A Publication of the Society of American Gastrointestinal and Endoscopic Surgeons | SAGES



PRESIDENT'S MESSAGE



If there is a surgical challenge, we identify it and begin programs to defy the status quo...



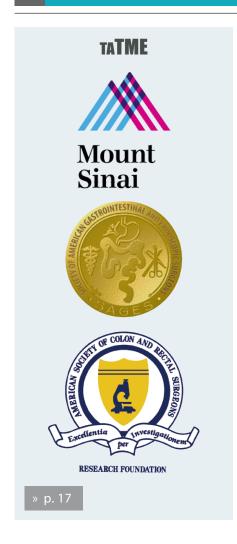


SAGES RESEARCH



SAGES 2018 MEETING









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MESSAGE FROM THE PRESIDENT

DANIEL B. JONES, MD, SAGES PRESIDENT

SAGES makes a difference. Our members are writing, educating, advocating, innovating and taking care of patients. SAGES never rests. "

If there is a a surgical challenge, we identify it and begin programs to defy the status quo. While many organizations are thirsty for volunteer leaders, ours now needs a football stadium to accommodate us all. SAGES IS HEALTHY!

If you have colleagues who are not part of the SAGES team, encourage them to join our ranks. If you are a member but hang in the background, get more active. Why?



- Science and emerging technology advance the practice of Surgery. SAGES advances that science.
- •The teaching practices of yesterday have appropriately disappeared as we now use simulation, remote teleproctoring and immersive head mounted displays.
- Close your eyes and think of the names of three or four other GI surgical organizations. Now think of where you will find a home for innovators and early adopters. That has been SAGES for more than three decades.
- SAGES is a member driven organization. Whether it is a new idea, budding technology, or the quest to add appropriate CPT codes, members lead the drive. There is an old saying, "I am their leader, so I must follow them." SAGES is a bottom up, not a top down, group.
- Stand at a SAGES meeting and look in any direction. In your line of sight will be one or more surgeons who volunteer, giving back locally, nationally, and globally.
- There is no professional monopoly on thinking. SAGES embraces community surgeons, professors, international experts, engineers, researchers, educators, nurses and industry partners in the expectation that together their interaction will embark us on new roads.

As 2017/18 President of this esteemed organization I try to represent our more than 6000 members around the globe in our mission to "improve the quality of patient care through education, research, innovation and leadership, principally in gastrointestinal and endoscopic surgery." This is one sentence and a lifetime of deliberation and action. No one President reaches the end zone, because, thankfully, we keep moving it forward. Each President makes one or two marks on the path.

SAGES has had an unfair share of great leaders. Each of us stands on the other's shoulders and each of us tries to inspire new leaders. It is a humbling experience.

During my tenure we are developing several initiatives which build upon and strengthen our history of innovation and progressive thinking. Join one. Add your brainpower, knowledge and enthusiasm to make both the Society and the world of surgery healthier in every way.

- WRS (We R SAGES) is SAGES drive toward diversity and inclusion. No more sticky floors or glass ceilings for any group.
- The Community Practice Task Force focuses on the educational needs and creative contributions from our members in private practice. If you GET a survey, COMPLETE a survey. We can't guess your needs. You have to tell us.
- New arenas to be tamed will mean the addition of Pathway Task Forces for Colon, Foregut and HPB.
- FLS and FES certification are now both mandated. Get certified and then make sure that your house staff are tested and deemed proficient.
- There are nearly 400 OR fires and 50,000 iatrogenic thermal injuries annually in the United States. No one was doing anything about it, but WE ARE through the Fundamental Use of Surgical Energy (FUSE) program. All SAGES Board members and Committee Chairs/Co-Chairs must be FUSE certified this year. We practice what we preach.

The SAGES UNIVERSITY MASTERS Program allows members to follow various pathways from competency to proficiency to mastery. This is lifelong learning, not a quick update for a test. To register go to www.sages. org/sages-masters-program.

Log onto our Facebook communities for Acute Care, Biliary, Bariatric, Hernia, Foregut, Colon, Flexible Endoscopy and Robotic Surgery. We now crowdsource the answers to challenging surgical situations. Technology tools are not just fun new software. They help us learn from one another without leaving our desks. Get with the program!

Look for the SAGES Mentors Match where we facilitate the quests for SAGES members to identify and work with a mentor. Someone(s) took you under their wing when you were new to surgery. Pay it forward.

THERE IS NOTHING LIKE A SAGES MEETING! 2018 Program Co-Chairs Rob Lim, John Marks and Liane Feldman are collaborating on an amazing 16th World Congress of Endoscopic Surgery, April 11-14, 2018. Co-sponsored by SAGES and CAGS, expect to see the most advanced laparoscopy, endoscopy and robotic surgery from around the globe. The new i3 Summit will bring together innovators, investors and industry in Seattle. Visit https:// www.sages2018.org/for updates. An IFSES sponsored event, the meeting will also be held in conjunction with IPEG. Don't miss the abstract submission deadline - September 24, 2017.

If SAGES is the future of surgery... and it IS, then the SAGES Foundation is the underpinning of that future. If you have not given or given recently, please do it now. The Foundation is not some esoteric charity that helps others. It helps YOU as a surgeon. Visit https://www.sagesfoundation.org/ to donate today.

