**MESSAGE FROM THE PRESIDENT**

**FLS and its future potential in surgical education**

**Our Strong Educational Credentials**

For 20 years SAGES has kept ahead of the curve on surgical education. Our training-the-trainers courses in Lap Chole brought minimal access surgery to the academic world which was slow in adopting the technique. Surgical residents from every state have learned techniques for flexible endoscopy, and basic and advanced laparoscopic procedures at SAGES hands-on courses since the early 90's. SAGES published a document entitled “A Framework for Post-Residency Education” that has been emulated by major medical organizations in the U.S. and abroad. The list goes on.

**Changing Needs**

Laparoscopic surgery, new budget constraints and a changing healthcare world have caused us to look at surgical education through a new prism. What’s more, basic laparoscopic surgery is still not uniformly or efficiently taught to all practitioners or residents. Short courses do provide some exposure but are expensive, require travel/course time and don’t have ample opportunity for practice of technique before testing. Residents are taught the traditional one-on-one method, but we have not yet standardized the teaching of video procedures in the same way we teach open procedures.

**FLS As A New Approach**

FLS (Fundamentals of Laparoscopic Surgery) is a combined didactic unit and skills testing module that should address some of the basic difficulties in broad-based standardized testing.

Dr. Lee Swanstrom and I worked with an energetic task force to create an interactive CD-ROM coupled with a trainer box to teach both cognitive and physical laparoscopic skills. The learning module will teach the underlying physiology and fundamentals of laparoscopic surgery. It will also institute something long missing from surgical education: a standardized skills test. Dedicated surgical educators have helped write didactic content and knowledge-based testing components of the program. The skills portion was developed and has been updated by Dr. Gerald Fried at McGill University in Montreal.

The long term goals of this project are: 1) To ensure that surgeons performing laparoscopy can obtain the basic knowledge and technical skill level to perform these procedures safely, and 2) To ensure residents completing a general surgery residency are knowledgeable and proficient in basic laparoscopic surgery.

**Why Is it Important? What is its potential?**

Through FLS, surgeons, residents & fellows will now be able to study and practice laparoscopic surgical procedures and techniques...

Continued on page 24.
New research review policy

For almost 10 years SAGES has held various policies concerning grant reviewers and potential conflicts of interest. While SAGES strived to go beyond the norm in avoiding the appearance of conflict, the Board has now clarified the policy. Previously, a reviewer recused him/herself from the entire grant reviewing process if another person from his/her institution had submitted an application. The research committee requested a change in policy as we now have more grants available, a higher number of applicants and an unnecessarily strict exclusion of reviewers. The new rule indicates that a reviewer must recuse him/herself from the specific grant review of his own paper or that of another person from his institution. However, he/she may participate in the overall grant review process.

Contract renewed with Springer Verlag for Surgical Endoscopy

After a year of discussions SAGES has renewed its publishing contract with Springer Verlag for another five years. Included in the new agreement is a business unit combining SAGES and EAES, which will work together toward the growth of the Journal and partner with Springer Verlag in this venture.

New slate of officers, voted in April 1, 2000

Officers and Members of the Executive Committee:

President - Nathaniel Soper, MD
President-Elect - L. William Traverso, MD
1st Vice President (two-year term) - Bruce Schirmer, MD
2nd Vice President (two-year term) - Jonathan Sackier, MD (Completing 2nd year)
Secretary (three-year term) - Lee Swanstrom, MD
Treasurer (three-year term) - Daniel Deziel, MD (Completing 3rd year)

Board Members – Three-Year Terms:
Re-Appointments:
Stephen Eubanks, MD
Carol Scott-Conner, MD

New Board Members:
Keith Apelgren, MD
Jo Buyske, MD
David Edelman, MD

Rotating Off the Board:
Karen Deveney, MD
Co. Richard Satava, MD
Irwin Simon, MD

It should be noted that Surgical Endoscopy was cited among the “Top Group – leading, high-impact and widely read (worldwide) subspecialty surgical and ‘surgical interest’ journals” in a paper entitled “Where can surgeons publish?” (Br J Surgery Volume 87).

View – A Critical Look at Endo Surgery

This section of SCOPE explores the science and ethics of surgical endoscopy and attempts to address some controversial questions. Your thoughts and comments will be enthusiastically received. Letters to the editor will be published on a space-available basis.

The Role of the Expert Witness

by Keith N. Apelgren, MD

Many surgeons and members of SAGES may be asked to serve in the role of an expert witness. At the recent SAGES meeting in Atlanta, a panel discussion was held on Saturday, April 1, 2000, to discuss these issues. This is a summary of that panel.

Dr. Ed Phillips was the first speaker. He stressed the qualifications of the expert witness, including board certification, knowledge of the literature, being a practicing specialist in the same field as the defendant and having experience with the procedure in question. He also stressed that the duty of the expert witness was to review the records and to request any additional records that might exist. The expert should advise the attorney of any lack of information and areas where controversy exists. He should also advise the attorney of the weaknesses of the case. The expert should “objectify the medicine for the jury” and be able to communicate well to the jury and withstand cross-examination.

Dr. Doug Olsen spoke from the perspective of the plaintiff’s expert. Dr. Olsen has testified as a plaintiff’s expert in the past, Continued on page 3.
New candidate representative to the Board is named

For several years, SAGES has appointed an ex-officio member to the Board of Governors from among active resident/fellow members of the Society. Nominations come from the leadership and are evaluated by the Resident Education Committee which makes its recommendation to the Board for approval.

