

# Summer 2014



DR. L. MICHAEL BRUNT

"It is a tremendous honor & privilege to serve as SAGES President for the coming year and I continue to be amazed by the incredible energy, vitality and forward progress of our society" ...

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# MESSAGE FROM THE PRESIDENT DR. L. MICHAEL BRUNT



**L. Michael Brunt, MD**SAGES President 2014-2015

It is a tremendous honor and privilege to serve as your SAGES President for the coming year. It was 22 years ago that I became a SAGES member and attended my first SAGES meeting in Washington, DC. The atmosphere at that meeting was electrifying and I will never forget it - it was still in the rapid growth phase of the laparoscopic revolution and it seemed that every week something new was being done laparoscopically. That meeting was also the debut of the Lap Rappers and the precursor to the Friday night main event that has become a signature feature of every SAGES meeting.

Today as I reflect back, it is amazing to see the evolution of our society to an organization that has impacted education and training, research, and innovation in virtually every aspect of GI and endoscopic surgery. Our annual meeting continues to be the centerpiece of our educational activities and we recently had another successful meeting in Salt Lake City with 2000 attendees who experienced a comprehensive program put on by Jeff Marks and Tonia Young-Fadok. Next April 15-18 we will be in Music City in Nashville and Aurora Pryor and Michael Holzman, the Program Chairs for 2015, are planning a fabulous educational meeting.

SAGES now has more than 6300 members, 33 committees, and more than 400 committee members who devote countless hours of work toward making our society and the surgical world a better place. SAGES as much as anything represents opportunity for its members - the opportunity to get involved, to contribute to the work of our various committees and projects, to participate in the annual meeting, and to make a difference in surgical care for our patients.

I'd like to highlight some important initiatives that have been undertaken by our society over the last several years that continue to build and gather momentum. The SAGES Fundamentals portfolio now consists of FLS, FES (Fundamentals of Endoscopic Surgery) and FUSE (Fundamental Use of Surgical Energy). FLS has been taken by more than 5300 general surgery residents over the last 5 years and under the leadership of Steve Schwaitzberg, is exploring international efforts in Latin America, China and other parts of the world. The Flexible Endoscopy curriculum, developed by the American Board of Surgery in conjunction with SAGES and the other GI societies, with FES (led by Jeff Marks) as the centerpiece, has now been mandated for general surgery residents graduating in the 2017-2018 academic year along with FES certification. I encourage you to support FES by reviewing the on line web based didactic program and by taking the FES examination; and if you are in a training institution, to integrate the Flexible Endoscopy Curriculum and FES into your surgical training programs. And FUSE, led by Dan Jones, will become available this summer as the first comprehensive educational program to address the topic of surgical energy and safe use of energy devices in the OR. Enhanced patient safety and improving surgical outcomes are among my top priorities as president. Although it's been almost 25 years since laparoscopic cholecystectomy transformed the surgical world, we continue to see major bile duct injuries that occur during this most common of procedures. Moreover, the occurrence of a major bile duct injury can be devastating for the patient who otherwise would have undergone an outpatient procedure with prompt return to their normal activities.

At my direction, SAGES has formed the Safety in Cholecystectomy Task Force led by Rob Fanelli and Horacio Asbun with the mission of encouraging a universal culture of safety for cholecystectomy and reducing biliary injuries. The group has distributed a Delphi survey to our committee members in an effort to develop expert consensus on the factors deemed important for the safe performance of cholecystectomy. The results of this survey will guide the task force and bring focus to the project. A subgroup of the task force will hold a retreat in St. Louis this summer to review the Delphi results and further refine the strategic plan for this program with plans to roll out the first phase of this multimodal initiative within a year.

Finally, it is important to be mindful of our humble origins as a society and of our roots in flexible GI endoscopy. To that end, I have asked Tonia Young-Fadok to produce a documentary film on the beginnings of SAGES that we anticipate will premiere at our annual meeting in April. We also plan to highlight other aspects of SAGES incredible history in the coming year as well.

This is a unique and perhaps historic time in medicine with transformative changes taking place in healthcare. We face not only tremendous economic challenges ahead and constraints regarding the costs of the care we deliver, but will also be increasingly be judged and paid according to the quality of our care and the outcomes we achieve. We also live in an increasing regulatory environment that may negatively impact innovation and the development of new technology. SAGES will continue to lead the way as we navigate these challenges and I encourage each of you to stay engaged and communicate to us your thoughts and ideas or concerns. I am convinced that together we can meet the great challenges in GI surgery and medicine in the 21st century.

L. Michael Brunt, MD

SAGES President



# 2014-2015 COMMITTEE CHAIR/CO-CHAIR LIST

**ASSETS/FINANCE:** 

Finance Chair: Daniel Scott, MD Assets Chair: Barry Salky, MD

**AWARDS:** 

Chair: David Rattner, MD

**BARIATRIC LIAISON GROUP:** 

Chair: Kevin Reavis, MD Co-Chair: Brandon Williams, MD

**BY-LAWS:** 

Chair: Kevin Wasco, MD

**COMMUNICATIONS:** 

Chair: Allan Okrainec, MD Co-Chair: Andrew Wright, MD

**CONFLICT OF INTEREST TASK FORCE (CITF):** 

Chair: Patricia Sylla, MD Co-Chair: Daniel Deziel, MD

**CONTINUING EDUCATION:** 

Chair: Timothy Farrell, MD

Co-Chairs: John Paige, MD & Lisa McLemore, MD

**DEVELOPMENT:** 

Chair: Fredrick Brody, MD

Co-Chairs: Gretchen Purcell-Jackson, MD, PhD & Dmitry Oleynikov, MD

**EDUCATIONAL RESOURCES:** 

Chair: Dean Mikami, MD Co-Chair: Michael Ujiki, MD

**ETHICS LIAISON GROUP:** 

Chair: Phil Shadduck, MD Co-Chair: Arthur Rawlings, MD

**FLEXIBLE ENDOSCOPY:** 

Chair: Brian Dunkin, MD Co-Chair: Ted Trus, MD

FES:

