

MESSAGE FROM THE PRESIDENT



SAGES President Steve Schwaitzberg, MD

Meetings

ike many of you I returned from the SAGES annual meeting in San Antonio marking our 30th anniversary. More than 2000 surgeons and allied health professionals registered for this year's meeting. I would like to personally congratulate Brian Dunkin, this year's program chair and his whole team for an extraordinarily engaging series of post graduate courses and scientific sessions. Many sessions were packed and a few were standing room only. There was so much great information it was like trying to drink from a fire-hose — you could not possibly take it all in! It was exciting to follow the SAGES Twits, our own version of the digerati who sent Tweets via the SAGES Meeting Twitter application alerting attendees to what was hot and where to find it in real time. If you could not make to the meeting, all is not lost. You can catch many parts of the meeting as well as more than 700 other videos on SAGES TV — check it out.

Despite all of the technologic advances the virtual meeting, is not (yet) ready to replace the real thing. Clearly our HD televisions provide the most granular view of any sporting event you can imagine, yet stadiums, arenas, and parks are still packed for the "big game." Nothing beats being there. If you want to feel the energy of the crowd, you still have to go there in person. I will admit to being biased, but in general surgery, the SAGES annual meeting is one of the few "big games". You just have to be there. Whether it was training time in the Learning Center, a hands-on course, a trip through the exhibit hall, rooting for your favorite Top Gun contestant, watching us sing, catching up with an old friend, or a chance to debate the presenter in person, the live meeting is still a singular experience. Moreover, as I sat with more than a thousand people during Jo Buyske's Presidential address "Those to Whom Much is Given, Much is Required" you could actually feel the

power of inspiration moving through the room. When coupled with the Marks Lecture that followed delivered by Cameron Wright describing the nature of service rendered by the American military surgeon, we left the room thunderstruck.

If you are a regular attendee, you know what I mean. Dan Jones and Danny Scott, the program chairs for the 2012 meeting have given me a sneak peak of what's in store for 2012. I can assure you there will be unique opportunities unseen before in a surgical meeting. If you have never been or have not been recently, it might be time to plan a trip to San Diego for the annual meeting March 7-10, 2012. There is nothing like a SAGES meeting.

If you want to find out how to participate or have comments, questions, concerns, or ideas how SAGES might continue to improve patient care or surgical education, please write me at president@SAGES.org. Check out my monthly president's messages on SAGES PAGES!

Steve Schwaitzberg, MD SAGES President

Reminder!

If your contact information has changed recently (address, phone, fax, e-mail), you may easily update it online. Just go to www.sages.org and access the members' area to make any changes to your information.

SAGES 2011 - 2012 Slate of Officers

Officers and Members of the Executive Committee:



◆ PRESIDENT Steven D. Schwaitzberg, MD



PRESIDENT-ELECT > W. Scott Melvin, MD





◆ SECRETARY (3 year term) Adrian Park, MD (I more year in this position)



TREASURER > (3 year term)

L. Michael Brunt, MD (2 more years in this position)

Board Members-Three-Year Terms:



IST VICE PRESIDENT (2 year term) Gerald M. Fried, MD



2ND VICE PRESIDENT → (2 year term) Daniel J. Scott, MD

Re-Appointments: (3 year terms) Fredrick J. Brody, MD

Jeffrey M. Marks, MD Aurora D. Pryor, MD Raul J. Rosenthal, MD

New Members:

Robert D. Fanelli, MD Dmitry Oleynikov, MD Gretchen Purcell-Jackson, PhD, MD Christopher M. Schlachta, MD (2 year term, fulfilling unexpired term of Dr. Scott)

Rotating Off:

Steve Eubanks, MD Brant K. Oelschlager, MD David W. Rattner, MD

Why Membership in the **AMA** is Important

Are you concerned about reimbursement? What about healthcare reform? Do you wonder about patient's diminishing access to quality care? If you answered yes to any of these questions then your membership in the American Medical Association (AMA) is important.

Your AMA Membership -What it Means for SAGES

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

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

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

Keep the SAGES voice strong. Please join the AMA or renew your membership by visiting the AMA website: https://membership.ama-assn.org/JoinRenew/search.jsp. In addition, please visit www.ama-assn.org/go/ballot to designate SAGES as your specialty society for representation purposes.



Call for Abstracts SAGES 2012 Annual Meeting

March 7 - March 10, San Diego, CA

DEADLINE FOR SUBMISSION: SEPTEMBER 30, 2011

(Deadline will not be extended / no late submissions accepted.)

Dear Colleague,

You are invited to submit paper and video abstracts to the SAGES 2012 Scientific Session. The meeting will be held March 7 – March 10, 2012 in San Diego, CA at the San Diego Convention Center. 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: http://www.sages.org/meetings/abstracts

*World Congress Crossover: If you are interested, SAGES will forward your abstract for consideration at the April 2012 World Congress in Puerto Vallarta. Abstracts accepted for both meetings will be allowed to be presented at both meetings.

*IMPORTANT NOTICE:

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 2012 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.

2012 Emerging Technologies Session

Submission for "Emerging Technology" abstracts will open in October and will run until early January 2011. These abstracts will then undergo an expedited review process. Please visit http://www.sages.org/meetings/abstracts/ for detailed instructions and submission deadlines.

If you have any questions, please contact the SAGES office at 310-437-0544, FAX: 310-437-0585 or email: abstracts@sages.org.

Sincerely,

Daniel B. Jones, MD

Program Chair

Daniel J. Scott, MD

Program Co-Chair

2011 AWARDS

The SAGES Resident Education Committee would like to congratulate the following surgeons-in-training for placing in the top of the Best Resident/Fellow Presentation Awards at the 2011 SAGES Annual Meeting:

Best Resident/Fellow Presentation Awards - Scientific Session

Top 5

- Ist Place: Darmarajah Veeramootoo, MB BS MRCS
 MD Laparoscopic Gastric Ischemic Conditioning Prior to
 Minimally Invasive Esophagectomy, The Logic Trial
- 2nd Place: Shawn Webb, MD Comparison of Clavien Class
 IV and V Complications for Laparoscopic Versus Open Colectomy
 Using NSQIP Data and Risk Adjustment
- 3rd Place: Song Liang, MD Comparison Studies on Emergent Laparoscopic Lavage and Drainage VS Hartmann's Procedure in 83 Consecutive Complicated Diverticulitis with Generalized Purulent Peritonitis: Damage Control Strategy in the Management of Severe Diverticulitis
- Juan Ramon Aguilar Saavedra, MD Laparoscopic Robotic Assisted Whipple: Early Results of a Novel Technique and Comparison with the Standard Open Procedure
- Song Liang, MD Laparoscopic Common Bile Duct Exploration: Clinical Studies on Transcholedochal VS Transcystic Approaches in 374 Consecutive Cases

Best Resident or Fellow Presentation Award – Resident and Fellows Scientific Session

- Ist Place: Byron F. Santos, MD Comparison of Transrectal NOTES® Approaches in a Cadaveric Appendectomy Model: Anterior is Better
- 2nd Place: Nicoleta O. Kolozsvari, MD New Dog, New Tricks: Trends in Laparoscopic Simulator Performance for Incoming Surgery Residents

Congratulations, Surgical Endoscopy, SAGES' Official Journal

The 2010 impact factors were released at the end of June, and SE increased from 3.307 to 3.436. We are currently ranked 15th out of 187 surgery journals. Congratulations to the Journal Editors-in-Chief, Dr. Mark Talamini and Sir Alfred Cuschieri, to our former Editor, Dr. Bruce MacFadyen, to our publisher Springer, and to the tireless efforts of the Editorial Board and countless reviewers. Also thanks to our SAGES members and colleagues who continue to submit their best work to Surgical Endoscopy.