The new Candidate representative to the Board will be Stephen Archer, a fellow at Emory University. Dr. Archer succeeds Dr. Ed Chekan who now serves on three SAGES Committees. Dr. Archer has been active in SAGES activities since he joined in 1997. He has served on SAGES Resident Education, Program and Outcomes committees and assisted in the abstract review process.

creation of a dot.com task force

Jeffrey Peters, as one of the last actions of his presidency, created a dot.com task force headed by Past President Col. Richard Satava, MD. The two major thrusts of the group are:

◆ To determine the value of SAGES materials and content to Internet outlets; to evaluate methods and paths to integrate SAGES content to those outlets in a manner most beneficial to the society and its members.

◆ To determine a long term strategy and goals for SAGES own presence on the web through its website.

The group already met at the annual meeting and developed a mission statement and several initial recommendations for the Executive Committee.

SAGES commemorates 20th ANNIVERSARY!

Twenty years ago a small group of visionary surgeons banded together to focus on an idea. The idea was that surgeons should continue to perform flexible endoscopy. Among the visionaries were surgeons like Ken Forde, Tom Dent, John Coller, John Van Sant, James Lind, Steve Hedberg, Fred Ackroyd, Tom Bombeck, Carl Knutson, John Ray, Frank Theuerkauf, Byron Gathright, Herand Abcarian, Whitney Boggs, Joe Bowden and Ted Schrock. The organizers of SAGES defined goals, crafted a strategy and set out to change the world of surgery. They founded an organization named SAGES to do it.

During the past 20 years SAGES metamorphosed from maverick to leader. Ten years after the first gathering, their vitality preserved; their enthusiasm in tact, their sense of scientific truth well-balanced, they led the laparoscopic revolution. This year we commemorate the founding of our Society and honor those whose vision secured endoscopy as the purview of the surgeon.

A Year of Activities…

◆ We presented a 15 foot commemorative display at SAGES 2000 in Atlanta. It included great old (and new) photos, accomplishments, and milestones. Look for this remembrance during ACS in Chicago

◆ A 20 year commemorative book will be published before year’s end.

◆ We will honor the founding Board at the 2001 Meeting in St. Louis. Join us as we say “thanks” for putting it on the line two decades ago.

View continued from page 2.

although he stopped doing that four years ago. He stressed three reasons why it is important to be an expert witness. The first is the duty to the profession. We do have a duty to police our own and to provide reasonable analysis and definition of the “standard of care.” If actual practicing surgeons do not do this, the attorneys will hire any physician to testify. Such physicians are not well qualified, not objective, but are willing to testify.

The second reason given by Dr. Olsen is that we have a duty to the patient, who may have suffered from negligent surgical care. Dr. Olsen stressed that the expert is expected to be impartial and to pro-

Continued on page 22.
Committee Updates

2000-2001 Committee Chair/Co-Chair List

Assets Management/Finance:
- Finance Chair: Daniel Deziel, MD
- Assets Chair: Joe Petelin, MD

Awards:
- Chair: Wayne Schwesinger, MD

By-Laws:
- Chair: Lee Sillin, MD

Continuing Education:
- Chair: David Rattner, MD
- Co-Chair: C. Daniel Smith, MD

Credentials:
- Chair: Steven Wexner, MD
- Co-Chair: Demetrius Litwin, MD

Development:
- Chair: Steven Schwartzberg, MD
- Co-Chair: Dennis Fowler, MD

Dot.com Task Force:
- Chair: Col. Richard Satava, MD

Educational Resources:
- Chair: David Edelman, MD
- Co-Chair: Gerald Fried, MD

Ethics:
- Chair: Thom Lobe, MD

Fls Task Force:
- Chair: Lee Swanson, MD
- Co-Chair: Gerald Fried, MD

International Relations:
- Chair: Ramon Berguer, MD
- Co-Chair: Harry Himal, MD

Legislative:
- Chair: Aaron Fink, MD
- Co-Chair: Daniel Jones, MD

Membership:
- Chair: Sherry Wren, MD
- Co-Chair: Adrian Park, MD

Nominating:
- Chair: Jeffrey Peters, MD

Outcomes Task Force:
- Chair: L. William Traverso, MD
- Co-Chair: John Hunter, MD

Public Information:
- Chair: Eli Lerner, MD
- Co-Chair: Jo Buyske, MD

Publications:
- Chair: Kenneth Forde, MD
- Co-Chair: Desmond Birkett, MD

Research:
- Chair: Mark Callery, MD
- Co-Chair: Karen Horvath, MD

 Resident Education:
- Chair: W. Stephen Eubanks, MD
- Co-Chair: Jeffrey Marks, MD

Standards of Practice:
- Chair: Keith Apelgren, MD
- Co-Chair: Paul Hansen, MD

Technology:
- Chair: Steven Schwartzberg, MD
- Co-Chair: Daniel Herron, MD

Non-Voting Advisors To the Board:
- George Berci, MD
- Tom Dent, MD
- Col. Richard Satava, MD

Publications Committee

Drs. Larry Whelan and James Fleshmann have been appointed Co-Editors of the second SAGES book publication, entitled “SAGES Manual of Pre and Post Operative Care of the Laparoscopic Patient.” This new manual will cover the topics of preoperative management and evaluation, intraoperative management of the laparoscopic patient, physiologic implications of CO2 pneumoperitoneum and minimally invasive methods, and postoperative management of the laparoscopic patient. There will be no overlap with the existing SAGES manual, “Fundamentals of Laparoscopy and GI Endoscopy.” Authors will be invited over the summer, including both SAGES members and outside experts, national and international. A small editorial board will be appointed to oversee development and production of the manual. Springer-Verlag will once again serve as publisher.


Public Information Committee

PCP Web Page To Be Launched This Summer

SAGES Public Information Committee has focused on several steps we should take to achieve one of our goals which is Primary Care Provider Education. A new web page targeted specifically for primary care physicians will be launched early this summer. The site will contain a series of chapters based on patient oriented information extracted from the SAGES manual. Each section will focus on PCP interests such as patient selection, indications, contra-indications, complications, basics of technique.

