

RAS-ACS News



A Quarterly Update from the Resident and Associate Society of the American College of Surgeons



Spring 2006

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RAS-ACS Chair Highlights New Roles of RAS Members

As 2006 rapidly moves forward, the Resident and Associate Society (RAS-ACS) continues to be an important player in helping to shape the policies and direction of the American College of Surgeons. In February, I participated in a meeting of the College's Board of Regents and continue to be amazed by our degree of involvement and the voice we have in the College. **Many new developments that have already occurred this year underscore the importance with which the leadership of the College views residents and young surgeons.**

First, and most importantly, there has been a change in a College policy that directly affects members of RAS. Prior to the February Board of Regents meeting, Residents and Associate Fellows were able to participate as guests on College committees, but our representatives could not vote nor hold the position of committee chair or vice-chair. That rule was amended in February, and **Residents and Associate**

Fellows are now considered to be full members of all committees, which means they can vote when committees take such action and, under appropriate circumstances, they can serve as chair or vice-chair of committees.

Our suggestion that the membership policy be changed to allow residents to pre-pay their dues for the projected duration of their residency has been accepted and is being implemented. The residents on the membership committee of RAS wanted an option that would allow residents to pay their dues for their entire residency in one lump sum. This option eliminates the need for residents to remember to pay dues every year and hopefully will help with retention.

Input from your representatives at the Regents meeting was solicited by members of the board on numerous topics, and the interest of the College's leadership in the young surgeon's ideas and priorities remains strong. We continue to be asked to provide input to help shape College policy and to contribute to all areas of the College's activities. It is input from members like you that helps us provide feedback to the Regents regarding our priorities and new programs we need to best serve residents and young surgeons. **Keep sending your ideas and concerns to us and never hesitate to become more involved.** The RAS-ACS is an inclusive organization, and we are always looking for talented, interested people who want to make a difference in our American College of Surgeons.

Michael J Sutherland, MD
Chair, RAS-ACS
Travis Air Force Base, CA

July Issue of the *Bulletin*: A Voice for the Resident and Associate Society

General surgery training is changing dramatically. This July's issue of the *Bulletin of the American College of Surgeons* will focus on some of those changes in articles written by members of the Resident and Associate Society of the ACS, who will discuss in detail their implications for residents, young surgeons, and the practice of surgery in general.

ACS President Kathryn D. Anderson, MD, FACS, has dedicated her Presidential year to "**Humanity.**" Therefore, in the article "**New Trends in General Surgery Training,**" Heena Santry, MD, and Ted James, MD, will explore relevant issues, challenges, and prior experiences in volunteerism, and international and rural electives during surgical training. These unique opportunities may impart a more global perspective that is clearly needed in today's interdependent world.

How do surgical trainees today differ from the traditional surgical

trainee? Recent reduced residency match rates suggested that lifestyle has increased in importance. The mandated 80-hour resident workweek now encourages residents to be shift workers. **“The Surgical Training Gap: The New Era of the Surgical Trainee”** by John Karamichalis, MD, and Carlos M. Mery, MD, MPH, will examine the effects of such changes and the challenges created as seen through the eyes of medical students, residents, and young surgeons.

The increase in subspecialty training is becoming more prevalent in the face of a finite number of patients and procedures. This trend has raised concerns among general surgery residents. Many young surgeons wonder why they must spend so much time learning such a broad range of surgical procedures when their practices will be far more focused. Keith Amos, MD, will discuss these issues in an article entitled **“Impact of Fellowships on General Surgery Training.”**

Established and developing leaders in surgery have something in common: good mentorship. Appropriate mentorship is critically important in the development of a successful and, perhaps, fulfilling surgical career. In the article **“The Elusiveness of Mentorship for Surgeons,”** Mallory Williams, MD, and C. Suzanne Cutter, MD, will explore the process of developing mentoring relationships, and how mentoring benefits career development, as well as expert opinions on success strategies through mentorship.

Carlos M. Mery, MD, MPH
RAS-ACS Communications Committee
Palo Alto, CA

Mallory Williams, MD
RAS-ACS Communications Committee
Southfield, MI

[Join Us at the Clinical Congress for the RAS-ACS Symposium 2006](#)

Each year, the Resident and Associate Society of the American College of Surgeons (RAS-ACS) sponsors a **symposium during the Clinical Congress** on a topic targeted at surgical residents, young surgeons, and Fellows. This year’s presentation will examine the issue of **acute care surgery** and will provide an **insight into its future**. The symposium will explore the possible advantages and disadvantages of training for acute care and elective surgical practices, as well as the impact of these changes on the training of residents and provision of care to patients. The impact on both general surgery training and on surgical specialties such as neurosurgery, plastic surgery, and orthopedic surgery will be explored.

Attendance is open to all RAS members, as well as to medical students and Fellows. An open microphone discussion will promote

audience participation in the symposium.

