

An Open Letter from Health and Medical Professionals

President Barack Obama
The White House
1600 Pennsylvania Avenue
Washington, DC 20500

Dear President Obama:

As doctors, nurses, scientists, and public health and medical professionals, we are writing to urge you to significantly strengthen both the annual and the 24-hour average National Ambient Air Quality Standards (NAAQS) for fine particulate matter (PM_{2.5}) to protect public health. Specifically, we recommend that the annual standards be set at 11 µg/m³ and the 24-hour standard be set at 25 µg/m³. Ample scientific evidence supports adopting tighter standards to protect the health of people who are most susceptible to the serious health effects of these pollutants.

More than 10,000 peer-reviewed scientific studies have been published since 1997 when EPA adopted the current annual primary NAAQS for fine particulate air pollution of 15 µg/m³. These studies, as discussed and interpreted in the EPA's 2009 Integrated Science Assessment for Particulate Matter, validate earlier epidemiologic studies linking both acute and chronic fine particle pollution with serious morbidity and mortality. The newer research has also expanded our understanding of the range of health outcomes associated with PM and has identified adverse respiratory and cardiovascular health effects at lower exposure levels than previously reported. The new evidence reinforces already strong existing studies and supports the conclusion that PM_{2.5} is causally associated with numerous adverse health effects in humans at exposure levels far below the current standard. Such a conclusion demands prompt action to protect human health.

At the conclusion of the thorough review of the current research, the Clean Air Scientific Advisory Committee and EPA's own staff scientists concluded that PM_{2.5} causes or is likely the cause of premature deaths and significant health problems such as increased hospital admissions and emergency room visits for cardiovascular and respiratory problems, including heart attacks and strokes. PM_{2.5} also is linked to the development of chronic respiratory disease.

Fine particulate air pollution is cutting short the lives of tens of thousands of Americans each year. Studies have shown fine particulate air pollution is shortening lives by up to six months. The World Health Organization recently concluded that diesel particulate matter, a component of total PM_{2.5} mass, is a known human carcinogen. Recent evidence suggests that long-term exposure to fine particles may cause reproductive and developmental harm.

The evidence documents risk well below the current annual average standard of 15 µg/m³. Numerous, long-term multi-city studies have shown clear evidence of premature death, cardiovascular and respiratory harm as well as reproductive and developmental harm at contemporary concentrations far below the level of the current standard.

Infants, children and teenagers are especially sensitive, as are the elderly, and people with cardiovascular disease, lung disease, or diabetes. The new EPA standards should be set at levels that will protect these sensitive people with an adequate margin of safety, as required by the Clean Air Act.

We urge you to set the following primary NAAQS for particulate matter to protect public health:

- Annual average PM2.5 standard of 11 µg/m³
- 24-hour average PM2.5 standard of 25 µg/m³

Lowering the annual average standard will reduce chronic exposures but it is not sufficient to protect against peak daily concentrations that have also been linked to serious harms to human health. Studies of short-term exposure demonstrate that PM2.5 air pollution increases the risk of hospital admissions for heart and lung problems even when you exclude days with pollution concentrations at or above the current daily standard of 35 µg/m³. Daily concentrations must be capped at lower levels to protect against peak exposure days that occur due to local and seasonal sources of emissions.

Strengthening both the annual and daily standards is necessary to provide healthier air to breathe for people all across the nation.

Numerous scientific studies have now identified increased health risks in association with traffic-generated air pollution, including fine particulate matter. We commend EPA's proposal to begin a program of roadside monitoring of PM2.5 pollution, but urge that the initiative be greatly expanded to protect the health of millions of Americans that live in high traffic areas.

Thank you for considering our views.

Sincerely,

William N. Rom, MD, MPH
 Sol & Judith Bergstein Professor of Medicine and Environmental Medicine
 Director, Division of Pulmonary, Critical Care and Sleep Medicine
 New York University School of Medicine

ALASKA

Thomas L. Macchia, Physician Assistant

ALABAMA

Robin E. Pattillo, PhD

ARIZONA

Bettina Bickel, RN, BSN, CCRN
 Terry Norbrock, MPH - Executive Director, National Disease Clusters Alliance
 William Weese, MD

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 Bill Legere, RRT
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 David Pepper, MD
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 Dorothy E. Vura-Weis, MD, MPH