Goals:
- To make primary care providers (PCPs) more aware of endoscopic surgical options for treatment of various diseases and conditions.
- To provide information to PCPs in a user-friendly format.
- To enable PCPs to have access to a roster of local surgeons who are involved with and interested in endoscopic surgery…the SAGES membership.
- To make PCPs aware of SAGES as a resource for information and updates on minimal access surgery and endoscopy.

If you want to direct your primary care physician to this page, the address is: http://www.sages.org/primarycare/ and it will be available after August 15, 2000.

See highlights from the 2000 SAGES meeting online at http://webevents.broadcast.com/sages/2000/home.asp!
MEMBERSHIP COMMITTEE

With the election of new members at the March meeting, SAGES is edging toward the number 4,000 as the total number of members. The chart demonstrates the percentages of our members from various sectors. Attesting to the present health and future growth of the Society, candidate membership is rising at twice the rate of active members and now comprises almost 20% of all members.

Accepted Applications for the Spring 2000 Cycle:

<table>
<thead>
<tr>
<th>Total: 159</th>
<th>Breakdown:</th>
<th>Active: 45</th>
<th>Active Int: 19</th>
<th>Candidate (US): 90</th>
<th>Candidate (Int.): 5</th>
</tr>
</thead>
</table>

Total SAGES Members by Category as of June 2000

- 2,685 Active members
- 281 International (Active) members
- 773 Candidate members
- 198 Senior members
- 20 Honorary members
- 11 Hiatus (due to illness or financial difficulty, their membership is on hold) members
- 3,968 TOTAL MEMBERS

Dr. Joszef Sandor, of Budapest Hungary, was elected to Honorary Membership in SAGES. His induction will take place at the 2001 meeting. Dr. Sandor has been a member of SAGES since October 1991 and is considered a pioneer in endoscopic surgery in Hungary. He has served on SAGES program and international committees as well as on the faculty of several annual meetings.

International Group Membership

After the important pilot project with ALACE, SAGES Board of Governors has now opened a path to enable international group membership. Rather than the intense process of individual membership application, groups may petition for international group affiliate membership. The criteria for applying are:

✦ The group must be convened outside the U.S.
✦ The group must have a minimum of 50 members who participate in the affiliate group.
✦ The group must have been in existence more than three (3) years.

The above criteria qualify a group to apply for international group member status, but group membership is by no means automatic. The Governing Board will consider each application individually, make a determination and negotiate the terms of the group affiliation.

THE SAGES EDUCATION & RESEARCH FOUNDATION

The SAGES Board of Governors has approved the SAGES Education & Research Foundation Special Matching Funds this year. Last year the SAGES Board of Governors had agreed to match dollar-for-dollar the individual contributions of its members, up to a total of $500,000. The Board has been encouraged by the response from members. So, at its recent meeting they voted an even greater incentive to giving, re-confirming its strong support for the Foundation.

The SAGES Board of Governors voted that the Society will match all contributions to the FOUNDATION received before the end of the fiscal year (June 30) with $2 (two) for every $1 (one) you donate. If you have already made a pledge, we encourage you to make your payment now and suggest you consider stepping up your actual contribution this year to maximize its impact on the Foundation. A donation sent now will have triple value. If you donate $100, The Society will donate $200, for a total of $300. If you donate $1,000, The Society will donate $2,000 for a total of $3,000.

The Foundation is the key to assuring the future of endoscopic surgery, as well as high quality training and research. It will enable us to be independent of the random forces of medical economics. To date we have more than $300,000 in individual pledges from individual SAGES members…and almost $3,000,000 from industry. Our goal is to obtain pledges of $500,000 from the entire SAGES membership and a total of $10,000,000. The SAGES Board of Governors has, through its matching program, made this goal easier to accomplish. Please do your part. To obtain a pledge or donation form, please call 310 314-2536.
Three of SAGES major awards are open for nomination from our members. You may obtain a copy of the form(s) online or by calling or faxing the SAGES office. We encourage you to participate in this process so that we may honor those who have contributed a great deal to endoscopic surgery and to SAGES.

**SAGES Distinguished Service Award**
- The Award is designated for an endoscopic surgeon who is a member of SAGES.
- The award will be granted for a significant, long-term educational, research, clinical and/or technological contribution to the field of surgical endoscopy as well as to SAGES.
- The award will not necessarily be given every year but bestowed when the Board determines a worthy nominee, who is approved first by the Awards Committee. This award is intended for those whose efforts have substantively contributed to, changed or improved the field of endoscopy or enabled SAGES to do so.

**Pioneer in Endoscopy Award**
- The Award is designated for a person in industry, not a physician/surgeon. The award will be given to an individual, not to a company.
- The award will be granted for a significant, long-term scientific or technological contribution to the field of surgical endoscopy, significant, long-term scientific or technological contribution to the field of surgical endoscopy.
- The award will not be given every year but bestowed when the Board determines a worthy nominee. It is intended for those whose efforts have substantively changed and improved the field of endoscopy.
- One person may not receive the award twice, but it is for a body of work as opposed to an individual achievement.

**The George Berci Lifetime Achievement Award in Endoscopic Surgery**
- This is the highest honor SAGES bestows.
- It is bestowed for a lifetime contribution as an innovator in the field of endoscopic surgery which may be scientific, technological or educational.
- It is designated to be granted to an endoscopic surgeon.
- The awardee may or may not be a member of SAGES.
- The award will not necessarily be given every year but bestowed when the Board determines a worthy nominee.