Chair: Jeffrey Marks, MD

Co-Chairs: John Mellinger, MD & Jose Martinez, MD

FLS:

Chair: Steven Schwaitzberg, MD

 $\hbox{Co-Chairs: Matthew Ritter, MD, Melina Vassilliou, MD, Allan Okrainec, MD}\\$ 

**FUSE:** 

Chair: Daniel Jones, MD

Co-Chairs: Pascal Fuchshuber, MD & Tom Robinson, MD

**GLOBAL AFFAIRS:** 

Chair: Horacio Asbun, MD Co-Chair: Natan Zundel, MD

**GUIDELINES:** 

Chair: William Richardson, MD

Co-Chair: Dimitrios Stefanidis, MD & Raymond Price, MD

**HERNIA TASK FORCE:** 

Chair: Adrian Park, MD

Co-Chairs: Carla Pugh, MD, Melina Vassilliou, MD, & Guy Voeller, MD

**HUMANITARIAN:** 

Chair: Tonia Young-Fadok, MD Co-Chair: Marian McDonald, MD

**LEGISLATIVE:** 

Chair: Donald Selzer, MD Co-Chair: Ross Goldberg, MD

**MEMBERSHIP:** 

Chair: Aurora Pryor, MD

Co-Chairs: John Marks, MD & David Tichansky, MD

**MILITARY WORKING GROUP:** 

Chair: Robert Lim, MD

Co-Chairs: Yong Choi, MD & Robert Rush, MD

**NOMINATING:** 

Chair: Gerald Fried, MD

**OPEN TO MIS TASK FORCE:** 

Chair: Jeffrey Hazey, MD

Co-Chair: Archana Ramaswamay, MD

**PEDIATRIC LIAISON GROUP:** 

Chair: Danielle Walsh, MD Co-Chair: Katherine Barsness, MD

**PROGRAM:** 

Chair: Daniel Herron, MD Co-Chair: Jon Gould, MD

**PUBLICATIONS:** 

Chair: Brian Jacob, MD Co-Chair: Scott Davis, MD

**QUALITY, OUTCOMES & SAFETY:** 

Chair: Anne Lidor, MD Co-Chair: John Romanelli, MD

**RESEARCH & CAREER DEVELOPMENT:** 

Chair: David Urbach, MD Co-Chair: Rebecca Petersen, MD

**RESIDENT EDUCATION:** 

Chair: Brent Matthews, MD Co-Chair: Matthew Goldblatt, MD

SAFETY IN CHOLECYSTECTOMY TASK FORCE:

Chair: Robert Fanelli, MD Co-Chair: Horacio Asbun, MD

**SMART TASK FORCE:** 

Chair: Liane Feldman, MD Co-Chair: Conor Delaney, MD

TAVAC:

Chair: Matthew Hutter, MD Co-Chair: Shawn Tsuda, MD

# **SAGES 2014 ESSAY SERIES**

# MEDICAL STUDENT SCHOLARSHIP AWARD PROGRAM



SAGES Membership Committee annually administers **SAGES MEDICAL STUDENT SCHOLARSHIP AWARD** program that offers participating medical students attending medical schools in the United States and Canada the chance to meet, network, and participate in educational courses alongside experienced surgeons attending SAGES annual meeting.

Earlier this year, 140 students submitted their personal essays in a competition to win three awards that provided complimentary meeting registration, a check in the amount of \$2,000, an award certificate, and recognition during the meeting. The essays were engaging and well written and the Membership Committee will be sharing the essay series with the membership through SCOPE, SAGES monthly newsletter and SAGES website. We hope you enjoy this essay below from a fourth year student at the Perelman School of Medicine, University of Pennsylvania.

The human body is a beautiful thing. From stick figures drawn on the walls of caves, to marble statues of the renaissance and post-modern interpretations of the human form, it is no surprise to me that throughout all the iterations of human society, the physical shape of our species has continued to fascinate us. Now cut through the surface of our shell and discover how much more there is to our being than meets the eye. The many layers of our bodies come together in an architecture so intricate and complex that it puts all of our man made creations to shame.

A single body, like a masterful piece of art, can be appreciated at many levels depending on the eye of the beholder. When I saw my first surgery at the age of 16, my mind could only appreciate the trauma involved and the struggle of the surgeons to work in an area not intended for human manipulation. After completing anatomy in Medical School, surgeries became a much different experience for me. Now I was constructing organ systems in my mind's eye and seeing how my imaginings of their pieces of our bodies actually came together in three-dimensional space. As I come closer to completing Medical School, with much more to learn about the human body I am beginning to appreciate the distinctions between different types of tissue: how they can be strained, how they can be cut, how they can come together, and what tools can be used to accomplish these goals. And when I look at the attending surgeons I work with, I see in their eyes that they are viewing the operative field in a completely different way than anything I can currently imagine.