With gratitude for the honor of being your President this year,

Daniel B. Jones, MD President@SAGES.org

SAGES BOARD OF GOVERNORS

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GO GLOBAL: iLAP

ILAP MASTER AND EDUCATION PROGRAM

Having access to minimally invasive surgery (MIS), where patients can return to work the same day or in just a few days, is of tremendous advantage to patients globally, especially when a patient is the primary income earner for his or her family. To address disparities in global access to MIS, the SAGES Go Global Program promotes the worldwide adoption of MIS through education, research, innovation and training. Through its new iLAP initiative, SAGES partners with international societies and offers instruction on how to build and run a curriculum so surgeons can replicate what they learn and help spread the knowledge and skills required to perform common MIS procedures.

"We are thrilled to partner with the Association Mexicana de Cirugia General on this initiative which will help make tremendous strides in public health for Mexico," said Dr. Jeffrey Hazey, SAGES Go Global Chair. Dr. Hazey and a team of SAGES surgeons presented the iLAP program to the Asociacion Mexicana de Cirugia General (AMCG) in Mexico City at Senator Fernando Mayans Canabal's Safe Chole Forum on April 19, 2017. Initial courses, focusing on teaching safe cholecystectomy, or safe and minimally invasive gallbladder surgery, will take place in different centers in Mexico where a need for uniform surgical standards has been perceived. iLAP will track and measure both pre-course and postcourse outcomes, using the SIGMA surgical platform, in order to inform future efforts.

"One of the main problems we face when taking care of surgical patients outside the main cities in our country, is the lack of well-prepared surgeons proficient in minimally invasive surgical techniques," said Senator Fernando Mayans Canabal, M.D. and President of the Social Security Commission. "We estimate that only around 18% of general surgery procedures in Mexico are undertaken laparoscopically and we need to adopt a culture of safety in minimally invasive surgery since our rate of surgical complications in small hospitals within the country is unacceptable," added the Senator.

"We cannot thank SAGES Go Global and the iLAP team enough for the devotion, tireless efforts and camaraderie they have shown in support for our program," said Eduardo Moreno Paquetin, M.D. and 2nd Vice President of the Mexican College, AMCG. "They are true friends and we have no doubt that thanks to the joint effort, we will make a difference in the way minimally invasive surgery is practiced in our country to the benefit of Mexican patients."The first two of nine planned iLAP courses will take place this summer in Guadalajara and Mexico City.

Over 750,000 cholecystectomies are performed each year in the United States alone and patients benefit from reduced pain, faster return to normal activities, and reduced risk of surgical site infection with a laparoscopic approach compared to an open operation. However, bile duct injury rates have increased since the introduction of laparoscopic cholecystectomy, occurring in about 3 per 1,000 procedures performed, thus increased training on safe chole practices is critical to improving outcomes. Through iLAP, SAGES is committed to improving safe chole outcomes internationally.

SAGES Go Global: Leveraging Laparoscopy and Endoscopy to Change Global Health

The mission of SAGES Go Global is to promote global collaboration and exchange of knowledge to optimize patient care. Through its webcasting and new iLAP Program, SAGES operates on an international level providing surgical education worldwide to improve health care in low resource regions. Since its founding, SAGES Go Global has held over 27 International Proctoring Courses. Collectively these sites have performed over 6,000 basic laparoscopic cases making the majority of the sites not only self-sustainable but a model for duplicating training efforts that expand across each country. An annual webcast from the SAGES Meeting is broadcast to more than 67 countries internationally, including Peru, the Philippines, Tanzania and remote locations in Iraq and Afghanistan, and has engaged over 3,000 surgeons worldwide, including the U.S. Military and Royal Military.



SAGES/AIG MINI-FELLOWSHIP

FOLLOW-UP FROM YOUR FIRST FELLOW

The SAGES Therapeutic Endoscopy Fellowship is a concentrated hands-on training program in gastrointestinal (GI) flexible endoscopy for practicing surgeons who wish to upskill in their ability to perform therapeutic procedures. It combines hands-on laboratory training conducted at a US center with hands-on patient experience conducted at a reputable international training site. Dr. B. Fernando Santos was the first fellow in this program.

I'd like to take this opportunity to update you on my life since the mini-fellowship. I have been busy applying what I learned over the course of the experience in Houston, and Hyderabad. Whenever I pick up an endoscope, I definitely feel different than I did a year ago. I have a level of comfort with procedures that is now clearly distinct from what it used to be. I have adopted and teach my residents the subtle choreography that you taught me, such as using the fingertips of the right hand to hold the scope, keeping the scope straighter, and moving with more grace.

In terms of pushing myself professionally, I have to tell you that I had an epiphany in Hyderabad, while watching Mohan and the staff do POEM. I had an awakening of my consciousness, a call to action, an inspiration. I am grateful that I was given the opportunity to help with so many procedures, and POEM in particular. At that moment, I decided, that I had to begin doing POEM when I returned. A few months after returning, I had a patient referred to me at the VA hospital, with achalasia. I started the visit as usual, reviewing the patient's history, studies, and starting to talk about the usual options, including Heller myotomy, as I am accustomed to. As soon as I finished mentioning Heller - I experienced a mental pause. I thought, "what about POEM?" "Is this even possible?" "Should I bother telling the patient about it?" "Maybe this is an opportunity." I then started to tell the patient about POEM. The patient and his wife were intrigued. They were interested! How to make it happen...however. I told them I would do some investigation. It just so happens that I do all the manometry studies at our VA, and I knew there were two other patients who had been scheduled a few weeks later that were likely to also have achalasia.

