



# New England Surgical Society Newsletter

Volume 9, Number 2

August 2007

## 2006-2007 Executive Committee

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John P. Welch, MD

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## FROM THE PRESIDENT

I am pleased to report that the NESS has a comprehensive scientific and social program planned for our upcoming 88th Annual Meeting in Burlington, Vermont on September 28-30.

Under the leadership of Dr. Rocco Orlando, the 2007 Program Committee (Drs. Richard Barth, Theresa Graves, John Louras, James Whiting, and J. Lawrence Munson) has selected 18 podium presentations, two of which were the winners at the NESS Resident and Fellow Research Presentation Day held this past May. In addition, 12 brief reports and 24 posters will be presented and Dr. Andrew Warshaw will deliver the 2007 Samuel Jason Mixer Lecture.

Dr. David Berger, Chairman of the NESS Ad Hoc Issues Committee, will be moderating an important panel discussion on Attending Work Hours with Drs. Neil Hyman, Orlando Kirton, and Robert Kozol serving on the panel. Also new this

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**John P. Welch, MD**

## Editor's Corner

**Bruce J. Leavitt, MD**



We are in the middle of a great summer here in New England. Soon the cooler temperatures will arrive and the colors of the Vermont trees will start to change. That will signal a Vermont fall and the arrival of NESS members to Burlington for our 88th annual meeting. All Vermont members of the NESS are looking forward to having our members visit our wonderful state. The last weekend in September should have great color, temperature and things to do in Burlington. We will have a Lake Champlain cruise on Friday night, golf Saturday

afternoon and a banquet Saturday night. For those who do not play golf there are many outdoor activities to consider. Some of these activities include visiting the Ben & Jerry's ice cream plant in Waterbury, climbing Camel's Hump, visiting Stowe, walking Burlington's bike path on the lake and enjoying the world famous Shelburne Museum.

I was on call this past July 4<sup>th</sup>. At quarter past 7 am the phone rings from the hospital. All surgeons know that most calls before 8 am when

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**New England Surgical Society**

88<sup>th</sup> Annual Meeting  
September 28-30, 2007  
Burlington, VT

[www.NESurgical.org](http://www.NESurgical.org)



## New England Surgical Society

88<sup>th</sup> Annual Meeting  
September 28-30, 2007  
Burlington, VT

[www.NESurgical.org](http://www.NESurgical.org)

### OBJECTIVE

The NESS Annual Meeting is designed to provide one and one half days of comprehensive educational experiences in the fields of clinical surgery, experimental surgery and related sciences, surgical education and the socio-economic aspects of surgical care.

### MEETING REGISTRATION

You can register for the 88th Annual Meeting online, via the NESS website. Visit [www.NESurgical.org](http://www.NESurgical.org). This simple and fast tool enables you to receive your confirmation immediately. You may also choose to download and fax or mail the meeting registration form.

### HILTON (formerly Wyndham) BURLINGTON HOTEL

The Hilton (formerly Wyndham) Burlington Hotel is located in Vermont on the shores of Lake Champlain, in the heart of downtown and just ten minutes from Burlington International Airport. Our hotel provides easy access to recreation, arts, history, shopping and entertainment. There are also local, state and national parks, and golf clubs for recreation as well.

**RESERVE EARLY!** The block of rooms reserved for NESS will be released on August 28th so don't delay.

### 88th Annual Meeting Highlights

#### 23rd Annual Samuel Jason Mixter Lecture

Andrew L. Warshaw, MD, Boston, MA

#### Presidential Address

John P. Welch, MD, Hartford Hospital, CT

#### Panel Discussion: *Attending Work Hours*

Moderator: David Berger, MD

Panelists: Neil Hyman, MD, Orlando Kirton, MD  
Robert Kozol, MD

#### Annual Poster Session - Cash prize

#### Welcome Reception

This year's Welcome Reception will be held on the Spirit of Ethan Allen cruise ship! A very quick walk from the hotel, the evening will begin on Friday, September 28th with cocktails and hors d'ouvres at 6:00 pm and will venture out on a sunset cruise from 6:30 – 7:30 pm. Dinner plans should be made for the evening, after the reception.

## PRELIMINARY PROGRAM

Friday, September 28, 2007

### SCIENTIFIC SESSION I

#### The Introduction of Retrievable Filters in the Trauma Population: Will the Advent of Retrievable IVC Filters Change Indications for Trauma Patients?