2011 SAGES Research Grant Winners

Covidien

PI: Piero Fisichella, MD

Institution: Loyola University Medical Center
Title: A Non-Invasive Test to Detect Markers of Aspiration After Lung

Transplantation

Karl Storz Endoscopy

PI: Brant Oelschlager, MD

Institution: University of Washington

Title: Long-term Outcomes of Barrett's Esophagus after Anti-Reflux Surgery

Ethicon-Endo Surgery

PI: Michael Awad, MD, PhD

Institution: Washington University School of Medicine

Title: Ergonomic Analysis of Robotic Surgery

SAGES Foundation

PI: Liane Feldman, MD

Institution: Montreal General Hospital

Title: Enhancing Functional Recovery after Colorectal Surgery: The Effect of Multimodal Prehabilitation

SAGES Foundation

PI: Allan Okrainec, MD

Institution: Toronto Western Hospital

Title: Remote Evaluation of Laparoscopic Performance Using the Global Operative Assessment of Laparoscopic Skills

SAGES Foundation

PI: Anne Rogers, MD

Institution: Penn State Surgical Weight Loss Program
Title: Functional MRI to Study Alterations in Taste Funcation After

Roux-en-Y Gastric Bypass Surgery.

SAGES

PI: David Sindram, MD, PhD

Institution: Carolinas Medical Center

Title: Synergy of Alcohol and Obesity in Hepatocellular Carcinoma Development and Progression

2011 Career Development Award Winner:

PI: Michael Awad, MD

Institution: Washington University School of Medicine

Title: Development of a Comprehensive Curriculum in Laparoendoscopic Surgery A SAGES/SCORE Collaborative Initiative

SAGES 2012 Award Nominations

SAGES has number of major awards available for nominations in the upcoming year. Four awards are open for nomination from the general membership and three additional awards open to nominations from SAGES Leadership (Officers, Board, and Committee Members). In addition to the SAGES Awards, there are also two scholarships available to SAGES members. Please submit all nominations and/or applications no later than September 23, 2011.

Nomination forms will be reviewed by the Awards Committee prior to the ACS Clinical Congress in October. The Committee will recommend recipients to the Board of Governors in November. Awards will then be bestowed upon the recipients during the during the 2012 SAGES Annual Meeting next year in

San Diego, CA.

We encourage you to submit your nomination online at http://www.sages.org/about/awards/index.php For any questions, please email, call, or fax Ms. Viera Ewell in the SAGES office (Email: admin@sages.org, Phone: 310-437-0544 ext. 104, Fax: 310-437-0585). We hope that you participate in this process so that we may honor those who have contributed a great deal to endoscopic surgery and to SAGES.

Thank you!

 C. Daniel Smith, MD, SAGES Awards Committee Chairman SAGES

11300 W Olympic Blvd, #600 | Los Angeles, CA 90064 phone 310.437.0544 | fax 310.437.0585

2012 Research Grant Application and Career Development Award

Research Grants

The SAGES Research Grant Application will be available on the SAGES website at http://www.sages.org/leadership/committees/research/grants.php/ beginning in early August.

The Research Awards are open to any principal investigator who is a SAGES member, including Candidate members. SAGES would like to especially encourage grant funding to young investigators/candidate members in the hopes that funding through SAGES will lead to extramural funding. The purpose of these grants is to stimulate original research in gastrointestinal and endoscopic surgery. The study may be either "bench" research or clinical. In the spirit of supporting the goals of our membership, applicants are encouraged to review:Urbach DR, Horvath KD, Baxter NN, Jobe BA, Madan AK, Pryor AD, Khaitan L, Torquati A, Brower ST, Trus TL, Schwaitzberg S. A research agenda for gastrointestinal and endoscopic surgery. Surgical Endoscopy 2007 for a recent review of key research questions.

* All Grant applications must be submitted by Friday, November 4, 2011 (5pm EST) Grant Guidelines can be found by visiting: http://www.sages.org/leadership/committees/ research/grants.php

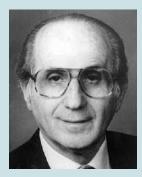
Career Development Award

The focus of this SAGES Foundation supported award is to provide funding for a young surgeon or surgeon-in-training for the development of critical skills required for their academic career in gastrointestinal and endoscopic surgery. The intent of this award is to delay the start of a faculty role or ongoing residency training for supplemental training/traveling fellowship or intense research time. This grant will provide the awardee with a unique educational opportunity that would not otherwise be available. Eligible applicants must be SAGES candidate members (including residents and Fellows), or SAGES members early in their faculty appointment (within five years of completed training). Additional information for this Award is available at: https://sages.org/leadership/committees/research/

The application process will open Mid-August and all submissions must be submitted by November 18, 2011 (5pm EST).

For more information on SAGES Research Grants or the Career Development Award, please contact Maribeth Balon at the SAGES office at research@sages.org or at (310) 437-0544, ext. 125.

George Berci, MD, FACS, Receives the 2011 Jacobson Innovation Award



George Berci, MD, FACS, FRCS, Ed. (Hon), a general surgeon from Los Angeles, CA, is the recipient of the 2011 Jacobson Innovation Award of the American College of Surgeons (ACS). Dr. Berci was honored with the award in recognition of his pioneering contributions to the art and science of endoscopy and laparoscopy for more

than 50 years. His work has included the development—or promoting the development—of advances in optics, illumination, television application, instrumentation, operative radiology, and anesthesiology, resulting in the high level of technology that is currently available for the performance of a variety of endoscopic and laparoscopic surgical procedures. Dr. Berci is an emeritus clinical professor of surgery at the University of California and the University of Southern California, and is currently the Senior Director of Minimally Invasive Endoscopic Research at Cedars Sinai Medical Center, all located in Los Angeles.

The 17th Jacobson Innovation Award was presented to Dr. Berci at a dinner held in his honor on June 10, 2011, in Washington, DC. The purpose of the award is to honor living surgeons who have been innovators of a new development or technique in any field of surgery. The award is made possible through a gift from Julius H. Jacobson II, MD, FACS, and his wife Joan. Dr. Jacobson is a general vascular surgeon known for his pioneering work in the development of microsurgery.

Dr. Berci's pioneering work in endoscopy and laparoscopy began with his studies in mechanical engineering, one of the few educational options available to him in the pre-World War II-era in Hungary. Following time spent in a Nazi labor camp in the mountains of Romania and Poland during the war, he pursued his medical and surgical training in Hungary.

Dr. Berci received his medical degree from the University of Szeged, Hungary, in 1950. He continued further surgical training at Szeged at the University Hospital, before moving to Budapest in 1953, where he helped to establish an experimental surgery division at the Department of Surgery Post Graduate School. During the Hungarian revolution in 1956, Dr. Berci escaped to Vienna, Austria, where he was interviewed for a postdoctoral Rockefeller Foundation fellowship. He emigrated to Australia, where he was mentored by Prof. Maurice Ewing at the University of Melbourne. While at the university, he started his studies on recovery of retained biliary duct stones, as well as biliary endoscopy, and imaging in operative cholangiography.

His work in endoscopy started in Australia in 1957, after he was awarded with a Rockefeller Fellowship in the Alfred and

Royal Melbourne hospitals. It was there that he first viewed the inside of a dilated common bile duct with a simple old cystoscope, at which point he realized the poor image quality produced by this tool. That experience marked the genesis of Dr. Berci's lifelong pursuit of endoscopy.

