
Meeting of Young Surgeons Representatives

Reflections of a young surgeon

by David R. Jones, MD, FACS, Charlottesville, VA

I was fortunate to be chosen by the Virginia Chapter of the American College of Surgeons (ACS) to be one of its representatives at the annual Meeting of Young Surgeons Representatives, held this past May in Chicago, IL. For the first time, this meeting was combined with the Chapter Leadership Conference and thus offered a unique opportunity for a young surgeon such as myself to visit the College and to better understand the relationship between the local ACS chapter and our parent organization.

Despite this unique opportunity, I was uncertain that the benefits of attending the conference would merit a three-day absence from my busy practice. Fortunately, I committed to attending and soon realized how important and informative this conference was.

The goals of the program were: (1) to introduce young surgeons to the College, (2) to encourage surgeon participation in their local ACS chapters, and (3) to help young surgeons find value in their membership with respect to their professional needs. To meet these goals, the content of the conference centered on the four pillars on which the ACS is currently grounded—education, health policy and advocacy, member services, and clinical research.

Participants heard an excellent talk by Ajit K. Sachdeva,

MD, FACS, FRCSC, Director of the ACS Division of Education, who spoke on medical student and resident mentoring and preceptorship. This presentation prompted an open discussion of different strategies whereby surgeons, working with the College, can improve public and medical student perception about our profession. In addition, several participants discussed ways in which they as individuals, or as part of their chapter, have begun to implement undergraduate and medical student preceptorship programs locally. It is clear that the College is very supportive of chapter programs that introduce undergraduate and medical students to the profession of surgery.

One highlight of the conference was an afternoon session devoted to developing a strategic plan for our ACS chapters. We had the opportunity to create an updated mission statement and working plan for our chapters. The strategic planning tools and organizational skills emphasized during this portion of the program were invaluable. They will certainly prove useful in guiding chapter leaders, but will also be valuable for us as surgeons in our respective roles in our own practices and institutions.

The second day was opened by R. Scott Jones, MD, FACS, then-



Dr. Jones

President of the ACS. Dr. Jones stated that despite the difficulties facing young surgeons today, he believed this was one of the most exciting times in surgery and that he “wished he was a young surgeon practicing today.”

The program continued with updates on the activities of the College that were presented by the directors of the various ACS divisions. This review was particularly helpful because it allowed me to have a better appreciation of the scope and accessibility of the College’s programs as they relate to my own practice and our chapter.

We then had the option of participating in one of three educational workshops. These sessions

were all excellent and focused on membership communication, effective federal and state advocacy strategies, and educational program development for chapter members, including residents and medical students.

Additionally, for those who were interested, we were given a tour of the College's facilities, including the Board of Regents' meeting room and the Executive Director's office. The facilities of the ACS headquarters are state-of-the-art, and the staff members are enthusiastic and dedicated.

The final day focused on issues relevant to the young surgeon. The session was opened by ACS Executive Director Thomas R. Russell, MD, FACS, and was followed by an evidenced-based discussion of risk management communication strategies for surgeons and their staffs.

This session was followed by a humorous but extremely helpful presentation by Erle E. Peacock, Jr., MD, FACS, on how to be an expert witness. His observations and experience were invaluable to those of us who have been asked to participate in medical liability cases. Finally, Frank Opelka, MD, FACS, provided an

informative session on how young surgeons can better analyze their practice's finances and understand how to improve their management in a time of decreased reimbursements and escalating costs.

While the formal educational program was excellent, the coffee-break sessions and dinners were equally informative and helpful. Discussions on medical liability reform, opinions on how to attract the "best and brightest" to our profession, as well as how to get involved in local and national ACS activities were just a few examples of what was discussed in the "off time." These interactions provided me with firsthand information about how other surgeons were handling their practices, marketing their services, teaching residents and students, and participating in their local College chapters.

Flying home after the conference ended, I reflected on what I had learned. Certainly, I had a much clearer understanding and appreciation of what the College is and of the resources it commands. I also realized that I am a part of the next generation of

surgeons and that the time for us to make our mark on our profession is upon us. The meeting reemphasized to me that just as the practice of surgery is active and not passive, so is ensuring that our profession remains healthy, robust, and dynamic. The talks we heard during those few days also served as a reminder of the individual stewardship required by all members of the College to ensure the College's productivity and longevity. The meeting allowed me to enjoy the fellowship of other young surgeons who share many of my own goals, aspirations, and concerns. Finally, it reaffirmed that the College is alive and active and is an underutilized resource for ACS chapters and young surgeons alike.

In summary, I had to agree with Dr. R. Scott Jones that it is good to be a young surgeon in the American College of Surgeons.

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Mission group seeks surgeons for trip to Dominican Republic

Medical Ministry International (MMI) is sending a mission group to the Dominican Republic January 11-25, 2003, to provide surgical care in the small village of Cabara, which is on the north coast of the island. A full team of nurses, anesthe-

siologists, certified registered nurse anesthetists, and various assistants has been assembled, but the team is still in need of one or two surgeons.

Operations likely to be needed include hernia, hysterectomy, thyroidectomy, cholecystectomy,

and other general surgical procedures. The pathology is the same as that seen in the U.S., but is often further advanced.

For further information, contact swartley@southwind.net, or visit MMI's Web site at <http://www.mmint.org>.