That night I thought about it on my way home, and kept thinking about it, and finally around 6pm, I came to a decision. I called my mentor from Northwestern, Dr. Eric Hungness, who is one of the most experienced POEM operators in the U.S., and with whom I had worked in the

research lab, helping with his first POEMs in 2010 and also as a chief resident, helping do a few closures. I called Eric up that night, and to my delight, he answered the phone. I started off with the usual pleasantries, and then just said, "would you ever consider coming to Vermont, and helping me get started with POEM?" There was a short pause on the phone, and then he asked me "Yes. What are your goals, what is your plan longterm?" I told him that I realized the VA was a small hospital, with a small achalasia population, and that I envisioned the long-term goal to be starting a POEM program at the larger university hospital, Dartmouth. He though this was a worthwhile goal, as Dartmouth has a very large referral area which encompasses the entire area within about 2.5 hours driving distance (Vermont, New Hampshire, Western Massachusetts, and even parts of Maine). I soon began to ask my Chief of Surgery at the VA about POEM, and he was supportive. I happened to have the good fortune of seeing two other patients with achalasia in the coming weeks and they were also interested in POEM. I now raced against the clock and the slow bureaucracy that is the VA. With the help of my Chief, we reached out to the IRB who agreed that this was not research. One hurdle done, several more to go. We started the credentialing process for Dr. Hungness, and for myself, which felt like "Mission Impossible."

TI scrambled to get equipment and supplies approved. As the day drew near, it felt a bit surreal. I had three POEM procedures scheduled at our small VA. I picked my team of nurses, and anesthesia staff. We had a rehearsal the week before. Everything was set. I couldn't believe it. The day came, and with Dr. Hungness proctoring me, and with Dr. Ted Trus looking on, I successfully performed three POEM procedures on March 9, 2017.

So far the patients have done well. I can't help to think, that a little over 1 year ago, Dr. Trus called me up as I was driving to work and asked me if I would be willing to go to India as the first SAGES/AIG fellow. I jumped at

the opportunity, but really had no idea that this experience would set in motion so many events in my career, for which I will always be grateful. When I first met with Dr. GV Rao, Brian Dunkin, and Joyce Peetermans to plan the minifellowship experience. I had no idea that less than a year after returning from Hyderabad I'd be doing 3 POEMs at the VA - if someone had told me that I would have thought they were out of their mind. Dr. Trus and I are now recruiting patients to start doing POEM at Dartmouth.

In closing, I would like to thank everyone that has helped me on this journey. Thank you for being patient and enthusiastic teachers. Thank you for believing in me, and for thinking of me in giving me these opportunities. Attached you will see a picture of me after completing my first POEM procedure. I hope to see you all soon. Take care.



Dr. B. Fernando Santos after completing first POEM

B. Fernando Santos, MD

Assistant Professor Dartmouth-Hitchcock Medical Center - Lebanon, NH White River Junction VA Medical Center - White River Junction, VT

2017 AIG Fellowship

Dr. Lee Morris was the second fellow sponsored by Boston Scientific. He received an award for his training during the 2017 SAGES Award Ceremony. He completed the MITIE portion of the training in February 2017, and then traveled to India for the AIG training in early March 2017.

ALL FUNDAMENTALS TESTING WILL BE AVAILABLE AT ACS DURING THE FOLLOWING DATES:

Monday, October 23, 2017 Tuesday, October 24, 2017 Wednesday, October 25, 2017



www.flsprogram.org

Phone: (310) 437-0544 ext.137

Fax: (310) 437-0585 E-mail: fls@sages.org



www.fuseprogram.org

Phone: (310) 437-0544 ext.149

Fax: (310) 437-0585

E-mail: info@fuseprogram.org



www.fesprogram.org

Phone: (310) 437-0544 ext.149

Fax: (310) 437-0585

E-mail: info@fesprogram.org

RESEARCH OPPORTUNITIES

BY SAGES FOR SAGES MEMBERS



SAGES 2017 RESEARCH GRANT REVIEWERS

In keeping with the SAGES mission of improving quality patient care through education, research, innovation and leadership, the Research & Careeer Dvelopment Committee aims to achieve this mission by funding quality research projects and other opportunities for deserving SAGES members. In doing so, SAGES has given over \$4,000,000 in research grants and awards since 1992.

Drs. Rebecca Petersen, Chair, Raj Aggarwal, Co-Chair, David Urbach, Mentor and the rest of the SAGES Research & Career Development Committee are proud to continue the tradition of making several research opportunities available for SAGES Members.

SAGES RESEARCH GRANTS

The SAGES Research Awards are open to any principal investigator who is a current SAGES member, including Candidate Members. Please read all the guidelines carefully. SAGES would like to especially encourage grant funding to young investigators/candidate members in the hopes that funding through SAGES will lead to additional extramural funding. Awards are conferred on a competitive basis by submission of a grant application, which is reviewed and evaluated by the SAGES Research & Career Development Committee and approved by the Governing Board.