Greg Cherr, MD

Vice-Chair, RAS-ACS
Buffalo, NY

Volunteer to be Your Residency Program's Liaison to RAS-ACS

The purpose of the residency program liaison is to serve as a direct link from RAS to the residents in your program, keeping them informed about RAS and ACS activities, and stimulating interest in membership. ACS membership benefits us all by providing a strong, unified voice for surgeons, and has many other perks like online access to *ACS Surgery: Principles & Practice*, the ACS job bank at <http://www.efacs.org> (click on the link on the homepage), and textbook discounts.

If you are interested in becoming a RAS-liaison for your program, please e-mail me at hiho70@yahoo.com or contact your Program Director.

Finally, thank you to all who have already volunteered to be a RAS liaison for your residency program!

Andrea Silver, MD

Chair, RAS-ACS Membership Committee
Royal Oak, MI

Advocacy and Health Policy Update

Over the past 25 years, the American College of Surgeons has greatly expanded its advocacy efforts at both the federal and state levels. There is an incredible amount of legislation and regulation that has a direct impact on the practice of surgery, but it takes more than ACS staff to represent the profession. In fact, **it is critically important that surgeons of every age and specialty talk to their legislators** to effect change on important issues such as medical liability reform, reimbursement, trauma system development, and loan repayment.

Why is it so important for Residents and Associates Fellows to be involved in the advocacy process? Decisions are being made today that will affect health care for decades to come, and your input is critical. However, young surgeons cannot have a voice in health policy decisions without understanding the terminology (such as pay-for-performance, sustainable growth rate, or the alphabet-soup of the organizations involved, such as CMS, AQA, NQF, SQF, and so on. Be on the lookout for future issue of this newsletter, which will contain **primers on health policy issues** of importance to young surgeons.

Want to make a difference today? Please contact us.

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Update — Committee on Young Surgeons (CYS)

The next CYS event will be the Annual Leadership Conference and Capitol Hill Visit on June 11-13, 2006, to be held at the Washington Court Hotel in Washington, DC. Attendees include chapter officers, administrators, and most importantly, Young Surgeon Representatives. The agenda is detailed at <http://www.facs.org/about/chapters/chapleadership2006.html>. Please contact your chapter if you are interested in attending this program.

The Committee on Young Surgeons is supporting the continued availability of **on-site child care services for the Annual Clinical Congress** in Chicago this October. We hope to encourage the participation of our Young Surgeon parents in this important meeting by promoting a family-friendly environment. Please watch for announcements regarding the specifics of these services.

Terry L. Buchmiller, MD, FACS

Chair, CYS
Boston, MA

Cardiothoracic Surgery – What the Future Holds

Cardiothoracic surgery, one of the most exciting fields in surgery, underwent an explosion in the 1970s and 1980s that was accompanied by a growing number of cardiothoracic surgeons. However, in recent years there has been a decline in the number of patients referred for coronary artery bypass and a concurrent increase in the number of stents placed by cardiologists across the country. Last year, more than one-quarter of the residency positions in thoracic surgery went unfilled. Is there a gloomy future lying ahead for cardiothoracic

surgery, or is this the beginning of **a new era** for a field in which it is only a matter of time before explosive growth occurs again?

With advancements in technology, introduction of new techniques including the hybrid procedures (a combination of cardiothoracic surgery procedures and interventional techniques performed simultaneously in the operating room), and a multimodality approach for the treatment of lung cancer, **a new and exciting direction lies ahead in the field.**

Cardiothoracic surgeons have always played a significant role in the American College of Surgeons. The ACS **Advisory Council for Cardiothoracic Surgery** is finding ways to improve the participation of cardiothoracic surgeons within the College and is examining ways to improve the training and recruitment of the most suitable individuals for the field. This has been a combined effort with both the Society of Thoracic Surgeons (STS) and the American Association of Thoracic Surgeons (AATS). Some of the things being explored include reciprocal membership between these societies and the ACS and the enhancement of the educational programs in cardiothoracic surgery during the ACS Clinical Congress.

John Karamichalis, MD

RAS-ACS representative to the ACS Advisory Council for Cardiothoracic Surgery
Nashville, TN

New Fellowship in Extracranial Radiosurgery for Surgeons Available

Is an incision necessary for a procedure to be considered an operation? The landscape of surgical practice is changing. Surgical procedures are becoming less invasive, and large incisions are no longer required to treat many diseases. If the field of surgery is to endure despite the subtleties of incision size, it should be defined as the manipulation of tissue based on an image

Stereotactic radiosurgery has already transformed the management of intracranial tumors in neurosurgery. The recent development of **extracranial body frames** and **robotically controlled systems** is now allowing its use for extracranial tumors, especially among patients considered too high-risk for conventional surgical intervention, and for patients with tumors of difficult access. With their understanding of the disease and their unique position to guide the treatment of patients with solid malignancies, surgeons should lead this evolution in surgery and actively participate in the decision-making process, planning, and execution of radiosurgery in the care of their patients.