Dr. Berci, who was also interested in operative cholangiography, became concerned about the issue of radiation dosage. He and his Australian research team created a single pulsed fluoroscope X-Ray image storage system that significantly decreased the exposure of radiation to patients and operating room personnel. He became the main advocate for both operative choledochoscopy and operative cholangiography as the subspecialty of biliary surgery. His aim was to recognize the anatomical anomalies and to decrease or discover injuries during surgical procedures. This research initiative also opened the field of improved removal technique (choledochoscopy) of suspected or non-suspected ductal stones during biliary operations.

Following a 1959 meeting with Prof. Harold Hopkins, a renowned physicist and professor of applied optics in London, Dr. Berci became actively involved in launching the Hopkins rodlens system for the transmission of images into the clinical application of endoscopy. The system was a vast improvement over the technology then being used and significantly improved image quality. Although the system improved the endoscope's ability to provide a quality image, the level of illumination did not go as far as Dr. Berci believed possible.

In 1976, he introduced a stronger, but miniaturized, explosion-proof xenon arc globe, which the military had developed and which he transferred to endoscopy. This form of illumination, which is still used in endoscopes today, increased the quality of endoscopic images as well as recording findings. Even so, Dr. Berci believed there was more that could be done to further enhance the application of endoscopy as a diagnostic and treatment tool, thus, the image-video display and recording of endoscopes captured his interest. His work in that area ultimately resulted in improvements to endoscopic television cameras, which are continually becoming smaller.

Through Dr. Berci's work in illumination, contrast, clarity, and image recording, the creation of instruments for use in endoscopy expanded. In the late 1960s, new versions of the cystoscopes, resectoscopes, and nephroscopes used in urologic surgery had a major impact on how operations in that specialty were practiced. Furthermore, the field of pediatric endoscopy was initiated as a result of the miniaturized equipment that Dr. Berci was instrumental in creating. It was used in examining, diagnosing, documenting, and treating diseases requiring surgical treatment in pediatric patients. As a continued on page 7

Resident Courses

Invitations for all resident courses are sent to residency program directors approximately three months prior to the course. Only one resident per program may apply. The basic courses are open to 2nd and 3rd year residents, with SAGES candidate members receiving priority. The advanced courses are for PGY 4 and 5 members who must be SAGES candidate members. For course registration policies, please contact the SAGES Registrar Tina Sandoval at registration@sages.org or (310) 437-0544, ext. 128 or visit http://sages.org/meetings/resident_courses/. The following dates and courses are subject to change. Courses for 2012 will be posted on the resident course site in Fall 2011.

 October 13-14, 2011: Advanced Laparoscopic Intestinal and Solid Organ Surgery Workshop Cincinnati, OH
 Sponsored by Ethicon Endo-Surgery, Inc.

4th and 5th year residents — must be SAGES candidate members

Webinars

The Resident Education Committee will present 4 webinars for 2011-2012 including:

 September 27, 2011 – Hernia Mesh Primer: The Appropriate Use of Mesh Technology for Clinical Application

Faculty includes: Brent Matthews, MD (Chair) To register for this webinar, go to:

http://events.SignUp4.com/Webinar_SEPT

 November 15, 2011 – Surgery in the Obese Patient: Bariatric Surgery and Tips and Tricks for Surgery in the Morbidly Obese Patient

Faculty includes: Valerie Halpin, MD (Chair);

 $Nicole\ Fearing,\ MD;$

Matthew Goldblatt, MD; Sachin Kukreja, MD

To register for this webinar, go to: http://events.SignUp4.com/Webinar_NOV

February 7, 2012 – Foregut
 Faculty includes: Michael Awad, MD (Chair)

 April 17, 2012 – Advanced Surgical Technique and Suturing

Faculty Includes: Brandon Williams, MD (Chair)

The webinars have been developed specifically for residents and feature presentations by 4 - 5 expert panelists. All of the webinars will be presented on Tuesdays from 7:00 - 9:00PM Eastern with didactic sessions plus an opportunity to chat online with the experts.

To view past webinars on SAGES TV such as Hernia Management, Upper and Lower Endoscopy, Solid Organ and Colorectal Surgery, visit the Resident Webinars channel at: http://www.sages.org/video/

Berci - continued from page 6.

result, Dr. Berci, working with Stephen Gans, MD, FACS, became the first to document a tracheoesophageal fistula in living infants. His work in developing instruments also included development of an improved laparoscope, the teleotoscope for adult and pediatric patients, the modern rigid choledochoscope, and the indirect laryngoscope (which he developed with Paul Ward, MD, FACS, replacing the 200-year-old mirror) and a new video operative laryngoscope for ear, nose, and throat patients with Edward Kantor, MD, FACS. He also introduced a combined suction-coagulation cannula, which, along with the improved laparoscope and other tools, made it easier to perform laparoscopic procedures.

Even now, more than 50 years after his initial ardor regarding endoscopy began, Dr. Berci continues his work in furthering the marriage of surgery and technology. His recent efforts have included the conception, creation, and utilization of an enhanced endoscopic means of intubation for use in patients with particularly difficult airways (with Marshall B. Kaplan, MD; Carin A. Hagberg, MD; and Denham S. Ward, MD, PhD) exploring the use of the latest electronic technology for improving the imaging and viewing capabilities of endoscopes.

In addition to all of the developments Dr. Berci created, conceptualized, or collaborated on, he also taught. A renowned lecturer, he has led hundreds seminars, courses, training sessions, conferences, teleconferences, and meetings. He has written 12

books, more than 200 scientific papers, 76 book chapters, and has produced nearly 42 teaching films. He was a founding member of the International Biliary Association and is a past president of the Society of American Gastrointestinal Endoscopic Surgeons (SAGES). Additionally, his professional accomplishments provided the inspiration for the SAGES George Berci Lifetime Achievement Award in Endoscopic Surgery.

Since its establishment in 1994, the Jacobson Innovation Award—administered by the Board of Regents Honors Committee of the American College of Surgeons—has been awarded to 17 prestigious surgeons, including Dr. Berci. Original thought combined with the first presentation of work that has led to a milestone in the advancement of surgical care is the main criterion for choosing a recipient of the Jacobson Innovation Award.

The American College of Surgeons is a scientific and educational organization of surgeons that was founded in 1913 to raise the standards of surgical practice and to improve the care of the surgical patient. The College is dedicated to the ethical and competent practice of surgery. Its achievements have significantly influenced the course of scientific surgery in America and have established it as an important advocate for all surgical patients. The College has more than 77,000 members and it is the largest organization of surgeons in the world.



Program Schedule (Tentative as of August 2011)

The following is an outline of the SAGES meeting. Detailed information will be available in the Advance Program in November.

SAGES Program Chairs: Daniel Jones, MD, Daniel Scott, MD

Wednesday, March 7, 2012

- SAGES Half-Day Postgraduate Course: Fundamentals of Endoscopic Surgery (FES)
- SAGES Half-Day Postgraduate Course: Essentials of Robotic Surgery
- SAGES Half-Day Postgraduate Course: MIS Colorectal Surgery
- SAGES Panel: Foregut Dysmotility from Mouth To Anus

SAGES Foundation Awards Lunch

- SAGES Symposium: Social Media for Surgeons
- SAGES Session: Surgery in Space
- SAGES Symposium:
 Upcoming Changes with Medical Reimbursements
- SAGES/SSAT Symposium: Minimally Invasive Hepatobiliary and Pancreatic Surgery
- SAGES Half-Day Hands-On Course: Robotic Surgery
- SAGES Half-Day Hands-On Course:
 Single Port and Transanal Colorectal Surgery
- SAGES Session: Top 21 Videos Every Resident Should Know
- Exhibits Opening Welcome Reception 5:30pm 7:30pm

Thursday, March 8, 2012

- SAGES Scientific Sessions
- Exhibits/Posters/Learning Center open 9:30am 3:30pm
- SAGES Half-Day Postgraduate Course: Metabolic Surgery and Cure of Diabetes
- SAGES Postgraduate Course: POEM
- SAGES Postgraduate Course: Laparoscopic Ventral Hernia with Endoscopic Components Separation
- SAGES Resident/Fellow Scientific Session
- SAGES Session: Posters of Distinction
- SAGES Panel: Education and Training in Crisis
- SAGES Panel: Stories of SAGES Heroes
- SAGES Video Session: Best of NOTES® from Around the World
- SAGES/IPEG SESSION: My Operation Is Better Than Your Operation
- SAGES Half-Day Hands-On Course: POEM
- SAGES Half-Day Hands-On Course: Laparoscopic Ventral Hernia with Endoscopic Components Separation
- SAGES Half-Day Postgraduate Course:
 Fundamental Use of Safe Energy (FUSE)
- SAGES/CAGS Panel: Therapeutic Endoscopy
- SAGES/ALACE Session: Innovations in Obesity Surgery
- SAGES Video Session: Oops Now What?

