituents so he/she will be recognized as the representative of the TMA
- Relate constituent views and suggestions, particularly those related to implementation to TMA policy positions, to the appropriate TMA leadership, governing body, or executive staff
- Advocate constituent views with the House of Delegates or other governance units including the executive staff
- Attend and report highlights of House of Delegates meetings to constituents, for example; at hospital medical staff, county and specialty society meetings
- Serve as an advocate for patients to improve the health of the public and the health care system
- Cultivate promising leaders for all levels of organized medicine and help them gain leadership positions
- Actively recruit new TMA members and help retain current members

# Model Resolution Form

Topics for discussion are introduced to the House of Delegates in the form of a resolution. Resolutions are received at the TMA headquarters in advance of the meeting for review, proper formatting, accuracy and completeness of information; and to determine if policy already exists. If you have questions regarding how to prepare a resolution, please contact [amy.campoli@tnmed.org](mailto:amy.campoli@tnmed.org) (800-659-1862 / 615-460-1650)

## Rules Governing Submission of Resolutions

- Resolutions submitted within ***two weeks*** of the opening session of the Tennessee Medical Association (TMA) House of Delegates will be made available to delegates/delegations electronically for their review will be reviewed and commented on by the TMA Legislative Committee.
- Resolutions brought forth within *two weeks* of the opening session of the Tennessee Medical Association (TMA) House of Delegates (HOD), must be entered as emergency resolutions, requiring more than 50% of the members of the HOD present to accept them as “true emergencies.”

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### TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

#### Resolution No. (to be assigned)

INTRODUCED BY: \_\_\_\_\_

*(Only delegates and ex-officio delegates may introduce resolutions. They may introduce on their own behalf, or on behalf of a society, a TMA committee, board, council, or a related organization.)*

SUBJECT: \_\_\_\_\_

*(The subject should appropriately reflect the action for which the resolution calls)*

Whereas, \_\_\_\_\_

*(Not required and not adopted. May include introductory statements briefly identifying the problem, inform the House on timeliness or urgency of the problem, the effect of the issue on the Association, and whether action would establish or modify current policy.)*

**RESOLVED,** \_\_\_\_\_

*(Sets forth specific intent and action.) Each “Resolve” should stand as a complete, stand-alone action and not refer to the prefatory statements (such as -- Resolved that the Tennessee Medical Association support **such** programs or policies...) since the House adopts only the Resolves.*

Sunset: 2032\* (All resolutions, unless there is specific or implied reference to earlier time frame, would automatically expire in seven years unless reaffirmed by the House of Delegates at that time.)

*Fiscal Note: to be determined by the Finance Committee*

# Parliamentary Procedure in the House of Delegates

## *Speaking to an Issue in the House*

In the absence of specific provisions to the contrary in the Bylaws of the Association or in this manual, “Standard Code of Parliamentary Procedure” by American Institute of Parliamentarians shall govern the House

For the information of those who transcribe the proceedings of the House it is necessary that each individual speaking to any issue be:

- ❑ recognized by the Speaker
- ❑ at a microphone
- ❑ properly identified (Name and Representation i.e. Ex-Officio Delegate, Component Medical Society Delegate or Specialty Society Delegate)

## **Rules Governing Motions**

- **The Main Motion**

The purpose of the main motion is to bring a proposal before an assembly for discussion and decision. The main motion is the means by which a member may present a substantive proposal to the assembly for consideration and action. It is the basic motion for the transaction of business. Since only one subject can be considered at one time, the main motion can be proposed only when no other motion is before the assembly.

- **Motion to Amend a Previous Action**

The purpose is to amend a main motion that was approved previously. A main motion approved at a previous meeting can be amended by majority vote, unless it was a motion requiring prior notice or a two-thirds vote, in which case the same restriction applies to the amendment. Since a motion amending a prior action is a main motion, it is subject to amendments and secondary amendments, as with any other main motion.

- **Motion to Ratify**

The purpose is to confirm and thereby validate an action that was taken in an emergency, or where a quorum was not present.

- **Motion to Reconsider**

The purpose is to enable an assembly to set aside a vote on a main motion taken at the same meeting or convention and to consider the motion again as though no vote had been taken on it. It is a restorative main motion and can be offered at any time during a meeting. It is unusual in that, unlike an ordinary main motion, it may be proposed even if other business is under consideration and, if necessary, it may interrupt a speaker.



