<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Message from the President</td>
<td>3</td>
</tr>
<tr>
<td>II</td>
<td>About the Syrian American Medical Society</td>
<td>5</td>
</tr>
<tr>
<td>III</td>
<td>SAMS Milestones</td>
<td>6</td>
</tr>
<tr>
<td>IV</td>
<td>Syria: A Humanitarian Crisis</td>
<td>8</td>
</tr>
<tr>
<td>V</td>
<td>Syria Programs</td>
<td>10</td>
</tr>
<tr>
<td>VI</td>
<td>Syria Programs by Governorate</td>
<td>16</td>
</tr>
<tr>
<td>VII</td>
<td>Jordan Programs</td>
<td>18</td>
</tr>
<tr>
<td>VIII</td>
<td>Lebanon Programs</td>
<td>21</td>
</tr>
<tr>
<td>IX</td>
<td>Turkey Programs</td>
<td>24</td>
</tr>
<tr>
<td>X</td>
<td>SAMS Funding</td>
<td>26</td>
</tr>
<tr>
<td>XI</td>
<td>U.S. Work</td>
<td>28</td>
</tr>
<tr>
<td>XII</td>
<td>Advocacy and Media</td>
<td>30</td>
</tr>
<tr>
<td>XIII</td>
<td>Coalitions and Working Groups</td>
<td>36</td>
</tr>
<tr>
<td>XIV</td>
<td>In Memoriam</td>
<td>38</td>
</tr>
<tr>
<td>XV</td>
<td>Offices and Staff</td>
<td>41</td>
</tr>
<tr>
<td>XVI</td>
<td>Current Boards and Committees</td>
<td>42</td>
</tr>
</tbody>
</table>
DEAR PARTNERS AND FRIENDS,

I am honored to present the Syrian American Medical Society (SAMS) annual report for 2014-2015, a year in which we provided critical medical and humanitarian relief to over 1.4 million vulnerable Syrians. In 2014 alone, we provided a record $13.8 million of vital assistance to Syrians, 70% of which came from direct public support like yours. To each and every SAMS supporter, I say thank you. Without your commitment, SAMS would not be able to work with local physicians and healthcare professionals to save Syrian lives, from the besieged families of Eastern Ghouta to the refugee communities in Al Zaatari Camp.

Every single day, the crisis in Syria is in my mind and close to my heart. The conflict has just entered its fifth year and has led to the worst humanitarian crisis of this generation- you have heard the staggering statistics of over 220,000 Syrians killed and more than half the population displaced. As UN Chief for Humanitarian Affairs Valerie Amos has said, "Every time we use a new figure in relation to the Syrian crisis, we say that it is unprecedented. We have run out of words to fully explain the brutality of violence and callous disregard for human life which is a hallmark of this crisis."

I too have run out of words to describe the horror of watching a child die in front of me on the surgery table of an underground field hospital. I have run out of words to describe the pain in the voice of a physician as he recounts his close escape from a medical clinic destroyed by an airstrike, while his colleagues were not so lucky- over 615 health workers have been killed in Syria since 2011. I have run out of words to describe the collective suffering of Syria’s children, like young Omar, who I met three months ago on a visit to Aleppo.

Omar is in the second grade. In school, he was asked to draw a picture, and he drew a world on fire: helicopters dropping barrel bombs, his house in rubble, himself crying on his knees surrounded by his friends who were dead, dismembered, and bleeding. He drew what he came to know in Syria. I have run out of words to describe this type of trauma and suffering.

And yet, despite the unthinkable violence and daily danger, our Syrian medical colleagues are the backbone of crisis response and relief, risking their lives to save others. I could not be prouder to work with the SAMS-sponsored health workers in Syria who perform surgeries, provide vaccines, facilitate childbirth, respond to chemical attacks, and work to help heal the next generation of Syrian children. We support brave physicians like Mohamed Tennari, who works in a field hospital in Sarmin, Idlib that has had to be rebuilt four times following targeted attacks. Dr. Tennari worked on the front lines of response following the horrific chlorine attacks that began in Idlib in March 2015. He spoke about his experiences treating chemical exposure victims in front of the United Nations Security Council, and prompted their discussion about the need for accountability and attribution for these chlorine attacks. We support courageous staff in Aleppo like Dr. Abu Mohammadin, who is one of many who...
rebuilt our flagship trauma hospital underground to protect patients and staff from bombing. This hospital has been hit by air attacks numerous times over the last year, and yet staff and civilians have been largely protected by its underground infrastructure. We support doctors in the besieged areas of Eastern Ghouta as they work day and night to provide care to a population suffering from starvation, acute trauma injuries, infectious diseases, dehydration, and more. SAMS supports 60% of the healthcare in Eastern Ghouta- in addition to providing fuel, equipment, and health workers’ salaries, SAMS has pioneered the use of telemedicine as an innovative response to the needs of the besieged population and lack of specialized physicians.

It is the courage and humility of these health workers that motivates me to ensure that SAMS continues to grow in scope and ability. With your support, SAMS has transformed from a small, member-based professional organization to one of the leading medical relief and advocacy organizations involved in the Syria crisis. SAMS has impacted the lives of countless Syrians through its programming inside Syria and in its neighboring refugee-host countries. In only four years, our budget grew from $100,000 to $15 million annually and our staff from one to 60 in five different countries. Our chapters grew from two to 16, our members from 150 to over 515, and our donor base grew from 60 to almost 5,000. Our presence on social media has grown to over 70,000 Facebook followers and almost 3,000 twitter followers. SAMS had a significant presence in the media this year, with coverage from major media outlets like the New York Times, the Washington Post, CNN, NBC, and many more. SAMS has spearheaded Syria humanitarian advocacy at the national and international levels, tangibly influencing policies impacting Syrian refugees, healthcare professionals, humanitarian aid, access, and civilian protection.

Our work has never been more important. Let’s continue our crucial medial efforts and stand with our brave Syrian colleagues to show them that they are not alone. Let’s show young Omar that he is not alone.

On behalf of everyone at the Syrian American Medical Society, thank you. Your support, your voice, and your contributions have helped us do what we do best: impact the health and lives of millions of Syrians.

Sincerely,

Dr. Mohammed Zaher Sahloul
President, Syrian American Medical Society
The Syrian American Medical Society (SAMS) is a nonpolitical, nonprofit, professional and medical relief organization that represents hundreds of Syrian American medical professionals across the United States. SAMS is working on the front lines of crisis relief in Syria and neighboring countries to alleviate suffering and save lives.

SAMS was founded in 1998 as a professional society, working to provide physicians of Syrian descent with networking, educational, cultural, and professional services. SAMS facilitates opportunities for its members to stay connected to Syria through medical missions, conferences, and charitable activities. SAMS continues to conduct national and international conferences annually to provide a platform for exchange of ideas and best practices, recognition of leaders in humanitarian and medical work, and trainings and updates on cutting edge medical relief.

When the conflict in Syria began in 2011, SAMS expanded its capacity significantly to meet the growing needs and challenges of the medical crisis. SAMS has since supported healthcare throughout Syria, sponsoring field hospitals and ambulances, training and paying the salaries of Syrian medical personnel risking their lives to save others, and sending lifesaving humanitarian aid and medical equipment to where it is needed most. SAMS also supports Syrian refugees in neighboring countries with critical psychosocial support, medical care, and art therapy programs.

SAMS currently has offices in Washington DC, Ohio, Jordan, Lebanon, Turkey, and Syria. SAMS has over 515 grassroots members in the United States, who help lead 16 chapters nationwide. SAMS is governed by an elected Board of Directors, and its work is overseen by several volunteer committees and dedicated staff.

**Vision**

SAMS’s vision is to be a leading humanitarian organization, harnessing the talents of Syrian American healthcare professionals, and channeling them toward medical relief for the people of Syria and the United States.

**Mission**

SAMS’s mission is to save lives and work to ensure healthcare development on behalf of Syrian American healthcare professionals.
SAMS Milestones

1998
- SAMS is founded

1999
- 1st International Conference in Syria
- Obtained 501(c)3 status for SAMS Foundation

2002
- 1st medical mission in Syria

2006
- 1st medical mission in Syria
- Started telemedicine program

2008
- Started scholarship program
- Started Avicenna Medical Journal

2010
- 1st medical mission for Syrian refugees in Turkey
- 1st grant received by SAMS Foundation
- 1st leadership retreat for SAMS members
- Started “Save Syrian Lives” Campaign

2011
- 1st training course for Syrian physicians
- Opened Lebanon, Jordan, and Washington D.C. offices
- 1st National Conference in Florida
- Reported on sarin attack in Eastern Ghouta

2012
- 1st leadership retreat for SAMS members
- Opened 1st Turkey office in Reyhanli

2013
- 1st meetings with UN delegations and agencies
Helped initiate the Polio Task Force for northern Syria

Helped spearhead #WithSyria campaign and joined coalition as Steering Committee member

Participated in UN cross-border aid implementing partner from Turkey

Started the Abdul-Rahman Peter Kassig Fund in memory of our friend and humanitarian

Reached over 5,740 private donors

Held largest SAMS medical mission to date in Jordan with 32 volunteers

Helped spearhead #WithSyria campaign and joined coalition as Steering Committee member

Participated in UN cross-border aid implementing partner from Turkey

Started the Abdul-Rahman Peter Kassig Fund in memory of our friend and humanitarian

Reached over 5,740 private donors

Held largest SAMS medical mission to date in Jordan with 32 volunteers

Celebrated one year without a polio diagnosis because of Polio Task Force

Participated in 3 UN briefings, including the Arria-formula UN Security Council session held by Ambassador Samantha Power on the chemical attacks in Idlib

Reached over 5,740 private donors

Held largest SAMS medical mission to date in Jordan with 32 volunteers

Briefed the House Foreign Affairs Committee on the humanitarian crisis in Syria after the fourth anniversary of the conflict

Published “Slow Death” report on the underreporting of communities under siege

Began receiving funds from UN OCHA’s Pooled Fund for ICU programs

Published “Syrian Medical Voices from the Ground” report alongside the Center for Public Health and Human Rights at the Johns Hopkins Bloomberg School for Public Health
**Syria: A Humanitarian Crisis**

“Every time we use a new figure in relation to the Syrian crisis, we say that it is unprecedented. We have run out of words to fully explain the brutality of violence and callous disregard for human life which is a hallmark of this crisis.”