Friday, March 9, 2012

- SAGES Scientific Sessions
- Exhibits/Posters/Learning Center open 9:30am 3:30pm
- · SAGES/IPEG Panel: Great Debates in Pediatric Bariatric Surgery
- SAGES/ASCRS Panel:
 Current Controversies during Colorectal Surgery Revisited
- SAGES Panel: Simulation: New Paradigm for Competency
- SAGES Presidential Address: Dr. Steven D. Schwaitzberg
- SAGES Karl Storz Lecture: Mr. John Abele
- · SAGES Session: Top Gun for Kids and Adults
- · SAGES Panel: Do You Know More Than Your Fellow?
- · SAGES Panel: Solid Organ
- SAGES Session: Emerging Technology
- · SAGES Debate: Robotic Surgery: Hope or Hype?
- SAGES Session: Inguinal Hernia: Treating the Other Guy's Complications
- SAGES Session: Advanced Open and Laparoscopic Ventral Hernia Repair
- Main Event & Sing-Off: USS Midway

Saturday, March 10, 2012

- SAGES Scientific Sessions
- SAGES Panel: Champions for New Operations Lessons Learned from Change Agents
- SAGES Panel: SAGES Response to Healthcare Reform
- SAGES Symposium: Starting Your Career
- · SAGES Gerald Marks Lecture: Dr. Michael Venner
- Exhibits/Posters/Learning Center open 10:00am 1:00pm
- Lunch in Exhibit Hall for all SAGES and IPEG Meeting Attendees

11:45am - 1:00pm

- SAGES/ASMBS Panel: Bariatric Surgery Nightmares: Prevention and Management of Complications
- SAGES Panel: MIS Evolution:
 Single Port, Needlescopy, and Deployable Instruments
- SAGES Panel: Innovation in the Era of COI and Transparency
- SAGES Session: TeleMentoring and Remote Battlefield Surgery
- SAGES/AORN Panel: MIS Patient Safety Checklist
- SAGES Panel: Mental Training

COMMITTEE UPDATES

Communications Committee

The SAGES Communications Committee encourages all SAGES members to take advantage of the following on line resources:

The SAGES Surgical Wiki:

A surgical "Wikipedia" editable by all SAGES members. This has significant potential to become the most authoritative and frequently accesses surgical reference on the web. The SAGES Wiki is open for public viewing but may be edited only by SAGES membership.

SAGES TV:

A central "searchable and fully navigational" depository for SAGES related videos. SAGES members will be able to submit, view, and rate videos on the site.

Now Playing on SAGES TV:

- Featured Content from the 2011 Annual Meeting.
- · Retired PG Courses and Grand Rounds

iMAGES:

A central depository of SAGES related images to be shared amongst SAGES members. Members are able to submit new images, download existing images for professional use, edit/revise and re-upload existing images. Proper use of a SAGES Image Library Image will require that credit be given to both SAGES and the submitting author.

SAGESPAGES:

SAGESPAGES is our new Surgeon to Surgeon Social network. SAGES is dedicated to enhancing member value. Please log in to communicate and collaborate with SAGES committees, individual members and old friends. Visit us often to keep updated on the newest content and interesting activities in the SAGES universe.

Continuing Education

American Board of Surgery (ABS) Maintenance of Certification (MOC) Part 2 Self-Assessment CME Credit Available at the 2012 Annual Meeting and SAGES University

2012 SAGES Annual Meeting

The SAGES Continuing Education Committee's Assessment Task Force (ATF) continues to review SAGES' evaluation methods for the Annual Meeting for areas of further improvement to help ensure that SAGES is meeting its overall educational objectives. Completing the survey will be mandatory in order to claim CME credit for the 2012 meeting. Participants who complete the online survey and CME credit form AND who also participate in an online follow-up assessment in July/August are eligible to convert all of the CME credits claimed for participation at the Annual Meeting to Self-Assessment MOC Part 2 credits.

Your feedback is vital to enhancing the program in years to come. Thank you in advance for completing your Annual Meeting surveys.

SAGES University

The SAGES Continuing Education Committee has been hard at work creating a premier online resource for your learning needs. Tuition to SAGES University is Free! This resource is available at no cost to all SAGES members – just use your member login to gain access, complete online modules, and get credit!

Log into SAGESPAGES and link to SAGES University from the "Member Resources" menu to browse our inaugural course selections NOW!

Course Types:

Journal Club: Journal Club courses feature the Editor's
 Pick from Surgical Endoscopy articles – receive I CME credit
 per article. This CME credit is applicable towards ABS Self
 Assessment MOC Part 2. Simply score a 75% or better on 4
 quiz questions to receive your credit!

Current Course: Mastery versus standard proficiency target for basic laparoscopic skill training

 OSAP (Online Self Assessment Program) The initial OSAP catalog features 10 SAGES videos – receive 0.25 CME credit per video. This CME credit is applicable towards ABS Self Assessment MOC Part 2. More modules will follow every month.

Current Courses:

- Laparoscopic Repair of a Perforated Marginal Ulcer Two Years
 After Gastric Bypass
- -Top 14 Part 11: Laparoscopic Right Colectomy
- Laparoscopic Component Separation
- NOTES-Assisted Transvaginal Splenectomy
- -Top 14 Part 2: Diagnostic Laparoscopy
- My CME/My MOC WEBPAGE Your own personalized webpage to track all of your SAGES CME Self Assessment MOC Part 2 credits with downloads directly to ABS. Simply answer I quiz question to receive your credit!

Note: Although the MYCME/MYMOC system is intended to eventually become the central location to store all CME data awarded by SAGES, it is currently not loaded with historical data from past SAGES events. Past event data will be evaluated and uploaded as available.

Educational Resources

The Educational Resources Committee is proud to spotlight:



 Top 21 Minimally Invasive Procedures Every Practicing Surgeon Should Know Video Product.

This Collection contains the most common minimally invasive procedures performed by general surgeons, as determined by the SAGES Educational Resources Committee. SAGES Top 21 replaces the very popular SAGES Top 14 DVD, with all new videos and commentaries.



Prepare Your Patients for Surgery

These SAGES Patient Information Brochures, developed by the SAGES Educational Resources Committee, are designed to give the patient a good overview of what can be expected before, during, and after his or her surgery.

For details on all official Enduring Material or to order, please visit www.cine-med.com/sages/ or call 800-515-1542.

FES

The FES Task Force, headed by Drs. Jeffrey Marks, John Mellinger and Ted Trus is in the final stages of the development and validation of the FES educational program.

The cognitive multiple-choice, computer administered test has now been validated, using data from 350 residents, fellows, attending surgeons and gastroenterologists who took part in the pilot testing process. The data analysis and final review culminated with a 'standard setting' retreat attended by 11 SAGES members.