- **Motion to Rescind**

To repeal (cancel, nullify, void) a main motion approved at a previous meeting. Any main motion that was passed, no matter how long before, may be rescinded unless as a result of the vote something has been done that the assembly cannot undo. The motion to rescind, if passed, affects the present and future only, since it is not retroactive.

- **Motion to Resume Consideration**

The purpose is to enable an assembly to take up a motion that was postponed temporarily (tabled) during the same meeting or convention. It applies only to a main motion that has been postponed. Beyond the current meeting or convention, the temporarily postponed motion lapses and can be brought up only as a new main motion.

- **Motion to Amend**

The purpose of the motion to *amend* is to change a motion that is being considered by the House so that it will express more satisfactorily the will of the members. The most frequently used methods of amending are by addition, by deletion, by striking and inserting, and by substitution. The subsidiary motions to postpone temporarily (table) and to vote immediately are not amendable. An amendment cannot change the intent of the motion and still be appropriate; however, an amendment cannot simply change an affirmative statement into a negative statement.

- **Motion to Refer to a Committee or Board**

The purpose is to transfer a motion that is pending before the assembly to a committee:

1. To investigate or study the proposal, make recommendations on it, and return it to the assembly, or
2. To conserve the time of the assembly by delegating the duty of deciding the proposal, and sometimes of carrying out the decision, to a smaller group, or
3. To ensure privacy in considering a delicate matter, or
4. To provide a hearing on the proposal, or
5. To defer a decision on the proposal until a more favorable time.

- **Motion to Postpone to a Certain Time and To Postpone Temporarily/Table**

These are the two most frequently used subsidiary motions. The purpose of the motion to Postpone to a Certain Time is to delay further consideration of a pending main motion until a stated time. And the purpose of the motion to Postpone Temporarily is to set aside a pending main motion, which can be taken up for further consideration at any time during the same meeting or convention.

- **Postponing to a Certain Time vs. Postponing Temporarily**

The motion to postpone to a certain time defers consideration, or further consideration, of the pending main motion, and fixes a definite date or time for its consideration, and make it either a general or special order for the designated time. Debate is permitted, but is restricted to brief discussion of the time or reason for postponement.

The motion to postpone temporarily (table) defers the pending main motion temporarily but specifies no time for its consideration and is not debatable. Its effect terminates at the end of the current meeting or convention, at which time the main motion dies if the assembly has not voted to resume consideration of it (or to “take it from the table”).

- **Motion to Limit or Extend Debate**

The purpose is to limit or extend the time that will be devoted to discussion of a pending motion or to modify or remove limitations already imposed on its discussion. The motion to limit debate on a pending question or to modify limitations already set up usually relates to the number of speakers who may participate, the length of time allotted each speaker, the total time allotted for discussion of the motion, or some variation or combination of these limitations. The most common example of a motion extending limitations on debate is one that extends the time allowed a particular speaker.

- **Motion to Close Debate and Vote Immediately**

The purpose is to prevent or to stop discussion on the pending question or questions, to prevent the proposal of other subsidiary motions except to postpone temporarily, and to bring the pending question or questions to an immediate vote. A powerful tool for expediting business, it may be proposed at any time after the motion to which it applies has been stated to the assembly. If the motion to close debate is proposed as soon as a main motion has been stated to the assembly, its adoption prevents any discussion of the question.

- **Request to Withdraw a Motion**

The purpose is to enable a member who has proposed a motion to remove it from consideration by the assembly. If the motion has been stated to the assembly by the presiding officer, it becomes the property of that body, and the proposer may withdraw it only if no objection is raised.

- **The Ballard Motion**

One of the most memorable contributions to efficient operations of the TMA House and its election process is the motion which the late Thomas Ballard, MD, former TMA president and member of Consolidated Medical Assembly standardized: “Mr. Speaker, I move that nominations cease and this nominee be elected by acclamation.” In 1995, the TMA House of Delegates adopted Resolution No. 15-95 stating that “Mr. Speaker, I move the nominations cease and this nominee be elected by acclamation” be known as “The Ballard Motion.”