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**Dr. Jeffrey Ponsky received the prestigious Distinguished Service Award for 2000. His plaque read: “You have cared about patients, strengthened surgical education and nurtured SAGES from fledgling to leader. You have given not only time and energy, but heart. In so doing you have advanced surgical endoscopy and the entire surgical community”**

(L to r) Drs. Bruce Schirmer, Kenneth Forde, Jeffrey Ponsky, Jeffrey Peters

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**BOOK CORNER**

The following books are authored or co-authored by SAGES members.

**Minimal Access Surgical Anatomy**
By Scott-Conner CEH, Cuschieri A, Carter F.
Published by Lippincott Williams and Wilkins.
Available wherever medical books are sold. Released at the SAGES meeting!

This unique text uses more than 200 high quality laparoscopic photographs paired with line drawings to illustrate regional anatomy as seen through the laparoscope. It is intended to be a reference work of potential interest to all laparoscopic surgeons.

**Endosurgery for Cancer**
By Steve Eubanks, Ricardo Cohen, Riad Younes, Frederick Brody (Editors)
Published by Landes Bioscience, 1999

It critically analyzes, in a clear and objective way, what has been done, what is being done and what is being developed in the fields of Videolaparoscopy and Videothoracoscopy. Contributors include representatives from several continents and countries providing the reader with an international flavor and a broad perspective of the appropriate applications of endosurgery in the cancer patient. Published 09/99.
Located at the population center of the United States, St. Louis is within a one-day drive of 1/3 of the nation’s population, and is no more than a 3 hour flight from anywhere in the country. From its beginnings as a simple French village founded in 1764, St. Louis has grown to be the “Gateway to the West.” Some of its most notable attractions include:

- The Gateway Arch: America’s tallest monument
- The Mississippi River & its Glorious River Boats
- The world famous St. Louis blues music!
- The St. Louis Cardinals, the Blues, & the Rams (winner of the 2000 Super Bowl)
- Mark McGwire: Baseball’s home run record holder!
- Forest Park: Site of the 1904 World’s Fair and home to the St. Louis Zoo, Science Center, Art Museum, Botanical Garden and “The Muny”
- The Scott Joplin House
- America’s 2nd largest Mardi Gras celebration

**2001 Annual Meeting**

David W. Rattner, MD, Program Director

**Two Hands-On Courses:**

- **Taking it to the Next Level - Advanced Laparoscopic Techniques (animate)**
  Lee Swanstrom, MD, Course Director
- **CBD (inanimate)**
  Joe Petelin, MD, Course Director

**Five 1/2 Day Postgraduate Courses:**

- **The Surgeon in the Digital Age (Basic & Advanced)**
  Steve Schwatzberg, MD, Course Director
- **Laparoscopic Bariatric Surgery Update**
  Phil Schauer, MD, Course Director
- **Minimal Access Pediatric Surgery Update**
  Thom Lobe, MD, Course Director
- **Problems Following Fundoplication**
  Michael Holzman, MD, Course Director

**Also Available:**

- **Scientific Session Panels featuring the latest developments in Minimally Invasive Surgery**
- **Nurses Course, Trudy Kenyon, RN, Course Director**
- **Technical Exhibits: New products debut here!**
- **Fabulous Social Events and networking opportunities**

**ON-LINE ABSTRACT SUBMISSION**

AFTER JULY, 2000 for the 2001 Meeting
http://www.sages.org/abstracts

**REGISTER ON-LINE AFTER NOVEMBER, 2000:**

http://www.sages.org/registration

An Advance Program & registration/housing information will be sent to all SAGES members in Fall, 2000.
HOLD THE DATES!

**ALACE**
September 19 - 22, 2000
Quito, Ecuador

**SAGES Pre-Meeting Course:** Sept. 19, 2000, Quito, Ecuador

**8th WORLD CONGRESS OF ENDOSCOPIC SURGERY**

**SAGES SCIENTIFIC SESSION & POSTGRADUATE COURSE**
March 13-16, 2002
New York Hilton & Towers, New York, NY

**SAGES SCIENTIFIC SESSION & POSTGRADUATE COURSE**
March 12-15, 2003
Los Angeles Convention Center, Los Angeles, CA

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**SAGES AMA Advisory Committee Representatives Chosen**

After consideration of the many worthy candidates, SAGES President Nathaniel Soper is proud to announce SAGES representatives to the AMA CPT (Current Procedural Terminology) and RUC (Relative Value Scale Update) Advisory committees: Dr. Eric Weiss will serve as the CPT advisory committee representative and Dr. Thom Dent will serve as the RUC advisory committee representative. Dr. Weiss is in practice at the Cleveland Clinic Florida and sits on the ASCRS socio-economic committee. He participated in the development of the ASCRS proposal for four new CPT codes, an extensive and educational process. Dr. Dent is the current Chairman of the Department of Surgery at Abington Memorial Hospital and served on the ACS CPT Coding Committee.

Thanks goes to those who expressed interest in serving in one of these capacities. It was moving to learn that so many SAGES members were willing to represent the needs of our group in this way. Thank you all.

We know that Dr. Dent and Dr. Weiss will vigorously and diplomatically proceed on SAGES behalf in this vital arena. Congratulations and good luck!

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**ONLINE COMMUNIQUE**

A number of new resources have been added to the SAGES web site recently.

- The SAGES 2000 Scientific Session webcast is now online and is available to everyone at no cost at http://webevents/broadcast.com/sages/2000/home.asp (details page 14).
- Streaming video presentation shown first at the SAGES 2000 meeting available at http://www.sages.org/worms (details page 14). This is but the first of many videos from the SAGES Video Library that we will be placing on the web. Look for five more new selections in August.
- SAGES members can now stay in touch with each other through their new SAGESnet discussion list. More information is available from http://www.sages.org/members/ (Member registration required)
- We will be accepting abstracts for the 2001 Scientific Session through the web page this year. Full details, rules, and submission forms can be obtained from http://www.sages.org/abstracts/
- The web version of the SAGES Job Board continues to receive new requests for surgeons. If you are looking for a new position, please make http://www.sages.org/jobboard/ one of your first stops.
- Coming soon for SAGES Members: Vector graphic versions of both our original black and web gold logos for use in your slide and PowerPoint presentations.
The highest registration since the World Congress was part of the meeting’s huge success. Having trouble finding your way? Footsteps show you the path to where you’re going.