Kristina Spate, Faisal Aziz, John Aruny, Bauer Sumpio

#### Tight Glycemic Control Reduces Deep Sternal Wound Infection Rate Following Cardiac Surgery: A Multidisciplinary Approach Using a Novel Tool

Robert S. Kramer, Robert Groom, Reed D. Quinn, Paul Lennon, Denise Weldner, Paulette Gallant, Cheryl St. Onge, Joanne Chapman, Barb Heyl, Ryan Knapp, Anna Arnold, Mirla A Kellett, Jr.

#### Measuring the Effectiveness of Laparoscopic Nissen Fundoplication: Long Term Results

Denise W. Gee, Michael T. Andreoli, David W. Rattner

#### Intraoperative Injection of 99m-Techneium Sulfur Colloid for Breast Sentinel Lymph Node Biopsy

Dalliah Black, Baiba Grube, Teresa Ponn, Donald Lannin

#### Sequential Kidney Transplants from Deceased Donors: Does the Increased Cold Ischemia Time Change the Final Outcome?

Evangelos Messaris, Amitabh Gautam, Reginald Gohh, Angelito Yango, Anthony Monaco, Paul Morrissey

#### Current Status of Laparoscopic vs. Open Cholecystectomy for Acute Cholecystitis in the United States

Nicholas Csikesz, Rocco Ricciardi, Jennifer F. Tseng, Shimul A. Shah

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**Analysis and Comparison of Ultrasonic-Shears-Assisted Thyroidectomy versus Conventional Clamp-And-Tie Thyroidectomy**

Heather A. Ford, David M. Brams, John P. We

**Results of Pediatric Laparoscopic Splenic Cyst Unroofing**

Monica Langer, Jordan Gutweiler, Tom Jaksic

**Total Abdominal Colectomy and Ileal Pouch - Anal Anastomosis in Children**

Craig W. Lillehei, Alan Leichtner, Athos Bousvaros, Robert C. Shamberger

**Laparoscopic Wedge Resection Of Gastric Lesions: Perioperative Morbidity And Long-Term Efficacy**

Yuri W. Novitsky, George Poultides, Sarah Treter, Kent W. Kercher, B. Todd Heniford

**SCIENTIFIC SESSION II**

**Has the 80-Hour Work Week Improved Surgical Resident Education?**

Erica Sneider, Anne C. Larkin, Jeannine St. Pierre, Shimul A. Shah

**Intraoperative and Percutaneous Radiofrequency Ablation of Pheochromocytomas**

Yee Lee Cheah, Jack M. Monchik, William W. Mayo-Smith, Damian E. Dupuy

**Angiostatin and Endostatin Expression Are Increased in the Skeletal Musculature of Diabetics**

Neel R. Sodha, Munir Boodhwani, Richard T. Clements, Shu-Hua Xu, Sirisha Emani, Cesario Bianchi, Frank W. Sellke

**Potential Role of MRI In the Diagnosis of Recurrent Breast Cancer**

John W. Gorechlad, Elizabeth McCabe, John H. Higgins, Donald Likosky, Petra Lewis, Richard J. Barth

**The Treatment of Biliary Dyskinesia Based Upon Symptoms: Results of a One-Year Prospective Study**

John Alfred Carr, LaDonna Bryan, Donald Snider

**STATE CAUCUS MEETINGS**

**Saturday, September 29, 2007**

**SPECIALITY GROUP BREAKFAST**

Topic 1: On-Call Reimbursement

Topic 2: Maintenance of Certification

Topic 3: Acute Care Surgery

**NEW MEMBER BREAKFAST MEETING**

**SCIENTIFIC SESSION III**

**Digital Intern Recovery Score: A Method of Thin Slicing Information Enhances Clinical Communication of Each Patient's Recovery Process**

John H. Braxton, Scott A. Buchanon, Desmond Donegan, Louis Russo, Seth Blank, Paul Weldner, Reed D. Quinn

**Bilateral Video Assisted Thoracoscopic (VAT) Approach for Pulmonary Vein Isolation (Minimally Invasive Maze procedure) in Patients with Isolated Atrial Fibrillation**