—Valerie Amos, UN Chief for Humanitarian Affairs

| **220,000** | total deaths¹, including **83,482** civilian deaths² |
| **3,977,211** | total registered refugees³ |
| **627,287** | in Jordan |
| **1,183,327** | in Lebanon |
| **1,759,846** | in Turkey |
| **7.6 million** | internally displaced persons⁴ |
| **12.2 million** | in need of assistance inside Syria⁵ |
| **640,200** | people under long-term siege in 49 areas⁶ |

---

5. Ibid
NOW IN ITS FIFTH YEAR, THE COMPLEX and protracted conflict in Syria has led to the worst humanitarian crisis of recent times, with an immeasurable toll on the Syrian people. Daily flagrant breaches of international human rights and humanitarian law have subjected civilians to both indiscriminate and deliberate attacks, as well as denied them critical humanitarian assistance. Torture, detention and enforced disappearance, and internationally prohibited chemical weapons have all been used against civilians. Access to critical humanitarian relief has been severely obstructed. More than 3.9 million Syrian civilians have been forced to flee to neighboring countries, and 7.6 million people have been internally displaced. The UN estimates that 12.2 million people are in dire need of assistance.

Throughout the crisis, healthcare has been attacked as a tool of war. Medical personnel, hospitals, and ambulances have been deliberately targeted by the government. Healthcare has been denied to Syrians through lack of access, prevention of aid delivery, removal of medical supplies from aid convoys, and widespread attacks on medical facilities and health workers. As a result of the constant threat of violence, thousands of physicians have been forced to flee Syria, leaving the healthcare infrastructure nearly decimated. In 2014 alone, SAMS facilities were attacked 30 separate times. Out of these strikes, 70% were direct and targeted attacks on the facilities. The Geneva Conventions prohibit the targeting of healthcare workers and humanitarian aid facilities, designating violations as a war crime—however, in Syria, these crimes continue daily.

8. Ibid
Syria Programs

SAMS OPERATES 96 MEDICAL FACILITIES THROUGHOUT SYRIA, in addition to supporting health workers, providing aid and equipment, and spearheading an assortment of medical programs. Programs range from primary care to more specialized treatment in order to provide effective and needs-based healthcare in Syria. In 2014, SAMS programs in Syria treated 1.1 million direct beneficiaries, in addition to the countless indirect beneficiaries impacted through fuel provisions, physicians’ salaries and training, advocacy efforts, and more.

96 medical facilities

1.1 million direct beneficiaries
Aid and Equipment Delivery

IN PARTNERSHIP WITH INTERNATIONAL relief organizations and the United Nations, SAMS supports medical facilities in Syria through the delivery of medical supplies, medications, equipment, and financial assistance. Using a network of warehouses in Syria and the region, SAMS is able to store and distribute these supplies to facilities in a timely manner in order to keep hospitals stocked and able to provide rapid, life-saving support. In 2014, SAMS sent 67 medical containers across borders into Syria.

Fuel
Severe shortages of fuel and electricity have led to an immediate need for the provision of diesel fuel in order to operate medical facilities throughout Syria. Unreliability and lack of government-provided electricity has left many cities without electricity for most or all of the day. Diesel fuel is the only alternative to run electric generators for hospitals and medical clinics. Without diesel fuel, operating rooms, ventilators, monitors, dialysis units, incubators, labs, X-rays, and storage refrigerators cannot function. SAMS supports each of its 96 facilities with diesel for generators and ambulances.

Equipment and Medical Supplies
Facilities in Syria face severe shortages in basic equipment and medical consumables. SAMS procures and distributes vital supplies to support hospitals and doctors on the ground. SAMS sends basic medical goods such as blood bags, surgical sets, sterilization equipment, intubation kits, X-ray machines, operating tables, ventilators, dialysis machines, monitors, ECG machines, defibrillators, chest tubes, gloves and gowns, basic lab kits, and even IV fluid.

Medicine
With the destruction of much of Syria’s pharmaceutical manufacturers, facilities are in short supply of many medications needed for basic healthcare. SAMS’s field teams conduct needs assessments to determine the most critical and lacking medications for various locations. SAMS collects and distributes numerous medications, including antibiotics, pain medications, anesthesia, atropine, amoxicillin, carbamazepine, nitroglycerine, paracetamol, and many more.

Ambulances
Ambulance systems in Syria play a significant role in saving lives and enhancing basic functions of medical facilities. Ambulances transport patients to and from hospitals to ensure that they have access to treatment as quickly as possible. SAMS supports ambulance systems at its 90 stationary medical facilities. SAMS also supports these ambulance systems with fuel, driver incentives, and a budget for necessary ambulance supplies. As many foreign vehicles lead to operational difficulties in Syria due to diesel and mechanical issues, SAMS doctors have initiated efforts to convert local vans into makeshift ambulances. These vehicles are outfitted with necessary equipment and are able to transport patients without the noticeable lights or fluorescent colors typically found on ambulances, which often lead to targeted attacks.

Winterization
SAMS provides critical winter survival kits for adults and children throughout Syria. These kits include basic winter necessities like high-thermal blankets, plastic sheeting, winter clothes, sleeping mats, jerry cans, and hygiene supplies. In December 2014 and January 2015, SAMS provided an additional 5,000 winterization kits to Dera’a with basic necessities vital for surviving cold winters. These kits were distributed to 12,271 individuals, with 67% of total beneficiaries were under the age of five.
2 Dialysis Centers

IN SYRIA, IT HAS BECOME INCREDIBLY DIFFICULT, SOMETIMES IMPOSSIBLE, FOR THOUSANDS OF KIDNEY DISEASE PATIENTS TO ACCESS DIALYSIS SERVICES THEY NEED TO SURVIVE. Poor machine maintenance and diminishing numbers of specialists have limited the availability of this critical care. Funding for dialysis can be particularly difficult given the high cost of the treatment for a limited number of patients. Kidney patients rely completely on dialysis treatments, and are left with no alternative treatment. SAMS supports 3 dialysis centers in Idlib, 1 center in East Ghouta, and 1 center in Homs, which together are able to reach 291 beneficiaries. SAMS doctors in the U.S. also provide consultation to nephrology and dialysis providers in Syria, utilizing the innovative telemedicine system.

3 Dental Clinics

DENTAL CARE CAN BE HARD TO FIND, even non-existent, in many areas of Syria. SAMS operates 10 dental clinics that together treat an average of 6,000 patients per month in Syria. Our dental clinics are in Idlib, Aleppo, Homs, and Quneitra, including a clinic in the Atmeh Refugee Camp in Idlib.

4 Healthcare Professionals Support

THE RELATIVE COLLAPSE OF THE FORMAL HEALTHCARE SYSTEM IN SYRIA HAS LEFT HEALTH WORKERS WITHOUT THE FINANCIAL SUPPORT NEEDED TO REMAIN IN THE COUNTRY. SAMS PROVIDES MEDICAL PERSONNEL AND HEALTH WORKERS WITH SALARIES, ALLOWING THEM TO CONTINUE PRACTICING MEDICINE IN SYRIA AND SUPPORT THEMSELVES AND THEIR FAMILIES. IN 2014, SAMS SUPPORTED OVER 802 HEALTHCARE WORKERS IN SYRIA. THESE HEALTH PROFESSIONALS WORK IN ALEPPO, IDLIB, Latakia, Hama, Homs, Dera’a, East Ghouta, and Quneitra.

5 Intensive Care Units

SAMS SPONSORS 13 INTENSIVE CARE UNITS AT MEDICAL FACILITIES IN SYRIA, SUPPORTING THEM WITH NECESSARY MACHINERY SUCH AS VENTILATORS, MONITORS, DEFIBRILLATORS, IV PUMPS, AND OTHER ESSENTIAL CONSUMABLES. THESE UNITS ALLOW PATIENTS TO EASILY ACCESS POSTOPERATIVE AND LONG-TERM CARE CRITICAL TO AID THEIR RECOVERY. SAMS CURRENTLY SUPPORTS INTENSIVE CARE UNITS IN ALEPPO, IDLIB, HAMA, AND EAST GHOUTA.

6 Labs & Blood Banks

LABS AND BLOOD BANKS ALLOW PHYSICIANS TO DRAW, TEST, AND STORE BLOOD FOR THE CONSTANT FLOW OF PROCEDURES IN THE FIELD. THESE FACILITIES AIM TO ENSURE THAT SAFE AND CLEAN BLOOD IS READILY AVAILABLE. SAMS CURRENTLY SUPPORTS 3 LABS AND 2 BLOOD BANKS IN EAST GHOUTA AND 1 BLOOD BANK IN IDLIB. IN 2014, THESE LABS AND BLOOD BANKS HAD 128,182 BENEFICIARIES IN EAST GHOUTA AND IDLIB.

