

RAS-ACS News



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



Summer 2005

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Welcome New Interns!

The Resident and Associate Society of the American College of Surgeons (RAS-ACS) would like to welcome interns in all of the surgical specialties as new members of our group. Your first year of membership is a **complementary benefit** provided by the College, and the individual dues for subsequent years will be only a nominal fee. Membership has privileges (including discounts on textbooks, free registration for national conferences of the American College of Surgeons, and free online access to the College's official textbook, *ACS Surgery: Principles & Practice*), and allows you to become active in shaping the future of surgery. Those of you who will be attending the Clinical Congress in San Francisco should be sure to come to the Council of Representatives (COR) Meeting on the morning of Sunday, October 16, and RAS symposium that afternoon to find out about more opportunities for getting involved. This edition of our e-newsletter includes an **invitation to the COR meeting** from Dr. Danielle Katz, RAS-ACS Chair, as well as a **call for applications** for available positions by Dr. Greg Cherr, RAS-ACS Secretary.

Andrea Silver, MD

Chair, RAS-ACS Membership Committee

RAS-ACS and the Committee on Young Surgeons Meet

The ACS Committee on Young Surgeons (CYS) is composed of Fellows and Associate Fellows who are younger than 46. The members are chosen by a CYS nominating committee with nominations solicited from both individuals in the College as well as from various ACS committees. The CYS is charged with establishing closer relationships between the College and surgical residents, Associate Fellows, and young Fellows; promoting active participation of young surgeons in College affairs, including at the chapter level; and making College activities meaningful to young surgeons in all specialties.

During the last Board of Regents meeting (June 9-10), Danielle Katz, MD (RAS-ACS Chair), and Greg Cherr, MD (RAS-ACS Secretary), had extensive discussions with CYS Chair Chad Rubin, MD, FACS. The outcome of these interactions was a better understanding of the common goals of the two groups. As a result of these discussions, Dr. Cherr was invited to attend the CYS meeting that was held June 11 in Washington, DC. At the meeting, he briefly outlined the mission of RAS. It was apparent that the two groups share many interests, such as increasing the membership in the College, practice management issues, the need for debt relief, and the ability to provide a voice for young surgeons within the College.

There were two tangible results from these meetings: (1) all agreed to meet regularly in the future and to appoint liaisons to represent each group at the other's regular meetings; and (2) a joint proposal was submitted to the ACS Program Committee for the 2006 ACS Clinical Congress. The proposed session would address an important practice management issue: **HOW TO MARKET A SURGICAL PRACTICE.**

We are grateful to Chad Rubin and Rhonda Peebles (ACS liaison to the CYS) for facilitating these very successful meetings between RAS and the CYS representatives.

Greg Cherr, MD
RAS-ACS Secretary
Buffalo, NY

Symposium on Rural Surgery Examines Practice Environment

Approximately 50 million Americans live in rural areas. Although they make up 25 percent of the United States population, they are served by only 10 percent of the general surgeons in this country. On May 22 to 24, 2005, in Cooperstown, NY, the First Annual Rural Surgery Symposium sponsored by the Mithoefer Center for Rural Surgery at Bassett Healthcare with support from the American College of Surgeons was convened to address the need for surgical care in rural communities. The mission of the center is "to study, advocate, and improve the practice environment of rural surgery in the United States."

For the purposes of health care access, "rural" is defined based not only on population but also on geography, degree of isolation from the nearest urban center, availability of resources, and economic issues. Based on these considerations, "urban" is generally any area with a population of more than 50,000, while "large rural" is an area with 10,000-50,000 population, and "small rural" is an area with less than 10,000 population. The symposium brought together surgeons from small rural areas across the United States—from Ketchikan, AK, to Liberal, KS, to Fayette, AL. A majority of attendees served large geographic areas, some as large as 1,000 square miles, with population less than 1,000.

The goals of the symposium were to address the surgeon supply needs of rural areas, the challenges of measuring quality of broad-in-scope but low-volume surgery, and the practice and training needs of rural surgeons. In addition to basic general and trauma surgery care, these surgeons frequently are the sole providers of orthopedic, gynecologic, and urologic surgical care. Symposium faculty included leaders in rural surgery research, training, and policy, as well as members of the Rural Surgery Subcommittee of the College's Advisory Council for General Surgery. The subcommittee's mission is to **"improve patient access to quality surgical care in the rural setting by identifying and addressing the needs of surgeons in this unique environment."**

Executive Director of the College, Thomas R. Russell, MD, FACS, spoke at the conference and conveyed the College's commitment to the needs of its rural surgeon members. The keynote address presented by the esteemed Hiram Polk, Jr., MD, FACS, of the University of Louisville, discussed the recent history of training surgeons for rural practice. Also speaking at the conference about health policy issues affecting rural surgery practice was Marcia Brand, PhD, Director of the Office of Rural Health Policy at the United States Health Resources and Services Administration.