Reza Khodaverdian, Thomas J. Sewyer, Vasant Khachane, Mark Marieb

**National Trends in Adrenalectomy for Neoplastic Disease, 1998-2004**

Elan R. Witkowski, Theodore P. McDade, Joshua S. Hill, James T. McPhee, Giles F. Whalen, Mary E. Sullivan, Demetrius E. Litwin, Jennifer F. Tseng

**An Alternative Model for Third Year Surgery Clerkship: Is it Effective ?**

Arundhati Ghosh, Wendy Gutterson, David Hirsh, Barbara Ogur, Ronald Weintraub, Steven Schwaitzberg

**Results of Esophagectomy for Achalasia After Failed Intervention**

Henning A. Gaisert, Ning Lin, John C. Wain, Cameron D. Wright, Douglas J. Mathisen

**Cystic Pancreatic Endocrine Neoplasms: A Distinct Tumor Type?**

Liliana G. Bordeianou, Parsia A. Vagefi, Dushyant Sahani, Vikram Deshpande, Elena Rakhlin, Andrew L. Warshaw, Carlos Fernández del Castillo

**PANEL DISCUSSION: Attending Work Hours**

Moderator: David Berger, MD, Boston, MA

**"Experiences with Restrictions" – Orlando Kirton, MD**

Pro – Neil Hyman, MD

Con – Robert Kozol, MD

**BREAK with POSTER SESSION**

**Early Involvement of Trauma Service Associated With Reduced Mortality**

Horace F. Henriques, James M. Whedon, Friedrich M. von Recklinghausen, John E. Sutton, Jr.

**CT Scan Improves Certainty of Diagnosis in the Pregnant Patient**

Stephen J Ferzoco, Matt Pappas, Ali Tavakkolizadeh, Stephen Ledbetter, David I. Soybel

**Vascular Assessment in Chronic Wound Care: Affect of HBO2T on Forecasting Patient Outcome**

George A. Perdrizet, Justin Mohr, Patrick Worth, Caesar Anderson, Brian Solomon, Christine Shapter

**Clinical Outcomes in Patients With Severe Diabetic Foot Ulcers Treated With and Without Hyperbaric Oxygen**

George A. Perdrize1, Patrick Worth, Justin Moher, Brian Solomon, Caesar Anderson, Christine Shapter

**Fulminant Clostridium Difficile Colitis: What Can be Done to Control the Epidemic?**

Yee Lee Cheah, Sanda Tan, Staci Fischer, Victor E. Pricolo

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**Identification of Factors That Will Predict Invasion on Excision Specimens in Patients With Stereotactic Core-Needle-Biopsy-Diagnosed DCIS**

Laura S. Dominici, K. Greg Chang, Jyotsna Kakullavarapu, Rebecca Yang

**A Novel Virtual Reality-Based Curriculum Improves Laparoscopic Skills in Novices**

Michael Martinez, Kurt E. Roberts, Robert L. Bell, James Dziura, Dan Eisenberg, Walter E. Longo, Andrew J. Duffy

**Ventilatory Requirements Following Esophagectomy: A Comparison Between Open And Minimally Invasive Esophagectomy**

Charles T. Bakhos, Jeremiah T. Martin, Alicia A. McKelvey, John A. Federico, Thomas Fabian

**AMP-activated Protein Kinase: A Physiological Off Switch for Gastric Acid Secretion**

Shafik M. Sidani, Thenral Socrates, Michael Foller, Walter E. Longo, John P. Geibel

**Can OR Schedule Optimizing Software Improve OR Efficiency?**

Mark Meyer, David Craft, Suzanne Sokal, Keri McCrensky, Wilton Levine, Warren Sandberg, David Berger

**Identification of a Putative Cardiac Progenitor Cells in the Miniature Swine**

Andrew J. Meltzer, Stuart Houser, Meghan Cochrane, Jessicca Sayre, James Allan, David Sachs, Joren C. Madsen, Bruce R. Roengard

**Calcimimetic Inhibits the Effect of Cholera Toxin in Rat Small Bowel**

Syed M. Alam, Stanley J. Dudrick, John Geibel

**Routine Feeding Jejunostomy Tube Placement May Not Be Beneficial in Pancreaticoduodenectomy**

James T. McPhee, Deep Adhikari, Theodore P. McDade, Joshua S. Hill, Giles F. Whalen, Dana K. Andersen, Hiroomi Tada, Mary E. Sullivan, Jennifer F. Tseng