To provide the necessary knowledge for the use of radiosurgery for the treatment of patients with extracranial malignancies, the

Departments of Surgery and Radiation Oncology at Stanford University have created a one-year **Clinical Fellowship in Extracranial Radiosurgery** for board-eligible general surgeons and surgical oncologists. For more information, please contact Dr. Thomas Krummel, Chairman of the Department of Surgery at Stanford Medical School (tkrummel@stanford.edu), or Dr Ralph Greco, Chief of the Division of General Surgery (grecors@stanford.edu)

Carlos M. Mery, MD, MPH

Member, RAS-ACS Communications Committee
Palo Alto, CA

www.efacs.org, the ACS Web Portal: The Surgical Internet at Your Fingertips

Since its official launch in January 2006, the ACS Web Portal has become the only tool you will ever need to access and surf the surgical Internet. Most of us use the Internet on a daily basis and understand how difficult is to access net-based relevant surgical information. The College decided to facilitate this process for you, and created <http://www.efacs.org>.

A *web portal* is not a traditional Web site, but, rather, is a **personalized gateway to the Internet**. It is an interactive tool that recognizes you as a unique user, presents or provides you with relevant information based on your specific profile, and gives you access to links that may be important to you as an individual. And, by the way, it is **free** for all members of the College.

The portal is constantly changing, constantly updating information, constantly growing. The login process is extremely simple. All you need is your ACS ID number (found on your membership card or on the label on your copy of the *Bulletin*) and your last name. As the Editor of the Resident and Associate Fellow Community, I encourage all of you to log into <http://www.efacs.org> and start experiencing first-hand the buzz that everyone is chatting (or should I say blogging) about.

Juan C. Paramo, MD, FACS

Editor, Resident and Associate Community, ACS Web Portal @
<http://www.efacs.org>
Miami Beach, FL

ACS Offers Distance Learning through Evidence-Based Reviews in Surgery

Analyzing current literature is essential to delivering quality surgical care. The College has recognized this educational necessity and is offering its members access to *Evidence-Based Reviews in Surgery* (EBRS), an **Internet-based journal club**. EBRS is structured to build

critical appraisal skills through the review of current articles relevant to general surgeons and residents.

Monthly packages of articles are distributed from October to May. Each package includes a clinical article, a methodological article, and methodological and clinical reviews by experts in the field. **CME credits** are earned through participation in the **expert-led listserv discussion** and monthly online post-test.

In addition to the monthly packages, additional articles and access to journals are available on the *EBRS* site. Articles can be accessed at <http://www.facs.org/education/ebrs.html>. For more information or to register for the *EBRS* listserv, contact mmckenzie@mtsinai.on.ca.

C. Suzanne Cutter, MD

Chair, RAS-ACS Communications Committee
U.S. Resident Representative, EBRS Committee
New York, NY

LIFE Curriculum Now Available

The LIFE Curriculum assists **graduate medical education programs**, their **residents**, and **faculty** to prevent, identify, and manage **resident fatigue and impairment**. This free program consists of two CD-ROMs and a teacher's guide. The project is funded in part by a grant from the Josiah Macy, Jr. Foundation. For more information, visit <http://www.lifecurriculum.info/>.

About RAS-ACS

The Resident and Associate Society of the American College of Surgeons (RAS-ACS) is an organization within the American College of Surgeons that was formed to benefit young and future surgeons through involvement in the College's activities. Membership in the RAS-ACS is automatic when you become a member of the Candidate Group or an Associate Fellow of the American College of Surgeons. Candidate Group membership is open to all surgical residents enrolled in an accredited graduate educational program, surgical research, or fellowship program. Associate Fellow membership is open to young surgeons who are currently engaged in a second surgical residency, a research or a fellowship program, a surgical specialty practice, and are within five years of graduation from formal surgical residency training. Currently, over 2,700 Associate Fellows and 4,400 Candidate Group members are part of the RAS-ACS.

Benefits of becoming a RAS-ACS member:

- free *Journal of the American College of Surgeons* subscription
- free *Bulletin of the American College of Surgeons* subscription
- free online *ACS Surgery Textbook*
- free Clinical Congress and Spring Meeting registration and access to CME credit

- reduced pricing for selected postgraduate courses at the Clinical Congress
- information on clinical and research fellowship opportunities
- free access to the College's job and resume databank
- electronic newsletter, Web site, and Web portal
- educational materials to meet requirements for board certification
- opportunities to serve on various College committees
- opportunities for local chapter affiliation
- access to ACS-sponsored insurance programs (life, health, disability)
- a voice in advocacy and policy-making issues concerning residents and young surgeons

Join today!

Be Sure to Visit These Important Areas of the ACS Web site:

RAS-ACS Homepage: <http://www.facs.org/ras-acs/index.html>

How to Join RAS-ACS: <http://www.facs.org/ras-acs/membership/membership.html>

Job Bank:

http://www.healthcareers.com/site_templates/ACS/index.asp?aff=ACS&SPLD=ACS

ACS Homepage: <http://www.facs.org>

ACS Spring Meeting:

<http://www.facs.org/springmeeting2006/index.html>

Your Feedback Is Important to Us

We are interested in making sure that the content of *RAS-ACS News* meets the interests and responds to the needs of surgical residents and newly practicing surgeons across the country. Your feedback and ideas are important to us. Please send your comments about this newsletter and your ideas for articles to the Editor at ras-news@facs.org.

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For additional information regarding the benefits and activities of the RAS-ACS, please contact Peg Haar at ras-news@facs.org



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