If your SAGES membership application is currently under review, please contact research@sages.org.

Amount: up to \$30,000 Application Now Open

Application Deadline: November 3, 2017

ROBOTIC SURGERY RESEARCH GRANTS

The SAGES Robotic Surgery Research Grants, supported by a generous grant from Intuitive, are open to any principal investigator who is a current SAGES member, including Candidate Members. The purpose of these grants is to stimulate original research in robotic surgery. SAGES is interested in reviewing grants focusing on the use of robotic surgery for procedures other than colorectal surgical procedures; there is a concurrent ASCRS Robotic Surgery Research Grant competition specifically focused on robotic colorectal surgery. Grants fostering collaborative research and focused on hernia repair will be prioritized in this competition. The committee will only consider grants that involve commercially available products. Please read all the guidelines carefully. Awards are conferred on a competitive basis by submission of a grant application, which is reviewed and evaluated by the SAGES Research & Career Development Committee and approved by the Governing Board. If your SAGES membership application is currently under review, please contact research@sages.org.

Amount: up to \$50,000 Application Now Open

Application Deadline: November 3, 2017

QUALITY IMPROVEMENT PROJECT AWARDS

The Quality Improvement Project Awards are open to all current & eligible SAGES Candidate members (residents and fellows). Candidates are encouraged to submit reports of quality improvement projects related to gastro-intestinal and endoscopic surgery. Reports should describe the quality improvement intervention, its rationale, the results of the intervention, and lessons learned. The proposals will be reviewed by members of the SAGES Research & Career Development Committee.

Amount: Free registration to the 2018 SAGES Annual Meeting and \$1,000 to cover travel expenses.

Application Open: September 19, 2017 Application Deadline: November 17, 2017

MEDICAL STUDENT SUMMER RESEARCH AWARD

This research award is open to all medical students who plan to perform research under the supervision of a SAGES Member Mentor. You are encouraged to be a SAGES member or apply to become one, but you do not need to be a SAGES member to apply. The research proposals will be reviewed by members of the SAGES Research & Career Development Committee.

Amount: \$2,000

More information coming soon.

CAREER DEVELOPMENT AWARD (BIENNIAL)

The focus of this SAGES Foundation-supported award is to provide funding to a junior faculty surgeon or surgeon-in-training for the development of critical skills required for his/her academic career in gastrointestinal and endoscopic surgery. The intent of this award is to provide a period of protected time equivalent to 6 months without clinical obligations. This can take the form of a delay in the start of a faculty role, ongoing residency training, a reduced clinical role for supplemental training/traveling fellowships, or intensive organized educational activities. This award will provide the awardee with a unique educational opportunity that would not otherwise be available. Awards are conferred on a competitive basis by submission of an award application, which is reviewed and evaluated by the SAGES Research & Career Development Committee and approved by the Governing Board.

Amount: \$60,000 to support travel, salary support, and/or tuition. (The salary support portion of the grant will be taxable.)

Application Open: September 19, 2017 Application Deadline: November 17, 2017



The SAGES 2013 Career Development Award enabled me to leverage and develop my clinical practice with respect to minimally invasive foregut surgery, through focused and deliberate engagement with international leaders at four centers of excellence across North America, and in addition to acquire skills for high-potential leaders through an intensive training program at Wharton. At the end of the Award, I was better equipped to lead clinically and academically, and continue my development toward impact and prominence in academic surgery.

- Rajesh Aggarwal, MBBS, MA, PhD, FRCS, FACS

SAGES FOUNDATION

UPDATE



The SAGES Foundation's Board of Directors extends their thanks and appreciation to all those SAGES members who have contributed to the 80 by 20 Campaign. The goal of the campaign is to have 80% of SAGES members giving to the Foundation by the year 2020.

The Foundation could not carry out its mission without the contributions of the dedicated

members of SAGES. Your past and future investment towards great projects of surgical education and research is both valued and appreciated.

WHY SHOULD YOU SUPPORT THE 80 BY 20 CAMPAIGN?

Text keyword **SAGES** to **91999** to donate.

Currently, 11% of SAGES members are donating to the Foundation. Help us get to 80% with your donation today. All donations to the Foundation are tax deductible (to the extent permitted by law). Every donation, no matter the amount, counts toward the 80 by 20 Campaign.

LEADERSHIP NEWS

The Foundation's Board of Directors is pleased to announce the appointment of Dr. Brian Dunkin as a Director to the board. As a recent past president of SAGES, Dr. Dunkin will be a great asset to the Foundation. Regrettably, Dr. Jo Buyske will be stepping down from her role as a Director due to her recent appointment as the executive director of The American Board of Surgery. The Foundation's board members congratulate and wish her the best in this new position.

THE 2017 SAGES FOUNDATION AWARDS LUNCHEON RECAP

The 11th Annual SAGES Foundation Awards Luncheon was held on Wednesday, March 22 at the George R. Brown Convention Center. Close to \$62,000 was raised from the event and the proceeds of which will be used for funding future minimally invasive research and educational opportunities! Thank you to those who attended the Awards Luncheon and many congrats to the 2017 award recipients.

See pages 24-26 for photos.