The Technical Exhibits were a huge hit as usual. The hall was packed during the 3 hour break each day. Major new innovations were showcased here for the first time.

Professor Tom DeMeester presents the Marks Lecture. His topic: Leadership.

Professor DeMeester is applauded for his thought-provoking lecture on leadership. (L to r) Drs. J. Hunter, B. Schimert, J. Peters, Dr. DeMeester, K. Forde, J. Ponsky, N. Soper.

Randolph Smoak, longtime SAGES member and President-Elect of the AMA presents one of the keynote lectures.

The Karl Storz Lecture in Innovative Technology was presented by Professor Tehmenton Udwadia. Congratulating him on his outstanding presentation, “One World - One People - One Surgery” are (l to r) Drs. Nat. Soper, Rick Satava, George Berci, Jeffrey Peters, Dr. Udwadia, John Coller and Gerald Marks.

Leaders of SAGES and IPEG with Ethicon Endosurgery representatives (l to r) Drs. Steve Rothenberg, President, IPEG, Dr. Bob Honigburg, Ethicon, Dr. Jeffrey Peters, President, SAGES, Dennis Longstreet, VP, Ethicon, Dr. Lee Swanstrom, Secy, SAGES.
In how many languages can you say "Have a Coke!"? The final night's festivities at the Coke Museum were pure rock and roll!

The Learning Center: Learn, turn, manipulate, drive, feel, maneuver. All verbs for more than 20 learning center stations in Atlanta. More than 80% of those attending the meeting stopped in to try the new "toys."

Let the Games Begin! SAGES Annual International Sing Off is becoming the hottest ticket in town. Here’s why: Surgeons from the U.S., Japan, Netherlands, Italy and parts unknown share the stage with The Peters Girls and the fabulous Gospel Singers for an evening of revelry, food and fun.
With more new products making their debut at SAGES, the Technical Exhibits have become THE premier site for introduction of new equipment and supplies. SAGES was pleased to welcome these exhibitors who newly appeared on the SAGES at the 2000 Atlanta Meeting. As a word of encouragement for companies who want to participate but who worry that being the “new kid on the block” will not translate into a successful show for them: Ask some of our new exhibitors what their experience was. One of these newcomers had standing room only on the opening exhibit evening. If you build a better mouse-trap…they will come!

**More than 30 new exhibitors!**

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**SAGES 2000 Scientific Session Online**

SAGES is proud to announce that our 2000 Scientific Session streaming audio and video webcast is now being shown at: http://webevents.broadcast.com/sages/2000/home.asp

Over 12 hours of audio, video, and slide presentations (including audience questions and discussion) are available. There is no cost to view the presentation, but registration is required.

**Topics include:**
- Laparoscopic Surgery: State of the Art
- Training and Credentialing in New Surgical Technology
- Hand-Assisted Laparoscopic Surgery
- Laparoscopic Hepatobiliary Surgery
- Ultrasound in International Surgical Practice
- Milestones in Endoscopic & Laparoscopic Surgery
- The Expert Witness: Role, Responsibility, and Accountability
- Adhesions and Operative Adhesives
- New Techniques/Technology
- Treating the CBD Stone: Endoscopic vs. Laparoscopic

**Featured speakers include:**
- The 2000 Karl Storz Lecture in New Technology
  “One World - One People - One Surgery” Professor Tehtmenton Udwadia, MD, FCPS, FRCS (ed), FRCS (Eng)
- Keynote Lecture
  “The AMA and American Surgery: Plans for Partnership in the Next Century” Randolph Smoak, MD, AMA President
- The 2000 Gerald Marks Lecture
  “Reaching for Leadership” Tom R. DeMeester, MD, FACS, FACCP

**Meeting Video Update:**

In the SAGES 2000 Final Program, Juan Serrano, MD, was inadvertently left off of the author listing for the video entitled “Hepatobiliary Pathology Due To Ascaris Lumbricoides.” Dr. Serrano was co-author on this video. The video can now be previewed on the SAGES web site at [www.sages.org/worms](http://www.sages.org/worms). The video may also be purchased by calling Cine-Med, SAGES video distributor, at 1-800-515-1542. Ask for video 00L6.

SAGES met in tandem with IPEG for the first time and the connection was a huge success. Both groups increased attendance and some registrants from each group attended the other’s meeting. One less meeting for surgeons. One less meeting for exhibitors. More education for everybody! It worked so well that we’re going to do it again the next time IPEG is in the U.S. So, look for this super combo in 2003 in Los Angeles.

**8th World Congress Set for New York**

**Mark the Dates...Now! March 13-16, 2002 - New York**

Kenneth Forde, MD has graciously accepted the draft of the leadership to serve as the President of then 8th World Congress. The Program Chairperson, International Chairperson and other appointments will be announced in early Fall, 2000.
Resident Education Bulletin

Upcoming Resident Courses

**Basic Endoscopy and Laparoscopy Workshop**

- **Date:** August 11-12, 2000
- **Chair:** Jeffrey Ponsky, MD, The Cleveland Clinic Foundation
- **Resident Year:** PGY 2-3
- **Sponsor:** Ethicon Endosurgery, Inc.
- **Location:** The Ethicon Institute, Cincinnati, OH

**Advanced Solid Organ Surgery**

- **Date:** September 14-15, 2000
- **Chair:** Michael Holzman, MD, Vanderbilt University
- **Resident Year:** PGY 4-5
- **Sponsor:** United States Surgical Corporation
- **Location:** USSC Headquarters, Norwalk, CT

**Advanced Laparoscopic Techniques Workshop**

- **Date:** November 3-4, 2000
- **Chair:** Jeffrey Marks, MD, Case Western Reserve University
- **Resident Year:** PGY 4-5
- **Co-Sponsors:** United States Surgical Corporation, Karl Storz Endoscopy
- **Location:** The Cleveland Clinic, Cleveland, OH

Registration materials for these courses have been sent to residency program directors throughout the United States. Please contact your program director if you are interested in attending one of these courses. If your program director did not receive the registration materials, please call the SAGES office at 310-314-2404.