**Where they work**

<table>
<thead>
<tr>
<th>Region</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aleppo</td>
<td>11%</td>
</tr>
<tr>
<td>Idlib</td>
<td>10%</td>
</tr>
<tr>
<td>Latakia</td>
<td>2%</td>
</tr>
<tr>
<td>Hama</td>
<td>6%</td>
</tr>
<tr>
<td>Homs</td>
<td>7%</td>
</tr>
<tr>
<td>Dera’a</td>
<td>27%</td>
</tr>
<tr>
<td>East Ghouta</td>
<td>36%</td>
</tr>
<tr>
<td>Quneitra</td>
<td>1%</td>
</tr>
</tbody>
</table>
In 2014, SAMS supported over 802 healthcare workers in Syria.

7 Mobile Clinics

Mobile clinics travel around the country to deliver primary healthcare to patients in Syria. Mobile clinics are typically staffed with a pharmacist, a midwife, a nurse, and a general practitioner. These clinics are able to address diverse cases and needs in different areas of the country, particularly rural areas that have seen high population increases due to internal displacement. Many vulnerable populations, mostly comprised of women, children, and the elderly, are trapped within hard-to-reach areas because of the perils of road travel. Mobile clinics are able to reach these populations and address their medical needs. SAMS’s mobile clinics were a vital component of the 2014 Polio Task Force, allowing the delivery of polio and other vaccinations to over 1.4 million children. SAMS supports 4 primary care mobile clinics in Idlib and Hama and 1 mobile dermatology clinic in Idlib. These mobile clinics served a total of 99,646 people in 2014.

STORIES FROM THE FIELD  Polio: One Year On

January 21, 2015 marked the one-year anniversary since the last polio case was reported in Syria. This great achievement is a testament to those involved in the polio outbreak response, particularly the Polio Control Task Force of which SAMS is a founding member, and the Syrian medical personnel on the ground.

Polio was reported in Syria in October 2013, and within a month 17 children had been paralyzed by polio in three different governorates. Before this recent outbreak, the virus had not been seen in the country since 1999. In order to address the sudden spike in polio diagnoses in Syria, the Polio Control Task Force was formed by eight Syrian and regional NGOs, including SAMS, and successfully reached more than 1.4 million children in their door-to-door vaccination campaign in northern and northeastern Syria. The targeted regions had been inaccessible to WHO and the Syrian Ministry of Health - the networks of SAMS and other local partners were essential to delivering the much needed immunizations to many isolated communities.
**8 OB/GYN**

The impact of conflict has significantly altered reproductive and women’s health in Syria. Due to the lack of healthcare options available, pregnancy and childbirth have particular added challenges, such as the risk of travel in a conflict zone in order to give birth and malnutrition among mothers and infants. SAMS proudly operates 11 OB/GYN clinics throughout Syria in Aleppo, Idlib, Latakia, Dera’a, Hama, Homs, and East Ghouta. These clinics offer multilayered treatment including pregnancy and neonatal care. The facilities also monitor mental health and provide reproductive health education and family planning for women in need.

**9 Primary Care Facilities**

The emergency conflict and deterioration of healthcare infrastructure has forced many facilities to prioritize the treatment of immediate trauma injuries over primary care. To address the primary health deficit identified by SAMS field teams, SAMS is committed to supporting facilities dedicated to basic healthcare. These primary care facilities provide general care as well as treatment for communicable and non-communicable diseases. SAMS supports 38 primary care facilities in Aleppo, Idlib, Latakia, Dera’a, Hama, Homs, and East Ghouta.

**10 Psychosocial Care**

The Syrian crisis has led to not only physical wounds, but also psychological wounds. Millions of Syrians have been witness to widespread destruction, violence, and loss. Countless Syrian civilians now suffer from Post-Traumatic Stress Disorder. In response to this mental health epidemic, SAMS supports psychosocial programming that facilitates therapeutic healing strategies and mental wellbeing. SAMS supports a psychosocial center in the besieged area of the Erbeen in East Ghouta that helps children use art and play therapy to heal. Group and individual counseling sessions are provided to children. The psychosocial center supported 3,245 children in 2014.
### 11 Referral Hospitals

SAMS supports referral hospitals that provide specialized care to patients following initial trauma treatment. These facilities target the varying complexities of individual cases resulting from conflict-related injuries. SAMS supports 4 referral hospitals in Dera’a, East Ghouta, and Quneitra which receive patients with specific needs that are unable to receive the care needed from other facilities. A total of 6,927 people were treated at these referral hospitals in 2014. These referral hospitals are specifically able to provide neonatal and obstetric care for patients. The facilities ensure that women and newborn children receive specialized treatment needed during vulnerable times in both mother and infant lives.

![Image of a hospital setting with medical staff]

### 12 Specialty Treatment

In addition to the basic medical care provided throughout Syria, SAMS supports multiple clinics and programs that offer specialty care. These facilities bring unique treatment to Syrian civilians in need. In Aleppo, SAMS supports an artificial limb program, which provides hands, arms, and legs for Syrians who have sustained conflict related injuries. Similarly, in Idlib, SAMS supports an orthopedic center which treats various injuries related to the musculoskeletal system.

![Image of a medical facility with patients and doctors]

### 13 Telemedicine

SAMS is spearheading innovative telemedicine strategies to use the skills of Syrian American physicians to assist and support doctors inside of Syria. Critical care specialists based in the United States use video cameras, Skype, and satellite internet to consult, advise, and support local healthcare professionals. SAMS’s members assist doctors inside Syria to provide high quality care to trauma victims, from advice on specialized to real time surgery consultations.

![Image of a telemedicine setup]

### 14 Trauma Care

Victims of violence and bombings often require immediate major treatment or surgery. SAMS supports trauma facilities located in direct proximity to emergency conflict-prone areas. These trauma centers are directly linked to ambulance referral systems, which are able to transport patients quickly. Though these facilities operate with minimal equipment and light, they provide a crucial service. SAMS currently supports 35 trauma care facilities in Aleppo, Idlib, Hama, Homs, Dera’a, Quneitra, and East Ghouta.
Syria Programs by Governorate

SAMS provides support inside of Syria based on local needs assessments, taking into consideration logistical, operational, and safety concerns.

**Latakia**
- Primary health care: 4
- OBGYN: 2
- Beneficiaries: 22,912

**Hama**
- Primary health care: 3
- Trauma: 2
- ICU: 1
- OBGYN: 1
- Mobile: 1
- Dental clinic: 1
- Beneficiaries: 89,121

**Quneitra**
- Primary health care: 2
- Trauma: 2
- Beneficiaries: 321,699

**Dera’a**
- Primary health care: 16
- Trauma: 18
- OBGYN: 2
- Referral hospital: 2
- Beneficiaries: 321,699
### Aleppo
- Primary health care: 4
- Trauma: 2
- ICU: 4
- OBGYN: 2
- Dental clinic: 3
- Nursing school: 1
- Beneficiaries: 196,722

### Idlib
- Primary health care: 2
- Trauma: 3
- ICU: 7
- OBGYN: 2
- Orthopedic: 1
- Mobile: 4
- Blood banks and labs: 1
- Dialysis: 3
- Dental clinic: 4
- Polyclinic: 1
- Rehabilitation center: 1
- Beneficiaries: 179,180

### East Ghouta
- Primary health care: 9
- Trauma: 6
- ICU: 1
- Psychosocial: 1
- Mobile: 4
- Blood banks and labs: 5
- Dialysis: 1
- Physiotherapy: 1
- Pediatric: 1
- Referral hospital: 1
- Dental clinic: 1
- Beneficiaries: 164,740

### Homs
- Primary health care: 1
- Trauma: 2
- OBGYN: 2
- Dialysis: 1
- Dental clinic: 2
- Beneficiaries: 57,956
Jordan Programs

SAMS’s REGIONAL OFFICE IN AMMAN IS A HUB FOR SAMS’S work in Jordan and southern Syria. The regional office monitors, coordinates, and communicates with facilities in southern Syria to ensure that they remain stocked with supplies, equipment, and general support. Additionally, SAMS operates several medical relief programs in Jordan. These programs target vulnerable refugee populations, aimed at providing free medical services to Syrian refugees. In 2014, SAMS programs in Jordan treated 129,629 beneficiaries.
Al-Zaatari Camp

SAMS operates the largest medical facility in Al-Zaatari Camp, a multi-specialty clinic that sees an average of 500 patients every day. This facility sees over half of the patients who seek treatment in the camp. In 2014, it served 122,221 patients. The multi-specialty clinic in Al-Zaatari offers internal medicine, pediatric care, surgery, OB/GYN, dermatology, ear/nose/throat, ophthalmology, dental care, and physiotherapy. Clinic staff make home care visits as well to ensure that patients receive needed rehabilitation care.

Medical Missions

SAMS’s members and volunteers in the United States take frequent medical missions to Jordan to support ongoing medical relief programs. Missions allow health workers of different specialties to volunteer their skills. Volunteers visit the SAMS clinic in Al-Zaatari Camp and other programs in Jordan with the help of the regional office in Amman. In March 2015, SAMS facilitated its largest medical mission yet with 32 volunteers from multiple specialties. From the various surgical procedures, dental work, internal medicine cases, pediatric evaluations, dialysis consultations, and psychological care, the medical mission of just six days treated 2,430 beneficiaries.
3 Psychosocial Care

Psychological and mental healthcare is vital for Syrian refugees in Jordan. SAMS operates 1 psychosocial program in Amman. This program uses art and play therapy such as photography, painting, and creative workshops to help individuals deal with the effects of trauma.