## The Chief Purposes of Motions

Purpose	Motion
Present an idea for consideration and action	Main Motion Resolution Consider informally
Improve a pending motion	Amend Division of a question
Regulate or cut off debate	Limit or extend debate Close debate
Delay a decision	Refer to a committee Postpone to a certain time Postpone temporarily Recess Adjourn
Suppress a proposal	Table Withdraw a motion
Meet an emergency	Question of privilege Suspend rules
Gain information on a pending motion	Parliamentary inquiry Request for information Request to ask a member a question Question of privilege
Question the decision of the presiding officer	Point of order Appeal from decision of chair
Enforce rights and privileges	Division of assembly Division of question Parliamentary inquiry Point of order Appeal from decision of chair
Consider a question again	Resume consideration Reconsider Rescind Renew a motion Amend a previous action Ratify
Change an action already taken	Reconsider Rescind Amend a previous action
Terminate a meeting	Adjourn Recess

## Principle Rules Governing Motions

Order of Procedures <sup>1</sup>	Interrupt Speaker	Requires Second	Debatable	Amendable
<i>Privileged Motions</i>				
1. Adjourn	No	Yes	Yes <sup>2</sup>	Yes <sup>2</sup>
2. Recess	No	Yes	Yes <sup>2</sup>	Yes <sup>2</sup>
3. Question of Privilege	Yes	No	No	No
<i>Subsidiary Motions</i>				
4. Table	No	Yes	No	No
5. Close Debate	No	Yes	No	No
6. Limit or Extend Debate	No	Yes	Yes <sup>2</sup>	Yes <sup>2</sup>
7. Postpone to a certain time	No	Yes	Yes <sup>2</sup>	Yes <sup>2</sup>
8. Refer to Committee	No	Yes	Yes <sup>2</sup>	Yes <sup>2</sup>
9. Amend.	No	Yes	Yes <sup>3</sup>	Yes
<i>Main Motions</i>				
10. a. The Main Motion	No	Yes	Yes	Yes
b. Specific main motions				
Adopt in-lieu-of	No	Yes	Yes	Yes
Amend a previous motion	No	Yes	Yes	Yes
Ratify	No	Yes	Yes	Yes
Reconsider	Yes <sup>4</sup>	Yes	Yes <sup>2</sup>	No
Rescind	No	Yes	Yes	No

## Incidental Motions

No order of precedence	Interrupt Speaker	Requires Second	Debatable	Amendable
<i>Motions</i>				
Appeal	Yes	Yes	Yes	No
Suspend Rules	No	Yes	No	No
Consider Informally	No	Yes	No	No
<i>Requests</i>				
Point of Order	Yes	No	No	No
Parliamentary inquiry	Yes	No	No	No
Withdraw a motion	Yes	No	No	No
Division of question	No	No	No	No
Division of assembly	Yes	No	No	No

<sup>1</sup>Motions are in order only if no motion higher on the list is pending. Thus, if a motion to close debate is pending, a motion to amend would be out of order; but a motion to recess would be in order, since it outranks the pending motion.

<sup>2</sup>Requires two-thirds vote when it would suppress a motion without debate