**Carcinoid Tumors of the Gastrointestinal Tract in Minority Patients**

Susana C. Wishnia, David B. McAneny, Antonio de las Morenas, Jennifer E. Rosen

**Surgical Outcomes of Open Cholecystectomies in the Laparoscopic Era**

Bram A. Nijssen, Suzanne M. Sokal, Yuchiao Chang, David L. Berger

**Hand-Assisted Laparoscopic Colectomy: Is There an Advantage Over Open Resections?**

Louis Reines, Heidi Fitzgerald, Kent W. Kercher, B. Todd Heniford, Yuri W. Novitsky

**Incidence of Return Visits to the Emergency Department Following Appendectomies within the Global Period: An Analysis of Incidence and Cost-Effectiveness of Post-Appendectomy Emergency Department Visits**

Erica Gross, Francesco A. Aiello, Robert Kozol, Rajiv Chandawarkar<sup>1</sup>, Anthony Morgan, Andrew Duffy, Walter Longo

**Stapled Hemorrhoidopexy - Initial Experience at a Community Hospital**

Lucian Panait, Viraj Bhalani, Thomas Alosco, Stanley J. Dudrick

**Preoperative Identification of Multiglandular Disease in Patients with Primary Hyperparathyroidism**

Michele L. Lombardo, Jack M. Monchik

**Early Postoperative Hemorrhage After Roux-En-Y Gastric Bypass: A Case-Control Study**

Charles T. Bakhos, Fuad Alkhoury, Tassos Kyriakides, Randolph Reinhold, Geoffrey Nadzam

**Outcomes in Patients With End Stage Renal Disease and Colonic Diverticular Disease**

Heather L. Yeo, Louis Salamone, Marc Lorber, Walter Longo

**An Alternative Measure of Proficiency in Sentinel Node Biopsy for Breast Cancer**

Ted A. James, Lawrence E. McCahill

**Mesh Plug Appearing As Cecal Mass On Colonoscopy**

Stacie E. Perlman, Steven Yood, Stephen Stein, Phillip Jaffe, Jamie Rand

**SCIENTIFIC SESSION IV**

**Use of Goal Sheets Reduces the Incidence of Ventilator Associated Pneumonia**

Melissa F. Perkal, MaryJane Rubino, Bobbie Welch, Karen Rosenbeck, Maureen Levey, Kelly Swan, Hilary Cain, Richard A. Martinello

**Do All Patients Undergoing Parathyroidectomy Require Additional Neck Exploration When Intraoperative PTH Levels Do Not Decrease Appropriately?**

Patrick B. O'Neal, Vitaliy Poylin, Peter Mowschenson, Sareh Parangi, Gary Horowitz, Pravin Pant, Per-Olof Hasselgren

**Angiographic Embolization for Gastroduodenal Hemorrhage: Safety, Efficacy, and Predictors of Outcome**

George A. Poultsides, Christine Kim, Rocco Orlando, III, Michael J. Hallisey, Paul V. Vignati

**Rectal Carcinoid Tumors: Review of Results After Endoscopic and Surgical Therapy**

Mary R. Kwaan, Joel E. Goldberg, Ronald Bleday

**Improving Communication in the Surgical Intensive Care Unit. A Prospective Trial**

Mallory Williams, Rodrigo F. Alban, James P. Hardy, David A. Oxman, Edward Garcia, Cristina M. Thorsen, Gyorgy Frenzl, Selwyn O. Rogers, Jr.

**NON-CME ULTRASOUND HANDS-ON WORKSHOP**

Topic 1: Overview of Ultrasound Guided Breast Biopsy

Topic 2: Ultrasound Imaging of Liver/Abdominal

Supported by B-K Medical Systems

**PRESIDENT'S RECEPTION & DINNER (Business Attire)**

Conferment of the Nathan Smith Award

Charles J. McCabe, MD, Boston, Massachusetts

Reception in Mezzanine

Dinner in the Green Mountain Ballroom

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Sunday, September 30, 2007

SCIENTIFIC SESSION V

ANNUAL BUSINESS MEETING (Members Only)