4 Cross-Border Support

SAMS’s regional office in Amman works to send medical aid from Jordan into facilities and programs in southern Syria. These shipments include vital medicine, equipment, and supplies, which are particularly important for communities under siege as well as civilians throughout the region. In 2014, 24 containers were shipped from Jordan to support SAMS-supported facilities in Syria.
Lebanon Programs

OVER 1 MILLION SYRIAN REFUGEES ARE REGISTERED IN LEBANON, an overwhelming figure given Lebanon’s small size and population. The crisis in Syria has taken an intense toll on Lebanon and its local communities, as well as Syrian refugees in the country. SAMS operates a small office in Lebanon to help provide Syrian refugees with medical relief. Despite the small size of our office, our staff in Lebanon, with the support of volunteers in the United States, have been able to accomplish significant tasks in the past years. In 2014, SAMS programs and facilities in Lebanon reported 144,854 beneficiaries.

144,854 direct beneficiaries
17,435 dental clinic beneficiaries
1 Dental Clinics

SAMS OPERATES 2 DENTAL CLINICS IN Tripoli AND BEKAA VALLEY. SAMS VOLUNTEERS from the United States also visit these clinics during medical missions to ensure refugees, particularly children, receive this important service. In 2014, the SAMS dental clinic in Bekaa Valley served 9,600 patients and the dental clinic in Tripoli served 7,835 patients.

2 Medical Containers

CLINICS OFTEN FACE SHORTAGES OF MEDICAL CONSUMABLES AND EQUIPMENT TO treat the high number of refugees seeking care. In response, SAMS procures, collects, and sends shipments of essential equipment to clinics to distribute to areas with the highest needs. In early February of 2015, the first medical container solely containing medical supplies was shipped from the United States to Lebanon, bringing supplies to 8 medical centers in Lebanon.

3 Medical Missions

SAMS’s NETWORK OF DOCTORS IN THE United States frequently volunteer their services in medical and surgical mission trips to Lebanon to help support programs and physicians on the ground with knowledge, expertise, and capacity needed to handle the often overwhelming caseloads. U.S.-based physicians travel to the country to treat patients, perform surgeries, and visit areas with high volumes of refugees. Many of these medical missions coordinate with other organizations in Lebanon in order to best deliver the services needed to Syrian refugees. In 2014, 28 SAMS volunteers took 4 medical mission trips to Lebanon, including a trip solely planned for the provision of dental care. These trips assisted 1,076 Syrian refugees in Lebanon.

4 Multi-Specialty Clinics

MULTI-SPECIALTY CLINICS ALLOW SYRIAN refugees to access both basic and specialized care. These clinics offer free treatment and are equipped to handle a variety of cases. SAMS operates 2 multi-specialty clinics in Lebanon. In the central Bekaa Valley, where many refugees have settled, SAMS operates a large clinic, which offers internal medicine, OB/GYN, pediatrics, general surgery, physiotherapy, dental care, orthopedics, x-rays, ultrasound, psychiatry, ophthalmology, urology, and basic lab work. The Bekaa Valley clinic treats an average of 4,000 patients each month. SAMS also operates a clinic in Tripoli which offers primary care, pediatrics, dental care, OB/GYN, orthopedics, hematology, x-rays, basic lab work, and dialysis treatment. The Tripoli clinic sees around 6,500 patients each month.

STORIES FROM THE FIELD The Palestine Children’s Relief Fund

In September 2014, SAMS and the Palestine Children’s Relief Fund (PCRF) worked together for a maxillofacial mission in Tripoli, Lebanon. This mission visited a hospital in a refugee camp to treat patients from the age of seven months to 54 years old. Cleft lip birth defects in infants and shrapnel wounds in many older patients left many in need of reconstructive surgery. Doctors screened 42 cases total and recommended 15 of for surgery, which doctors were able to complete in 3 days. The surgeries included primary lip repair labioplasties, mandibular reconstruction, and primary palatoplasty. SAMS and PCRF plan to continue collaborations in the future to bring Syrian refugees the care they deserve.
5 Psychosocial Care

Many, if not all, Syrian refugees in Lebanon experience the effects of trauma. Refugees of all ages in Lebanon often experience new psychological difficulties when it comes to adapting to their new environment. SAMS sponsors a psychosocial care program in Bekaa Valley to help refugees heal, work through trauma, and adjust to life in Lebanon. This psychosocial program works with roughly 200 beneficiaries each month, and offers multiple specialized programs for women, children, and victims of detention.

6 Surgical Center

SAMS supports a surgical center in Tripoli, the only surgical center for Syrian refugees in Lebanon. The surgical center, which offers free services to Syrian refugees, is equipped to provide treatment within multiple areas of surgery such as orthopedic, ear/nose/throat (ENT), urology, ophthalmology, plastic and reconstructive, as well as general surgery. In 2014, this center saw an extremely high patient rate and was able to perform 2,233 surgeries.

7 Winterization Kits

SAMS partners with several organizations on the ground in Lebanon who distribute winterization kits in regions such as Arsal and Bekaa Valley. SAMS members were able to raise $40,000 to support the work of these organizations for the procurement and distribution of winterization kits for refugees to help many survive the winter.
Turkey Programs

SAMS's office in Turkey works to provide relief for both Syrian refugees and Syrian medical personnel based in northern Syria who travel back and forth to Turkey. SAMS works in Turkey to provide cross-border operational support, treat Syrian refugees in dental clinics, and conduct medical training courses essential for skill development of doctors on the ground. SAMS’s office in Turkey has fostered strong partnerships with other INGOs and UN agencies on the ground.

48,000+ dental clinic beneficiaries
1 Dental Clinics

SAMS has established and supported 7 dental clinics in or close to refugee camps in Turkey that are supervised and operated by a Syrian American dental team. In 2014, SAMS dental clinics in Turkey saw over 48,000 beneficiaries.

In February 2015, SAMS was humbled to name one of its clinics after Deah Barakat, Yusor and Razan Abu-Salha, three UNC students who were tragically killed in North Carolina on February 10, 2015. The clinic was named in memory of their committed work for SAMS’s dental medical missions in refugee camps along the Syrian border. Barakat, who planned to return to Turkey in summer 2015 on the Project Refugee Smiles medical mission, spearheaded a crowdfunding platform that raised over $500,000 for dental care for Syrian refugees in Turkey. SAMS will never forget the compassion and generosity of these young humanitarians.

2 Medical Training Program

SAMS provides comprehensive medical training seminars to Syrian doctors in Turkey. These training programs began in August 2012 and take place every three months with the purpose of training medical personnel from the field on advanced critical care skills such as trauma care, gender-based violence recognition, and specialty care like dialysis. The courses have been expanded to include a primary healthcare component, as well as training for nurses. The courses are taught in Arabic and led by U.S. physicians of multiple specialties who have an in-depth understanding of the challenges faced by Syrian medical workers. Courses pair medical lectures with hands-on training in order to provide Syrian medical personnel with comprehensive instruction that can be brought back to the field. In 2014 and 2015, SAMS conducted five courses with 163 participants.

3 UN Cross-Border Support

Following the passing of UN Resolution 2165, which allows cross-border and cross-line routes for humanitarian aid, SAMS has served as an implementing partner for the WHO, UNICEF, and UNFPA. From August 2014 until March 2015, SAMS sent 24 trucks with UN shipments to IDP camps and medical facilities in five governorates of northern Syria. These trucks were filled with supplies to address the diverse needs of the civilian populations in Syria such as surgical kits, emergency health kits, reproductive health kits, and female dignity kits.
The Following is Syrian American Medical Society's Statement of Activities for years ended December 31, 2013 and 2014.\(^1\)

<table>
<thead>
<tr>
<th>UNRESTRICTED NET ASSETS</th>
<th>Statement of Activities</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support and other contributions</td>
<td>Contributions</td>
<td>$5,757,215.23</td>
<td>$7,372,748.85</td>
</tr>
<tr>
<td></td>
<td>Grants</td>
<td>$2,136,097.38</td>
<td>$4,349,840.34</td>
</tr>
<tr>
<td></td>
<td>Gifts in kind</td>
<td>$3,895,100.00</td>
<td>$2,091,766.00</td>
</tr>
<tr>
<td>Total support and other contributions</td>
<td></td>
<td><strong>$11,757,547.61</strong></td>
<td><strong>$13,845,220.19</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EXPENSES</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services</td>
<td>Turkey Regional Office/Northern, Midwest, and Coastal Regions of Syria</td>
</tr>
<tr>
<td></td>
<td>Jordan Regional Office/Southern Syria, Damascus Suburbs, and Refugees in Jordan</td>
</tr>
<tr>
<td></td>
<td>Lebanon Regional Office and Refugees in Lebanon</td>
</tr>
<tr>
<td></td>
<td>United States</td>
</tr>
<tr>
<td>Total program services</td>
<td></td>
</tr>
<tr>
<td>Supporting Services</td>
<td>Fundraising</td>
</tr>
<tr>
<td></td>
<td>Administrative and general</td>
</tr>
<tr>
<td>Total expenses</td>
<td></td>
</tr>
</tbody>
</table>

Increase in Unrestricted Net Assets | $672,987.63 | $1,648,958.67 |

<table>
<thead>
<tr>
<th>NET ASSETS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning of Year</td>
<td>$656,007.37</td>
</tr>
<tr>
<td>End of Year</td>
<td>$1,328,995.00</td>
</tr>
</tbody>
</table>

\(^1\) 2014 financial information is unaudited, preliminary and subject to adjustments and modifications.