For more information on rural surgery or the Mithoefer Center, contact Lori Sawicki, Administrative Director at the Mithoefer Center for Rural Surgery at lori.sawicki@bassett.org or view the Center's website at <http://www.centerforruralsurgery.org>. The second annual symposium is planned for 2006.

Heena P. Santry, MD
Communications Committee
Chicago, IL

From the Committee on Young Surgeons

Bring the entire family with you when you attend this year's Clinical Congress, October 16-20, in San Francisco. Back by popular demand, Camp ACS will offer an exciting children's activity center and youth tours for the children of ACS attendees. Camp ACS has been planned by ACCENT on Children's Arrangements, Inc., a nationally recognized professional child care company organized to provide on-site children's activities in a nurturing, safe, and educational environment. With arts and crafts activities, active games, and special guests, Camp ACS is sure to be great entertainment for all ages. For

more information on this service for attendees at the Clinical Congress, visit <http://www.facs.org/clincon2005/social/campacs.html>.

Chad Rubin, MD, FACS
Chair, CYS

Invitation to Residents and Associate Fellows from the Chair of RAS: COME ONE, COME ALL!!

The Resident and Associate Society (RAS) Council of Representatives (COR) will meet on **Sunday, October 16, 2005**, from 8 am to 12 noon in the Moscone Center, Room 102, during the Clinical Congress. At this meeting, we will review the activities and accomplishments of the past year and set goals for the upcoming year. New members will be elected to the standing committees of RAS (Issues, Education, Communications, and Membership). In addition, election of the new secretary of RAS will take place.

If you are not already a member of RAS, obtain application materials either by accessing the College Web site at <http://www.facs.org/memberservices/documents.html> or by contacting Peg Haar (phaar@facs.org). This is a great opportunity to meet other residents and Associate Fellows, learn more about RAS, and get involved. And remember, RAS members get *FREE* registration for the Clinical Congress. We look forward to seeing you in San Francisco!

Danielle A. Katz, MD
Char, RAS-ACS
Syracuse, NY

Call Issued for Applications for Secretary, Other RAS Leadership Positions

Secretary

WANTED: Dedicated young surgeon to be the next Secretary of the RAS-ACS. The candidate must be a member of RAS and may not apply for Fellowship in the College before 2008 (although the Secretary may be an Associate Fellow).

Duties of the Secretary include:

- attending the ACS Spring meeting and Clinical Congress
- attending Board of Regents meetings when necessary
- participating in phone conference calls
- reporting of the results of election of new Executive Committee members.
- performing other duties assigned by the Chair

The position of secretary shall succeed to the position of Vice-Chair at the conclusion of the one-year term. Applications for Secretary should include

- curriculum vitae
- essay outlining the applicant's qualifications for the position (1-2 pages)
- letter of support from Department Chair or Program Director

(for applicants who will be residents while serving as Secretary)

Representatives to the Advisory Council

WANTED: Young surgeons to serve as RAS representatives to the ACS Advisory Councils for **Ophthalmic Surgery** and **Otolaryngology—Head and Neck Surgery**. The applicants must be members of RAS and training/trained in the appropriate specialty.

Responsibilities of this two-year position include

- attending bi-annual Advisory Council meetings
- submitting to the RAS an annual report of Advisory Council activities

Applications for Advisory Council representative should include

- curriculum vitae
- essay outlining the applicant's qualifications for the position (1-2 pages)
- letter of support from Department Chair or Program Director (for applicants who will be residents while serving as Secretary)

Application Submission

Applications should be sent by September 9, 2005, to:

Peg Haar
Division of Member Services
633 N. Saint Clair Street
Chicago, IL 60611-3211
Phone: 312-202-5312
Fax: 312-202-5007
E-mail: phaar@facs.org

Greg Cherr, MD
Secretary, RAS-ACS
Buffalo, NY

Update on the Board of Regents Meeting

The Board of Regents of the American College of Surgeons (ACS) met June 10-11, 2005. Among the guests joining the Board were RAS representatives Danielle Katz (Chair) and Gregory Cherr (Secretary).

While Dr. Cherr attended the Members Services Committee meeting, Dr. Katz participated in the meeting of the Communications Committee. The RAS representatives also attended the meeting of the full Board of Regents. Topics of particular interest to RAS members included recruiting and retaining ACS members (including residents and young surgeons), streamlining the transition from resident to associate Fellow, the new ACS publication *Surgery News*, and progress on the ACS Web portal. Also discussed was the free RAS-ACS membership to all incoming surgery interns for 2005.