Of all the surgical fields, the abdomen is the most fascinating to me. I have a visceral appreciation for its intricate network of organs, so perfectly packaged, and yet with so many variations on a standard theme. As I look toward the next phase of my training, there is no question that my surgical career will be centered in the abdominal cavity. I simply cannot wait to see how my appreciation for this space will change over the next many years of my training. I have been told by many surgeons that exposure is the key to successful surgery. I believe exposure is also essential in developing a successful and prolific academic surgical career. I would relish the opportunity and privilege to attend the SAGES Surgical Spring Week this year in April, to learn more about the people, tools, and future that make up a career in qastrointestinal and endoscopic surgery. Thank you very much for your time and consideration.

# SEE YOUR MEMBERSHIP PAY FOR ITSELF AND BEYOND!

Join now and become eligible for the member rate at future meetings and enjoy the benefits of SAGES membership including:

- Cutting-edge education and professional development programs
- Networking with colleagues and experts in the field of gastrointestinal and endoscopic surgery
- Support for achievement in laparoscopic and endoscopic surgery
- > Exposure to state of the art surgical technology and techniques
- Annual subscription to the Surgical Endoscopy Journal
- Member-only research awards and career development grants
- Substantial savings on meeting fees
- Leadership Opportunities
- ... and so much more!

Visit www.sages.org/membership/benefits or call **310. 437.0544**, ext. 156, to learn more.





# **100%** OF SAGES UNIVERSITY ALUM RECOMMEND IT TO OTHER SAGES MEMBERS!

SAGES University is a free educational tool available at **university.sages.org** to SAGES members only.

# It's a no-brainer!

- Nearly all SAGES U grads shared with us that SAGES University activities had positively impacted their practice.
- More than half indicated it increased their strategies & approaches to difficult cases, and over 40% indicated it improved their ability to implement evidence-based medicine.
- > SAGES U credits automatically upload to the ABS for your recertification!



# SAGES IN THE NEWS

SAGES received significant media coverage on a variety of news items including the annual meeting, the ABS requirement for FES and more. Visit our newsroom at www.sages.org/newsroom for link to the full stories as well as TV coverage from this year's mini med school.

Board of Surgery Sets Endoscopy Requirement for Surgical Trainees | May 23, 2014 |
History of Lap Colectomy: An Approach Still Awaiting Widespread Use | May 21, 2014 |
The Birth of SAGES: How the Surgical Society Came About | May 8, 2014 |
To BIRG (Bask In Reflected Glory) and SAGES | April 1, 2014 |
Utah high school students try on surgeon's skills at SAGES mini med school boot camp | April 8, 2014 |
Miniature Medical School: Utah students try their hand at surgery | April 6, 2014 |
Students try their hand at 'surgery' in contest | April 6, 2014 |
Surgeons to convene in Salt Lake for major conference | March 28, 2014 |

# SAGES VIDEO ATLAS



# **VIDEOS NEEDED!**

Over a year ago, the flexible endoscopy committee embarked on a project to develop a video atlas of endoscopically viewed benign and malignant GI pathology. Surgical endoscopists are sometimes criticized for being good technicians but poor at recognizing endolumenal pathology. A video atlas will help fill this knowledge gap. The Video Atlas Task force has created an outline of desired normal and abnormal pathology to be included in the atlas. They have also created a link to allow captured videos to be uploaded for editing.

### THE TASK FORCE HAS MADE FANTASTIC PROGRESS BUT NEEDS YOUR HELP IN COLLECTING MORE VIDEOS!

To contribute, go to: www.sages.org/video\_atlas. There you will find a list of desired normal and abnormal pathology still needed for the atlas. Raw videos should be recorded at the highest possible resolution for uploading and labeled with location in the GI tract, type of pathology, and name of physician to be given credit for the submission in the atlas (e.g. right colon, serrated adenoma, Jose Martinez). No editing is required — this will be done by the task force. Multiple examples of the same types of pathology are desired, so there is no limit to the number and types of uploaded videos.

Please contact Christine@sages.org for any additional questions and information.

