
Call for nominations for the ACS Board of Regents

The 2009 Nominating Committee of the Board of Governors has the task of selecting three nominees for pending vacancies on the Board of Regents to be filled during the 2009 Clinical Congress in Chicago, IL. One of these pending vacancies is a Canadian seat, which, in accordance with ACS *Bylaws*, must be filled by a Canadian surgeon. The following guidelines are used by the Nominating Committee when reviewing the names of candidates for potential nomination to the Board of Regents:

- Loyal members of the College who have demonstrated outstanding integrity and medical statesmanship along with an unquestioned devotion to

the highest principles of surgical practice

- Demonstrated leadership qualities that might be reflected by service and active participation on ACS committees or in other components of the College

- Recognition of the importance of their representing all who practice surgery

Also to be taken into consideration are geography, surgical specialty balance, and academic or community practice. The College encourages consideration of women and other underrepresented minorities.

Individuals who are no longer in active, surgical practice should not be nominated for election or reelection to the

Board of Regents. Priority consideration should be given to representatives of general surgery. Note: Consideration of the surgical specialty does not apply to the Canadian seat.

Nominations should include one or two paragraphs on the potential contributions each candidate can offer in terms of what he or she can do for the members of the College. Submit nominations to memberservices@facs.org by Friday, **February 27, 2009**.

If you have any questions, contact Patricia Sprecksel, Staff Liaison for the Nominating Committee of the Board of Governors, at psprecksel@facs.org.

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32. Weese J. Knowing when not to operate on cancer: The essence of surgical oncology and the challenge for the mentor. *Ann Surg Oncol*. 2006;13(4):450-452.
33. ABHPM. History and Future of Board Certification. Available at: <http://www.aahpm.org/certification/overview.html>. Accessed November 21, 2008.
34. American Board of Surgery. Certification in Hospice and Palliative Medicine. Available at: <http://home.absurgery.org/default.jsp?certhpm>. Accessed November 6, 2008.
35. LeGrand SB, Walsh D, Nelson KA, Davis MP. A syllabus for fellowship education in palliative medicine. *Am J Hospice Palliat Med*. 2003;20(4):279-289.
36. Morrison LJ, Scott JO, Block SD. Developing initial competency-based outcomes for the hospice and palliative medicine subspecialist: Phase I of the Hospice and Palliative Medicine Competencies Project. *J Palliat Med*. 2007;10(2):313-330.
37. Billings JA, Block SD, Finn JW, et al. Initial voluntary program standards for fellowship training in palliative medicine. *J Palliat Med*. 2002;5(1):23-33.
38. Azoulay E, Pochard F, Kentish-Barnes N, et al. Risk of post-traumatic stress symptoms in family members of intensive care unit patients. *Am J Respir Crit Care Med*. 2005;171(9):987-994.
39. Molmenti EP, Dunn GP. Transplantation and palliative care: The convergence of two seemingly opposite realities. *Surg Clin North Am*. 2005;85(2):373-382.
40. Mosenthal AC, Murphy PA, Barker LK, Lavery R, Retano A, Livingston DH. Changing the culture around end-of-life care in the trauma intensive care unit. *J Trauma*. 2008;64(6):1587-1593.
41. Ulmer JF. An exploratory study of pain, coping, and depressed mood following burn injury. *J Pain Symptom Manage*. 1997;13(3):148-157.
42. Thompson B, Cox P, Antonelli M, et al. Challenges in End-of-Life Care in the ICU: Statement of the 5th International Consensus Conference in Critical Care: Brussels, Belgium, April 2003: Executive Summary. *Crit Care Med*. 2004;32(8):1781.