Dr. Donna Carr
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Janet Perlman, MD
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Kari Nadeau, MD, PhD
Kathryn Zils, RN
Dr. Kerri Johannson
Krisztina Balazs, MD
Laura Apodaca, Health Program Coordinator
Laura Applebaum, MD
Leslie Hata, DDS
Lloyd Peckner, MD
Lynda Boyer, Public Health Nurse
Michael Kelly, MD - Chair, San Diego Regional Asthma Coalition
Miriam L. Iosupovici, MSW
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Natalie Audage, MPH
Oliver Brooks, MD
Patricia Marlatt, RT, CRT
Paul M. Quinton, MD - Professor of Pediatrics
Peter G. Joseph, MD
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Robert L. Stein, PhD, JD
Robert Meagher, MD
Robert Vinetz, MD - Director, Pediatric Asthma Disease Management
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Viki Chaudrue, RN, MSNed, Ed.D(c)
Zoe Chafe, MS, MPH

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Cecile Rose, MD, MPH - Professor of Medicine, National Jewish Health and UC Denver
Thomas Hill, III, BS, RN, MSN, PhD

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Aquitania Morales, RRT
Brett Gerstenhaber, MD
Bruce E. Gould, MD
Carl R. Baum, MD, FAAP, FACMT - Associate Professor of Pediatrics, Yale School of Medicine
Carol Manseau, BS RRT-NPS
Catherine Peacock, Respiratory Therapist
Connie C. Dills, Clinical Educator Respiratory Care Services
Connie Clements Dills, MBA, RRT, RPFT
David G. Hill, MD FCCP - Assistant Clinical Professor of Medicine, Yale University School of Medicine
Diane Grenier, RN
G. Eriketa, RRT
Fazeena Dickens, Respiratory Therapist
Iolanda Peck, LPN-AEC
Jodi Sherman - Assistant Professor of Anesthesiology
John R. McArdle, MD
Kathleen Cooper-McDermottka, MSN, MOH, RN, Certified Asthma Educator
Louis M. Levine, RRT
Mark A. Mitchell, MD, MPH
Marlene Scrivani, RRT, AE-C
Marvin Den, MD
Melissa Hutt, Respiratory Therapist
Patricia Jackson Allen - Professor, PNP
Paula Lackups, RRT
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Susan Silver, RN
Susan Walsh, MD

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Teresa Towne, RN, Clinical Educator

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Robert Zarr, MD
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Steven H. Lamm, MD, DTPH
Tee Lamong Guidotti - Professor of Occupational and Environmental Medicine (retired)

FLORIDA

Chuck Henry, RS, MPA - President, Florida Environmental Health Association
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Lynn Ringenberg, MD - President, Physicians for Social Responsibility/Florida,
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Mona V. Mangat, MD
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Maeve Howett, PhD, APRN - Associate Professor

HAWAII

Michele Nihipalim, MPH

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Amy Funk, Air Quality Project Specialist
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Andrius Kudirka, MD
Anita Indrelie, Respiratory Care Practitioner
Ann Fohrman, RN
Autumn Eggert, RN
Avani Shah, MD
Barbara Rosean, RN
Bernadette Mary McCoy, Certified/Licensed Respiratory Therapist
Beverly Hancock, Doctor of Nursing Practice
Caitlin MacKinnon, RN
Colleen Cappitelli, RN
David Vines - Chair, Department of Respiratory Care
Donna Radzun, CMA(AAMA)
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Jessica Meier-Singer, RNC
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Majid Afshar, MD
Marcia Smith, RN
Mark Haupt, MD, FAAP
Marla Lynne Wood, RN
Mary A. Nevin, MD - Attending Physician, Pediatric Pulmonary Medicine. Ann & Robert H. Lurie
Children's Hospital of Chicago
Meghan Conaty, RN
Michael Hanak, MD

Nina E Grude, Advanced Practice Nurse
Pamela Bell , RN, BSN
Patricia Spolar, RN
Peggy Murphy, Public Health Administrator
Rachel G. Robison, MD
Robin Robinson, BS, RRT
Samuel Dorevitch, MD - Associate Professor, UIC School of Public Health
Sandy Stoub, MD
Sally Ruecking, RRT
Sarah Rittner, Manager, Lung Health Initiatives
Shawn DeVillez, RCP/CRT
Shelle Ridings, CMA (AAMA)
Shirley Schultz, Pulmonary Rehabilitation Coordinator, RRT, AE-C
Susan Galanes, Nurse Practitioner
Susan Newberry, RN
Susanna A. McColley, MD
Sylvia M. Bradshaw, RN
Victoria Pressling, RN, MSN
Dr. William Edwards