# **SAGES 2014 Awards Recipients**

**SAGES RESEARCHER IN TRAINING AWARD** 

Recipient: Ezra Teitelbaum, MD

**SAGES YOUNG RESEARCHER AWARD** 

Recipient: Michael Awad, MD

SAGES gratefully acknowledges support from Olympus

SAGES IRCAD FELLOWSHIP AWARD

Recipient: Eran Shlomovitz, MD

SAGES gratefully acknowledges support by SAGES Karl Storz Endoscopy

**SAGES BRANDEIS AWARD** 

Recipients: Ross Goldberg, MD & Jon Gould, MD

SAGES gratefully acknowledges support by SAGES Foundation

SAGES FOUNDATION - EXCELLENCE IN MEDICAL LEADERSHIP AWARD

Recipient: Dmitry Oleynikov, MD

SAGES Foundation gratefully acknowledges support by W.L. Gore and Associates

SAGES FOUNDATION - JEFFREY L. PONSKY MASTER EDUCATOR IN ENDOSCOPY AWARD

Recipient: Gary Vitale, MD

ARNOLD P. GOLD FOUNDATION - SAGES AWARD FOR CLINICAL EXCELLENCE AND HUMANISM IN MEDICINE

Recipient: Brant Oelschlager, MD

SAGES gratefully acknowledges support by Arnold P. Gold Foundation

SAGES INTERNATIONAL AMBASSADOR AWARD

Recipient: Geoffrey Kohn, MD

SAGES PIONEER IN SURGICAL ENDOSCOPY AWARD

Recipient: David Utley, MD

SAGES DISTINGUISHED SERVICE AWARD

Recipient: Steven Wexner, MD

SAGES GEORGE BERCI LIFETIME ACHIEVEMENT AWARD

Recipient: Tehemton Udwadia, MD



# **CONGRATULATIONS AGAIN TO OUR 2014 SAGES AWARD WINNERS!**



Dr. Philip Omotosho and Dr. Dana Telem



Dr. David Utley, Dr. Steven Wexner and Dr. Bruce Schirmer



Dr. Ezra Teitelbaum and Dr. David Urbach



Dr. Gary Vitale and Dr. Bruce Schirmer



Dr. Tehemton Udwadia and Dr. Gerald Fried



Dr. David Rattner and Dr. Geoffrey Kohn



Lori Seel, Gore, and Dr. Dmitry Oleynikov



Dr. Michael Awad and Dr. David Urbach

Award nominations for 2015 will be open over the summer with the deadline to apply or submit nominations by September 15th.

Visit www.sages.org/about/awards to learn about the types of awards and scholarships available.

# 2015 RESEARCH GRANTS AND CAREER DEVELOPMENT AWARD

### **RESEARCH GRANTS**

SAGES Research Grants are open to any Principal Investigator who is a SAGES member, including Candidate Members. SAGES would like to especially encourage grant applications from young investigators and Candidate Members, in the hope that funding through SAGES will lead to success with subsequent extramural research grants. The purpose of SAGES Research Grants is to stimulate original research in gastrointestinal and endoscopic surgery. The application will be available on the SAGES website at <a href="https://www.sages.org/projects/research-grants">www.sages.org/projects/research-grants</a> in August 2014.

For 2014 AGES also awarded two targeted grant opportunities: (1) a Patient Outcomes Grant, and (2) Fundamentals of Endoscopic Surgery (FES) Grants to create competency-based skills training plans for endoscopic surgery. Please check the SAGES website for any Requests for Proposals in 2015.

## **2014 WINNERS**

### Per-Ola Park, MD

Institution: Sodra Alvsborgs Hospital Supported by SAGES

### Philip A. Omotosho, MD

Institution: Duke University Medical Center Supported by SAGES

### Rebeccah Bradshaw Baucom, MD

Institution: Vanderbuilt University School of Medicine Supported by SAGES Education & Research Foundation

### Amin Madani, MD

Institution: McGill University
Supported by SAGES Education & Research Foundation

### Eran Shlomovitz, MD

Institution: The Foundation for Surgical Innovation and Education Supported by by Karl Store Endoscopy

### John Scott Roth, MD

Institution: University of Kentucky

### Eric Mark Pauli, MD

Institution: The Pennsylvania State University, College of Medicine Supported by SAGES

### **FES GRANT RECIPIENTS**

### Maria Affleck Cassera, BS

Institution: The Foundation for Surgical Innovation and Education Supported by SAGES Education & Research Foundation

### Jeffrey W. Hazey, MD, FACS

Institution: The Ohio State University
Supported by SAGES Education & Research Foundation

### PATIENT OUTCOMES RECIPIENT

#### Conor P. Delanev, MD, Ph.D.

Institution: Case Medical Center
Supported by SAGES Education & Research Foundation

#### **CAREER DEVELOPMENT AWARD WINNER**

### **Dana Alexa Telem**

Institution: Stony Brook University
Supported by SAGES Education & Research Foundation

## CAREER DEVELOPMENT AWARD

The focus of this SAGES Foundation-supported award is to provide funding for a young surgeon or surgeon-in-training to develop critical skills required for their academic career in gastrointestinal and endoscopic surgery.

For more information, please visit www.sages.org/projects/sages-career-development-award

THE APPLICATION PROCESS WILL OPEN EARLY AUGUST AND ALL SUBMISSIONS MUST BE SUBMITTED BY NOVEMBER 3, 2014 (5PM PST).

# UPDATE YOUR SAGES PROFILE & VISIT OUR HUMANITARIAN REGISTRY

Tell us about your medical volunteer experience and learn about the experiences of other members at the SAGES Humanitarian Mission Registry. www.sages.org/humanitarian-service/add-mission Follow these simple steps to help to enhance our mission to improve quality patient care by taking a few minutes to update your SAGES public profile

- 1. Go to sages.org and login
- 2. Click My Profile from the Members Menu

so that patients can find you in our directory:

3. Click Profile and then Edit

We thank you in advance for your participation!



Do you have a new e-mail address? Or have you changed your overall contact information? Email us at membership@sages.org with this information so we can make sure you receive the full benefits of your membership!



**SUMMER 2014** 

# CALL FOR ABSTRACTS

# **SAGES 2015 Annual Meeting**

April 15 - April 18, Nashville, TN

# ABSTRACT SUBMISSIONS NOW OPEN!

**DEADLINE FOR SUBMISSION:** <u>September 26, 2014</u> (Deadline will not be extended / no late submissions accepted)

Dear Colleague,



You are invited to submit paper and video abstracts to the SAGES 2015 Scientific Session. The meeting will be held April 15 - April 18, 2015 in Nashville, TN. You must be a member of SAGES or have a member of SAGES sponsor you to submit an abstract.

