

## American College of Surgeons

#### Founded May 5, 1913

- Fellowship required application, submission of case records, interviews, reviews before admission
- FACS = demonstrated excellence in surgery

#### Early Initiatives

- Hospital Standardization
- Cancer
- Trauma
- Continuing education for surgeons

#### Today: 85,000 Members

- 66,500 of them Fellows
- Others include surgical residents/trainees and affiliate members



### Surgery, Gynecology and Obstetrics

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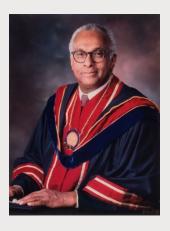
#### The Minimum Standard

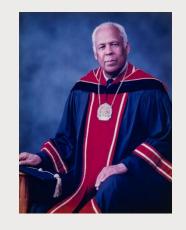
- 1. That physicians and surgeons privileged to practice in the hospital be organized as a definite group or staff. Such organization has nothing to do with the question as to whether the hospital is "open" or "closed," nor need it affect the various existing types of staff organization. The word STAFF is here defined as the group of doctors who practice in the hospital inclusive of all groups such as the "regular staff," "the visiting staff," and the "associate staff."
- 2. That membership upon the staff be restricted to physicians and surgeons who are (a) full graduates of medicine in good standing and legally licensed to practice in their respective states or provinces; (b) competent in their respective fields and (c) worthy in character and in matters of professional ethics; that in this latter connection the practice of the division of fees, under any guise whatever, be prohibited.
- 3. That the staff initiate and, with the approval of the governing board of the hospital, adopt rules, regulations, and policies governing the professional work of the hospital; that these rules, regulations, and policies specifically provide:
- (a) That staff meetings be held at least once each month. (In large hospitals the departments may choose to meet separately.)
- (b) That the staff review and analyze at regular intervals their clinical experience in the various departments of the hospital, such as medicine, surgery, obstetrics, and the other special-ties; the clinical records of patients, free and pay, to be the basis for such review and analyses.
- 4. That accurate and complete records be written for all patients and filed in an accessible manner in the hospital-a complete case record being one which includes identification data; complaint; personal and family history; history of present illness; physical examination; special examinations, such as consultations, clinical laboratory, X-ray and other examinations; provisional or working diagnosis; medical or surgical treatment; gross and microscopical pathological findings; progress notes; final diagnosis; condition on discharge; follow-up and, in case of death, autopsy
- 5. That diagnostic and therapeutic facilities under competent supervision be available for the study, diagnosis, and treatment of patients, these to include, at least (a) a clinical laboratory providing chemical, bacteriological, serological, and pathological services; (b) an X-ray department providing radiographic and fluoroscopic services.

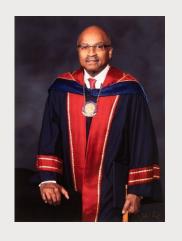
## Governance

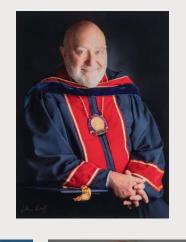
- Member Leadership
  - Board of Regents/Officers (32)
    - 9 Women
    - 5 POC\*
- Staff Leadership (19)
  - Executive/Division Directors
    - 8 Women
    - 7 POC





















## Presidents

### POC (Black, Hispanic)

- LaSalle D. Leffall, Jr., MD, FACS (1995)
- Claude H. Organ, Jr., MD, FACS (2003)
- L.D. Britt, MD, FACS (2010)
- Carlos A. Pellegrini (2013)

#### Women

- Kathryn D. Anderson, MD, FACS (2005)
- Patricia J. Numann, MD, FACS (2011)
- Barbara Lee Bass, MD, FACS (2017)
- Valerie W. Rusch, MD, FACS (2019)
- Julie A. Freischlag, MD, FACS (2021)

# **Early Initiatives**

#### **STATEMENTS**

- Statement on Diversity (2001)
- Statement in Support of a Sustainable, Competent, and Diverse Nursing Workforce (2004)
- Statement on Health Care Disparities (2010)
- Statement on Intimate Partner Violence (2014)
- Statement on Gender Salary Equity (2017)
- Statement on Harassment, Bullying, and Discrimination (2019)
- Statement on the importance of Workplace Accommodations for Pregnancy, Parental Leave, and Lactation Support for Practicing Surgeons (2020)

### **PROGRAMS/INITIATIVES**

- International Committee (1939)
- Committee on the Relation of the Colored Surgeon to the American College of Surgeons (1945)
- o Led to increase in Black surgeons admitted to Fellowship
- Committee on Diversity Issues (2002)
- Operation Giving Back (2004)
- o Volunteerism initiative allowing surgeons to assist in addressing unmet surgical needs of underserved communities

## Moving Forward

### **DEI Initiatives** *include*:

- ACS Statement on Diversity (2001) updated Oct in 2017 & Jan 2018
- Creation of Regental Task Force on Racial Issues, led to Regental Committee on Anti-Racism (2020)
- Launched "Staff Addressing Racism Task Force" (ACS-START) (2020)
- Launched Staff Office of Diversity within ACS Executive Services Division (2021)
- Convened the "Promoting DEI & Anti-Racism: Professional Surgical Society Retreat," with over 170 leaders representing the House of Surgery (2021)
- Black Surgeons and Surgery in America, (2021)

# Moving Forward

### DEI Strategies & Initiatives Across the College include:

- Board of Governors Diversity Pillar
- Regental Committee on Healthcare Disparities
- Committee on Trauma DEI Workgroup
- Member Community on Diversity