INDIANA

Cecelia Morris-Walton, Respiratory Therapist, Asthma Educator
Gilbert Liu, MD
Stephen Wintermeyer, MD, MPH - Associate Professor of Clinical Medicine; Indiana University School of
Medicine

KENTUCKY

Barbara Polivka, Professor, PhD, RN
Janice Beatty, RN

LOUISIANA

Heidi Sinclair, MD

MAINE

Stella E. Hines, MD, MSPH - Assistant Professor of Medicine
Suzanne Jacobson, RN
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Andrew Filderman, MD
Ann Skelton, MD
Cherry Baker, FNP-C Director Student Health Services
Christine Rossi, MS, RRT
Daren Rainey, RRT
David Bachman, MD/Chief Medical Officer
David G. Kern, MD, MOH - Occupational and Environmental Medicine
David Merrill, MD
Diane C. Haskell, RRT
Donald Endrizzi, MD
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Heidi R. Wierman, MD
Howland Bickerstaff, LCPC, LADC, CCS, TTS-C
James Melloh, MD

Jennifer M. Friedman, MD
Jo E. Linder, MD
Joanna Aronica, Health Promotion Program Manager
Jonathan Zuckerman, MD
Julie Osgood, MS
Keith Siegel, RRT
Laura King, Respiratory therapist
Laurie Mitchell, Director Employee Health Improvement
Lorraine L. McElwain, Associate Chief of Pediatrics, The Barbara Bush Children's Hospital
Marguerite A. Pennoyer, MD
Martine J. Eon, Lung Health Specialist
Norma Hay, RRT
Paris T. Mansmann, Associate Clinical Professor, MD, FACP,FAAP,FACAAI
Patricia Boston, MSN, RN, RRT
Paul LaPrad, MD
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Yana Wirengard, MD
Yeow C. Tan, MD

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Brenda Afzal, Public Health Nurse
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Ronald H. White, MST
Shawna Mudd, PNP

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Andrew D. Harding, RN
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Ann Ottalagana, Manager, Health Education
Ann T.M. Kiely, RN
Antonia Blinn, Healthy Mothers, Healthy Babies Coalition of MA
Barbara Gardner, Occupational Health Nurse
Barbara R. Kelley, Pediatric Nurse Practitioner, RN, EdD, MPH
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Dennis O'Brien, RN, Program Manager, Pulmonary Rehabilitation
Diane Ferguson, RN
Donna Hawk, RRT, AE-C
Dorothy A. Jones, Professor of Nursing and Director of Nursing Research
Dorothy A. Slack, RN
Dorothy Cabral, LPN, Asthma Nurse Educator
Doug Brugge, Professor
Eleanor Vanetzian, Professor Emeritus, RN, PhD, CS
Elizabeth Wittensten, CRNA
Ellen J. Pond, CRT
Emmanuel Berthil, RRT
Eric Chivian, MD - Director, Center for Health and the Global Environment, Harvard Medical School
Gail Foley, Respiratory Therapist
Geraldine Twomey, Respiratory Therapist
Helen Hollingsworth, MD
Howard Paisner, Respiratory Therapist
Irving Bailit, Physician Allergist
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Kyle Hoesterey, MD, MPH
Laura E. Lusky, Respiratory Educator
Linda Barros, Healthy Homes Program Manager
Linda Kovitch, CRNA, RRT, MSN
Maher Ghamloush, MD
Margaret A. Beturne, Assistant Nurse Manager
Margaret A. Lougee, PFT Coordinator
Margaret M. Lance, RN
Marilyn P. Griffin, MD, Chief, Pulmonary Section, NE Baptist Hospital
Martin Joyce-Brady, MD
Mary Brother, RRT
Mary C. Russell, RRT

Maura A. Flynn, RN
Maura Goodney, RN
Michele Hart, Pulmonary Nurse Clinician, RN, BSN, AE-C
Müge Erkan, MD
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Susan Sommer, RN, NP, Certified Asthma Educator
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William S. Beckett, MD - Associate Professor of Medicine, Harvard Medical School

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Rita Nabor, RN
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Sara Wilk, RN
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Thomas Fountain, Environmental Health Director
Tina Topalian, Health Science Consultant