BE A MEMBER. BE A LEADER. BE A DONOR.

SAGES EDUCATION AND TRAINING



SAGES ENDORSED COURSES

As a service to members, SAGES offers Course and Program Directors the opportunity to have their courses reviewed and endorsed by the Continuing Education Committee.

These courses meet the guidelines established in the SAGES Framework for Post-Residency Surgical Education and Training and are endorsed by the Society of American Gastrointestinal and Endoscopic Surgeons. (SAGES). IRCAD-EITS will present courses from August to November of this year. For more information, visit http://www.ircad.fr/.

For more information please visit: http://www.sages.org/endorsed-courses/

IN MEMORIAM

George Blackburn, MDBoston, MA

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Ronald H. Clements, MD Nashville, TN

John Dzwonczyk Jr, MD Newtown SQ, PA

William L. Gage, MD Laconia, NH

George F. Gowen, MD Philadelphia, PA

Robert J. Hasl, MD Cincinnati, OH

Wolfgang H. Markgraf, MD Fort Myers, FL **John O. Marshall, DO** York, PA

Sidney F. Miller, MD Columbus, OH

Punnoose Pachikara, MD Murphysboro, IL

G. William Parker, MDDelaware, OH

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John E. Ray, MD Kenner, LA

Ronald S. Romig, MD Pinehurst, NC

Theodore R. Schrock, MD McAllister, MT

Paula N. Shoemake, MD Starkville, MS

John Sonneland, MD Spokane, WA

James R. Wallace, MDMilwaukee, WI

Leslie Wise, MDBrooklyn, NY

First Ladies of SAGES

Kay FordeScarborough, NY
Married to Kenneth Forde, MD, SAGES Past President

SAGES FUSE PROGRAM GOES INTERNATIONAL

WITH U.S. MILITARY

SAGES Fundamental Use of Surgical Energy™

Colonels Rob Rush and Rob Lim of the United States Army, members of SAGES and the Fundamental Use of Surgical Energy™ (FUSE) Program Task Force, have set up an international testing center for FUSE at Camp Arifjan in Kuwait where surgeons, nurses, and allied personnel deployed there will be able to take the FUSE exam and become champions of Operating Room Safety for our most valuable and valiant OR teams.

To date, five people have successfully passed the FUSE test, with plans for another 20 to take the test during their deployment. Several FUSE proctors have been trained and are available to pass the baton and keep the site operational.

In 2015, after successful implementation of the France-FUSE program on the national CME e-learning platform, passing FUSE became a mandatory compliance module for maintenance of certification for active surgeons and all surgical residents and fellows in France. FUSE also has test centers in Japan and additional international sites for the SAGES FUSE program will be opening within the next twelve months.

SAGES is also expanding FUSE test centers nationally and if your institution already is an FLS/FES test center, FUSE test capability can be added with minimal input. Please visit www.fuseprogram.org for more information or e-mail sarah@sages.org to learn how you can set up a FUSE test center.



COLs Rob Lim & Rob Rush

Congratulations to our SAGES military members for a job well done!

Keep them in your prayers.

The views and opinions expressed in this article are those of the authors and do not reflect the official policy or position of the Department of the Army, DOD, or the US Government.

AMA MEMBERSHIP

WHY MEMBERSHIP IN THE AMA IS IMPORTANT



Are you concerned about reimbursement? What about healthcare reform? Do you wonder about patient's diminishing access to quality care? If you answered yes to any of these questions then your membership

in the American Medical Association (AMA) is important.

WHAT IT MEANS FOR SAGES?

In order for SAGES to retain its seat in the HOD, a significant percentage of our members also have to be members of the AMA.

Your membership in the AMA allows SAGES to:

- Keep our seat in the AMA House of Delegates (HOD)
- Have representation on the CPT Advisory Committee
- Have representation on the RUC Advisory Committee

But that is just a part of it. While SAGES continues to gain experience and recognition in the legislative arena, there is no denying that being a part of a larger organization has its benefits. The government recognizes the AMA as representing physicians across the country. They take the lead in tracking action on Capitol Hill and in organizing member associations and grass roots efforts to affect positive change.

KEEP THE SAGES VOICE STRONG

Please check your AMA membership status and keep it current. To join the AMA or renew your membership, visit the AMA website: https://member.ama-assn.org/join-renew/

In addition, please visit www.ama-assn.org/about-us/specialty-society-representation-ballot to designate SAGES as your specialty society for representation purposes.



Bringing innovators, investors, and industry together to foster innovative and emerging technologies that benefit our patients

Join us on Thursday, April 12, 2018 of the SAGES meeting to participate in a passholder track which includes:

- Shark Tank Session
- Emerging Technologies Session
- BSession
- Guided tours of the Exhibit Hall by SAGES key opinion leaders
- Attend Networking Sessions
- SAGES Industry Night

Stay tuned for more information on how you can participate!

For more information please contact Nicole Von Husen at <u>nicolevh@sages.org</u>.

SAGES 2018 CALL FOR AWARDS

SAGES AWARDS NOMINATIONS ARE NOW OPEN!

We encourage you to review the available awards and scholarships and submit your nomination online at www.sages.org/about/awards/. Note, you must be logged in to your SAGES account to submit nominations.