<sup>3</sup>Debatable if no other motion is pending

<sup>4</sup>Withdraw may be applied to all motions

## Parliamentary Strategy

To Support a Motion	To Oppose a Motion
<ul style="list-style-type: none"> <li>• Second it promptly and enthusiastically</li> </ul>	<ul style="list-style-type: none"> <li>• Speak against it as soon as possible. Raise questions; try to put proponents on the defensive.</li> </ul>
<ul style="list-style-type: none"> <li>• Speak in favor of it as soon as possible</li> </ul>	<ul style="list-style-type: none"> <li>• Move to amend the motion so as to eliminate objectionable aspects</li> </ul>
<ul style="list-style-type: none"> <li>• Do your homework; know your facts; have handouts, charts, overhead projector slides, etc., if appropriate (previous approval from speaker)</li> </ul>	<ul style="list-style-type: none"> <li>• Move to amend the motion to adversely encumber it</li> </ul>
<ul style="list-style-type: none"> <li>• Move to amend motion, if necessary, to make it more acceptable to opponents</li> </ul>	<ul style="list-style-type: none"> <li>• Draft a more acceptable version and offer as amendment by substitution.</li> </ul>
<ul style="list-style-type: none"> <li>• Vote against motion to table or to postpone, unless delay will strengthen your position.</li> </ul>	<ul style="list-style-type: none"> <li>• Move to postpone to a subsequent meeting.</li> </ul>
<ul style="list-style-type: none"> <li>• Move to recess or postpone, if you need time to marshal facts or work behind the scenes</li> </ul>	<ul style="list-style-type: none"> <li>• Move to refer to committee</li> </ul>
<ul style="list-style-type: none"> <li>• If defeat seems likely, move to refer to committee, if that would improve chances.</li> </ul>	<ul style="list-style-type: none"> <li>• Move to table</li> </ul>
<ul style="list-style-type: none"> <li>• If defeat seems likely, move to divide question, if appropriate, to gain at least a partial victory.</li> </ul>	<ul style="list-style-type: none"> <li>• Move to recess, if you need time to round up votes or obtain more facts.</li> </ul>
<ul style="list-style-type: none"> <li>• Have available a copy of the organization's standing rules, its bylaws, and The Standard Code of Parliamentary Procedure, in case of a procedural dispute.</li> </ul>	<ul style="list-style-type: none"> <li>• Question the presence of a quorum, if appropriate.</li> </ul>
<ul style="list-style-type: none"> <li>• If motion is defeated, move to reconsider, if circumstances warrant it.</li> </ul>	<ul style="list-style-type: none"> <li>• Move to adjourn.</li> </ul>
<ul style="list-style-type: none"> <li>• If motion is defeated consider: reintroducing it at a subsequent meeting.</li> </ul>	<ul style="list-style-type: none"> <li>• On a voice vote, vote emphatically</li> </ul>
	<ul style="list-style-type: none"> <li>• If the motion is adopted, move to reconsider, if you might win a subsequent vote.</li> </ul>
	<ul style="list-style-type: none"> <li>• If the motion is adopted, consider trying to rescind it as a subsequent meeting</li> </ul>
<p>Have available a copy of the organization's standing rules, its bylaws, and The Standard Code of Parliamentary Procedure (AIP), in case of a procedural dispute.</p>	

## 2025 Certified Delegates

As of March 18, 2025

Component Society	Number Eligible	Delegate	Alternate Delegate
Benton-Humphreys	1	Maysoon Shocair Ali, MD	Charles Heffington, MD
Blount	3	Kimberly Ballard, MD	Travis Groth, DO
		Marvin Beard, MD	James Ray, MD
		Jennifer Winbigler, MD	
Bradley	2		
Chattanooga-Hamilton County Medical Society	27	John Blake, MD	Katrina Gooden, MD
		Melanie Blake, MD	Michael Nichols, MD
		L. Curtis Cary, MD	Mary Shuster, MD
		Anuj Chandra, MD	
		Louis Chemin, III, MD	
		Steven Fox, MD	
		Charles Gober, MD	
		Marijka Grey, MD	
		James Haynes, MD	
		Samuel Jones, MD	
		Jennie Mahaffey, MD	
		Harish Manyam, MD	
		Terry Melvin, MD	
		Richard Moody, MD	
		Glenn Newman, MD	
		Mukta Panda, MD	
		Phillip Pollock, MD	
		Sunanda Sadanandan, DO	
		Molly Seal, MD	
		Harry Severance, MD	
		Rishabh Shah, MD	
		Jason Susong, MD	
		Todd Thurston, MD	
		Harsha Vardhana, MD	
		Vincent Viscomi, MD	
Coffee	1		
Consolidated	6	Keith Micetich, MD	Davidson Curween, MD
		Caitlyn Trostel, MD	Elly Riley, MD
		Devan Trull, MD	
		Victoria Watson, MD	
Franklin	1	Terry Holder, MD	Thomas Smith, MD
Knoxville Academy of Medicine	20	Julia Arana, MD	
		Davis Berry, MD	
		Mary Emily Berry, MD	



Component Society	Number Eligible	Delegate	Alternate Delegate
The Memphis Medical Society (cont.)			
Monroe	1	Kenya Kozawa, MD	
Montgomery	2	Jyotsna Korivi, MD	
		Greta Manning, MD	
Nashville Academy of Medicine	29	Newt Allen, MD	Ralph Atkinson, MD
		Michael Baron, MD	Lee Anna Fentriss, MD
		Tyler Barrett, MD	Chris Ott, MD
		Michael Beckham, MD	William Penley, MD
		Steven Bengelsdorf, MD	Jane Siegel, MD
		Amy Gordon Bono, MD	Jacob Uskavitch, MD
		Glenn Booth, MD	Jule West, MD
		Ethel Cobbett, MD	
		Ashley Dailey, DO	
		Natalie Dickson, MD	
		Katherine Frederick-Dyer, MD	
		Christin Giordano McAuliffe, MD	
		William Harb, MD	
		Rahul Iyengar, MD	
		Laura Lawson, MD	
		Adele Lewis, MD	
		Rodney Lewis, MD	
		Brent Moody, MD	
		Matthew Pollard, MD	
		Dorris Powell-Alexander, MD	
		James Powers, MD	
		Adrian Rodriguez, MD	
		Gregg Shepard, MD	
		Steven Sprenger, MD	