Resident & Young Researcher Awards

**Winner of the Best Presentation Award at SAGES 2000 Resident and Fellow Scientific Session**

- **Daniel Scott, MD**
- **Institution:** Southwestern Center For Minimally Invasive Surgery, University Of Texas Southwestern Medical Center, Dallas, TX
- **Abstract Title:** Development Of An In-Vivo Tumor Mimic Model For Learning Radio Frequency Ablation
- **Co-Authors:** William N. Young, BS, Lori Watumull, MD, Guy M. Lindberg, MD, Robert V. Rege, MD, Ron J. Brown, BS, Daniel B. Jones, MD

Best Resident or Fellow Presentation in SAGES 2000 Main Session

1st Place: **Joseph Ambrose, MD**
- **Abstract Title:** Pneumoperitoneum Up Regulates Renal Preproendothelin-I Messenger RNA
- **Co-Authors:** Ray Onders, MD, N. T. Stowe, PhD, M. S. Simonson, MS, A. V. Robinson, BA, S. Wilhelm, MD, J. A. Schulak, MD
- **Institution:** Department Of Surgery, University Hospitals Of Cleveland, Cleveland, OH

2nd Place: **Christine Ren, MD**
- **Video Title:** Laparoscopic Bilipancretic Diversion With Duodenal Switch For Superobesity
- **Co-Authors:** Murina Kurian, MD, Emma Patterson, MD, Michel Gagner, MD
- **Institution:** Mount Sinai School Of Medicine, New York, New York

3rd Place: **Jeff Hazey, MD**
- **Abstract Title:** Laparoscopic Management And Clinical Outcome Of Emphysematous Cholecystitis
- **Co-Authors:** Fredrick Brody, MD, Steven Rosenblatt, MD, Jennifer Malm, RN, Jeffrey Ponsky, MD
- **Institution:** Department Of Minimally Invasive Surgery, Cleveland Clinic Foundation, Cleveland, OH

Attention Candidate Members:

Is it time to upgrade your membership to active status?

If you have been a candidate member for up to 3 years following completion of a general surgery residency or attained a Board Certificate or completed your training, you are asked to notify the administrative office. To upgrade, please send a copy of your Board Certificate or proof of fellowship in the ACS to SAGES Member Services, 2716 Ocean Park Blvd., Suite 3000, Santa Monica, CA 90405.
**2000 Research Grant Award Winners**

**Principle Investigator:** Dennis Blom, MD  
**Project Title:** Using Multichannel Intraluminal Impedance To Predict Postoperative Outcomes In Patients With Symptomatic Foregut Disease  
**Institution:** University Of Southern California  
**Grant Support:** United States Surgical Corporation

**Principle Investigator:** Jonathan A. Cohen, MD  
**Project Title:** The Effect Of Fundoplication On Sleep Architecture And Nocturnal Gastroesophageal Reflux  
**Institution:** Vanderbilt University Medical Center  
**Grant Support:** United States Surgical Corporation

**Principle Investigator:** Ara Darzi, MD  
**Project Title:** Hypoxic Pneumoperitoneum Enhances Tumour Metastatic Potential  
**Institution:** Imperial College Of Medicine  
**Grant Support:** United States Surgical Corporation

**Principle Investigator:** E.J. Hazebroek, MD  
**Project Title:** Short And Long Term Impact Of Pneumoperitoneum On Renal Function And Histomorphology In Donors And Recipients  
**Institution:** University Hospital Rotterdam  
**Grant Support:** Karl Storz Endoscopy

**Principle Investigator:** Santiago Horgan, MD  
**Project Title:** Development Of A Web-Based System For Evaluating Laparoscopic Skills Of Surgical Residents  
**Institution:** University Of Illinois At Chicago  
**Grant Support:** Ethicon Endosurgery, Inc.

**Principle Investigator:** Emina Huang, MD  
**Project Title:** Evaluation And Follow-up Of Murine Colitis With Colonoscopy  
**Institution:** Columbia University  
**Grant Support:** Olympus America, Inc

**Principle Investigator:** Daniel B. Jones, MD  
**Project Title:** Comparison Of Robotic Versus Human Laparoscopic Camera Control: Impact On Surgeon Efficiency  
**Institution:** University Of TX Southwestern Medical Center  
**Grant Support:** Stryker Endoscopy

**Principle Investigator:** Reginald V.N. Lord, MD  
**Project Title:** The Effect Of Antireflux Surgery On Gene Expression In Barrett’s Esophagus  
**Institution:** University Of Southern California School Of Medicine  
**Grant Support:** United States Surgical Corporation

**Principle Investigator:** William S. Richardson, MD  
**Project Title:** Evaluation Of Scar Formation After Botulinum Toxin Type A Injection Or Forced Balloon Dilation To The Lower Esophageal Sphincter  
**Institution:** Alton Ochsner Medical Foundation  
**Grant Support:** United States Surgical Corporation

The 2001 Research Grant applications will be mailed in September, 2000.
SAGES Official Products Available

**NEW** Stress Stomach $4.00
A SAGES logo stamped mini-stomach stress reliever designed to help squeeze away the tension of the OR.