Nomination forms will be reviewed by the Awards Committee and winners will be selected at the SAGES Awards Committee meeting during the ACS Clinical Congress in October. The Committee will recommend recipients to the Board of Governors. Awards will then be bestowed upon the recipients during the SAGES Annual Meeting the following year.



DUE DATE TO SUBMIT NOMINATIONS IS BY FRIDAY, SEPTEMBER 22, 2017.

For any questions, please e-mail Jillian Kelly at jillian@sages.org

BRANDEIS LEADERSHIP PROGRAM IN HEALTH POLICY AND MANAGEMENT

DEAN J. MIKAMI, MD, FACS

I was extremely honored to attend the Brandeis Health Policy course at The Babson Executive Conference Center outside of Boston, Massachusetts. Moving from The Ohio State University to the University of Hawaii Department of Surgery was a huge change, not only in the weather but also in the health care environment. I am happy to say that Hawai'i has one of the highest

percentages of insured patients in the U.S. Hawai'i also has one of the highest percentages per capital of patients to computer assisted robotic systems in the county. The future of surgery lies in the ability to understand the constantly changing technological environment and how this will impact the health care we see tomorrow. With other multimillion-dollar robotic systems on

the horizon, will our desire to be on the forefront today lead us to bankrupt our health care system tomorrow? This is why I signed up for this course. I want to know how and who is going to manage and pay the sky-rocketing cost of our health care system in the future.

The intensive course consisted of 35 students which ran from June 4 to 10, with classes stretching from

CONTINUES ON PAGE 17»

8:30 a.m. to 6:30 p.m. Course goals include improving a variety of skills in healthcare policy and management, strategic thinking, decision making and effective leadership techniques. I was especially energized by a list of leadership techniques created by program director Dr. Jon Chilingerian. (The techniques, aptly, are called "Chilingerianisms on Leaders and Leadership.") They stress the importance of connection, listening and personal development. A few of the highlights included lectures from Dr. Stuart Altman, who was a principal designer of the Medicare diagnostic related group (DRG) system. Dr. Altman has also been a health care advisor to five different Presidents dating back to the Nixon administration. Another very useful segment focused on hospital finances with Dr. Brenda Anderson. Many of the participants have never had a course on economics, including myself, which Dr. Anderson most descriptively stated: "it is going to feel like drinking water out of a fire hose". She was right. The amount of information we learned in an 8-hour period is usually taught over the course of a semester. There were also multiple breakout sessions where we

would use computer animation to help solve complex systems issues.

In all, the Brandeis course was a fantastic learning opportunity for me. The course was very well managed and extremely helpful for the practicing surgeon. I would like to thank the leadership of SAGES for this fantastic experience. I will use these skills every day when speaking with students, resident, staff, colleagues, and hospital administrators.

Transanal Total Mesorectal Excision (taTME)

PATRICIA SYLLA, MD

Since the first clinical report in 2009, Transanal Total Mesorectal Excision (taTME), a novel approach in rectal cancer surgery, has been increasingly adopted worldwide. With taTME, the majority of the rectal dissection is performed transanally through specialized endoscopic platforms, rather than transabdominally, which overcomes many challenges related to deep pelvic dissection. While preliminary outcomes are encouraging, they are limited to case series and one international registry.

The US Multicenter Study of taTME for rectal cancer opened for enroll-

ment in May 2017 (clinicaltrials. gov NCT03144765). This is a 5-year Phase II clinical trial investigating taTME with laparoscopic or robotic assistance in patients with resectable rectal cancer who are eligible for sphincter preservation. This trial is led by Patricia Sylla, MD at Mount Sinai Hospital, with a total of 100 patients to be enrolled among 10 US study sites. It is anticipated that this trial will help validate the safety and efficacy of taTME with respect to the quality of the resection achieved, perioperative outcomes, and oncologic and functional outcomes.

The study is funded in part by a generous grant from the American Society of Colon and Rectal Surgeons Research Foundation (ASCRS RF), and sponsored by SAGES through grant support from Medtronic, Karl Storz, Richard Wolf, Intuitive, Applied Medical, Conmed, Olympus, Novadaq, Ethicon, and Stryker. For more information regarding the trial, please visit: https://clinicaltrials.gov/ct2/show/NCT03144765?term=sylla&rank=1.







LEADERSHIP IN HEALTH POLICY AND MANAGEMENT COURSE 2017

ERIC G. WEISS, MD

Having received the SAGES Brandeis Scholarship and attending the week long Leadership in Health Policy and Management Course was truly an amazing opportunity both personally and professionally. The annual course involves 30-40 physician participants with diverse background, experiences and clinical specialties in medicine and surgery.

Upon arriving at the Babson Executive Conference Center on Babson College's campus, one checks into an "all inclusive compound" complete with housing, dining, conference and classroom space, workout facilities and even a bar to socialize in after a long day's work in the classroom. Upon check-in, we all received a large binder with information pertaining to our next seven days of learning, including assignments and background information to prepare us for the upcoming sessions.