The hands-on skills test is undergoing its final beta review by Residents, Fellows and Practicing Surgeons at several ACGME accredited programs across the US including Case Western, Tulane, UNLV, The Methodist Hospital and McGill University in Montreal, Canada.

Please visit our new FES website at www.fesprogram.org or call 310-437-0544, ext. 139 for more information on the Fundamentals of Endoscopic Surgery.

Flexible Endoscopy Committee MIS Flexible Endoscopy Course for Fellows

Registration is now open for the Fellows Course! Sign up now to reserve your spots as there are limited available.

This year the fellows course is taking place September 22-23, 2011 at the Methodist Institute for Techonology, Innovation and Education (MITIE) in Houston, TX. The course is open to 60 Fellows that must be SAGES Candidate members. This course is free of charge (fellows just need to pay for their travel to and from Houston)

For more information and to register now please visit: http://www.sages.org/meetings/endoscopy_workshops/index.php For any other questions please contact Maribeth@sages.org.

SAGES Training Endoscopic Proficiency

SAGES and Olympus have partnered together to develop a hands-on program, which would expose surgical training programs around the United States to Flexible Endoscopy. STEP: Surgeons Training Endoscopic Proficiency has now nearly 70 institutions taking part in this program. The program will hope to expand next year allowing another 35 institutions to take part in this program.

Further information on this program can be found at http://www.sages.org/projects/step/ or contact Maribeth@sages.org for additional information.

FIS

The FLS Committee is excited to announce the much-anticipated release of "FLS 2.0"!

FLS 2.0 is the newly revised edition of the FLS didactic online study guide. Over 90% of the overall content has been updated including hundreds of new photos, illustrations, links and videos. Meticulously written and reviewed by SAGES members, FLS 2.0 contains fresh material in 4 topics:

- · Preoperative Considerations
- Intraoperative Considerations
- · Basic Laparoscopic Procedures
- · Postoperative Care and Complications

Current users with an active account for FLS will get a FREE UPGRADE! Just log into http://www.fls-online.org and enter the existing user name, program number and password to be redirected to FLS 2.0 – there's nothing else to do!

Once launched, all new users of the FLS program will automatically receive FLS 2.0 along with an FLS Test Voucher when purchasing an Individual Package, Educational Package A or B, or through the Covidien Educational Fund. FLS 2.0 didactic online access may also be purchased separately for just \$155 per user, or \$125 per user for members of SAGES or ACS.

Plus, FLS 2.0 is accredited for CME, awarded upon successful completion of the FLS exam – visit www.flsprogram.org for details about CME for FLS.

Need more information? Call 310-437-0544, ext. 137.

FUSE

The Fundamentals department is excited to announce the official launch of the FUSE (Fundamental Use of Surgical Energy) Committee. This group, lead by Dan Jones, MD will focus their efforts on developing a curriculum and cognitive exam centered around providing instruction on how to safely use devices that transmit surgical energy in the operating room and other endoscopic procedural areas.

The topics to be covered by this program include but are not limited to:

- · Fundamental physics of electrical energy applications
- Safe use of electrical/laser/ultrasonic/plasma and future forms of energy and electrical tools in the O.R.
- Recognition of faulty equipment and application of correct settings
- Appropriate indications of energy tools and technology in the O.R. or Endoscopy Suite

A highly energized and passionate group, this committee has already submitted the first draft of the FUSE Manual to the publisher and is hard at work to have a beta version of the didactics and cognitive exam ready for review in continued on page 12

COMMITTEE UPDATES (continued)

conjunction with the FUSE PG Course at the SAGES 2012 meeting in San Diego.

For more information on the FUSE program, please call Jessica at 310-437-0544, ext. 139

Global Affairs Committee Go Global – International Proctoring Course

Arvaikheer, Mongolia, June 24-July 13, 2011

June 28th, 2011; Arvaikheer, Mongolia. Our start this year was fraught with some interesting challenges. Flickering images on a 15-inch monitor were interrupted with crackling electric surges. Five minutes of crisp, clear picture would suddenly disappear. After trouble-shooting the camera, the light box, the camera box, and all the cords in between, nothing seemed to work. Blank screens stared back at us as we wondered how we were going to get over this hurdle ...

We started asking questions, raiding closets, and digging up old pieces of electronics. Idle, early generation laparoscopic equipment began to appear. Antique camera boxes, old cameras, we pieced together random parts donated by various organizations and patched together our mismatched solution. And there, in the operating room that is smaller than my closet, we performed laparoscopy ... It was a surreal, retro experience that pushed our surgical skills and intuition to the limits. We made it work.

This was my second time teaching laparoscopic surgery in Mongolia and the first teaching under the SAGES International Proctoring Course Program On this tour, SAGES partnered up with the Swanson Family Foundation (SFF). The Swanson Family Foundation has worked in Mongolia for many years to promote laparoscopy by providing equipment and training to surgeons in the capital city and each of the main district hospitals. The success of the program stems from its origins; the Mongolian surgeons requested this training – knowing that the benefits of smaller incisions, less pain, quicker return to work and shorter hospital stays – would make a significant impact on the lives of their nomadic patients. Additionally, they provide complete training for all members of the hospital staff that are touched by this new technology. The SAGES and SFF partnership helped support a full OR team including nurses, anesthesiologists, scrub



techs, and even a biotechnician to teach about the instruments and help in-country hospital staff understand the steps necessary for maintenance and trouble shooting the new equipment. Data collection at each site is starting to



provide a clearer picture of the project's impact (Straub, Price, et al. Expanding Laparoscopic Cholecystectomy to Rural Mongolia. World | Surg (2011) 35:751-759.)

This trip, we were in the town of Arvaikheer which is the capital of the Ovorkhangai province of central Mongolia. The training program started with a full day of lectures covering the Fundamentals of Laparoscopic Surgery (FLS), specific lectures on laparoscopic cholecystectomy, laparoscopic appendectomy, anesthesia issues related to laparoscopy and a very important lecture on sterile technique. Following these lectures, we began the proctoring ... we gradually taught the Mongolian team safe completion of laparosopic cholecystectomy.

SAGES Go Global IPC courses also provided an evaluation framework that allowed for the trainee surgeons and the mentors to evaluate the progress of the training. I was a harsh critic initially rating our three surgeons very low on the scale for many of the evaluated skills. I stuck to the descriptors and was honest about their initial performance. Slowly, using this rating tool, I began to notice progress in their tissue handling, depth perception, and coordinated movement using two hands. By the end of the training, I was evaluating our surgeons in the 3-4 range (out of 5) ... honestly. They made significant progress in their safety, understanding of the equipment and instruments, and in their technical skills.

Mongolia is a far away place, with a nomadic and hard working population born of a deep history and strong culture. They are a people hungry for knowledge and welcoming to visiting teachers. SAGES Go Global and the Swanson Foundation have established a model for sustainable, impactful training that benefits the Mongolian health care system. Introducing laparoscopy in a responsible and organized manner will benefit generations of Mongolian patients. I left Mongolia once again happy and excited to have participated, impressed with the Monoglian student surgeons and wanting to come back and do it all over again ...