<b>Component Society</b>	<b>Number Eligible</b>	<b>Delegate</b>	<b>Alternate Delegate</b>
Nashville Academy of Medicine (cont.)		Carl Willis, MD	
		Michael Zanolli, MD	
Northeast Tennessee Medical Society	13	R. Theo Hensley, MD	
		James Joslyn, MD	
		Jayson Macarelli, MD	
		Clinton Musil, MD	
		Steve Peterson, MD	
		Eddie Reynolds, MD	
		Timothy Smyth, MD	
		Tedford Taylor, MD	
		Turney Williams, MD	
NW Tennessee Academy of Medicine	1	Ravinder Machra, MD	Susan Lowry, MD
Sevier	1		
Stones River	5	Nicholas Cote, DO	
		Brannon Mangus, MD	
		Marcus Owen, MD	
Sullivan	8	Stephen Combs, MD	
		Jonathan Hughes, MD	
		Donald Lovelace, MD	
		Kate Molony, MD	
		Kiley Perethian, MD	
		Alahna Smith, MD	
		Marta Wayt, DO	
		Sean White, MD	
Sumner	1		
Tennessee Valley Medical Society	2	Toral Pattni, MD	
		Randall Pearson, MD	
Tipton	1		
TMA Direct	3		
Upper Cumberland Medical Society	4	Steven Alexander, MD	Chad Griffin, MD
		James Batson, MD	Pushpendra Jain, MD

<b>Component Society</b>	<b>Number Eligible</b>	<b>Delegate</b>	<b>Alternate Delegate</b>
Upper Cumberland (cont.)		Samantha McLerran, MD	Abhaykumar Kemkar, MD
		Ty Webb, MD	James McKinney, MD
Williamson County Medical Society	4	Barbara Dentz, MD	John Binhlam, MD
		Eva Parker, MD	Barry Jarnagin, MD
		Dorothy Sinard, MD	Christopher Montville, MD
		Jeffrey Suppinger, MD	Heather Rupe, MD
Wilson County Medical Society	1	Dwayne Lett, MD	
Total Eligible Members	180		

## 2025 Certified Delegates

As of March 18, 2025

### TMA Sections

#### Medical Student Section

Delegate	Alternate Delegate
Anisha Dash	Kriti Bomb

#### Resident and Fellow Section

Delegate	Alternate Delegate
Victoria Alexander, MD	Samantha Bookbinder, MD

#### Young Physician Section

Delegate	Region
Vacant	1
Sanwal Singh Mehta, MD	2
Megan Morrison, DO	3
Kaylin Craig, MD	4
Kelli Currie, MD	5
Vacant	6
Vacant	7
Carli Cooper, DO	8

### Medical Specialty Society Delegates

[illegible]

**Ex-Officio Delegates to the TMA House of Delegates – 2024**  
**(Ex-Officio Delegates Are Voting Delegates in the TMA House of Delegates)**