The first group gathering was a cocktail reception on Sunday evening prior to a presentation on Advocacy by John Armstrong, MD, a general and trauma surgeon and former Surgeon General for the State of Florida. During that initial reception it was evident how diverse the group of attendees was including differences in age, specialty and specialty societies they represented, reasons for attending the course and roles within their practices or institutions. It was also quite exciting to be amongst physicians that if not for this course, our paths would likely have never crossed. At the reception, after mingling with each other, each one of us had to introduce one of the others, which was a great way to meet and know about each other prior to the more formal interactions throughout the course. Our leader and course director, Jon Chilingerian first introduced himself and then the rest of us followed.

John Armstrong's talk was a great introduction into the value of advocacy and getting involved in organized medicine and how important the political arena is to healthcare policy.

The following morning, as well as all mornings for breakfast and mid-day for lunch, the entire group ate together. It was a great opportunity to further get to know one's other classmates and discuss both issues relevant to the course material that day but also personal and professional snippets. Following breakfast daily the typical two session day began.

Day 1 in the morning was devoted to strategic thinking and decision making and led by our leader, Jon Chilingerian while in the afternoon there were several talks all relating to Medicare/CMS and the ACS and its role in implementing an APM (Alternative Payment Model) based on episodes of care. Robert Mechanic and Frank Opelka were the speakers for this.

In the evenings, one could go to dinner with the group, go out either in downtown Boston or Waltham in smaller groups and then head back to Babson to do some reading and preparation for the next day.

Day 2 began in the morning with a session on managing clinics, care processes and patient flow led again by Jon Chilingerian. The afternoon and the following morning was a fascinating insight into the field of healthcare economics, US health policy, led by Stuart Altman, the father of healthcare economics in the US. His talks ended in a book signing of his book *Power, Politics and Universal Health Care*.

That afternoon dealt with effective leadership styles again led by Jon Chilingerian. The following morning dealt with high performance health care taught by Jody Hoffer Gittel and was followed by quality and performance measures by Deborah Garnick, both professors at Brandeis University. In the afternoon there was a session with a simulation that followed, led again by Jon Chilingerian on leading change. This was an extremely useful and fun group project using a computer model. In the end, although it was a

competition, everyone won and shared champagne at the end of the day.

Friday rounded out this amazing week with Brenda Anderson, again from Brandeis, teaching financial literacy and accounting.

As one can imagine, each one of the topics covered is just a glimpse into the subject matter, as often these topics are full semester courses in an MBA program.

Friday night we went to Boston Harbor for a dinner cruise. A beautiful night out on the water. Great dinner conversation, speeches, jokes and pictures.

Saturday morning dealt with conflict resolution led by Jeffrey Prottas, again from Brandeis. In the afternoon

people departed at various times and the session was a wrap up led by John.

From a SAGES perspective, I spent a lot of time with the other two members of SAGES who attended, Dean Mikami and Aurora Pryor. I am sure, like me, they found amazing value in attending this course and pride in representing SAGES at such a leadership meeting.

My goals in attending the meeting were clearly fulfilled. I was hoping to better serve my institution, my patients and my trainees with the knowledge gained and perspectives learned. In addition, I was hoping to participate fuller in panels and sessions at SAGES and other meetings imparting that knowledge to others. I think I have garnered that knowledge and information and owe a great debt of gratitude to SAGES.



2017/2018 SAGES

IMPORTANT DATES CALENDAR

SAGES Flex Endo Course for Fellows at NorthShore University, in Chicago, IL http://www.sages.org/mis-fellows-course/

SAGES and SERF 2018 Awards & Scholarships submission deadline https://www.sages.org/about/awards/

Abstract and Video submission deadline for SAGES 2018 Meeting https://www.sages.org/meetings/abstracts/

ACS 2017 in San Diego, CA SAGES Committee meetings take place Sunday through Tuesday FES, FLS & FUSE testing also available

SAGES 2018 Research Grants submission deadline http://www.sages.org/research/

Career Development Award Application Deadline http://www.sages.org/research/

Emerging Tech Abstract submissions for SAGES 2018 Meeting opens at http://www.sages.org/meetings/abstracts/

Emerging Tech Abstract submission deadline

Early Bird 2018 Meeting Registration and Housing deadline

SAGES Certification of Fellowship Training deadline https://www.sages.org/fellowship-certification/

Late/Advanced Meeting Registration deadline

APRIL 11-14, 2018 SAGES/CAGS HOST WORLD CONGRESS OF ENDOSCOPIC SURGERY

SEATTLE, WA | www.sages2018.org

FES, FLS & FUSE testing also available

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To improve quality patient care through education, research, innovation and leadership, principally in gastrointestinal and endoscopic surgery.

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16TH WORLD CONGRESS OF ENDOSCOPIC SURGERY (WCES) JOINTLY HOSTED BY SAGES & CAGS

An IFSES Endorsed Event Held in conjunction with IPEG

April 11-14, 2018 Washington State Convention Center Seattle, WA

2018 SCIENTIFIC SESSION SUBMISSION DEADLINE:

SEPTEMBER 24, 2017 (11:59 PM PDT)

Dear Colleague,

You are invited to submit paper and video abstracts to the Scientific Session of the 16th World Congress of Endoscopic Surgery, jointly hosted by SAGES & CAGS. To submit your paper and video abstracts, please visit the following web page:

http://www.sages.org/meetings/abstracts/

NOTE: The SAGES Conflict of Interest Task Force (CITF) declares that no employees of a commercial interest may present or be a planner in SAGES CME accredited activities when the topic is relevant. For additional information, review SAGES Policy on Employees of Commercial Interests.