Overall, the meeting was very productive with significant emphasis on issues of importance to residents and young surgeons. Furthermore, the Board of Regents welcomed the opinions and concerns of young

surgeons at the meeting. The inclusion of RAS representatives in the Board of Regents meeting demonstrates the continued emphasis on role of young surgeons in the ACS. Thanks to the Board of Regents for including the RAS members in their important meeting.

Greg Cherr, MD
Secretary, RAS-ACS
Buffalo, NY

ACS Leadership Conference 2005: Surgeons Climb Capitol Hill

The conference opened with an exam! Although it was not graded, the resulting scores determined the participants' dominant leadership style – thinker, senser, feeler, or intuitor – during stressed and unstressed states. Do you know your leadership style? Dr. Michele Kayden, who developed the instrument, can help you find out.

Mornings filled with congressional visits were planned for delegations of surgeons by state. In preparation for those visits, a series of instructive seminars were conducted. Participants learned the four Ps of interacting with Congress and the Senate: **politics, policy, procedure, and patience**. Did you know that over 10,000 bills are introduced annually? Judy Schneider from the Congressional Research Service, which serves junior members explained how those bills are introduced, reduced to the 400 bills that are actually reviewed, and revised through the intricacies of legislative procedure.

The College is very active on the Hill and Cindy Brown, Director of the Division of Advocacy and Health Policy, described her division's ongoing activities. On the local level, surgeons are having success with their state legislatures in supporting trauma bills, and three chapter representatives described their efforts and strategies. Roxie Albrecht, MD, FACS, of the Oklahoma Chapter and Sidney Miller, MD, FACS, of the Ohio Chapter described how they used patient testimonials, made comparisons with neighboring states, utilized the media, and built coalitions to successfully pass bills to fix trauma crisis. In further support of chapter activities, Paula Goedert, the College's legal counsel, discussed the fiduciary responsibilities of volunteers and recommended a 501C6 status for chapters interested in lobbying activities. There was also a panel seminar on accomplishing CME.

Senators, congressman, and their staffs made time to speak with the participants and take their questions. Counsel for the House Energy and Commerce Committee, Health Policy Advisor to the Senate Finance Committee, Advisor to a member of the Senate Ways and Means Committee, and an aid to a member of the Center for Medicare and Medicaid Services (CMS) committed shared the sentiments of their members on healthcare issues. Current key issues are the sustainable growth rate (SGR) formula, which affects Medicare reimbursements; pay-for-performance, which is under development to improve quality of care; restrictions on specialty hospitals; and the initiative to develop standards for an electronic medical record that can be accessed by all institutions. President Bush's Special Assistant for Domestic Policy highlighted the President's views on malpractice litigation. Congressman Paul Ryan, Sen. John Thune, and Sen. John

Ensign each spoke to the surgeons gathered at the conference and made time to take questions.

This conference is sponsored by the Committee for Young Surgeons and is held annually. Look for an announcement regarding the **2006 Leadership Conference** in all of the College's publications early next year.

C. Suzanne Cutter, MD

Co-Chair, RAS-ACS Communications Committee
Flushing, NY

Clinical Trials Methods Course Being Offered this Fall

The American College of Surgeons' Surgical Research Committee is sponsoring the eighth Clinical Trials Methods course **November 11-15, 2005**, at ACS headquarters and the Wyndham Hotel in Chicago. This course is recommended for surgeons who plan to engage in clinical research at a leadership level. It includes concepts and development of skills in the design, implementation, and analysis of randomized clinical trials; observational studies; the use of large administrative databases; meta-analysis; funding mechanisms and budget development; outcomes (medical, patient-centered, cost); and dissemination of results. Participants work in small groups mentored by a surgeon and a biostatistician to develop a protocol.

The Clinical Trials Methods course is **limited to 50 participants**, and preference is given to members of the American College of Surgeons. The course fee is \$2,495 for registration by the deadline of September 16, but a discounted fee of \$2,350 is available to those who sign up by September 2. A preliminary course schedule, general information and a registration form can be accessed on the College Web site at <http://www.facs.org/cqi/src/clintrial.html>. For additional information, contact mfitzgerald@facs.org or call 312/202-5319.

1st Annual AAS Conference: Best Paper Competition

The first Annual Academic Surgical Congress will be held February 7-10, 2006, at the Hyatt Manchester, San Diego. This is the first joint meeting of the Association for Academic

Surgery (AAS) and the Society of University Surgeons (SUS), which will feature abstracts, speakers, and seminars from both the AAS and SUS.