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Ellen Pond, CRT
Dr. William Goggin

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John A. Stith, MD

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Dora Cardillo, RRT-NPS, CPFT
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Missoula MT
Elizabeth Schenk, RN, MHI
Emily Colomeda, RN, MPH
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Rockies, MD
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Robert Merchant, MD

Robert Shepard, MD
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Sara Rehmer, Prevention Health Specialist
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Sue Hansen, RN
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Tony Ward, Associate Professor

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John Walburn, Medical Director, General Pediatric Clinic
Dr. Margery Coffey

NEVADA

Jorie Gulbranson, Director of Respiratory

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Trudy Loy, CRT

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DeWitt Henderson, RN
Mavis Y. Williams, Director of Clinical Education

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Caralee Caplan-Shaw, MD
Carl W. Braun, MD
Cathleen London, MD
Charles A. Powell, MD - Janice and Coleman Rabin Professor and Chief, Division of Pulmonary, Critical Care and Sleep Medicine Mount Sinai School of Medicine
Christian P. Becker, MSRT
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David Clark, MD
David O. Carpenter, MD
David Weiss, MD, MPH
Deepak Pradhan, MD
Elana Maser, Assistant Professor of Medicine

Elizabeth Fiorinom MD
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Francis V. Adams, MD - Assistant Professor of Clinical Medicine
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Medicine
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Harald Sauthoff, Assistant Professor of Medicine and Environmental Medicine
Joan Reibman, MD - Professor of Medicine and Environmental Medicine
John S. Munger, Associate Professor of Medicine and Cell Biology, NYU School of Medicine
Jonita Bell, RN
Joseph Lowy, MD, Associate Professor of Medicine
Joseph T. Cooke, Chief, Pulmonary and Cardiac Care New York Presbyterian/Weill Cornell
Junchieh James Tsay, MD
Dr. Kate Young
Kathleen Raszeja, RN
Ken Spaeth, MD, MPH - Director, Occupational and Environmental Medicine Center
Kisha Rae Brown, RRT
Liz D'Imperio, Director of Asthma Education
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Michael Katz, MD
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Nomi Levy-Carrick, MD
Norma Mt Braun, MD
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Rita Molloy, RN
Steven Markowitz, MD, DrPH - Professor and Director, Center for the Biology of Natural Systems,
Queens College, City University of New York
Susan Richman, MD, MSc
Thomas Fayle, Respiratory Therapist
Thomas Martin, MD

NORTH CAROLINA

Cathy Nieman, MS, RD, LDN
Jack K. Leiss, Adjunct Associate Professor of Maternal and Child Health, University of North Carolina at
Chapel Hill PhD

OHIO

Amy Chuang, MD
Brenda R. Clark, Doctoral Candidate
Donald Nguyend, MD
Dr. Jasleen Goel
Jessica M. Haines, CRT
John McLeod, Director, Environmental Public Health
Kathleen Morris, RN
Lois Hall, MS
Marilyn J. Orr, MBA, CMPE
Michael J. Piepsny, Executive Director, Environmental Health Watch
Nicholas Sperelakis, Professor of Physiology
Peggy Berry, Occupational Health Nurse
Phyllis J. Scheiderer, BSN, RN, CCHP-A, LNC

Roger Friedman, MD
Sarah Varekojis, PhD, RRT - Assistant Professor of Respiratory Therapy
Shawna Weaver, Respiratory Therapist
Sumita B. Khatri, MD, MS

OREGON

Adriana Voss-Andreae, MD, PhD
Bonnie New, MD, MPH
David R. Gilmour, MD, former Jackson County (OR) County Commissioner
Diana S. Pope, PhD, MS, RN
Sarah Petras, MPH
Ted Welker, Licensed Respiratory Care Practitioner