The program will consist of oral presentations, video presentations, and poster presentations. The program committee will be responsible for selecting the length of the oral and video presentations.

All paper and video abstracts MUST BE SUBMITTED ONLINE VIA THE SAGES ABSTRACTS SUBMISSION SITE. Please visit the following web page for instructions: www.sages.org/meetings/abstracts

NOTE: ALL content authors are required to disclose any financial relationship(s) with an ACCME-defined commercial interest ('industry'). Also, no content author may be an employee of a commercial interest. More details available online.

The following Abstract Submission Policies will be firmly enforced:

- No Previously Published Submission: The abstract submitted must present original work that has not and will not be published or presented prior to the 2015 SAGES meeting.
- No Dual Submissions: The abstract must not have been submitted to any other upcoming meeting in North America.
- No Previously Presented Data: All abstracts must be new and original content OR include at least 50% new data if previously presented at a meeting.
- > Manuscript Submission: Accepted Oral Abstract Presenters must submit a complete manuscript to Surgical Endoscopy.
- Digital Poster Submission: If selected for a Poster Presentation, a digital version of the poster must be submitted.

If you have any questions, please contact the SAGES office at 310-437-0544 ext. 118 or email: abstracts@sages.org

# FELLOWSHIP COUNCIL COLORECTAL & THORACIC APPLICATION AND MATCH OPENS JULY 14, 2014!



The Fellowship Council (FC) was created to foster the development of high quality fellowships in Minimally Invasive, Advanced Gastrointestinal, Flexible Endoscopy, Bariatric, Hepato-Pancreato-Biliary, Thoracic (non-ACGME) and Colorectal(non-ACGME) surgery. FC continues to grow and currently represents **168 programs and 197 fellowship positions**. The Council was formed by program directors to meet the needs of the program, applicants, and fellows. FC is governed by leadership drawn from its component societies including SAGES, ASMBS, SSAT, AHPBA, and ASCRS.

The application and match process for non-ACGME Colorectal and Thoracic surgery fellowships beginning in July 2015 will open on July 14, 2014 and will conclude on September 22, 2014.

For additional information about the application and match process for those interested in applying for a non-ACGME Colorectal or Thoracic surgery fellowship, visit: https://fellowshipcouncil.org/applicants-for-fellowship.

For general information, visit: https://fellowshipcouncil.org/, email info@fellowshipcouncil.org or call (310) 437-0555, ext. 138.

# FLEXIBLE ENDOSCOPY COMITTEE

# Therapeutic Flexible Endoscopy Course for Fellows Is Now Open!

This year's Fellow's course will take place September 19-20, 2014 at the University of South Florida's Center for Advanced Medical Learning and Simulation (CAMLS). The course is free for 60 Fellows (excluding travel) and available on a first-come-first served basis. To attend, Fellows must register through the website (listed below), become Candidate members of SAGES, and submit a fully refundable deposit.

To register, go to: www.SignUp4.net/Public/ap.aspx?EID=20143411E&TID For more information, visit: www.sages.org/mis-fellows-course/Questions? Contact christine@sages.org.

# 2014 IRCAD VISITING FELLOWSHIP AWARD



I had the great honor of receiving the 2014 IRCAD visiting fellowship award. This award, generously funded by Storz afforded me the opportunity to spend a week at IRCAD in Strasbourg, France. This not only gave me access to the cutting edge facilities at IRCAD but more importantly allowed me to interact with the incredible staff of researchers, clinicians, engineers and fellows at IRCAD. The advanced imaging facilities at IRCAD and the Image Guided Hybrid Surgery Institute (IHU Strasbourg) have allowed me to further my research into hybrid endoscopic and interventional radiology techniques. With the support of Dr. Diana and the other fellows we were able to complete two research projects within a short time period.

The ability to collaborate and brainstorm with this innovative group has exposed me to new ways of thinking and is sure to have a lasting influence on my research and future career.

I believe that the opportunities exemplified by the IRCAD visiting fellowship award are unique. Moreover, these opportunities exemplify the spirit of innovation at SAGES, its commitment to the professional development of its trainee members and its ultimate goal of advancing the science of surgery and patient care.

The opportunity to go to IRCAD and spend a week working on research has been amazing and unforgettable. I am truly grateful to SAGES for affording me this chance.

Eran Shlomovitz, MD

# **FUNDAMENTALS COMMITTEE UPDATE**



## **FUNDAMENTALS OF LAPAROSCOPIC SURGERY**

> The FLS committee has approved a new practice task for the FLS Trainer System. The Cannulation Task was developed by Committee Co-chair Melina Vassiliou and colleagues at McGill University, and is now available at www.vtimedical.com. For more information about this task and FLS, visit www.flsprogram.org.





# **FUNDAMENTALS OF ENDOSCOPIC SURGERY**

- FES Testing is now available at over 15 test centers across North America. Please click here to find out if there is one near you - www.fesprogram.org/testing-information/regional-test-centers. Special inaugural test voucher pricing is still available for a limited time at www.fesprogram.org.
- A cadre of endoscopic surgeons, gastroenterologists, and colon and rectal surgeons are convening to review the FES didactic online materials, to ensure continued relevance to the field of flexible endoscopy and up-to-date content. The first phase of the project is a retreat in Montreal in August.
- > Surgeons graduating residency in the 2017-2018 academic year or thereafter must complete the ABS Flexible Endoscopy Curriculum to be eligible for board certification in general surgery. The curriculum contains several milestones that must be attained through the course of general surgery residency training, one of which is successful completion of FES.