For the first time, the AAS will present \$500 awards for the BEST PAPER OVERALL and the BEST PAPER BY NEW AAS MEMBER. To be eligible, presenting authors must **submit a manuscript for publication** in the Journal of Surgical Research by **January 9, 2006**. Manuscripts should be submitted on-line at <https://www.editorialmanager.com/jsr> Also new this year are expedited reviews for all manuscripts submitted to the Journal for the meeting by January 9th. Membership in AAS is encouraged but not required. For more information, contact Herbert Chen, MD, AAS Recorder and Program Committee Chair.

Association for Academic Surgery (AAS)

11300 W. Olympic Blvd., Suite 600

Los Angeles, CA 90064

Phone (310) 437-1606

Fax: (310) 437-0585

2006 Young Surgical Investigators Conference Scheduled

The American College of Surgeons will hold the Eighth Biennial Young Surgical Investigators Conference **March 3-5, 2006**, at the Bethesda North Marriott Hotel and Conference Center in North Bethesda, MD. The conference is designed to assist surgeon-scientists in obtaining extramural, peer-reviewed grant support for their work and to introduce them to the process, the content, the style, and the people involved in successful grant-writing and interactions with the NIH.

As participants, young surgeon-scientists meet their peers, selected mostly from surgery departments in US and Canadian academic medical centers. The conference provides opportunities to meet and talk with key NIH staff and many of the leading surgeon-scientists who have been successful in obtaining NIH grant support for their work and who participate in the Conference as leaders of various small group meetings and as plenary session speakers.

The program includes intensive exposure to:

- NIH programs and policies
- Information from NIH Institutes
- What programs are best and available for your research project and how to apply
- Workshops in hypothesis testing, methodology, background, and preliminary results
- Grant-writing strategies
- Mock study sections reviewing model grants

The conference fee is \$1750.00 \$U.S. (**\$1,575.00 if registration and payment are received by December 16, 2005**). This fee includes all related conference materials, meals, breaks, receptions, and lodging for two nights. The deadline for registration is January 6, 2006.

Look for information and a registration form on the College Web site under <http://www.facs.org/cqi/src/young surg.html>. Direct questions to mfitzgerald@facs.org or call 312-202-5319.

Michigan Chapter News

The annual meeting of the Michigan Chapter of the American College of Surgeons was held in Grand Rapids on May 19-20. ACS President Dr. Edward Laws judged the resident competition along with Drs. Anna Ledgerwood, Michael McLeod, Mark Puls, and Larry Robson. Congratulations to prize winners Stepheny Berry, Chaim Colen, Noreen Durrani, Kellie McFarlin, Krishna Athota, Jules Lin, Alisha Arora, Almaas Shaikh and to all other resident presenters! Next year's meeting will be held at the Grand Traverse Resort.

If you have local chapter news to share from your state or region, contact Andrea Silver at hiho70@yahoo.com.

Andrea Silver, MD

Chair, RAS-ACS Membership Committee
Grand Rapids, MI

Contributions Sought for RAS-Sponsored Sessions at the 2006 Spring Meeting

When: Sunday April 23, 2006

Where: Dallas, TX

Submissions Deadline: **November 30, 2005**

Due to their tremendous success in 2005, resident-oriented programs will again be sponsored by the Resident and Associate Society (RAS) during the 2006 Spring Meeting:

- **Clinical Abstract Presentations by Residents:** will provide a forum in which residents can present their research findings and discuss results of their research with experts and peers.
- **Spectacular Cases from Residents:** session will enable residents to present extraordinary cases to a group of expert panelists for discussion.
- **Surgical Jeopardy:** will be an exciting competition among teams of two residents from general surgery programs from all over the country.

To submit abstracts, register resident team members, or obtain additional information, contact Lisa Richards at lrichards@facs.org or call 312-202-5385.

The deadline for submission of contributions is November 30, 2005.

Juan Paramo, MD

Co-Chair, RAS-ACS Communications Committee
Miami Beach, FL

Truncated Training for the Surgical Resident—the Future or Fallacy?

The Resident and Associates Society of the American College of Surgeons is proud to sponsor the annual symposium at the 91st Clinical Congress in San Francisco this fall. This year's symposium will highlight the **advantages and pitfalls of reducing the number of years a surgical specialist has to train** – truncated training. Currently, vascular surgery and plastic surgery provide medical students with the unique opportunity to shorten their length of surgical training. However the impact of this shortened training on the trainees, training programs, and societal needs has not been studied. In fact, the results of truncated training in these subspecialties will be carefully monitored by other surgical specialties to determine its usefulness.