Funds Allocation

- **95 cents** of every dollar donated went directly into our programs in 2013
- **94 cents** of every dollar donated went directly into our programs in 2014
Annual Medical Expenses

<table>
<thead>
<tr>
<th>Service</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physicians and Syrian Staff Salaries</td>
<td>$1,443,987</td>
</tr>
<tr>
<td>Medical Supplies</td>
<td>$1,634,536</td>
</tr>
<tr>
<td>Hospital Fuel Program</td>
<td>$645,765</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>$25,155</td>
</tr>
<tr>
<td>Chemical Weapons Protection</td>
<td>$10,945</td>
</tr>
<tr>
<td>Psychosocial Program</td>
<td>$252,804</td>
</tr>
<tr>
<td>Nephrology Projects</td>
<td>$272,962</td>
</tr>
<tr>
<td>Ophthalmology Projects</td>
<td>$18,052</td>
</tr>
<tr>
<td>Ambulance</td>
<td>$71,249</td>
</tr>
<tr>
<td>Intensive Care Unit</td>
<td>$431,661</td>
</tr>
<tr>
<td>Birth Centers and Neonatal Units</td>
<td>$290,150</td>
</tr>
<tr>
<td>Primary Care Centers (Poly Clinics)</td>
<td>$427,727</td>
</tr>
<tr>
<td>Patients and Wounded Program</td>
<td>$232,507</td>
</tr>
<tr>
<td>Medical Trainings and Missions</td>
<td>$79,766</td>
</tr>
<tr>
<td>Mobile Clinics</td>
<td>$225,046</td>
</tr>
<tr>
<td>Dental Clinics</td>
<td>$108,929</td>
</tr>
<tr>
<td>Polio Vaccination</td>
<td>$295,681</td>
</tr>
<tr>
<td>Winterization IPDs</td>
<td>$261,706</td>
</tr>
<tr>
<td>Warehousing and Shipping</td>
<td>$386,126</td>
</tr>
<tr>
<td>Zaatari Camp</td>
<td>$208,630</td>
</tr>
</tbody>
</table>

STORIES FROM THE FIELD

Nursing School

Staff shortages continue to be one of the largest problems plaguing medical facilities in Syria. SAMS established a nursing school in October 2014 in Aleppo to train nurses on various techniques and practices to treat the diverse needs of patients on the ground. The schools educate nurses to address the limited numbers of specialized doctors available for care and treatment.

In its initial phase, the school trained 74 students, 58 male and 18 female, on subjects such as practical nursing, nursing fundamentals, anatomy, and physiology. Students study for four to eight months and have the opportunity to specialize in areas such as midwifery and anesthesia. Thus far the school has completed one Anesthesia Technician Assistant preparation course, four First Aid courses, and four Treatment of War Injuries courses. The Nursing School provides vital education and skills for the development and rebuilding of the healthcare system in Syria, enriching the lives of both the patients who rely on medical treatment and the doctors who provide these services.
U.S. Work

At its core, SAMS is a grassroots member organization, with 16 current chapters and over 515 active members.
Programs

SAMS’s network of doctors in the United States connect in order to create new programming and help give strategic direction to work on the ground to best serve Syrians in need.

Scholarship Program
The scholarship program, established in 2006, supports Syrian medical residency applicants through the provision of interest-free loans. SAMS has awarded 113 scholarships over the past eight years. In 2014, with the contributions of prior scholarship applicants alongside the generous donations from members, 28 Syrian graduates received scholarships in amounts ranging from $1,000 to $3,500, with the total scholarship fund distribution reaching $71,500.

Observership Program
The SAMS Clinical Observership Program seeks to assimilate International Medical Graduates (IMGs) to American medical practices in order to prepare them for residency. The program follows American Medical Association International Medical Graduates (AMA-IMG) guidelines to best prepare incoming graduates for residencies in the United States. The observership program helps students with lessons on typical physician-patient interaction and examination, professional communication among facility staff, colloquialisms used in the workplace, exposure to electronic medical records, and cultivation of the six competencies recommended by the Accreditation Council for Graduate Medical Education (ACGME). In 2014, 12 graduates participated in the program.

Avicenna Journal of Medicine
SAMS sponsors a peer-reviewed medical journal that releases new issues every quarter. To date, SAMS has released 16 issues with the purpose of ensuring an accessible PubMed indexed journal in which members can publish their research and work in their various specialties.

Mentorship Program
SAMS recently launched a mentorship program to connect Syrian physicians in the United States with new Syrian graduates to receive guidance as they undergo training. In early 2015, the mentorship program launched a complementary online evidence-based medicine webinar to provide accessible content to support new professionals in their residency programs. The program had 36 participants by May 2015.

Conferences and Symposiums
Every year, SAMS holds a national conference, an international conference, and as of 2014, a national symposium. In 2014 and 2015, SAMS held its 14th Annual International Conference in Gaziantep, Turkey and its 4th National Conference in Scottsdale, Arizona. In the fall of 2014, SAMS held its 1st National Symposium in Houston, Texas. These events bring together SAMS members and often field doctors for educational programming, trainings, and high level speakers to keep SAMS volunteers up to date on the various medical situations and practices for both Syria and general practice. In 2014, the 1st National Symposium gala raised $700,000 and in 2015, the 4th National Conference gala raised $1.7 million.
Advocacy and Media

IN ADDITION TO MEDICAL AND HUMANITARIAN WORK ON THE ground, SAMS has become a leader in advocacy and policy-maker engagement. From briefings on Capitol Hill to meetings with UN delegations, SAMS effectively advocates at the local, national, and global levels and engages a broad constituency to create political will around saving Syrian lives. SAMS has been an advocate for an increase in humanitarian aid and access, tangible civilian protection mechanisms, an end to the targeting of healthcare in Syria and across the world, regional and international support for Syrian health workers, support for Syrian refugees and host communities, a referral of all war crimes committed to the International Criminal Court or an ad hoc international tribunal for Syria, and more.

1 High Level Engagement

SAMS members and staff periodically meet with policy makers at the Department of State, Department of Homeland Security, Department of Treasury, National Security Council at the White House, U.S. Mission to the UN, UN delegations, and Congressional leaders. In the past year, SAMS has met with Ambassador Samantha Power; UN Special Envoy Staffan De Mistura; National Security Advisor Susan Rice; Turkish Prime Minister Ahmet Davutoglu; National Security Council Senior Director Rob Malley; U.S. Special Envoy to Syria Daniel Rubinstein; and many other senior officials and offices. SAMS has previously met with President Barack Obama and Secretary of State John Kerry to discuss the humanitarian needs of Syria.

SAMS members meet with U.S. Ambassador to the UN Samantha Power.
2 UN Advocacy

SAMS members and staff are in constant contact with UN delegations and UN agencies. We have developed strong working relationships with many UN missions, having near monthly meetings with them and hosting briefings for key UN Security Council members.

UN General Assembly Week
Beginning in mid-September 2014 during the time of the UN General Assembly, a group of SAMS staff and Advocacy Committee members met with various delegations to the UN. The major topics addressed were attacks against medical facilities and personnel, accountability, full implementation of UN Resolutions 2139 and 2165, and support for humanitarian aid efforts.

UN Security Council Briefing on Medical Neutrality in Syria hosted by Spain Mission to UN
On March 18, 2015, SAMS spoke at a briefing alongside Physicians for Human Rights for UN Security Council members about medical neutrality in Syria. The briefing was attended by a diverse and important group of Security Council members. SAMS President Dr. Zaher Sahloul and Dr. Majed, a SAMS-affiliated doctor from East Ghouta, gave remarks about attacks on healthcare and life under siege.

UN General Assembly Briefing on Siege in Syria hosted by Qatar Mission to UN
On March 19, 2015, SAMS launched the important data and information presented in the "Slow Death" report to UN member states in a briefing hosted by Qatar and sponsored by the U.S., UK, Turkey, Italy, Jordan, and Saudi Arabia. Member states were very responsive to the statistic of over 640,200 people living under siege.

UN Security Arria-Formula Meeting on Chemical Attacks
On April 16, 2015, SAMS President Dr. Zaher Sahloul and SAMS's Idlib coordinator Dr. Mohamed Tennari testified in front of the United Nations Security Council about the chlorine attacks in Idlib. The meeting was held by Ambassador Samantha Power, and Security Council members addressed the importance of accountability and attribution for the chemical attacks.
2 Congressional Advocacy

SAMS STAFF AND MEMBERS MEET WITH members of Congress in district and in Washington, DC. We have held numerous briefings and hearing with key members and committees, and have developed close working relationships with many offices in the House and Senate.

House Foreign Affairs Subcommittee Hearing on the Humanitarian Crisis in Syria

In May 2014, SAMS’s President Dr. Zaher Sahloul spoke at a hearing titled “The Humanitarian Crisis in Syria: Views from the Ground.” The meeting was presided by Ileana Ros-Lehtinen, Chairman of the House Foreign Affairs Subcommittee on Middle East and North Africa, and included other witnesses from CARE, Mercy Corps, Global Communities, and Save the Children. The hearing highlighted obstacles faced on the ground by various NGOs and effectiveness of U.S. assistance reaching populations in need.

Dr. Majed from East Ghouta: “People want to live, and medical staff are working to save lives. We are doing what we can do, not what we have to do because it is not only about us; there are many people preventing us from getting the equipment necessary to do our jobs because of the siege. Many people are dying from the lack of medical supplies we have to treat them. Doctors and hospitals are aggressively targeted in Syria.”