### FUNDAMENTAL USE OF SURGICAL ENERGY

- > The development of the FUSE multiple choice exam is now complete! Those who participated in the beta test should expect to receive their results this summer.
- The FUSE program is expected to launch nationally in July 2014. Please refer to www.fuseprogram.org for the most current information.

### HERNIA TASK FORCE

> Hernia Task Force Leaders convened in Montreal, Canada this June for a program planning retreat focused on inguinal hernia care.

# SAGES CONFLICT OF INTEREST TASKFORCE (CITF) UPDATE

THE FOLLOWING ABSTRACT CAPTURES THE CITF'S RECENT EXPERIENCE IDENTIFYING AND MANAGING CONFLICTS OF INTEREST.

The full article is available at http://link.springer.com/article/10.1007/s00464-014-3571-1

### A COMPREHENSIVE PROCESS FOR DISCLOSING AND MANAGING CONFLICTS OF INTEREST REDUCED PERCEIVED BIAS AT THE SAGES ANNUAL MEETING

<u>Steven C Stain, MD</u>, Erin Schwarz, Phillip Shadduck MD, Paresh Shah MD, Sharona B Ross MD, Patricia Sylla MD, Yumi Hori, C D Smith MD, Albany Medical College, Albany, NY; BSC Management, Los Angeles CA; Duke Regional Hospital, Durham NC; New York University, NY NY; Florida Hospital Tampa, Tampa FL, Massachusetts General Hospital, Boston MA, Mayo Clinic Jacksonville, Jacksonville FL

### **INTRODUCTION**

The relationship between SAGES, its member surgeons and industry has been longstanding, productive technologically, and beneficial to patient care and education. In order to both maintain this important relationship as well as to honor its responsibility to society for increasing transparency, SAGES established a Conflict of Interest Task Force (CITF) and charged it with identifying and managing potential conflicts of interest (COI) and limiting bias at the SAGES Annual Scientific Meetings. To fulfill this responsibility, the CITF developed and implemented a comprehensive process for reporting, evaluating, and managing COI in accordance with ACCME guidelines.

### **METHODS**

From 2011 to 2013, all presenters, moderators and session chairs received proactive and progressively increasing levels of education regarding the CITF rationale and processes. All presenters and faculty at the Annual Meeting (faculty, session directors, session moderators, course chairs, and program chairs) were required to disclose all relationships with commercial interests. All disclosures were reviewed and discussed by multiple layers of reviewers, including moderators, chairs, and CITF committee members. Tiered, prescribed actions were implemented in a standardized, uniform fashion (table below).

	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	LEVEL 5
	Nothing to Disclose	Non-relevant Relationship	Relevant Relationship	Relationship with Owner- ship Interest	Employee of commercial interest
Action by SAGES	Review for Accuracy	Review by Moderator & CITF	Peer Review required prior to Presentation, with changes to Presentation as appropriate	Automatic Peer Review prior to Presentation, with changes to Presentation as appropriate	Presenter Removed from Faculty
Resulting Actions	Print & Present Disclosures	Print & Present Disclosures	Letter to Faculty Explain- ing Policy; Print & Present Disclosures	Letter to Faculty Explain- ing Policy; Print & Present Disclosures	Presentation not Allowed

All attendees at the Annual Meetings were strongly encouraged to complete anonymous surveys regarding perceived biases. The CITF database was then analyzed and compared to the reports of perceived bias to determine if the implementation of this comprehensive process had been effective.

RESULTS									
	Number of faculty, presenters, mod- erators, and chairs	Number of faculty, presenters, mod- erators, and chairs	Resolved by CITF	Presentations Reviewed in Advance of Mtg	Changes made to presentation	Speaker Replaced	Reported Bias by Attendees		
	No industry relationships	Yes industry relationships							
2011	Data not avail	Data not avail		6	0	0	18/802 2.2%		
2012	350	173	124	49	8	1	10/797 1.2%		
2013	264	190	103	93	20	0	11/717 1.5%		

In the three years prior to the implementation of this process, reporting of bias by meeting attendees was 20/427 (4.7%) in 2008, 37/596 (6.2%) in 2009, and 38/856 (4.4%) in 2010. Following implementation of this process, reports of bias were reduced to 1.2-1.5%.

### CONCLUSION

It is possible to have a surgical meeting that includes participation of speakers that have industry relationships. Implementation of a comprehensive, standard-ized process for reporting, evaluating, and managing COI resulted in a reduction of perceived reports of bias from 4.4-6.2% to 1.2-1.5%, as reported by annual meeting attendees in anonymous surveys.

# SAFE CHOLECYSTECTOMY TASK FORCE UPDATE



Although it's been almost 25 years since laparoscopic cholecystectomy transformed the surgical world, we continue to see major bile duct injuries that occur during this most common of procedures. Nearly 850,000 cholecystectomies are performed annually in the United States; 90% of them are performed laparoscopically. The overall rate of major bile duct injury during laparoscopic cholecystectomy ranges from 0.2% to 1%, which translates to 3000 or more bile duct injuries in the US each year. This complication rate remains higher than that seen with open cholecystectomy, despite continuing experience with the minimally invasive approach. Moreover, the occurrence of a major bile duct injury can be devastating for a patient's life, who otherwise would have undergone an outpatient procedure with prompt return to his/her normal activities.