To examine the issues, the RAS-ACS symposium has been designed specifically to generate thoughtful discussion on this topic. We have

compiled an expansive list of speakers who will be **discussing both sides of the argument** on Sunday, October 16, from 1 to 4 pm. The speakers include:

1. **Barbara L. Bass, MD, FACS**, Chair, department of surgery, Methodist Hospital, Houston, TX, Chair of the American Board of Surgery, and a Regent of the College. Dr. Bass will provide both the view of the ABS and her own personal thoughts on the topic.
2. **Scott C. Levin, MD**, Professor of Surgery and Chief of the Plastic, Reconstructive, Maxillofacial and Oral Surgery division at Duke University Medical Center. Dr. Levin will discuss the experiences that his field has had with truncated training.
3. **James M. Seeger, MD, FACS**, Professor of Surgery and Chief of Vascular Surgery, University of Florida. Dr. Seeger has been actively involved in resident education and looks forward to discussing the advantages of truncated training.
4. **Amit Kumar, MD**, Vascular fellow at the Cleveland Clinic, will give us the perspective of residents and fellows in training. His unique perspective will round off the discussion.

The discussion will also focus on the role of truncated training in the world of limited work hours, long-term financial benefits and impact on family life.

Attendance is open to all RAS members, residents, fellows, and medical students. Each speaker will be given an opportunity to discuss their views for 20 minutes and an **open-microphone discussion** will promote audience participation at the end of the session. We look forward to seeing you there.

Faisal G. Qureshi MD
Chair, RAS-ACS Issues Committee
Pittsburgh, PA

Surgical Simulation—Time to Practice How We Play

Traditional surgical residency training relies on a series of random encounters involving the care of our patients in and out of the operating room. Cumulatively, these events transform a resident into a competent surgeon. Although this system works fairly, it is not without problems. We all know the frustration of being on-service when the attending physicians are away at a meeting and the elective case load drops to nil, or of watching one of our fellow senior residents beginning his fourth trauma laparotomy of the night when our call nights are like someone has thrown a wet blanket on the trauma service. If these glitches in experience come at crucial junctures in a resident's training, the missed educational opportunities may be difficult to replace. As many programs have restructured call schedules and rotational assignments in response to the 80-hour work week, there is concern that imbalances in education may be magnified. **We should no longer depend solely on random experience to teach us what we need to know.**

Surgical simulation can help to **smooth out peaks and valleys in the training experience**, as well as ensure that everyone leaves residency

with a defined set of skills. Those who have played sports such as football or basketball have learned the importance of breaking down complex plays into more easily learned elements. The same can be done for even the most complex procedures, such as Roux-en-Y gastric bypass. Surgical simulation is an invaluable way to learn, practice, and reinforce skills outside of the time and economic pressures of the operating room.

Surgical simulation need not be complex. Although virtual reality simulators simulating ERCP, interventional endoscopy, and laparoscopy are fantastic, their cost can be prohibitive. Simple things can work well- try practicing "tying down without pulling up" by looping a suture through the tab of an empty soda can, taking students and interns through central line wire changes using sheets of paper towel taped to a board, or practicing anastomoses using a Penrose drain. These simple maneuvers can be used to teach basic surgical skills. One of the real challenges of surgical simulation is to continue to develop feedback and evaluation systems and then to fully integrate this into the residency curriculum.

Many surgical residency education programs, including ours, have been increasingly utilizing animate models to teach a wide variety of procedures, such as complex laparoscopy and robotic surgery. We have also recently begun a trauma surgery resident simulation experience. Each of our soon-to-be trauma surgery senior residents has the opportunity to **perform a wide variety of trauma related maneuvers and procedures**, from hepatography to major vascular repairs. Instead of facing their first major trauma operation "cold," they have already practiced the moves, strategies, and planning involved in these complex procedures. The value of this approach was validated early in this academic year. Each of these residents was faced with either an aorta or vena cava injury during the first week of July. They performed well, certainly in part because they'd already "been there and done that"--in the safety of the simulation lab.

Timothy A. Pritts, MD, PhD

Assistant Professor of Surgery

Associate Program Director

Program for Residency Education in General Surgery

University of Cincinnati, Cincinnati, Ohio

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 *SESAP*
 - information on clinical and research fellowship opportunities
 - free access to the College's job and resume databank
 - electronic newsletter and Web site
 - 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!

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.

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.facs.org/ras-acs/career/career.html>

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

ACS Spring Meeting:

<http://www.facs.org/2004springmeeting/index.html>

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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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