**NEW** SAGES Travel Bag $20.00
Great for all your bathroom supplies, the bag rolls up for your suitcase and expands to hang on the door when you arrive at your destination.

SAGES Baseball Caps $15.00
Pre-washed denim, two tone: khaki-green or khaki-blue

SAGES “Here’s looking in you kid” T-Shirts $15.00
White, with SAGES colors and logo. A great design, especially for Bogart lovers and endoscopic surgeons.

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Please call 310-314-2404 or e-mail SAGESweb@sages.org for international shipping prices.
**Surgical Education Update**

**Endorsed Courses**

Educational opportunities abound this summer all around the world! SAGES keeps an extensive list of endorsed courses on-line at [www.sages.org/endorsed.html](http://www.sages.org/endorsed.html). New courses are added on a regular basis, so be sure to check it out!

**Joint Seminar with SSAT Slated for A.C.S.**

Clinical Congress to be held in Chicago - October 22-27, 2000

The joint symposium, now an annual event teaming SAGES and SSAT (Society for Surgery in the Alimentary Tract) will focus on: “Energy sources and tissue ablation.” Dr. Bruce Schirmer will take the lead in organizing the program. It will be a two-hour session held on Wednesday evening, October 27th during the Clinical Congress. It will include one session on the technology of tissue destruction; and one session on the applications of energy sources and tissue ablation. Some of the methods include hypo-hyperthermia, radio frequency, and applications to treat solid organ: e.g. photo ablation, hemostatic methods, argon beam, Bipolar sources. More information will be sent to SAGES & SSAT members in August, 2000.

**SAGES Endorses Training Program in Developing Countries**

You Can Help!

by Ramon Buerger, MD

It is a natural instinct for physicians to want to help the disadvantaged and the sick. In our busy daily practices we sometimes lose our sense of doing work for the public good, helping those who are less-fortunate. Here is an opportunity to recapture that desire while teaching what you love to do: Laparoscopic Surgery.

Laparoscopic cholecystectomy - the “queen” of minimally invasive procedures is standard practice in industrialized nations but is rarely available to the majority of the population people in developing countries. This remains true despite the fact that gallbladder surgery is very common in these areas, often more so than hernia surgery.

Since 1994, Medical Training Worldwide (MTW) has been conducting intensive laparoscopic surgery training programs in public hospitals in Central and South America. Our goal has been to bring U.S. quality laparoscopic instruction directly to surgeons and hospitals that need it, but cannot afford the courses or the necessary equipment.

In 1997, the Society of American Gastrointestinal Endoscopic Surgeons (SAGES) endorsed the MTW Northwest Nicaragua Laparoscopic Surgery Program. The results have been very gratifying: Over 40 surgeons in six hospitals trained to perform laparoscopic cholecystectomy with documented clinical outcomes as good as in the U.S. or Europe. Today, MTW and SAGES are building on this successful training model to bring the benefits of laparoscopic cholecystectomy to patients in all developing countries.

The International Laparoscopic Cholecystectomy Program is a SAGES-endorsed MTW effort that will train surgeons working in public regional hospitals in developing countries to perform laparoscopic cholecystectomy. The project will have the following components:

1. Basic didactic and laboratory courses conducted either by Medical Training Worldwide or training centers already established in each country.
2. Individual proctoring of surgeons by volunteer surgeons from the U.S., Europe, and Asia who will travel to their hospital to assist them during their first ten operations.
3. The establishment of an outcomes database at each hospital to track the clinical results of the program.
4. Yearly reports to SAGES on the progress and results of the training program.
5. Financial support from public fundraising, grants, and in-kind donations of supplies and services.

We invite SAGES members to register to participate as volunteer instructors and to support the fundraising and equipment needs of the program. Information on volunteering is available on the MTW website at [www.med-training-worldwide.org](http://www.med-training-worldwide.org). In August, 2000 MTW will launch a new website that will allow direct volunteer registration and program administration through the internet.

We look forward to expanding the family of volunteer surgeons who are willing to bring the benefits of laparoscopic surgery to developing countries.
IN MEMORIAM

We acknowledge with a sense of sadness the loss of these members of the SAGES Family who have died within the past year.

Joseph J. Esgro, MD
63 West Underwood St., Orlando, FL 32806
SAGES member since: 10/17/1990

James M. Giffin, MD
453 County Road 5, Ridgway, CO 81432
SAGES member since: 04/24/1989

Shivappa V. Hulbanni, MD
16834 Riverside St., Livonia, MI 48154-2408
SAGES member since: 04/09/1992

Frederick W. Miltenberger, MD
625 Kent Avenue, Suite 202, Cumberland, MD 21502
SAGES member since: 1985

Joel J. Roslyn, MD
3300 Henry Ave., Philadelphia, PA 19129
SAGES member since: 10/30/1998

Phil Vanderwoude, MD
577 Michigan Avenue, Ste. 202, Holland, MI 49423
SAGES member since: 04/24/1989

OUTCOMES TASK FORCE UPDATE

The Outcomes Task Force is pleased to announce that more than 150 SAGES members have signed up to participate in the SAGES outcomes on-line initiative and over 1,000 cases have been entered into the outcomes database, as of May 31, 2000.

One of the advantages of the system is the real-time benchmarking which allows you to compare your results to the national average instantly. The reports for gallbladder, GERD and hernia are available to you any time you choose to access them.

SAGES members may sign up to participate by contacting Erika Schroeder from Outcomes Sciences at ErikaS@outcomes-sciences.com, Phone: 888-526-6700 Fax: 617-723-7667.

SAGES wishes to acknowledge Ethicon Endo-Surgery for support of this project.