1st PLACE RESEARCH DAY PRESENTATIONS

CLINICAL

Paige Teller, MD

*"Staging And Treatment Of Cancer: How Does Maine Compare?"*

BASIC SCIENCE

Gregory Nelson, MD

*"MR Surveillance Of Human Tissue-Engineered Arterial Conduits in SCID Mice Via Superparamagnetic Iron Oxide Nanoparticle Labeling."*

Implications and Management of Pancreatic Fistula Following Pancreaticoduodenectomy: The MGH Experience

Gregory Veillette, Ismael Dominguez, Cristina Ferrone, Sarah P. Thayer, Deborah McGrath, Andrew L. Warshaw, Carlos Fernandez del Castillo

Attrition of Categorical General Surgery Residents: Results of a 20 Year Audit

Walter E. Longo, John H. Seashore, Andrew J. Duffy, Robert Udelsman

23RD ANNUAL SAMUEL JASON MIXTER LECTURE

Andrew L. Warshaw, MD, Boston, MA

PRESIDENTIAL ADDRESS

*"Whither Goest General Surgery?"*  
John P. Welch, MD

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VERMONT HIGHLIGHTS

**The Firehouse Center for the Visual Arts (FCVA)** provides visitors with a fully integrated arts experience through contemporary exhibitions and educational programming.

**Shelburne Museum** contains over 150,000 works of art, Americana, and is one of New England's most diverse and unconventional museums.

**ECHO Museum** offers 60 species of fish, amphibians, invertebrates, and reptiles, and over 100 hands-on experiences, major traveling exhibits, and the Awesome Forces Theater.

**Billings Farm and Museum** provides entrance to the gateway of Vermont's rural heritage with a visit to one of the finest Jersey farms in America.

**Vermont Stage Company** is Burlington's only year-round professional theater, combining nationally renowned talent with the best Vermont-based actors.

**Frog Hollow Vermont State Craft Center** is a non-profit visual arts galleries and schools. A rigorous jury process means only the finest contemporary and traditional Vermont crafts.

**Robert Hull Fleming Museum** is Vermont's premier collection of art and anthropological artifacts, comprising an extraordinary range of more than 20,000 works of art.

**Vermont Teddy Bear Company** offers a factory tour of the largest handmade manufacturer of Teddy Bears in North America.

**Ben and Jerry's Ice Cream Factory** for a fun, educational factory tour, and sample the flavor of the day.

**Shelburne Farms** is a 1,400-acre working farm, nonprofit environmental organization and National Historic Landmark.

**Burlington Bike Path** allows walking, biking, cross country skiing, in-line skating and fishing on 7.6 miles of trail from Burlington to the Champlain Islands through the middle of Lake Champlain.

**Vermont National Country Club** is a semiprivate country club designed by Jack Nicklaus/Jack Nicklaus II.

**Stowe Mountain Resort** offers dining, lodging, shopping, nightlife, and plenty of world-class activities and amenities. And don't forget the mountain.

**Petra Cliffs Climbing Center** offers year round indoor rock climbing for all ages and abilities.

**University Mall** is Vermont's largest enclosed shopping center with over 70 shops and services and a state-of-the-art movie theatre.

**Essex Shoppes & Cinema** features national outlet stores & local Vermont specialty shops.

Shop the charming streets of Historic Manchester at the **Manchester Designer Outlets**.

**Church Street Marketplace** offers over 100 retail shops, restaurants and street vendors

**Burlington Farmers Market** features more than 50 vendors sell a wide variety of crafts, ready to eat foods and agricultural products.

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## 2007 NESS Resident Research Day

Ketan R. Sheth, MD

This year's Resident and Fellow Research Day took place on May 11, 2007. The day was a phenomenal success thanks to the presenters and the lively discussion from attending faculty and guest judges. This year's crop of submissions was highly competitive resulting in 24 high quality presentations throughout the day long event. The venue was the state-of-the-art Conference Center at Harvard Medical and made the challenging commute into Boston well worth the effort. This annual program continues to become increasingly popular amongst both the house staff and faculty as it provides an informal atmosphere for meeting and exchanging ideas with our New England surgical neighbors.