STORIES FROM THE FIELD Medical Care Under Siege

Long-term sieges of towns in Syria have been used as a tactic of war since 2012. Sieges have a devastating impact on the people trapped inside, as they are denied food, clean water, electricity, and healthcare. This has confined more than 640,200 people to horrific conditions. Doctors and medical personnel have stepped up to face challenges and continue to provide the medical services and treatment necessary to keep the populations alive. SAMS supports 60% of all healthcare and 75 out of the 95 physicians inside besieged East Ghouta.

Dr. Majed from East Ghouta: “People want to live, and medical staff are working to save lives. We are doing what we can do, not what we have to do because it is not only about us; there are many people preventing us from getting the equipment necessary to do our jobs because of the siege. Many people are dying from the lack of medical supplies we have to treat them. Doctors and hospitals are aggressively targeted in Syria.”
In October 2014, Dr. Abdel Aziz, a SAMS-affiliated surgeon based in Aleppo, spoke at a Tom Lantos Human Rights Commission Briefing. He addressed the challenges of the partial siege in Aleppo, barrel bombs and air strikes, and the medical community’s response to targeted attacks.

Senate Human Rights Caucus Briefing on Medical Neutrality in Syria
On March 12, Dr. Majed, a SAMS-affiliated doctor from Eastern Ghouta, spoke at a briefing with the Senate Human Rights Caucus. The topic was on medical neutrality in Syria, and Dr. Majed spoke about the medical situation under siege. Senator Coons, who co-leads the Caucus, attended and made remarks about the importance of civilian protection in Syria and the work of medical personnel.

House Foreign Affairs Committee Briefing on the Humanitarian Crisis in Syria
On March 17, 2015 SAMS spoke alongside Oxfam, Save the Children, and Mercy Corps at a HFAC briefing on the humanitarian and security challenges in Syria called "Shining a Light on Syria." The meeting was hosted by Chairman Royce’s office. SAMS highlighted the medical and humanitarian needs in Syria, as well as the need for the U.S. to take the lead in civilian protection.

Congressional Floor Speeches and Statements
SAMS and the work of our Syrian and Syrian American medical personnel have been mentioned in several Congressional floor speeches and remarks. In April 2015, Congressman Ted Poe of Texas mentioned the work of SAMS in a speech, highlighting SAMS’s President as “… one of the dozens of American doctors who have helped the wounded in this war. He has risked being arrested, tortured, and even killed for aiding the opposition. He has treated victims of these barrel bomb attacks.” Congressman Alex Mooney of West Virginia also highlighted the brave work of our Syrian medical personnel in a floor speech in April. Senator Dick Durbin of Illinois has highlighted SAMS’s work in Syria during several public remarks calling for civilian protection.

3 Campaigns

#WithSyria
SAMS has partnered with over 130 other NGOs to lead the #WithSyria campaign, urging world leaders to stand with civilians in Syria. SAMS is on the Steering Committee of the #WithSyria Coalition. In 2014, the #WithSyria campaign brought together celebrities, artists, policymakers, high level stakeholders, and thousands of grassroots supporters to call for a strengthened humanitarian response, civilian protection, and the prioritization of a political solution with human rights at its heart in Syria. In the fall of 2014, the #WithSyria coalition released a video called “In Reverse” that highlighted the effects of barrel bombs and reached over 800,000 people. For fourth anniversary of the crisis in Syria in March 2015, the #WithSyria Coalition led the "Turn the Lights Back on for Syria" campaign, which included a video that has reached over 500,000 people so far and a wide-reaching media strategy. This campaign received coverage in over 180 news outlets in over 40 countries, many in which SAMS was quoted. Dr. Majed, a SAMS-affiliated doctor from East Ghouta, was invited to speak alongside former Secretary of State Madeline Albright and International Rescue Committee CEO David Miliband in a telebriefing that launched this important campaign.
Life in Refuge
In March 2015, SAMS joined CARE, Oxfam, Save the Children, Islamic Relief, and Syrian Relief and Development for the “Life in Refuge” campaign and display in Washington, DC. This exhibit highlighted the plight of Syrian refugees through photography displays, a mock refugee tent, and interactive aspects encouraging attendees to send messages of hope to Syrian refugees.

Medics Under Fire
In April 2015, SAMS partnered with The Syria Campaign for a critical call for doctors, health workers, and medical students across the world to stand with Syrian medical workers. The website www.medicsunderfire.org and corresponding petition asks for medical professionals around the world to add their voice and echo the call to end barrel bombs and prioritize civilian protection in Syria. The campaign is both a show of solidarity with Syrian doctors and a call to action for the international community.

4 Reports

Implementing UN Cross-Border Aid to Syria Under UN Resolution 2165
In December 2014, SAMS released this report on our experience as a UN implementing partner of cross-border aid from Turkey under Resolution 2165, and provided policy recommendations to address the challenges that we have encountered.

Syrian Medical Voices from the Ground: The Ordeal of Syria’s Healthcare Professionals
In February 2015, SAMS launched “Syrian Medical Voices from the Ground: The Ordeal of Syria’s Healthcare Professionals” alongside the Center for Public Health and Human Rights at the Johns Hopkins Bloomberg School of Public Health. The report highlighted the voices and experiences of brave healthcare workers, targeted in Syria for practicing their medical work. SAMS used this report widely during our Congressional, State Department, National Security Council, and UN meetings, and it has been highlighted in briefings in the Senate, House, and UN. It received media coverage in Voice of America, NBC, and Syria Deeply.

Slow Death: Life in Syrian Communities Under Siege
In March 2015, SAMS launched “Slow Death: Life in Syrian Communities under Siege,” written by UN Advocacy Consultant Valerie Szybala. This report examined the effects of long-term siege in Syria and estimated that over 640,200 people were currently under siege, more than three times the UN estimate. Those under siege suffer from a systematic lack of food, water, electricity, and humanitarian and medical assistance. The report was covered in The New York Times, Washington Post, The Guardian, Al Jazeera, and more.
## Media

SAMS’s work has been featured in all of the major media outlets across the United States and many around the world. Between May 2014 and April 2015, SAMS was featured in 263 articles, including numerous op-eds by SAMS leaders, coverage of our role in the #WithSyria campaign, the launch of our report stating that over 640,200 Syrians were under siege, and the UN Security Council meeting highlighting chlorine attacks in Syria.

### Between May 2014 and April 2015, SAMS was featured in 263 articles.

### Arria Coverage

Following the April 16, 2015 Arria-Formula Testimony of Dr. Mohamed Tennari and Dr. Zaher Sahloul, SAMS was featured in over 130 media platforms across 28 different countries, including The New York Times, Foreign Policy, The Guardian, and CNN.

---

**Stories from the Field**

**Ahmed, 23 Years Old, in Douma, East Ghouta**

“I entered the Faculty of Pharmacy at Damascus University in 2010, but I had to end my studies in 2012, when I was already at the end of my second academic year. At the time, they were asking for everyone’s identity cards in Damascus, and young men from Douma were at great risk of arrest. So I preferred to stay in Douma and not return to university. I stayed there unemployed until it was completely freed from the Syrian forces. Two months after, I began to establish my own pharmacy in Douma, which was very difficult because of the scarcity of medicines and high prices. I don’t think I’ll ever get the chance to go back to school, but I hope that if I manage to stay alive through this.”

Photo and story courtesy Humans of Syria

---

Dr. Mohamed Tennari, SAMS’s Idlib Coordinator, appears on CNN following the UN Arria session.
Coalitions and Working Groups

SAMS is a member of numerous coalitions and working groups that collaborate on advocacy and operational planning.

U.S. Based Coalitions

**American Relief Coalition for Syria (ARCS)**
ARCS is a coalition of 20 non-political Syrian American led humanitarian organizations that provide multi-sector relief inside of Syria and to refugees in surrounding countries. Together, ARCS’s efforts have helped millions of Syrians. The programs of ARCS organizations cover the full range of humanitarian sectors, including community services, education, food and non-food items, health, protection, water/sanitation/hygiene, and women’s empowerment.

**#WithSyria Coalition**
The #WithSyria Coalition is a group of over 130 organizations from around the world that stand with Syrians caught in the conflict. This coalition is facilitated by Crisis Action, and provides key media, advocacy, and public engagement work to highlight the needs of Syrian civilians. SAMS is on the Steering Committee for the #WithSyria Coalition.

**InterAction**
InterAction is a coalition of more than 160 humanitarian organizations working on disaster relief, refugee assistance, and development programs worldwide. InterAction convenes a Syria Working Group to speak about joint humanitarian challenges and opportunities, and to strategize around advocacy and public messaging as a community.

**Multifaith Alliance for Syrian Refugees in Jordan**
The Multifaith Alliance is a group of faith-based and secular organizations working to respond to the humanitarian crisis in Syria. This coalition aims to raise public awareness about the crisis, as well as fund organizations and unique collaborative partnerships that directly address the needs of Syrian refugees in Jordan.

**Safeguarding Health in Conflict Coalition**
The Safeguarding Health in Conflict Coalition is a group of international NGOs working to protect health workers, services, and infrastructure. The coalition aims to raise awareness about the problem of attacks on health workers, work with global stakeholders to strengthen the documentation of such attacks and increase accountability for violators, and empower local groups to play a role in documenting and reporting such attacks. SAMS is on the Steering Committee for the Safeguarding Health in Conflict Coalition.

**Global Mental Health Advocacy Working Group**
The Global Mental Health Advocacy Working Group is an NGO coalition co-founded by the Center for Victims of Torture and the International Medical Corps dedicated to advancing the prioritization, quality, and availability of mental health services in humanitarian settings.
Field Based Coalitions

**NGO Forum**
The NGO Forum connects both local and international NGOs, UN partners, and other actors in the humanitarian field who are working in northern Syria and southern Turkey. The forum, which operates out of Turkey, facilitates information sharing and coordination between all organizations in order to prioritize and manage all needs for Syria’s vulnerable populations.