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View continued from page 3.

vide an unbiased opinion regarding the case. Several times he referred to the bulletin of the American College of Surgeons, volume 74, number 8, pages 7&8 from August, 1989 which succinctly lists the qualifications and duties of the surgical expert witness.

The third and final reason Dr. Olsen believes we should function as experts is that such activities improve the medical care delivered in the field. Such expert testimony defines “the standard of care” and resolves issues which are controversial. Examples of this include sponge and needle counts and use of pulse oxymetry.

The third speaker was Dr. Carlos Pelligrini who discussed the issue from the defense expert viewpoint. He stressed that you should define your role early to the defense attorney, namely that of review only, deposition testimony, and/or trial testimony. Like Dr. Olsen, he stressed that you should limit your testimony to areas that you truly have expertise in. He also stressed that you should review the records and be thorough. He felt that it was very important to review the depositions of the surgeon, the patient, and the plaintiff’s expert. He felt that you should then meet with the lawyer to discuss the strengths and weaknesses of the case and to play the devil’s advocate.

He offered suggestions for deposition testimony. He stressed that you should give brief answers and not try to teach. He stressed that you should take time to think, and be patient, and to ask for repetition of the question if you do not understand it. He pointed out that the plaintiff lawyer is not your friend and that you should not lose your temper during the deposition. You should listen to the objections raised by your lawyer during the deposition.

At trial, he stressed that you should be brief and be kind in your answers. Do not avoid a question. Look at the jury when answering questions and show kindness and understanding.

The expert should be prepared for the question on compensation for the testimony and respond appropriately.

The final speaker of the morning was Mr. Paul Rovington, an Atlanta attorney, who spoke on the subject of how he chooses an expert witness from the attorney’s standpoint. He mentioned that in the state of Georgia any physician of allopathy can testify against any other allopathic physician. He usually would ask the defendant for potential names, usually people that are well known in the field and well published. For laparoscopic surgery, he stressed that he would get an expert who “walks in the same shoes as the defendant”. He would look for an expert with a reasonable demeanor who is not arrogant and could deal with the opposing lawyer. In general, he would get two experts, one a prominent surgeon and a second local surgeon. He stressed that academic surgeons should be aware of their institution’s policy on reimbursement. He stressed that the expert should be accessible and available and offer reasonable opinion. He appreciated being advised when to settle a case.

The panel offered several good suggestions on how to be an excellent expert witness. Guidelines for experts can also be found via the American Medical Association publication “Ethical Guidelines for Medical Experts”, last updated in June, 1996.
Ever wanted to buy a video from the SAGES video library but had trouble choosing from the large selection? Now the SAGES Educational Resources Committee has selected for you! “SAGES Top 12 Procedures Project” includes 12 videos and 12 commentaries from the world’s experts on the procedures most often performed by general surgeons. The project is available on CD ROM or in video format. Six of the videos were created specifically for this project and six were chosen from the existing library. The topics included are:

**Flexible Endoscopy**
- Video Author: Fredrick L. Greene, MD
- Commentator: Maurice Arregui, MD

**Diagnostic Laparoscopy and Access Techniques**
- Video Author: David Edelman, MD
- Commentator: Harry Himal, MD

**Laparoscopic Cholecystectomy**
- Video Author: Horacio Asbun, MD
- Commentator: Douglas Olsen, MD

**Laparoscopic Common Bile Duct Exploration**
- Video Author: Stephen J. Shapiro, MD
- Commentator: Joseph Petelin, MD

**Laparoscopic Nissen Fundoplication**
- Video Author: Jeffrey H. Peters, MD
- Commentator: John Hunter, MD

**Laparoscopic Inguinal Hernia Repair**
- Video Author: Guy Voeller, MD
- Commentator: Edward Felix, MD

**Laparoscopic Ventral Hernia Repair**
- Video Author: Philip Schauer, MD
- Commentator: Guy Voeller, MD

**Laparoscopic Splenectomy**
- Video Author: Adrian Park, MD
- Commentator: Edward Phillips, MD

**Laparoscopic Adrenalectomy**
- Video Author: Mark Stoker, MD
- Commentator: Michel Gagner, MD

**Laparoscopic Appendectomy**
- Video Author: Gerald Fried, MD
- Commentator: Carol Scott-Conner, MD

**Laparoscopic Right Hemi-colectomy**
- Video Author: Dennis Fowler, MD
- Commentator: Jeffrey Milsom, MD

**Laparoscopic Sigmoidectomy**
- Video Author: Steven D. Wexner, MD
- Commentator: Morris Franklin, MD

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niques on their own time, take a didactic test on their own schedule at their own computer and undergo skills testing during major national surgical meetings and at several permanent sites.

In years to come we anticipate that the surgeon will be able to take the practical skills test on video or via electronic means and have the results evaluated remotely.

The potential is enormous. Every surgeon and resident who wants to can learn and be tested in the fundamental techniques for laparoscopic surgery. Much as in ATLS, a standardized module will provide the core information and uniform testing mechanism. We anticipate the development of similar modules covering advanced laparoscopic procedures. While this will not solve every educational challenge for laparoscopic surgery, it WILL provide a platform on which other educational tools will rest. We expect that within 5 years every surgeon leaving a general surgery residency will have studied the basics and passed the preliminary test. For years, hospitals have been requesting criteria to be used for credentialing and privileging; we believe FLS will be an important step in this direction.

This is an enormous undertaking, and one with both administrative and scientific challenges, but SAGES has never shrunk from its responsibility to lead. FLS is another example of our leadership. The FLS program is currently undergoing final modifications and beta-site testing. It is anticipated that full roll-out will occur over the next 12 months.

We are grateful for a generous educational grant from Karl Storz Endoscopy in the development and implementation of this project.

Nathaniel Soper, President