

## Region 16 Meeting

Saturday, October 26, 2019

Moscone Convention Center, San Francisco, CA, USA

### 1) Welcome and Introductions

Katsuhiko Yanaga, MD, PhD, FACS, Governor of the Japan Chapter

Norihiro Kokudo, MD, FACS, President of the Japan Chapter

Richard Lo, MD, FACS, Governor for China-Hong Kong Chapter

Gilberto Leung, MBBS, FACS, Governor for China-Hong Kong Chapter; Region Chief for ATLS

Murtuza Choudhury, MBBS, FACS, Governor for Bangladesh Chapter

Professor Chintamami, MBBS, FACS, Governor for India Chapter

Nam Kyu Kim, MD, PhD, FACS, Governor for South Korea Chapter

Julian Smith, MBBS, FACS, Governor & President for Australia-New Zealand Chapter

Muhammed Klaris Feroks and Amir Khan on behalf of the ACS Pakistan Chapter

### 2) Minutes

The minutes of the October 2018 Regional Meeting of ACS Chapter Leaders and Governors were approved without objection.

### 3) Discussion of payment issues and/or obstacles in respective countries

- Bangladesh reported no major issues with receipt of payments or obstacles to members paying dues.
- India reported some issues with paying dues online. Locally, they have undertaken efforts to host regular interactive workshops to engage members.
- Australia-New Zealand reported the main issue for the chapter is registering FACS as members of member of the chapter. There is a small subscription rate to join the chapter and it has been the same for 15 years. There are no issues asking or collecting this small amount. The fund collected support several scholarships. According to the survey results, half of chapters struggle financially, and Dr. Smith believes Governors should lobby ACS to help struggling chapters. One possible support could be a means-tested grant to help with administrative support. He believes the ACS has a large membership and is very wealthy, and the organization needs to determine how to help developing countries. In addition, developed countries need to advocate for underdeveloped countries.
- South Korea reported no issue with payments. According to Dr. Kim, the young generation does not think about FACS credential in the same way as other surgeons in the country. When he recommends the ACS to young faculty, interest varies greatly and this affects the strength of the chapter. The ACS does not offer support to regional chapter meetings and this is an issue; as such, they don't support a regional meeting. How to strengthen Region 16? There are many good programs and opportunities, but young surgeons don't understand.
- China-Hong Kong reported that the chapter is comprised primarily of surgeons from Hong Kong as they have limited knowledge of administrative burdens and controls in

the mainland. In addition, Drs. Lo and Leung states that in Hong Kong, there is little incentive to become a FACS since certification is not reliant on the credential. For former colonies, such as Hong Kong and Australia, the Royal Colleges are still prevalent because of those ties.

- India reported another large initiate class. Senior and middle-aged surgeons in India are keen on FACS credential. The Royal Colleges have presences in India based on certification examination. In India, the certification examination equates to importance. According to Professor Chintamami, the attraction is specialties. In addition, he said the chapters need more activities to offer locally. Further, the chapters need to recruit residents as part of the membership as this is a group keen on opportunities. Chapters should also work with the ACS to determine support for low income attendees to attend Clinical Congress and activities. Lastly, he stated that chapters just wait for activities to happen, they need to pursue it.
- Pakistan reported the transition to the 10<sup>th</sup> edition of ATLS. Fellows in Pakistan have reported problems with payments for membership and ATLS. They would like an opportunity to make cash payments, especially for ATLS.
- South Korea reported his mentor encouraged him to become a FACS and attend Clinical Congress. Now, Dr. Kim believes, it is difficult to encourage young surgeons to participate in the ACS. He challenged leaders to think of other ways to promote young surgeons in Region 16, including giving them resources to help with their travel to Clinical Congress. In addition, he believes the ACS needs improved international programming at Clinical Congress.
- Japan reported an initiate class of 14, which is half of last year. Have support from JSS, but the chapter needs to continue to attract new Fellows.

#### 4) Opportunities for fellowships and/or observerships in other countries

- Pakistan reported they are very interested in opportunities for their surgeons to observe in other countries.
- Several chapter leaders commented that connection among senior surgeons is important to fostering opportunities for observerships in their countries.
- There was interest among Region 16 leaders to establish a travel fund for observership opportunities.

#### 5) International credentialing and board certification

- Chapter leaders verified or updated information on the proper board certification, medical licensing, and disciplinary boards in their respective countries.

#### 6) Regional Meeting

- The next regional meeting will be hosted in 2020 by the Japan chapter and the topic will either be work/life balance and gender issues, or engaging young surgeons and mentoring. Future upcoming regional meetings include 2022 hosted by the China-Hong Kong chapter. The 2024 meeting will possibly be hosted by South Korea and Dr. Kim will confirm this. Pakistan is interested to host a regional meeting in the future.

#### 7) Chapter Updates

1. Australia-New Zealand – the chapter met in Bangkok in conjunction with the RACS meeting. Ron Maier, MD, FACS, was in attendance as President of the ACS. The chapter is recipient of International Chapter Opportunity Fund to host an ASSET course. The chapter welcomed 9 initiates this year, all from Australia.
2. Bangladesh – the chapter has the most international initiates. In February, the chapter transitioned to the 10<sup>th</sup> edition of the ATLS, and a second ATLS course will be held soon.
3. India – the chapter has made an effort to focus on training, especially with trauma programs. The chapter hosted webinars on 8 topics, including breast reconstructive surgery, head and neck surgery, gynecology, surgical awareness, mentoring, and the future of a general surgeon. The chapter participated in India's pink ribbon walk for breast cancer. The chapter will host its annual conference with the Delhi state Indian surgical meeting.
4. China-Hong Kong – the chapter's main activity was promulgating ATLS into China and the translation of course materials into Chinese.
5. Pakistan – the chapter reported there are 11,000 surgeons in Pakistan, and the chapter welcomed 34 initiates this year. The chapter conducted a national course with international speakers. The chapter is experiencing issues with the 10<sup>th</sup> edition of ATLS and reiterated a need to figure alternative payments because they have lobbied to make skills programs such as ATLS mandatory in surgery programs.
6. South Korea – the chapter hosts meetings every 2 months and welcomed 7 initiates this year.
7. Japan – the chapter has 473 members and welcomed 14 initiates. The chapter is hosting a cocktail reception on Monday evening and welcomes everyone to attend.

Minutes prepared by: Kathleen McCann