**Syria INGO Regional Forum (SIRF)**
The Syrian INGO Regional Forum (SIRF) connects INGOs working in the humanitarian sphere and promotes coordination among its members in order to best address the needs of Syrians in multiple sectors of response. Through collaboration, members are able to share priority information, and use knowledge on the ground to influence humanitarian policy in the region for all populations affected by the crisis. SIRF is based in Jordan.

**Syrian NGO Alliance (SNA)**
The Syrian NGO Alliance (SNA) was created to connect Syrian groups operating out of Turkey for work in northern Syria. This group works to promote the presence of Syrian voices in planning and coordination of relief efforts, particularly as Syrian NGOs and partners are the primary implementers of operations within Syria. SNA seeks to ensure that Syrian NGOs have high stakes in all relief work in Syria in order to best address various situations throughout the country.

**Syria Relief Network (SRN)**
The Syria Relief Network (SRN) consists of various humanitarian relief groups working within Syria or in its surrounding host countries. The network advances humanitarian priorities through unified and coordinated communication among organizations working in the crisis. Additionally, the group maps and tracks situations on the ground so organizations can better execute operations in the field.

Awards and Recognition

**State Department**
Leading up to the fourth anniversary of the Syria crisis on March 13, 2015, the State Department formally recognized SAMS for its “truly heroic work to provide medical care inside of Syria.”

**American Muslim Health Professionals’ Humanitarian Service Award**

SAMs received the American Muslim Health Professionals (AMHP)’s Humanitarian Service Award at their 10th Annual Gala. This award recognized SAMS’s Syrian American healthcare professionals for their contributions to medical relief for the people of Syria.

**Syrian American Council’s Hakam Sibai Award for Service**

On December 13, 2014, SAMS received the Hakam Sibai Award for Service from the Syrian American Council for its work in medical relief inside Syria and in neighboring countries. The award also recognized the advocacy works of SAMS for the protection of medical facilities, healthcare workers, and volunteers.

**Proclamation from the Governor of Illinois**

On March 5, 2014, SAMS was officially recognized by the Office of the former Governor of Illinois, Honorable Pat Quinn. His statement proclaimed March 8 as Syrian American Medical Society Day in Illinois, to commend SAMS’s work providing medical and humanitarian services to those in need.
In Memoriam

IN 2014 AND EARLY 2015, SAMS LOST NUMEROUS MEDICAL STAFF, HEALTH WORKERS, volunteers, and friends dedicated to alleviating the suffering of the Syrian people. We are humbled to work with such brave and remarkable individuals. Their lives and their work will never be forgotten.

James Foley

"He gave his life trying to expose the world to suffering of the Syrian people."
—James Foley’s mother

JAMES FOLEY, WHO WAS KILLED IN AUGUST 2014, WAS COMMITTED TO AIDING THE people of Syria through both his reporting and his generosity. Foley, as part of a group of concerned journalists, raised nearly $12,000 for SAMS to pay for a much needed ambulance in Aleppo. The humanitarian work of this brave journalist will never be forgotten.

The ambulance that James Foley fundraised for SAMS.

Abdul-Rahman Peter Kassig

“What I do know is that I have a chance to do something here, to take a stand. To make a difference.”
—Abdul-Rahman Peter Kassig

ABDUL-RAHMAN PETER KASSIG WAS A 26-YEAR-OLD EMERGENCY MEDICAL TECHNICIAN working to save Syrian lives. Kassig had worked in Lebanon, Turkey, and in facilities in Syria bringing in much-needed medical supplies. He was killed in November 2014. Abdul-Rahman Peter Kassig made an immeasurable difference in Syria and his courage and compassion will be remembered by all those impacted by his work. In December 2014, SAMS established the Abdul-Rahman Peter Kassig Fund in his memory to support medics, doctors, and nurses in Syria and to continue the important work of saving Syrian lives and improving Syria’s healthcare.

Left, Abdul-Rahman Peter Kassig’s parents accept an award on behalf of their son at the 2015 SAMS National Conference.
Kayla Mueller

“For as long as I live, I will not let this suffering be normal, something we just accept.”
—Kayla Mueller

Kayla Mueller was a young humanitarian who dedicated her life to working for those in need. She was doing work with Syrian refugees in Turkey, and was captured in Aleppo in 2013 after leaving a Doctors Without Borders hospital. Sadly, she was killed in February 2015. Kayla’s selfless work is an inspiration and her impact on the lives of those in need will never be forgotten.

Deah Shaddy Barakat, Yusor Abu-Salha, and Razan Abu-Salha

“Have you ever felt helpless about the situation in Syria and felt like you can’t do anything about it? Well this is your opportunity to help. This summer, I’m embarking on a trip to Turkey with 10 dentists to help Syrian refugees in need of urgent dental care.... Let’s relieve their pain.”
—Deah Barakat

On February 10, SAMS mourned the loss of Deah Shaddy Barakat, 23; his wife, Yusor Abu-Salha, 21; and her sister, Razan Abu-Salha, 19. All three were shot and killed at the University of North Carolina Chapel Hill campus. Both Deah and Yusor had volunteered for SAMS in Turkey in the summer of 2014. Deah, a Syrian-American, was scheduled to go to Reyhanli, Turkey this summer with 10 other dental students to treat Syrian refugees as part of a project co-organized by SAMS. He had been generously raising money for SAMS’s dental programs in Turkey through a crowd-funding campaign called “Project Refugee Smiles,” which ultimately raised over $500,000. Deah was studying dentistry at the University of North Carolina, while Yusor and Razan were attending North Carolina State University. SAMS will never forget the remarkable compassion and generosity of these three extraordinary young people. Their lives impacted the world and all who knew them.
Health Workers Killed in Syria

In 2014, 178 health workers were killed in Syria, according to Physicians for Human Rights. We dedicate our work to these brave and selfless humanitarians.

<table>
<thead>
<tr>
<th>Health Professional</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses</td>
<td>34</td>
</tr>
<tr>
<td>Doctors</td>
<td>52</td>
</tr>
<tr>
<td>Medics</td>
<td>46</td>
</tr>
<tr>
<td>Medical Students</td>
<td>8</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>12</td>
</tr>
<tr>
<td>Dentistry Students</td>
<td>2</td>
</tr>
<tr>
<td>Veterinary Student</td>
<td>2</td>
</tr>
<tr>
<td>Ambulance Worker</td>
<td>11</td>
</tr>
<tr>
<td>Dentist</td>
<td>7</td>
</tr>
<tr>
<td>Veterinarians</td>
<td>3</td>
</tr>
<tr>
<td>Pharmacy Student</td>
<td>1</td>
</tr>
</tbody>
</table>

**Cause of Death**

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detention (Torture)</td>
<td>36</td>
</tr>
<tr>
<td>Detention (Execution)</td>
<td>3</td>
</tr>
<tr>
<td>Shooting</td>
<td>17</td>
</tr>
<tr>
<td>Warplane Shelling</td>
<td>82</td>
</tr>
<tr>
<td>Shelling</td>
<td>33</td>
</tr>
<tr>
<td>Explosion</td>
<td>1</td>
</tr>
<tr>
<td>Unknown</td>
<td>2</td>
</tr>
<tr>
<td>Kidnapping (Execution)</td>
<td>3</td>
</tr>
<tr>
<td>Field Execution</td>
<td>1</td>
</tr>
</tbody>
</table>

**Dr. Mohamed Majed Bari**

On October 15, 2014, Dr. Mohamed Majed Bari was killed while transporting patients in an ambulance along Castello Road in Aleppo. A heat-seeking missile targeted the vehicle, killing three civilians in the same attack. He was working with a humanitarian organization called “Saving Lives.” Dr. Majed had graduated from the Aleppo University Medical School with honors, and left behind his wife and two children.
Offices and Staff

Ohio
Lucine Saleh, MBA, MPH  Director of Operations
Jinan Shbat  Events Coordinator
Mohamad Khankan  Financial Manager
Rima Abdulmajid  Accounting Administrative Assistant

Washington DC
Mariam Klait  Grants Manager
Kathleen Fallon  Advocacy & Communications Manager
Christine Simontacchi  Society Manager
Sonia Hinson  Program Assistant
Amena Waseem  Program Assistant
Caroline Philhower  Program Assistant

Michigan
Jihad Alharash, MD  Fundraising Coordinator
Maysa Nabulsi  Logistics & Gift-in-Kind Coordinator

Turkey
Mazen Kewara, MD  Turkey Country Director
Tamer Monla-Hassan, MD  Assistant Director of Operations & Implementation
Ph. Hazem Rihawi  Advocacy & Media Manager
Imad Qwaydi  Financial Officer
Taleb Nasab  Financial Assistant
Tarek Alwan  Financial Assistant
Mahmoud Saeed  Financial Assistant
Mustafa Kattaa  Financial Assistant
Bassam Kassouma  Projects Manager
Ph. Ghaila Alwan  Program Project Manager
Ph. Imad Bazirbashi  Program Project Officer
Eng. Mohammad Ali AlHossni  Program Project Assistant
Anas Shaabani  Program Project Assistant
Mohamad Safsaf  Program Project Assistant
Bashir Sheikh Aleshra  Program Project Assistant
Usama Fannous  Administrative & Office Manager