PENNSYLVANIA

Alana Wilson, RRT
Albert M. Gutmaker
BSOM, RRT, CPFT
Allan P. Freedman, MD
Andrea Imperatore, Executive Director, PPHA
Arthur L. Frank, Professor of Public Health, MD, PhD
Barbara J. Guent, MSN, CRNP
Barbara Soly, Pulmonary Technologist
Brittany Jean Baker, RN
Cherie Eichholz
Executive Director, Physicians for Social Responsibility
Christopher M. Hughes, MD
Clintonette Garrison, Manager of Respiratory Care
Curtis Aumiller, HACC, Program Director, Respiratory Therapist Program
Cynthia B. Flynn, CNM, PhD
David Eibling, MD, FAC, Professor of Otolaryngology-HNS University of Pittsburgh
Deana Kilmer, MBA, BS, RN, HN-BC
Diane M Hornemlan, CRNP
Dora Martinez, Public Health Counselor
Elaine Chrissos, BS Ed, RRT, Director of Clinical Education - Respiratory Therapy
Elizabeth K. Keech, Assistant Professor, PhD, RN
Ellen Eline, CRNP
Erin Johnson, RN, MSN, MPH
Eva Tseng, MD, MPH
Fattouma Boumahraz, Respiratory Therapist
Frank Alsis, EdD, RRT, CPFT
Gus A. Kostas, Jr, MS, CRNP
Jacalyn Oravec, RRT, RPSGT, RST, CPFT
Jacqueline Rinier, Nurse Practitioner
James J. DiStefano, Director of Respiratory Services, Ephrata Community Hospital, RRT-NPS
Jeffrey Campbell, RRT
Julie Cristol, CNM
Karen F. Lewis, RN, FNP, MSN
Karen Flad, President, PASNAP
Kari Magill, RRT
Dr. Kate Lawler
Kathleen Gilmartin, CRNP
Keith S. Somers, MD
Laura Boll, CRNP
Lauri Weiss, CRNP

Laveina Dash, Clinical Regulatory Affairs Specialist
Linda M. Zube, RRT
Lindsey Shultz, MD
Margaret Hayn, CRNP
Margaret Slota, Associate Professor
Mary J. Bryner, Respiratory Therapist
Maureen George, Assistant Professor of Nursing
Dr. Michael Balsai
Mona Rupert, Respiratory Therapist
Nancy Berry, RN
Nina M. Kaktins, MS, RN
Patricia Holtz, MD
Patricia Schwabenbauer, CRNP
Dr. Paul O'Rourke
Rebecca Bascom, MD, MPH
Renee Carter, RRT
Rhoda Sulzbach, CRNP
Robert Thomas Jordan, Respiratory Therapist
Ronald Napikoski, Director, Cardiovascular and Pulmonary/Sleep Services
Ruth McDermott-Levy, PhD, RN, PSNA Environmental Health Committee Co-chair
Dr. Sara K. Schultz
Subodh G. Patel, MD
Susan S. Aronson, MD, FAAP
Susan Schrand, Certified Registered Nurse Practitioner
Susan Zasadny, Respiratory Therapist
Thomas Lamphere, Executive Director, Pennsylvania Society for Respiratory Care
Todd Groeber, RN
Tracy Elias, Respiratory Therapist

RHODE ISLAND

Bindu Panikkar, Postdoctoral Research Associate
Catherine Kempe, Respiratory Therapist
Liana Cassar, MPH/MBA
Robert P. Naparstek, MD, FACOEM
Valerie Szlatenyi, Respiratory Therapist

SOUTH CAROLINA

Georgette Smith, CPNP, Assistant Professor

TENNESSEE

Susanne Tropez-Sims, MD, MPH, FAAP

TEXAS

Adeltia G. Cantu, Assistant Professor, PhD, RN
Betty J. Dabney, PhD
Elena Craft, Health Scientist
Frances Gaus, MSIS, RRT, RCP
Harold J. Farber, Pediatric Pulmonology, MD, MSPH
Dr. James Klein
Michelle A. Zeager, DO, MPH
Dr. Shannon Cox

UTAH

Brian Moench, President, Utah Physicians for a Healthy Environment
Cris G. Cowley, MD
Douglas Jones, MD
Gary Kunkel, MD
Holly Molberg, MD
Ingrid Nygaard, MD
Jan Baker Kennington, Nurse Practitioner
Kristina Heintz, RN
Michelle Hofmann, MD, MPH
R. Scott Poppen, MD
Richard E. Kanner, MD
Tamara Schwarting, RN, MSN
William J. Walsh, III, MD
Sharon Moon, Immunization Coordinator

VIRGINIA

Ananth Thyagarajan, MD
Andrew Carruthers, RRT
Autumn Burnette, MD; Diplomate, American Board of Allergy & Immunology
Barbara Cruickshank, RN, MSN Community Health
Catherine I. Bowers, RD
Charlotte Brody, RN
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