- Suzanne Yoder, MD, Global Affairs Committee Member

SAGES gratefully acknowledges the following companies for their unrestricted support towards the SAGES International Proctoring Courses (IPC), a SAGES Global Affairs Initiative:

Allergan Foundation • SAGES Research & Education Foundation SAGES gratefully acknowledges the following companies and individuals for their unrestricted contribution in kind:

Karl Storz Endoscopy • Stryker Endoscopy Swanson Family Foundation

Guidelines

Your SAGES Guidelines Committee continues to be active in the production of evidence-based practice guidelines, credentialing guidelines and other material supporting the practice of minimally invasive surgery and flexible GI endoscopy. One recently approved SAGES guideline is now available online at:

http://www.sages.org/publications/guidelines/

- Guidelines for the Surgical Treatment of Esophageal Achalasia
 Some of our more recently approved guidelines include:
- Guidelines for Diagnosis, Treatment, and Use of Laparoscopy for Surgical Problems during Pregnanacy
- Guidelines for Surgical Treatment of Gastroesophageal Reflux Disease (GERD)

All current SAGES guidelines are available on the SAGE website at: http://www.sages.org/publications/guidelines/

If you are unable to access the guidelines online and wish a copy sent to you, please contact Aaron Goodman (aaron@sages.org) at the SAGES office (310) 437-0544. Also, if you would like to suggest topics for future SAGES guidelines, please contact Aaron Goodman.

Pediatric Committee

In response to the SAGES past president's call for "Giving Back", the Pediatric Liaison Group has decided to contribute to Operation Medical Libraries. The Division of Pediatric Surgery at Nemours Children's Clinic in Jacksonville, FL held a book collection, and a total of 89 books were donated and shipped to Kabul, Afghanistan for the rebuilding of the local teachining hospital and university. Our group page now shows a photograph of SAGES members Danielle Walsh, MD and Daniel Robie, MD with the shipment.

Research and Career Development

Career Development Workshop

January 13 - 14, 2012, Fort Lauderdale, FL

The SAGES Research and Career Development Committee will be hosting its 4th Annual Career Development Workshop. The workshop is scheduled to take place January 13-14, 2012 in Fort Lauderdale, FL.

This course has been designed by the SAGES Research Committee in order to provide its membership with education and personalized training on obtaining the skill set required for academic success. The goal of this program is to provide fellows and junior faculty with a venue for interaction with experienced faculty with at rack record of successful publication, funding, and mentorship. This experience will serve to "set the bar" for a formalized career development effort at the participants home institution. Topics will range from developing and organizing research studies to successful grant and manuscript writing strategies. Each participant will bring the specific aims portion of a research grant that will be edited, revised, and improved for a submission

Use SAGESPAGES to Promote Your Practice Online

SAGES officially lauched our new Member Web Site/Social Network: SAGESPAGES (http://www.sages.org/sagespages/) in May, 2011. Since then, almost 4,000 surgeons have checked into the site to update their enhanced members profile or connect with their SAGES colleagues using the new tools.

But did you know that, in addition to proving tools for SAGES Members to more easily communicate with each other or with committees, SAGESPAGES is also an excellent way to advertise your public activities or practice details on search engines? The new SAGES Member Profile allows you to not only add full contact information for your practice, including a free-text description but you can also upload your CV or copies of articles or chapters you have authored (copyright permitting, of course) or even brochures and those become linked to your public profile and visible to the world. You have control over which data fields appear to the public or just to your fellow SAGES members. If you submit images or videos or wiki articles to SAGES, all of those become visible in your profile too.

By doing this, you are able to take full advantage of the SAGES web site's reputation and weight on the search engines. We have run the sages.org domain continously since late 1995 (which makes us one of the oldest sites on the Internet) and that longevity directly translates to attention from the various search engines. Additionally, the SAGES Web Team is constantly checking on the health of our site and making tweaks to the pages to increase their visibility.

An excellent example of a member utilizing the resources of SAGESPAGES to its fullest extent is Dr. Constantine Frantzides: http://bit.ly/CFSAGES. Dr. Frantzides has an excellent practice description and has uploaded 84 documents to his profile for sharing, all of which are indexed by Google and help to drive people searching for a surgeon to his profile.

If you have any questions about using SAGESPAGES or setting up your profile, please contact techsupport@sages.org

to SAGES and/or other funding sources. Small group discussions on such protocols will provide practical training in research methodology, proposal writing and manuscript preparation.

Registration will open in the fall and will cost \$250.00 For more information please contact Maribeth@sages.org and further information will be available on the sages website shortly.

The Fellowship Council



For Information on Non-ACGME Minimally Invasive, Bariatric, Gastrointestinal, Colorectal, Thoracic, Hepato-Pancreato-Biliary, and Flexible Endoscopic Surgery Fellowships, visit

www.fellowshipcouncil.org

- Streamlined Fellowship Application and Match Process
- Universal Fellowship Application Form

2012 NON-ACGME FELLOWSHIPS AVAILABLE FOR:

- Advanced Laparoscopic/Minimally Invasive Surgery
- Bariatric Surgery
- Foregut & Hepato-Pancreato-Biliary Surgery
- Flexible Endoscopy
- Colorectal
- Thoracic

2012 FELLOWSHIP APPLICATION CYCLE:

Application Process Opens: Wednesday, June 1, 2011

Application Process Closes: Thursday, September 1, 2011

Letters of Recommendation Deadline: Thursday, September 1, 2011

Inform Applicants of Interview Status: Friday, September 23, 2011

Match Site Opens: Monday, October 3, 2011

Match Rank Order Deadline: Friday, October 21, 2011

Match Date: Wednesday, November 2, 2011

HEPATO-PANCREATO-BILIARY APPLICATION CYCLE:

HPB Match Process Opens: Monday, May 9, 2011

HPB Match Process Closes: Friday, July 1, 2011

HPB Letters of Recommendation Deadline: Friday, July 1, 2011

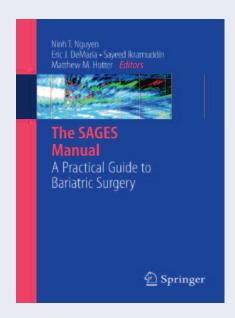
HPB Match Application (Rank Order Deadline): Monday, Sept. 19, 2011

HPB Match Date: Thursday, Oct. 27, 2011

springer.com

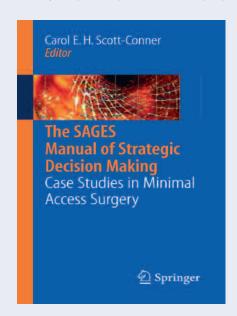
SAGES Manuals

The SAGES Manuals are portable, concise, beautifully illustrated manuals from the world's pioneering Society of minimally invasive surgery. These books provide an authoritative synopsis of the major laparoscopic and endoscopic procedures in easy-to-use, outline form.



From the reviews ► This is a convenient, multifaceted guide to the principles and practice of bariatric surgery and related topics... The manual is targeted primarily at the members of the multidisciplinary team involved in a bariatric surgery program: surgeons, fellows and residents, physician extenders, nutritionists, nurses, psychologists, and specialty physicians... It will also be a valuable addition to the reference section of medical libraries. ► Isaac Samuel, Doody's Review Services, Dec 2008

2008. XVI, 280 p. 62 illus., Softcover ISBN 978-0-387-69170-1 ▶ \$59.95



From the reviews ► This is a guide to clinical strategy for the general surgeon employing minimal access surgery... Contemporary trainees in general surgery and senior practitioners... will benefit from this work from an international group of experts with a significant number of contributors from the University of Iowa... Discussion of treatment alternatives is clear and the review of evidence is excellent. Dr. Scott-Conner and her contributors place an important technique in context for trainees and practitioners. ► David J. Dries, Doody's Review Service, Nov 2008

2008. XL, 616 p. 125 illus., Softcover ISBN 978-0-387-76670-6 ▶ \$79.95



From the reviews ► This book provides an authoritative synopsis of the major laparoscopic and endoscopic procedures in easy-to-use, outline form. All the major and emerging laparoscopic general surgery procedures are included and information on indications, patient preparation and position, and the step-by-step operative technique are featured for each operation. It is an absolutely must have reference for the general surgery resident on call or as a refresher before procedures.

