

## **2018 Physician of the Year Award Nomination Form**

### **Nominate a Physician Today!**

**The 2018 Physician of the Year Award** will recognize a physician who works to bring wellness, healing and hope to patients and families.

Physicians will be honored at the Hilo Medical Center Foundation's 16<sup>th</sup> Annual Wine, Cheese, Chocolate, & MORE! Gala on Saturday, November 3, 2018.

### **Eligibility Requirements for Candidates:**

A physician who:

- Provides his/her patients with compassionate, comprehensive and caring medicine on a continuing basis.
- Is directly and effectively involved in community affairs and activities that enhance the quality of his/her community.
- Provides a credible role model professionally and personally to his/her community, to other health professionals, and residents and medical students.
- Is in good standing in his/her medical community.
- Those physicians nominated previously and not selected can be nominated again this year. Prior awardees may not be nominated.  
(A list of prior awardees is available at [www.hilomedicalcenterfoundation.org](http://www.hilomedicalcenterfoundation.org) )

### **Due Date and Submission Information:**

- The awards committee will consider all nominations that are received by **September 15, 2018**.
- Complete and submit nomination form in as much detail as possible. We encourage nominators to speak with the nominated physician to gather complete details of physician's work in order to fully complete each question (Please avoid one sentence answers to the questions).
- Submit physician's Curriculum Vitae/ Resume; if possible.

**Please Note:** Fill out the form completely and send to:

Hilo Medical Center Foundation

Attn: Lisa Rantz

1190 Waianuenue Avenue

Hilo, HI 96720

Or by email to [lrantz@hhsc.org](mailto:lrantz@hhsc.org)

**Nominator's Contact Information:**

Name:	
Title:	
Department/Organization:	
Address:	
City & Zip:	
Phone:	
Email:	

**Physician's Contact Information:**

Name:	
Title:	
Specialty:	
Address:	
City & Zip:	
Phone:	
Email:	

How does this physician provide patients with compassionate, comprehensive and caring medicine on a continuing basis?

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How is this physician involved in his/her community?

Explain how this physician is a credible role model professionally and personally to his/her community, to other health professionals, residents and medical students:

What characteristic(s) make this physician unique?

Any other reasons you're nominating this physician please share:

**THANK YOU FOR YOUR NOMINATION!** The winner will be announced no later than September 30, 2018.