SAGES have formed the Safety in Cholecystectomy Task Force with the dual goals of reducing biliary injuries resulting from cholecystectomy and improving the quality of surgical patient care. The group has designed a Delphi survey and has distributed it to over 400 committee members in an effort to develop expert consensus on the factors deemed important for the safe performance of cholecystectomy. The results of this survey will guide the committee and bring focus to the project. The Task Force plans to roll out the first phase of this multimodal initiative within a year.

A sub group of the task force will meet in St. Louis, Missouri for a summer retreat to review the Delphi results and further refine their strategic plan.

# SAGES SMART PROGRAM

SAGES has established a multidisciplinary Enhanced Recovery Task Force, the SMART Program(Surgical Multimodal Accelerated Recovery Trajectory) in order to promote the adoption of patient-centered Enhanced Recovery care principles that further enhance the value of minimally invasive surgery, improving outcomes, efficiency and cost. The task force includes subspecialty surgeons (colorectal, upper GI, bariatrics, HPB, abdominal wall), anesthesiologists and nurses.

The SMART task force will create enduring educational resources, focusing on laparoscopic surgery, including postgraduate courses and workshops, and develop evidence-based guidelines for optimal perioperative care of patients undergoing minimally invasive surgery, to help SAGES members adopt these principles into their practice.

The SMART task force will work towards identifying evidence gaps in the literature where further research may be beneficial, such as prehabilitation (exercise and psychological preparation for surgery), multimodal analgesia techniques for laparoscopic surgery and fluid management. The SAGES task force will also work to identify, develop and validate metrics to help measure improvements in patient outcomes related to the SMART program. A research grant in this area will be available to support the creation of metrics, implementation of enhanced recovery programs, or clinical trials.

SAGES is committed to promoting the coordinated activity of surgeons, anesthesiologists and nurses to provide a seamless perioperative care plan capable of extending the value-based advantages of minimally invasive GI surgery. It will foster this effort through educational and research activities that promote wider implementation of Enhanced Recovery Pathways.

A full day postgraduate course was held on April 2, 2014 at the SAGES annual meeting with strong attendance and stimulating discussion. We will next be partnering with the McGill University Health Centre on a one-day symposium this November in Montreal. We encourage surgeons, anesthesiologists and surgical nurses to attend as institutional teams as we will address the issues related to the organization of Enhanced Recovery Programs for for digestive surgery. An invitation will be sent to all SAGES members in fall of 2014.

**SUMMER 2014** 

# **GUIDELINES COMMITTEE UPDATE**

SAGES members may now review and comment on draft guidelines on the SAGES website. The Guidelines committee will consider all the comments posted in the members only section moving forward from the draft to the final document. For consideration all comments must be received within 30 days of the initial post. You may now review the following guidelines at this link: www.sages.org/publications/guidelines

### **GUIDELINES IN REVIEW:**

> Guidelines for Laparoscopic Ventral Hernia Repair (May 2014)

### ALSO PLEASE CONSIDER CHECKING OUT THE NEWLY APPROVED GUIDELINES:

- > Guidelines for the Introduction of New Technology And Techniques (April 2014)
- > Guidelines for Laparoscopic Peritoneal Dialysis Access Surgery (May 2014)





# **HUMANITARIAN MISSION REGISTRY**

Share your volunteer/humanitarian experience – so others may join you!

SAGES members have an extraordinarily high rate of contributing to humanitarian efforts, both locally within your communities and internationally on medical missions. We would like to facilitate these efforts by highlighting volunteer opportunities and providing information to our surgical community. Please consider uploading information about your medical volunteer experiences on the SAGES website to help facilitate other SAGES members joining your efforts. Visit www.sages.org/humanitarian-service





# SAGES FOUNDATION UPDATE



Thank you to those SAGES members who annually contribute to the SAGES Research & Education Foundation. The SAGES 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. This past year, the SAGES Foundation was able to distribute close to \$400,000 in grants.

### **DONOR NEWS**

Dr. Pon Satitpunwaycha, a twenty-year member of SAGES, made a transformational \$500,000 gift in January 2014. This is largest, individual gift ever received by the Foundation. The Foundation's staff and Board of Directors offer Dr. Satitpunwaycha our most heartfelt appreciation. His gift will be used to fund training programs in developing countries.

# THE 2014 SAGES FOUNDATION AWARDS LUNCHEON RECAP:

The 8th Annual SAGES Foundation Awards Luncheon was held on Wednesday, April 2 at the Salt Palace Convention Center. Once again, a select group of outstanding, accomplished, and reputable leaders were recognized. All proceeds from the luncheon will be used for future minimally invasive research and educational opportunities!





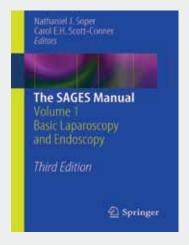


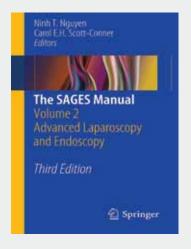


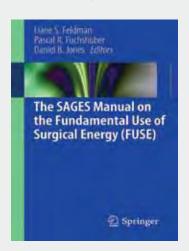


# **SAGES Manuals**

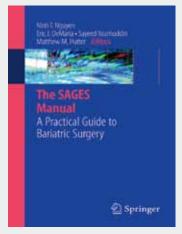
The SAGES Manuals are portable, concise, beautifully illustrated manuals from the world's pioneering society of minimally invasive surgery.

