



American Association of Oral
and Maxillofacial Surgeons

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April 14, 2004

Donald S. Clark, Esq.
Secretary
Federal Trade Commission
Office of the Secretary
Room 159-H
600 Pennsylvania Avenue, NW
Washington, DC 20580

Re: CAN-SPAM Act Rulemaking, Project No. R411008 (Advance notice of proposed rulemaking, *Federal Register* of March 11, 2004, 69 FR 11776)

Dear Mr. Clark:

The American Association of Oral and Maxillofacial Surgeons (AAOMS) is the professional organization representing approximately 7,000 oral and maxillofacial surgeons who provide complex dental and craniofacial surgical services for patients throughout the country. The Association has actively communicated with members and potential members since 1918, and we are deeply concerned that potential regulations to implement the CAN-SPAM Act (PL 108-187) may have the unintended consequence of limiting our ability to use modern communication tools for routine member communications as well as for efforts to inform potential members about the benefits of participating in education and other AAOMS-sponsored activities.

There is no question that the volume of unwanted and unsolicited e-mails has severely degraded the benefits of the Internet as a communications medium, and we support reasonable efforts to stop or at least staunch the flow of unwanted solicitations for pornography, financial services, prescription medications, supplements and other “opportunities” that seem to choke our in-boxes. In the process of developing regulations, we strongly urge the FTC to recognize a broad allowances for “transactional or relationship” messages that voluntary membership organizations rely on for communicating their necessary activities. Especially given the unique nature of an association -- where membership is limited based on specific criteria -- the ability to communicate with members and potential members should not be impeded.

As a voluntary membership association dedicated to promoting education, advocacy and public service to our surgeon members and their patients, AAOMS provides unique resources that are unavailable from any other sources and which directly enhance the ability of an oral and maxillofacial surgeon to provide patient care. This information – which includes but is not limited to the most recent innovations in clinical care -- is communicated to candidates for membership as well as to members. No public benefit will be reaped, and, in fact, public health is likely to be adversely affected, by regulations that narrowly define commercial communications in a manner that impedes activities to provide valuable patient care information to a limited class of people who are members or potential members of a professional association.

We trust that the FTC will give careful consideration to our viewpoint as well as the comments received from the American Society of Association Executives as the rulemaking process progresses.

Sincerely,

Elgan P. Stamper, DDS
President, AAOMS

Robert Rinaldi, PhD
Executive Director