2nd ed., 2006. XXIV, 840 p. 311 illus., Softcover ISBN 978-0-387-23267-6 ► \$79.95

Available in print and electronic format

SAGES-Endorsed Courses as of August, 2011

s a service to members, SAGES offers Course and Program Directors the opportunity to have their courses reviewed and endorsed by the Continuing Education Committee. These courses meet the guidelines established in the SAGES Framework for Post-Residency Surgical Education and Training and are endorsed by the Society of American Gastrointestinal and Endoscopic Surgeons (SAGES).

For more information on these courses, visit http://sages.org/education/endorsed_courses/index.php and for information on applications, visit http://sages.org/education/endorsed_courses/applications.php.

Cleveland Clinic

Course Director: David W. Dietz, MD For More Information Contact:

Cleveland Clinic

3050 Science Park Drive Beachwood, OH 44122 Phone: 216-448-0791 Email: sukenik@ccf.org

- Turnbull Symposium// September 22, 2011 - September 23, 2011

Cleveland Clinic: Ohio

Course Director: Philip Schauer, MD For More Information Contact:

Cleveland Clinic

3050 Science Park Drive AC 313

Beachwood, OH 44122 Phone: 216-448-0786 **Fax:** 216-448-0784 Email: wisnosl@ccf.org Contact: Lisa Politi-Wilk Email: politil@ccf.org Fax: 216-448-0782

- 6th Annual Obesity Summit 2011// October 20, 2011 -

October 21, 2011

CUHK Jockey Club Minimally Invasive Surgical Skills

Course Director: Professor Enders Kwok-Wai Ng **For More Information Contact:**

CUHK Jockey Club Minimally Invasive Surgical Skills Centre 3/F., Li Ka Shing Specialist Clinic (North Wing)

Prince of Wales Hospital, Hong Kong

Phone: (852) 2632-1497 Fax: (852) 2632-4708 Email: info@hkmisc.org.hk

- Urology Symposium 2011- Men's Health// November 04, 2011 - November 05, 2011

- 26th International Workshop on Therapeutic Endoscopy// December 13, 2011 - December 15, 2011

Foundation for Surgical Innovation and Education

Course Director: Lee L. Swanstrom, MD

For More Information Contact:

The Foundation for Surgical Innovation and Education

1040 NW 22nd Avenue, Suite 560

Portland, OR 97210 Phone: 503-963-2866 Fax: 503-281-0575 Contact: Sara Knutson

Email: sknutson@orclinic.com

- 9th Annual Postgraduate Course in Advanced Surgery: Practical Applications for Everyday Practice// September 22, 2011 - September 23, 2011

IRCAD-EITS

Course Director: Jacques Marescaux, MD, FRCS

For More Information Contact:

IRCAD-EITS

Hopitaux Universitaires I place de l'Hopital, BP 426 Strasbourg, France F-67091 Phone: +33-388-119-000 Fax: +33-388-119-099

Email: secretariat@ircad.u-strasbg.fr

- Gynecology Surgery: Current Techniques in the Treatment of Severe Endometriosis// September 05, 2011 - September 07, 2011
- Intensive Course in Laparoscopic Urological Surgery// September 19, 2011 - September 23, 2011
- NOTES & Single Port Surgery// September 29, 2011 -October 01, 2011
- Cours Intensif en Chirurgie Laparoscopique Urologique// October 05, 2011 - October 05, 2011
- Gynecological Surgery: New Insights in Prolapse Surgery-Vaginal and Laparoscopic Routes// October 17, 2011 -October 19, 2011
- Arthroscopic Course: Knee Course// October 25, 2011 -October 26, 2011
- Arthroscopic Course: Shoulder Course// October 27, 2011 - October 28, 2011
- Digestive Surgery// November 03, 2011 November 05,
- Gynecological Surgery: Advanced Trechniques in Operative Gynecological Endoscopy// November 14, 2011 - November 16, 2011
- Colorectal Surgery// November 18, 2011 November 19,
- Intensive Course in Laparoscopic Surgery// November 21, 2011 - November 25, 2011
- Arthroscopic Course: Advanced Wrist// November 25, 2011 - November 26, 2011
- Bariatric & Metabolic Surgery// December 02, 2011 -December 03, 2011
- Intensive Courses in Laparoscopic Urological Surgery// December 05, 2011 - December 09, 2011
- Interventional GI Endoscopy// December 12, 2011 -December 13, 2011
- Arthroscopic Course: Hip Course// December 15, 2011 -December 16, 2011

Minimally Invasive Surgery Training Centre

Course Directors: Prof MC Misra and

Dr. Virinder Kumar Bansal

For More Information Contact:

Minimally Invasive Surgery Training Centre Room No. 5023, 5th Floor Teaching Block Department of Surgical Disciplines All India Institute of Medical Sciences Ansari Nagar, New Delhi-110029, India

Phone: +91-11-26594769
Fax: +91-11-26588324
Email: drvkbansal@gmail.com

Email: mistrainingcentre.aiims@gmail.com

- Training Course in Operative Laparoscopic// September 05, 2011 - September 09, 2011
- Training Course in Operative Laparoscopic// October 10, 2011 October 14, 2011
- Training Course in Operative Laparoscopic// November 14, 2011 November 18, 2011
- Training Course in Laparoscopic Hernia Surgery// November 22, 2011 - November 24, 2011
- Training Course in Operative Laparoscopy// November 28, 2011 December 02, 2011
- Training Course in Laparoscopic Hernia Surgery// December 13, 2011 December 15, 2011

Save the Date!!

SAGES Scientific Session & Postgraduate Course (with IPEG)

March 7 - 10, 2012

San Diego Convention Center, San Diego, CA

SAGES Scientific Session & Postgraduate Course

April 17 - 20, 2013

Baltimore Convention Center, Baltimore, MD

SAGES Scientific Session & Postgraduate Course

April 2 - 5, 2014

Salt Lake Convention Center, Salt Lake City, UT

SAGES Scientific Session & Postgraduate Course

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

Report of the AMA Yearly Meeting - 2011

This was a lively meeting with many important decisions that may change the way we practice medicine in the future, perhaps forever. Decisions cut to the quick of the problems we face as physicians in both Private and Academic practice. These included the relationships between Industry and academic medicine, the backing of individually mandated health insurance, the further dissection and removal of the most disquieting provisions of the Patient Protection and Affordable Care Act as well as other important health care issues of interest.

After four years of debate, the relationship between Corporate and Medical Specialty Societies as well as guidelines promulgated by our societies were finally codified. A summary of some clinical practice guidelines follows, and as you can see, they are less restrictive than those of some specialty societies. Please note that guidelines and policies adopted by the AMA do not restrict, in any way, the actions of independent societies. Rather, they reflect the position that the AMA holds regarding the issue at hand.

Council of Medical Specialty Societies

Code for Interactions with Companies 2010

7. Clinical Practice Guidelines

- **7.1.** Societies will base Clinical Practice Guidelines on scientific evidence.
- 7.2. Societies will follow a transparent Guideline development process that is not subject to Company influence. For Guidelines and Guideline Updates published after adoption of the Code, Societies will publish a description of their Guideline development process, including their process for identifying and managing conflicts of interest, in Society Journals or on Society websites.
- **7.3.** Societies will not permit direct Company support of the development of Clinical Practice Guidelines or Guideline Updates.
- 7.4. Societies will not permit direct Company support for the initial printing, publication, and distribution of Clinical Practice Guidelines or Guideline continued on page 18

Report of AMA Yearly Meeting – continued from page 17

Updates. After initial development, printing, publication and distribution is complete, it is permissible for Societies to accept Company support for the Society's further distribution of the Guideline or Guideline Update, translation of the Guideline or Guideline Update, or repurposing of the Guideline content.

