

EXCELSIOR SURGICAL SOCIETY

MILITARY HEALTH SYSTEM Strategic Partnership



AMERICAN COLLEGE OF SURGEONS

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100+years

May 2019

Dear fellow military surgeons past, present, and future,

I wanted to take a few minutes to update all of you on the current status of the Excelsior Surgical Society – the military chapter of the American College of Surgeons. Under the insightful leadership of CAPT Eric Elster, MD, USN the ESS was reborn and it was taken to new heights by the wise council of Col Stacy Shackelford, MD, USAF. As the ESS graduates from its infancy into its adolescence, it is my hope that we continue this progress and make the ESS a stronger voice between military surgeons and all the senior military leadership – a reliable connection between the clinical and operational aspects of military medicine.

In order to do so, I have asked that the presentations of the consultants have a different approach this year. In light of the planned combined medical force under the new NDAA, instead of each consultant giving a service update, the consultants will discuss how assignments, deployments, and GME will work now and in the future amongst all the services. As these topics have a lot of questions and controversies, it should be the most up-to-date and direct answers to these issues. Additionally, the ESS recognizes the Defense Health Agency's two big missions: to provide high-quality beneficiary care and to provide readiness for battlefield care. For the clinician, though, these two missions do not have to be mutually exclusive. To that end, the Military Health System and several key figures have worked extremely hard to provide a trauma course that would work as an intensive, readily available, but efficient course to help military surgeons stay ready for the battlefield without sacrificing their ability to provide quality care for complex non-trauma diseases. This course, called the ASSET+ supported by the Military Health System and USUHS, piloted this past April at the SAGES meeting in Baltimore. The designer of this course, COL (ret) Mark Bowyer, MD, has been chosen to deliver the John Pryor lecture for the Symposium this year to discuss the importance of these courses and how to make such courses available to all military surgeons for the purposes of battlefield readiness.

This year, the ESS program committee elected Steve Schwaitzberg, MD to deliver the prestigious Churchill lecture. Dr. Schwaitzberg is the Chair of Surgery at the University of Buffalo and he holds full professorship in Surgery and Biomedical Informatics there. Dr.

The value of learning. To know well. To seek knowledge and wisdom. We are here to learn, grow, and expand into greater aloha as we walk up the mountains of life.

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Schwaitzberg is internationally recognized as an innovator for surgical techniques and for his surgical teaching. He is world renown for incorporating technological advancements for the improvement of surgical care. He served as a hospital commander in combat during the first Gulf War and as President of SAGES. He embodies dedication to service and the success that military surgeons are capable of utilizing military-civilian partnership in both trauma and non-trauma settings. His talk will be inspirational for any military surgeon and should help in bridging the gap between combat care and beneficiary care.

Staying true to one of the original goals of the ESS to “provide a forum for the exchange of surgical knowledge as it relates to the practice of military surgery”, this year we will extend beyond the realm of trauma care. This year’s theme is “*The Complete Surgeon*” with a goal to recognize and highlight other specialties at our military symposium at the ACS Clinical Congress in San Francisco next October. While the heart of the military surgeon is combat care, there are a lot of other surgical specialties where the military excels, like Bariatric Surgery and Humanitarian Care, which should be celebrated. The symposium will continue to emphasize the importance of academic medicine. The ACS Committee on Trauma paper competition will occur during the Military Symposium, with the winner representing the military in the national competition. The military track will also include a scientific session with the presenters showcasing the best of the military’s research.

At the symposium, there will be discussions about the status and future of military Graduate Medical Education and the academic/leadership prowess of current and recent military surgeons. There will also be a presentation about combining military-civilian partnerships in both trauma and beneficiary care surgery that benefits readiness. Finally, there will be an exciting presentation about the ability to provide combat care as a civilian.

Another goal of the ESS is to reach more military surgeons. While our membership number is impressive at over 270 in just 4 years, there are many more surgeons to engage. In order to do so, I have introduced several committees that I hope will bring the ESS in other directions in order to address more issues within military surgery. For instance, we are making a concerted effort to connect with the Reserve and National Guard components. We have created a Reserve/National Guard committee led by Col Jeremy Cannon, MD, USAF-R to do just that. He has already displayed great energy and dedication in leading that committee.

LtCol Fia Yi MD, USAF and LTC Danielle Holt, MD, USA will lead the new Women’s Committee of the ESS. Its goal is to identify issues specific to women in the military. In doing so, they will address issues so that the military medicine is a team that is caring for all of its members. I have no doubt these two officers will build cohesiveness amongst military surgeons and lead this initiative to great success.

We also have a mentorship committee led by LTC Sue Gillern, MD, USA and MAJ Maggie Gallagher, MD, USA to guide our medical students as they embark on surgical careers in the military. The Surgical Interest Group of USUHS will be an obvious connection for them, but Drs. Gillern and Gallagher have also worked hard to include the HPSP students around the United States so that they too have resources to utilize as they make decisions about their careers.

Finally, I have one request for all of you and that is to participate. Whether it is in a large way or a small one, there are many ways. Let your voice and concerns be heard by the ESS so we can deliver them to the appropriate senior leaders. Use your experience to guide the next generation of surgeons or to assist line commanders with the battlefield utilization of medical assets. Regularly engage on one of our many social media platforms. Or simply reach out to another member of our military team to let them know you are fighting alongside them.

Ultimately, participate to learn more and know well the issues so we can better resolve the many problems we face as surgeons in the military. Thank you for your attention. I hope to see all of you in October. I am here to serve military surgery, so please do not hesitate to reach out to me if you have questions, problems, or potential solutions.

Very respectfully,



COL Robert B. Lim, MD, FACS, USA

President, Excelsior Surgical Society

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