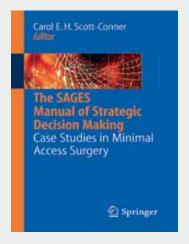




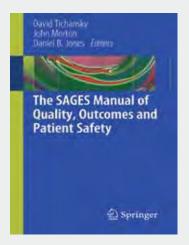












# **Forthcoming SAGES Manuals:**

The SAGES Manual Operating Through the Endoscope

Kroh, Reavis (Eds.)

The SAGES Manual of Groin Pain Jacob, Chen, Ramshaw, Towfigh (Eds.)

The SAGES / ERAS Manual of Enhanced Recovery Programs for Gastrointestinal Surgery

Feldman, Delaney, Ljungqvist, Carli (Eds.)

# SAGES & ASGE Present the 9th International NOSCAR® Summit

July 10-12, 2014

# ASGE IT&T Center, Downers Grove, IL

Course Directors: David Desilets, MD, PhD and Patricia Sylla, MD

Course Co-Directors: John Romanelli, MD and Stavros Stavropoulos, MD

The 9th International NOSCAR Summit will take place at the ASGE Institute for Training and Technology in Downers Grove, IL. Updates on NOTES® and NOSCAR procedures from around the world will be presented through video sessions and didactic lectures. A renowned international faculty will present updates on critical topics at this three-day course.

### **SESSION TITLES:**

- NOSCAR Trial Update and Results
- Update on NOTES Simulation Development
- NOTES Transvaginal Cholecystectomy
- > Endoscopic Full Thickness Resection
- Pathway Forward to Clinical NOTES
- Transanal NOTES Update 2014
- NOTES in the Lab/Videos
- Endoluminal Bariatric Procedures
- POEM: Update 2014

### **ADDITIONAL TOPICS INCLUDE:**

- Retract Ligate Unroof Biopsy (RLUB)
- Subepithelial Tumors
- Colorectal ESD
- Early Rectal Cancers
- SLNBx in Colorectal Cancer
- Single Site Surgery
- Endoscopic Suturing
- POEM



The NOSCAR Summit promises to be a comprehensive and up-to-date summary of the state-of-the-art in NOSCAR research and technical advances.

Visit www.noscar.org or contact Liz O'Keefe at (630) 570-5623 or liz@noscar.org for more information.

**SUMMER 2014** 

# SAGES COMMUNICATIONS COMMITTEE

The SAGES Communications Committee has completed three major projects in the last 6 months and is actively working on several more. Our two-year overhaul of the SAGES web site is nearing completion and we are happy to report that our surgical media sections have all received major overhauls to their looks and functionality:



SAGES TV Surgery Video Library: www.sages.org/videos



SAGES Image Library: www.sages.org/image-library



SAGES Surgical Wiki: Member-generated articles on MIS www.sages.org/wiki

We encourage all members to visit the above areas and try out the new functionality. Tell us what we can do differently or better!

Email webmaster@sages.org or reach out to us on Twitter (http://twitter.com/sages\_updates) or Facebook (www.facebook.com/SAGESSurgery)

Up next are continued improvements and refinements to the web site including translations of popular content into several languages. Keep visiting the site for more information as it becomes available!



# **OPEN TO MIS**

The mission of the Open to MIS initiative is to improve the overall value of patient care through promoting the adoption of and access to minimally invasive surgical techniques.

At the annual SAGES meeting in Utah, the committee refined phase one of Open to MIS, "Get Well Sooner". The newly approved pilot program will focus heavily on promoting the adoption of and access to minimally invasive surgical techniques in two therapeutic areas, colorectal and hernia. The

pilot program seeks to improve the adoption of these procedures in a targeted area in Central Florida with low adoption rates currently. Benchmark data is being gathered in an effort to "measure" adoption rates before and after the PR campaign.

In November of 2014 SAGES will host a kickoff event in Florida to promote the Get Well Sooner Campaign to media, elected officials and the general public. Through partnerships with local hospitals and non-profit organizations SAGES hopes to raise public awareness about minimally invasive surgery and encourage primary care providers and referring physicians to participate in the initiative. This public relations campaign will be augmented by the national distribution of a PSA spot highlighting the benefits of minimally invasive surgery.

Please visit the Getwellsooner.org website to view the PSA spot and for more information tailored for patients and primary care providers.

www.getwellsooner.org



Program Chair: Aurora Pryor, MD Program Co-Chair: Michael Holzman, MD







www.sages.org • www.sages2015.org





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Society of American Gastrointestinal and Endoscopic Surgeons
Executive Director: Sallie Matthews

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# SAVE THESE DATES! SAGES FUTURE ANNUAL MEETINGS

SAGES SCIENTIFIC SESSION & POSTGRADUATE COURSE (W/IPEG)

April 15-18, 2015, Gaylord Opryland Hotel & Convention Center, Nashville, TN

SAGES SCIENTIFIC SESSION & POSTGRADUATE COURSE

March 16-19, 2016, Hynes Veterans Memorial Convention Center, Boston, MA

**SAGES SCIENTIFIC SESSION & POSTGRADUATE COURSE** 

March 22-25, 2017, George R. Brown Convention Center, Houston, TX