<b>Officers</b>	<b>TMA Former Presidents</b>
Landon Combs, MD, President	Charles W. White, Sr., MD (1993-1994)
John McCarley, President-elect	Virgil H. Crowder, Jr., MD (1994-1995)
Andrew Watson, MD, Immediate Past President	Robert E. Bowers, Jr., MD (1995-1996)
George “Trey” Lee, III, MD, Speaker House of Delegates	Richard M. Pearson, MD (1996-1997)
	David G. Gerkin, MD (1998-1999)
<b>Board of Trustees</b>	James Chris Fleming, MD (1999-2000)
Joseph “Gene” Huffstutter, MD, Chair	Barrett F. Rosen, MD (2000-2001)
Leslie Treece, MD, Vice-Chair	David K. Garriott, MD (2001-2002)
Daniel Bustamante, MD, Secretary/Treasurer	Michael A. McAdoo, MD (2002-2003)
J. Michelle Allmon, MD	Subhi D. Ali, MD (2003-2004)
Patrick Andre, MD	John J. Ingram, III, MD (2004-2005)
Laura Andreson, DO	Phyllis E. Miller, MD (2005-2006)
Nicole Schlechter, MD	Charles R. Handorf, MD (2006-2007)
Allan Colyar, MD	J. Mack Worthington, MD (2007-2008)
James McKenzie, DO	Richard J. DePersio, MD (2009-2010)
Lauren Favors, MD	B Ruffner, Jr., MD (2010-2011)
Maro Doce	F. Michael Minch, MD (2011-2012)
<b>Vice-Speaker House of Delegates</b>	Wiley T. Robinson, MD (2012-2013)
Wm. Kirk Stone, MD	Chris E. Young, MD (2013-2014)
	Douglas J. Springer, MD (2014-2015)
<b>Councilors</b>	John W. Hale, Jr., MD (2015-2016)
Region 1 Allison Stiles, MD	Keith G. Anderson, MD (2016-2017)
Region 2 Christopher Marshall, MD	Nita W. Shumaker, MD (2017-2018)
Region 3 Mark Dentz, MD	Matthew L. Mancini, MD (2018-2019)
Region 4 Parul Goyal, MD	Elise C. Denny, MD (2019-2020)
Region 5 Brent Staton, MD	M. Kevin Smith, MD (2020-2021)
Region 6 Nita Shumaker, MD	Ronald Kirkland, MD (2021-2022)
Region 7 Tim Wilson, MD	Edward Capparelli, MD (2022-2023)
Region 8 John McGraw, MD	
	<b>Commissioner of Health</b>
<b>AMA Delegation</b>	Ralph Alvarado, MD
Richard J. DePersio, MD, Chair	
Wiley T. Robinson, MD, Vice Chair	<b>Commissioner of Mental Health &amp; Substance Abuse Services, CMO</b>
Vijaya Appareddy, MD	Terry Holmes, MD
O. Lee Berkenstock, MD	
Christopher E. Young, MD	
Nita Shumaker, MD	

## Model Resolution Form

Topics for discussion are introduced to the House of Delegates in the form of a resolution. Resolutions are received at the TMA headquarters in advance of the meeting for review, proper formatting, accuracy and completeness of information; and to determine if policy already exists. If you have questions regarding how to prepare a resolution, please contact [amy.campoli@tnmed.org](mailto:amy.campoli@tnmed.org) (800-659-1862 / 615-385-2100 ext. 1650)

- Resolutions submitted within *three weeks* of the opening session of the Tennessee Medical Association (TMA) House of Delegates will be made available to delegates/delegations electronically for their review and will be reviewed and commented on by the TMA Legislative Committee.
- Resolutions brought forth within *two weeks* of the opening session of the Tennessee Medical Association (TMA) House of Delegates (HOD), must be entered as emergency resolutions, requiring more than 50% of the members of the HOD present to accept them as “true emergencies.”

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### TENNESSEE MEDICAL ASSOCIATION HOUSE OF DELEGATES

#### Resolution No. (to be assigned)

INTRODUCED BY: \_\_\_\_\_

*(Only delegates and ex-officio delegates may introduce resolutions. They may introduce on their own behalf, or on behalf of a society, a TMA committee, board, council, or a related organization.)*

SUBJECT: \_\_\_\_\_

*(The subject should appropriately reflect the action for which the resolution calls)*

Whereas, \_\_\_\_\_

*(Not required and not adopted. May include introductory statements briefly identifying the problem, inform the House on timeliness or urgency of the problem, the effect of the issue on the Association, and whether action would establish or modify current policy.)*