2018 EMERGING TECHNOLOGY SESSION

Submission for "Emerging Technology" abstracts will open in November and will run until early January 2018. For detailed instructions and submission deadlines, please visit: http://www.sages.org/meetings/abstracts/

If you have any questions, please contact the SAGES office at 310-437-0544 x118 or email: abstracts@sages.org.

Sincerely,

John Marks, MD Program Chair (SAGES) Robert Lim, MD Program Co-Chair (SAGES) Liane Feldman, MD Program Chair (CAGS)

FELLOWSHIP COUNCIL

IMPORTANT DATES FOR THE 2017 MATCHING PROCESS



ADVANCED FELLOWSHIP SURGICAL TRAINING

Streamlined Universal Fellowship Application and Matching Process

FOR INFORMATION: www.fellowshipcouncil.org

2017 FELLOWSHIP COUNCIL NON-ACGME ACCREDITED FELLOWSHIPS AVAILABLE

2018-2019 FELLOWSHIP YEAR

- Colorectal Surgery
- Thoracic Surgery

2017 FFLLOWSHIP APPLICATION AND MATCHING CALFNDAR

AUGUST 1, 2017 Fellowship Application Process Opens

NOVEMBER 13, 2017 Fellowship Application Closes

NOVEMBER 13, 2017 Letters of Recommendation Deadline

NOVEMBER 27, 2017 Inform Applicants of Interview Status

JANUARY 10, 2018 Rank Order Deadline

JANUARY 18, 2018 Announcement of Fellowship Matches

AUGUST 1, 2018 FELLOWSHIPS BEGIN

SAGES MEETING 2017

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Drs. Desmond Birkett and Katherine Panganiban Margret Oddsdottir Award



Drs. David Rattner and Daniel Scott George Berci Lifetime Achievement Award



Drs. Eric Pauli and David Urbach Young Researcher Award



Drs. Desmond Birkett and Aurora Pryor Excellence in Medical Leadership Award



Drs. Desmont Birkett and Peter Marcello Jeffrey L. Ponsky Master Educator in Endoscopy Award



Drs. David Urbach and Yalini Vigneswaran Researcher in Training Award



Drs. Paul Severson and David Rattner Award for Excellence in Humanistic Clinical Care



Drs. Michel Gagner and David Rattner Pioneer in Surgical Endoscopy Award

SAGES MEETING 2017

SAGES 2017 AWARD WINNERS AND MORE...



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Karl Storz Lecture



Exhibit Hall Opening



Dr. Daniel Scott **SAGES President**



Dr. Antonio Lacey **International Ambassador Award**



Dr. Daniel Scott & Family with Sallie Matthews



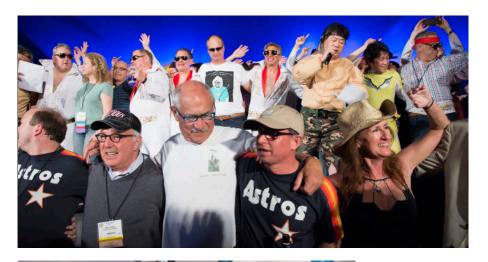
Drs. Horacio Asbun and Melina Vassiliou **Program Chairs**



SAGES President's Dinner

SAGES MEETING 2017

2017 SAGES SING-OFF & MAIN EVENT













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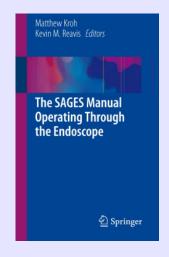
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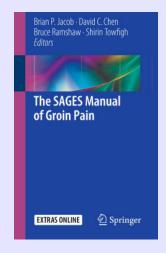


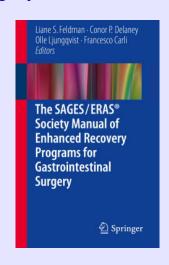
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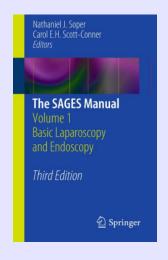


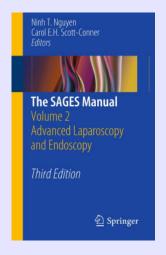


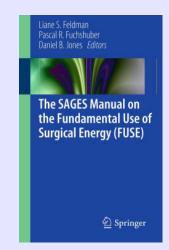


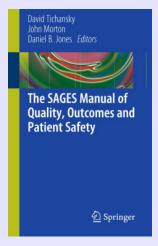


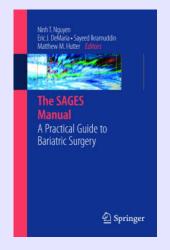


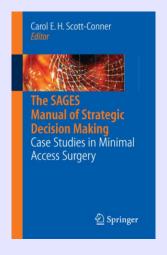
















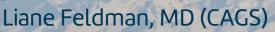
SAGES & CAGS

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April 11 - 14, 2018
WASHINGTON STATE CONVENTION CENTER SEATTLE, WA

PROGRAM CHAIRS:

John Marks, MD & Robert Lim, MD (SAGES)











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