Saleh Termanini  Human Resources Officer
Ph. Emad Sawas  Information Officer
Ph. Hussam Bayazid  Training Officer
Roukan Battal  Procurement Officer
Ph. Ahmad Rami Mokadam  Warehouse/Logistics Manager
Eng. AbdulHay Khatib  Warehouse Officer
Ph. Samer AlAhmad  Syria Field Manager

Jordan
Naser Hamood, MD  Operations Manager
Ghassan Khierallah, MD  Senior Project Officer
Mohammad Alhariri, MD  Human Resources Officer
Eman Soudah  Senior Financial Officer
Dina Dahabi  Financial Officer
Abdulrahman Mardini  Financial Officer
Saleh AlZoubi  Program Manager
Rania Alqenneh  Program Project Officer
Qayid Abumahfouz  Program Project Officer
Rowida Wa’ai Talakh  Program Project Officer
Shereen AlSheikh  Program Project Assistant
Abd Al-Kareem Al-Absi  Program Project Assistant
Enas Ghaze Al-Ayyoub  Program Project Assistant
Khali Abuwoood  Program Project Assistant
Mohammad Ali Hammoud  Program Project Assistant
Firas Abu Zahra  Program Project Assistant
Bassam Abazed, MD  Program Project Assistant
Basam Khlfat  Program Project Assistant
Wissam Afif Mohammad  Program Project Assistant
Kasem Naser Ballout  Program Project Assistant
Ali Alkhateeb  Program Project Assistant
Alaa Algabawy  Program Project Assistant

Lebanon
Bilal Toulyimat, DDS  Program Coordinator
Current Boards and Committees

Boards

**Society Board**
M. Zaher Sahloul, MD, President
Randa Loutfi, MD, Treasurer
Fuad Azrak, MD, Secretary
Ammar Ghanem, MD
Maher Azzouz, MD
Lina Murad, MD
Ahmad Tarakji, MD

**Foundation Board**
Abdul Zanabli, MD, *Former Foundation Chair*
Amjad Rass, MD, *Foundation Chair*
Opada Alzohaili, MD, *Foundation Vice Chair*
Randa Loutfi, MD, *Treasurer*
Ihsan Mamoun, MD, *Secretary*
Jaber Monla-Hassan, MD
Ammar Ghanem, MD
M. Zaher Sahloul, MD

Committees

**1st National Symposium Committee**
Fares Albitar, MD, *Co-Chair*
Tarek Kteleh, MD, *Co-Chair*
Amir Habra, MD, *Scientific Co-Chair*
Hussam Jenad, MD, *Scientific Co-Chair*
Mounzer Kassab, MD, *CME Coordinator*
Maher Azzouz, MD
Ahmad Sabouni, MD
Wareef Kabbani, MD
Aref Al-Kali, MD
Lucine Saleh, MBA, MPH, *Director of Operations*
Christine Simontacchi, *Society Manager*
Amena Waseem, *Program Assistant*

**4th Annual National Conference Committee 2014**
Fuad Azrak, MD, *Co-Chair*
Hussam Mihtar, MD, *Co-Chair*
Issam Khhayta, MD, *Scientific Chair*
Mounzer Kassab, MD, *CME Coordinator*
Aref Al-Kali, MD
Ahmad Azzouz, MD
M. Amir Habra, MD
Anas Kawayeh, MD
Abdul Ghani Sankari, MD
Lucine Saleh, MBA, MPH, *Director of Operations*

**14th International Conference Committee**
Maher Azzouz, MD, *Chair*
Ahmad Tarakji, MD, *Scientific Co-Chair*
Mahmoud Houmsee, MD, *Scientific Co-Chair*

**Advocacy Committee**
M. Zaher Sahloul, MD, *Chair*
Ahmad Tarakji, MD
Abdul Zanabli, MD
Rim Albezem, MD
Samer Attar, MD
Abdelmajid Katranji, MD
Souheil Habbal, MD
Maher Azzouz, MD
Zaki Lababidi, MD
George Netto, MD
Said Abu Samra, MD
Jaber Monla-Hassan, MD
Kathleen Fallon, *Advocacy & Communications Manager*
Valerie Szybala, UN Advocacy Consultant

**Bylaws Committee**
Ayman Saleh, MD, *Chair*
Mazen Kudaimi, MD
Abdulfatah Elshaar, MD

**Dental Committee**
Mohammad Nahas, MD, *Chair*
Omar Salem, MD
Imad Shami, MD
Nawaf Masri, MD
STORIES FROM THE FIELD
Mohammad, 24 years old, in East Ghouta

“I was studying dentistry, but I stopped during my fourth year in 2012. There was a shortage of doctors in Eastern Ghouta, so I volunteered two and half years ago. Then all the roads were closed—the siege had begun. In the beginning there were no centralized emergency points—just separated groups of medical aid teams who I volunteered with. Over time, a medical office was opened and I volunteered in the emergency department. After several months, I started volunteering with the Syrian Arab Red Crescent (SARC) where we divided our work between medical and emergency work, vaccines, psychological support, and school health lessons for children. The idea of psychological support for children is to try to make them feel happy through a variety of activities within our capabilities and ideas. We sometimes organize entertainment activities for the injured children who have a long road to recovery and get bored and upset. We organize small concerts when they feel up to it to try and make them feel better. I am delighted when I see a smile on their faces; that’s when I feel I did my job well and I’ve made a great achievement.”

Photo and story courtesy Humans of Syria
Lebanon Regional Medical Relief Committee
Ihsan Mamoun, MD, Chair
Ahmad Tarakji, MD
M. Zaher Sahloul, MD
Mohamad Sekkarie, MD
Yasser Wafaei, MD
Fadi Khankan, MD
Randa Loutfi, MD
Jihad Alharash, MD

Medical Publication Committee
Bassel Atassi, MD
Haitham Arabi, MD
Aghiad Al-Kutoubi, MD
Chadi Nabhan, MD
Mousa A. Al-Abbadi, MD
Naem Shahrouf, MD
Mazen Kherallah, MD
M. Chadi Alraies, MD
Mohamad Nour Alhosaini, MD
Mazen Saleh Ferwana, MD
Loay S Kabbani, MD
Anas Kawayeh, MD
Muhammad Arabi, MD

Medical Training Courses Committee
Jaber Monla-Hassan, MD, Chair
Ahmad Tarakji, MD
Wael Hakmeh, MD

Membership Committee
Souheil Habbal, MD, Co-Chair
Ayman Khaimim, MD, Co-Chair
Abdularazzak Chakaki, MD
Omar Salem, MD
Fuad Azrak, MD
Randa Loutfi, MD
Abdulfattah Alshaar, MD
Shadi Latta, MD
A. Osama Rifai, MD

Nephrology Committee
Oussama Rifai, MD, Chair
Mohamed Sekkarie, MD
Anas Kayal, MD
Khaledoun Soudan, MD
Fahd Alsaghir, MD
Majd Isreb, MD
Akram Almakki, MD
Abdul Zanabli, MD
Lina Murad, MD

Nomination Committee
Ayman Saleh, MD, Chair
Abdul Ghani Sankari, MD
Yahia Abdul-Rahim, MD
Abdulrahma Elshaar, MD
Mohamad Najib Barakat, MD

Online Courses Committee
Bassel Atassi, MD
Fares Alahdab, MD
Tareq Alyousef, MD
Mamoun Abdoh, MD

Primary Care Committee
Aref Al-Kali, MD, Chair
Souheil Habbal, MD
Abdul Zanabli, MD

Psychosocial Committee
Mohammad K. Hamza, MD, Chair
Yassar Kanawati, MD
Maher Azzouz, MD
Ammar Trabulsi, MD
Bretina Alashkar, MD

Research & Data Committee
Wasim Maziak, MD, Chair
Ahmad Tarakji, MD
M. Zaher Sahloul, MD
Fouad M. Fouad, MD
Adam Coutts, MD
Abdul Ghani Sankari, MD
Maher Azzouz, MD
Taha Kass-Hout, MD
Hind Alhinnawi, MD
Aula Abbara, MD
Bassel Atassi, MD
Fuad Azrak, MD

Scholarship & Observership Committee
Bassel Atassi, MD, Chair
Randa Loutfi, MD
Shadi Latta, MD
Mamoun Abdoh, MD
Tarek Kteleh, MD
Aref Al-Kali, MD

Supplies Chain & Medication Committee
Wael Khouli, MD, Chair
Najib Barakat, MD
Amjad Rass, MD
Fares Bitar, MD
Bassel Termanini, MD
Abdulrazzak Chakaki, MD
Mazen Kewara, MD, Turkey Country Director
Maysa Nabulsi, Logistics & Gift-In-Kind Coordinator
Ahmad Rami Moqdom, Warehouse/Logistics Manager

Telemedicine Committee
Anas Moughrabieh, MD
Jaber Monla-Hassan, MD

Trauma & Critical Care Committee
Jaber Monla-Hassan, MD, Chair
Anas Moughrabieh, MD
Abdul Ghani Sankari, MD
Bassel Atassi, MD
Ammar Ghahem, MD
Abdalmajid Katranji, MD
M. Zaher Sahloul, MD
Anas Alsakass, MD
Tarek Zaza, MD
Maher Saqqur, MD

Turkey & Northern Syria Regional Medical Relief Committee
Amjad Rass, MD, Chair
Mazen Kewara, MD, Turkey Country Director
Abdul Zanabli, MD
Yahia Abdul-Rahim, MD
Lina Murad, MD
Mohammad Nahas, MD
Randa Loutfi, MD
Bassel Termanini, MD
Feras Bitar, MD
Wael Khouli, MD
Aref Al-Kali, MD