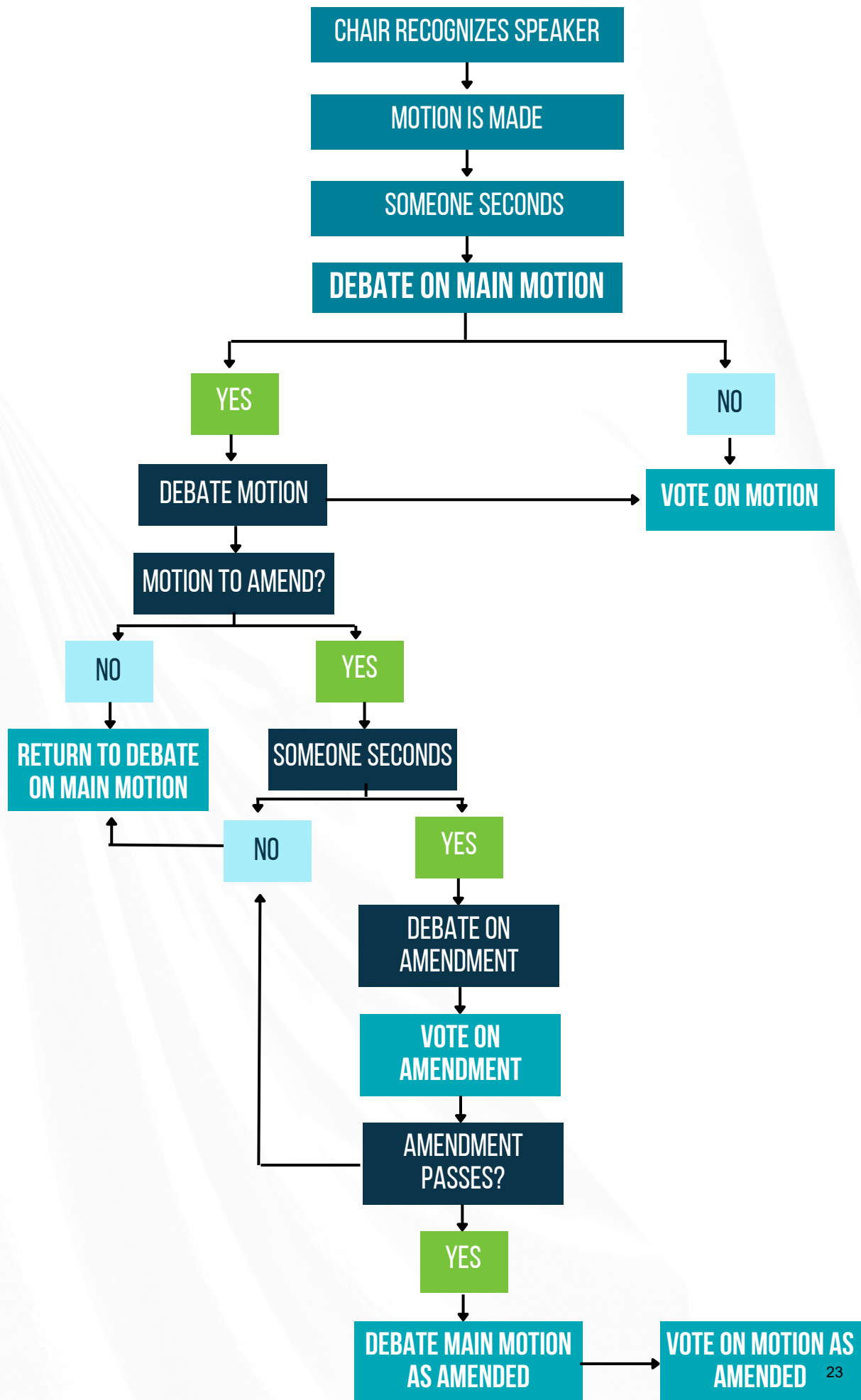
**RESOLVED,** \_\_\_\_\_

*(Sets forth specific intent and action.) Each “Resolve” should stand as a complete, stand-alone action and not refer to the prefatory statements (such as -- Resolved that the Tennessee Medical Association support **such** programs or policies...) since the House adopts only the Resolves.*

Sunset: 2032\* (All resolutions, unless there is specific or implied reference to earlier time frame, would automatically expire in seven years unless reaffirmed by the House of Delegates at that time.)

Fiscal Note: \_\_\_\_\_ \*\*\*

# PARLIAMENTARY PROCEDURE AND DEBATE



# HOW AN IDEA BECOMES OFFICIAL TMA POLICY

- 1.** Delegates discuss issues at component medical society meetings and form resolutions.
- 2.** Resolutions are submitted by delegates to TMA headquarters.
- 3.** Resolutions are processed and posted on the TMA web page: [www.tnmed.org](http://www.tnmed.org).
- 4.** Resolutions are introduced to the House of Delegates.
- 5.** Resolutions are discussed and acted on by the entire House of Delegates.
- 6.** Policy is carried out by TMA and its component medical societies.
- 7.** Resolution could be introduced to the AMA House of Delegates.

