

From my perspective

I am delighted that for the second year in a row, the *July Bulletin* is devoted largely to issues of importance to, and the activities of, the members of the Resident and Associate Society of the American College of Surgeons (RAS-ACS). This group is a vital component of the College that represents the future of this organization and of our profession in general. In the following pages, members of the RAS and ACS President Edward R. Laws, MD, FACS, address the following issues of relevance to young surgeons: unity in surgery, ACS member benefits, the College as a forum for collaboration, truncated surgical training, and volunteerism.

In addition to providing our younger members with this annual forum for communicating with their colleagues of all ages, the College is working harder than ever to be an organization that represents the interests and concerns of young surgeons, as well as those of more seasoned professionals. This objective has not always been at the top of this organization's priority list. It was only a few years ago that the College formed the Candidate and Associate Society, which evolved into the RAS-ACS just last year to better reflect the inclusiveness of the group.

One of the initial goals of the RAS-ACS was to provide opportunities for residents and Associate Fellows of the College to be exposed to the leadership structure of the College. To this end, the College has designated seats on many of its standing committees for members of the RAS-ACS. We intend to extend RAS-ACS representation to nearly all College committees within the next year or two so that young surgeons will have an even greater voice in advocacy and policymaking decisions that affect them.

Broadening influence

Over the last year, the RAS-ACS has, indeed, become an increasingly influential body, initiating a range of programs and activities that will prepare young surgeons to navigate the changing health care system and to define the evolving leadership role of the next generation of surgeons.

For example, our annual Spring Meeting is truly becoming a major forum of the surgical resident. In fact, the RAS-ACS sponsored the following three sessions Sunday, April 17, at the 2005 Spring Meeting: Clinical Abstract Presentations by Resi-



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idents, Spectacular Cases from Residents, and Surgical Jeopardy. Furthermore, this year's Spring Meeting included a Life After Residency program designed to arm senior residents with the skills and knowledge they will need to negotiate contracts, examine job offers, and prepare for and register for American Board of Surgery certification. This program will be offered again next year to fourth- and fifth-year residents in any surgical specialty.

The Clinical Congress also features special programs aimed at medical students and residents. In addition, the RAS-ACS sponsors an annual symposium during the Clinical Congress. The topic at the upcoming meeting in San Francisco, CA, will be Truncated Training for the Surgical Resident—The Future or Fallacy?

We are also developing a special curriculum for residents in their first postgraduate year that will appeal to all future surgeons, regardless of their specialty interest. This special curriculum is sched-

uled to become available in 2007 and will incorporate much of the information published in *ACS Surgery: Principles and Practices*, which is currently available online at no charge to Resident Members of the College.

The RAS-ACS is collaborating with the Division of Education to develop other courses that are relevant to resident education. Some concepts under consideration include a Residents As Managers program that would provide trainees with the skills they need to be successful chief residents and to make the transition to becoming attendings. We also intend to offer a course for residents on conducting research and a RAS-sponsored plenary session at the Clinical Congress.

Moreover, the Regents recently approved the establishment of an American College of Surgeons Foundation, which is intended to raise money to support the organization's education, research, and patient safety programs. Through this foundation, we hope to increase and possibly even double the amount we award in scholarships to residents and young surgeons.

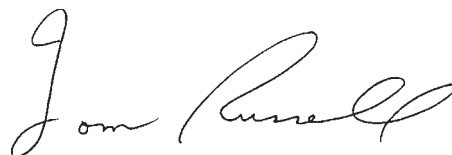
The RAS-ACS is also crafting a resident area of the College's Web portal, which will be pilot-tested this summer. Through its quarterly electronic newsletter, *RAS-ACS News*, the group invited Resident and Associate members to submit their ideas for the content for their area of the Web portal. Future issues of the newsletter will continue the dialogue between the RAS-ACS leadership and membership about what information should be communicated through this area of the Web portal, in addition to tools that will allow surgeons to keep case logs and records of their CME activities online.

Increasing membership

I am happy to report that membership in the RAS-ACS continues to grow, demonstrating how welcome the College's outreach to residents and other young surgeons has been. To stimulate the involvement of all young people who are interested in pursuing a surgical career, the College is waiving membership dues in the RAS for individuals in their first year of postgraduate training. To ensure member retention, the RAS-ACS is working on strategies to maintain the involvement of more senior residents and to facilitate the transition from Resident Member to Associate Fellow status.

All members of the RAS-ACS receive free subscriptions to the *Journal of the American College of Surgeons*, the *Bulletin*, *ACS NewsScope*, and, of course, *RAS-ACS News*, in addition to free online access to *ACS Surgery*. RAS-ACS members receive the following other benefits as well: free registration at the College's Clinical Congress and Spring Meeting, reduced pricing for the Surgical Education and Self-Assessment Program, information on clinical and research fellowship opportunities, access to the College's job and resume data bank, and eligibility for ACS-sponsored insurance programs.

For all the reasons outlined in this column and given the issues described in this special edition of the *Bulletin*, I believe that program directors should encourage residents to join the RAS-ACS. Our future truly rests in their hands, and we must equip them with the capabilities they will need to secure it. The RAS-ACS seeks to be the best resource available to all surgical residents who are preparing to take our profession, as well as the College, into the future.



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If you have comments or suggestions about this or other issues, please send them to Dr. Russell at fmp@facs.org.