- 7.5. Societies will require all Guideline development panel members to disclose relevant relationships prior to panel deliberations, and to update their disclosure throughout the Guideline development process.
- **7.6.** Societies will develop procedures for determining whether financial or other relationships between Guideline development panel members and Companies constitute conflicts of interest relevant to the subject matter of the guideline, as well as management strategies that minimize the risk of actual and perceived bias if panel members do have conflicts.
- **7.7.** Societies will require that a majority of Guideline development panel members are free of conflicts of interest relevant to the subject matter of the Guideline.
- **7.8.** Societies will require the panel chair (or at least one chair if there are co-chairs) to be free of conflicts of interest, and to remain free of conflicts of interest for at least one year after Guideline publication.
- 7.9. Societies will require that Guideline recommendations be subject to multiple levels of review, including rigorous peer review by a range of experts. Societies will not select as reviewers individuals employed by or engaged to represent a Company.
- **7.10.** Societies' Guideline recommendations will be reviewed and approved before submission for publication by at least one Society body beyond the Guideline development panel, such as a committee or the Board of Directors.
- **7.11.** Guideline manuscripts will be subject to independent editorial review by a journal or other publication where they are first published.
- **7.12.** Societies will publish Guideline development panel members' disclosure information adjacent to each Guideline and will identify abstentions from voting.
- 7.13. Societies will require all Guideline contributors, including expert advisors or reviewers who are not officially part of a Guideline development panel, to disclose financial or other substantive relationships that may constitute conflicts of interest.
- 7.14. Societies will recommend that Guideline development panel members decline offers from affected Companies to speak about the Guideline on behalf of the Company for a reasonable period after publication.

To read the full report from the AMA Yearly Meeting, please visit SAGES PAGES (http://bit.ly/SAGESAMA2011).

Council on Ethical and Judicial Affairs: Report 1: Financial Relationships with Industry in Continuing Medical Education.

Relationships between medicine and industry—such as pharmaceutical, biotechnology, and medical device companies—have driven innovation in patient care, contributed to the economic well-being of the community, and provided significant resources (financial and otherwise) for professional education, to the ultimate benefit of patients and the public. The interests and obligations of medicine and industry diverge in important ways, however. An increasingly urgent challenge for both partners is to devise ways to preserve strong, productive collaborations for the benefit of patients and the public at the same time they each take clear, effective action to avoid relationships that could undermine public trust.

As relationships between medicine and industry have evolved, major national organizations, such as the Institute of Medicine (IOM) and the Association of American Medical Colleges have explored the challenges that these relationships can pose in research, clinical care, education, and beyond. Key stakeholders, including (among others) the Accreditation Council for Continuing Medical Education (ACCME), [the Council of Medical Specialty Societies (CMSS), and the Pharmaceutical Research and Manufacturers Association (PhRMA) have developed guidance to help their constituents sustain appropriate, productive, and professional interactions.

The Council on Ethical and Judicial Affairs (CEJA) has been exploring the relationship between industry and CME sponsorship for several years. CEIA notes that the AMA was founded on the vision that, as medical professionals, physicians should represent the highest standards of competence, integrity, and professionalism. The adopted CEJA report carries that vision forward. It examines ethical aspects of medicine-industry relationships in continuing medical education (CME), explores ethical challenges that can be posed by financial relationships from the perspective of physicians, and provides guidance for members of the medical profession who attend or who organize, teach in, or serve other roles in CME. The Council recognizes that pharmaceutical, biotechnology, and medical device companies are not the only entities with which financial relationships can raise concerns. CEJA likewise recognizes that CME is not the only domain of potential concern. However, narrowing our focus to CME allows us to explore the complex considerations at stake in a manageable context and to provide practical ethical guidance on issues that increasingly challenge physicians as professionals.

While the Report was adopted, considerable testimony was heard in the reference committee and on the House floor that the report needed further revision, and that it remained too restrictive—especially for smaller speciality societies. Nonetheless, adoption passed with 59% of delegates voting Aye.

SAGES Foundation Update

August 2011

SAGES Foundation continues to raise money for compelling research and education opportunities benefiting the practice of minimally invasive surgery. For more than a decade, this investment capital has been utilized to yield income supporting the foundation's basic objectives in perpetuity, allowing us to lead minimal access advancements and ensure patient safety well into the future. We have successfully obtained more than \$9.5 million in commitments to date with the goal to double that amount by 2020. The SAGES Foundation carries out its objectives through focused, discretionary grant making, providing institutions, physicians, fellows, and academicians with "venture capital" to develop and create evidence-based standards of practice, up-to-date training programs and long-term research. The SAGES Foundation could not possibly carry out its mission without the contributions of patient care advocates, the medical industry, and the community. Your past and future investment towards great projects of surgical education and research is both valued and appreciated. We can't thank you enough.

New and Recommitted Corporate Supporters

The SAGES Foundation is thrilled to acknowledge the following companies for their recent recommitments to advance minimally invasive surgery. We are grateful for your continued support!

Allergan Foundation \$25,000

LifeCell \$15,000

Simbionix \$20,000

Synovis Surgical Instruments \$5,000

WL Gore & Associates \$200,000

After the Meeting: The 2012 SAGES Foundation Golf Outing

The 2nd Annual SAGES Foundation Golf Outing will be held at The Torrey Pines Golf Course in San Diego, CA on Sunday, March 13, 2012. The event will include transportation, lunch, practice range including golf balls, golf and cart fees, post golf refreshments including beer and snacks. The cost of the event is \$300.00 and all proceeds will go to the SAGES Foundation. A portion of your participation fee will be tax-deductible to the fullest extent of the law.

Both SAGES members and industry are invited to participate. This will be your chance to relax and have some fun after a long productive meeting. Please contact our event chair, Dr. Barry Salky at barry.salky@mountsinai.org to make your reservation.

The 2010 SAGES Foundation Awards Luncheon Recap:

The 5th Annual SAGES Foundation Awards Luncheon was held on Wednesday March 30th at the Henry B. Gonzalez Convention Center in San Antonio, Texas. Once again, a select group of outstanding, experienced and reputable leaders in MIS were recognized and lauded by 200 of their peers, friends, and family. In total, the luncheon helped to raise more than \$40,000 to benefit future minimally invasive research and educational opportunities!

This year awards for laudable service and innovation were presented to

Haruhiro Inoue, MD: SAGES Pioneer in Endoscopy Award Jacques Perissat, MD: SAGES George Berci Lifetime Achievement Award

Wayne H. Schwesinger, MD: SAGES Foundation Jeffrey L. Ponsky Master Educator in Endoscopy Award

Brent Matthews, MD FACS: The Excellence in Medical Leadership Award – A SAGES Foundation Award

* Generously funded through an unrestricted educational grant from W.L. Gore & Associates

Gerald M. Fried, MD: SAGES Distinguished Service AwardTheodore N. Pappas, MD: SAGES Excellence in Clinical Care Award

Masaaki Ito, MD: SAGES Foundation Gerald Marks Rectal Cancer Award

J. Esteban Varela, MD: SAGES Young Researcher Award Rebecca Petersen, MD: SAGES Researcher in Training Award Konstantinos Makris, MD: SAGES IRCAD Traveling

Fellowship Award

* SAGES acknowledges a generous grant in support of this award from Karl Storz Endoscopy

The 6th Annual Luncheon will take place in San Diego, CA in March, 2012. To become an event sponsor, purchase individual tickets, tables, or virtual ads, please contact the Foundation office at (310) 347 0544 ext.117 or danielle@sages.org. Individual tickets can be purchased for \$150, and tables of ten will be available for \$1,275. Because this event benefits the SAGES Foundation, a portion of your purchases will be tax deductible to the extent permitted by law.



Society of American Gastrointestinal and Endoscopic Surgeons

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