Presentations were delivered from a variety of surgical subspecialties including: general, pediatric, cardiac, thoracic, vascular, plastic, and urology. Both Basic Science and Clinical investigations were presented and first, second, and third place winners in each category were awarded cash prizes and plaques. This year's visiting professor and guest judge was Dr. Russell Nauta who gave an insightful "surgical top ten" on the past, present, and future of surgical education and training. Drs. John Welch, David McAneny, and Steven Schwaitzberg were the judges for the event and had a difficult job in picking winners from the outstanding presentations that were delivered. In the clinical category, first place was awarded to Dr. Paige Teller for her work: "Staging and Treatment of Cancer: How does Maine Compare?" In the basic science category, the first place went to Gregory Nelson for his work: "MR surveillance of Human Tissue-Engineered Arterial Conduits in SCID Mice Via Superparamagnetic Iron Oxide Nanoparticle Labeling." Both winners will be presenting their papers at the NESS Annual Meeting on September 28 - 30, 2007 in Burlington, Vermont.

Congratulations to all who participated and we look forward to seeing you at next year's event.

***The day was a phenomenal success thanks to the presenters and the lively discussion from attending faculty and guest judges.***

### BASIC SCIENCE

### CLINICAL SCIENCE

**1<sup>st</sup> Place Gregory Nelson, MD**  
**Yale University School Of Medicine**

*"MR Surveillance Of Human Tissue-Engineered Arterial Conduits In SCID Mice Via Superparamagnetic Iron Oxide Nanoparticle Labeling"*

**2<sup>nd</sup> Place Virendra Patel, MD**  
**Massachusetts General Hospital**  
*"Hind Limb Ischemia Reperfusion Accelerates Vascular Injury In Susceptible Vessels"*

**3<sup>rd</sup> Place Sang Lee, MD**  
**Children's Hospital**  
*"Parental Nutrition-Associated Liver Disease and Omega-3 Lipid Emulsions In Infants: Preliminary Findings On Safety And Efficacy"*

**1<sup>st</sup> Place Paige Teller, MD**  
**Maine Medical Center**

*"Staging And Treatment Of Cancer: How Does Maine Compare?"*

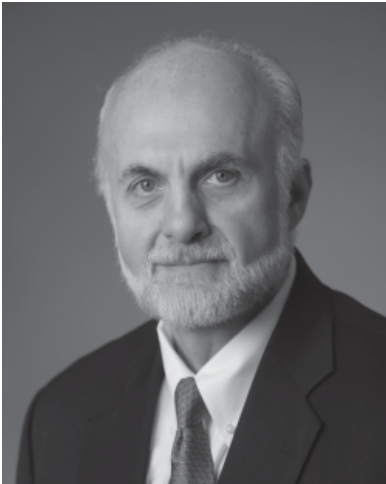
**2<sup>nd</sup> Place Stefano Crippa, MD**  
**Massachusetts General Hospital**  
*"Mucinous Cystic Neoplasm Of The Pancreas Is Not An Aggressive Entity. Lessons From 163 Resected Patients"*

**3<sup>rd</sup> Place Ami D. Jhaveri, MD**  
**Beth Israel Deaconess Medical Center**  
*"Perioperative And 3-Year Outcomes Of Endovascular And Open AAA Repair In The US Medicare Population"*

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## From the President-Elect

Thomas A. Colacchio, MD



Greetings,

Once again, I want to express my sincere thanks for being given the opportunity to serve as your President-elect and I am eagerly anticipating the upcoming year for the New England Surgical Society.

I have greatly enjoyed rejoining the Executive Committee and participating with them on numerous

important initiatives. These activities have included working with the Program Committee under the excellent leadership of Dr. Rocco Orlando to plan the exciting program for our Annual Meeting in Burlington. In addition, following the substantial efforts of Dr. David Crombie and the Archives Committee, we have begun to develop the plan and materials for our Society's Centennial celebration in 2016. This will be a wonderful opportunity for us to acknowledge the many important contributions that our predecessors and colleagues have made to the science and practice of surgery. It is a great honor to have been chosen to lead an organization that has had such an impact on the surgical landscape for almost 100 years.

Items of significant importance for the coming year include ongoing research by the Ad Hoc Issues Committee to identify future topics of substance and relevance for their Annual Meeting panel discussion, which will have its debut in Vermont this September. The Society will also work to build greater awareness and support of the spring Resident and Fellow Research Day which continues to see an increase in both the number and quality of the abstracts submitted. Remember that attendance at the Research Day counts toward your NESS participation requirement and I am confident that you will be impressed by our younger colleagues and their efforts.

This year will see a new NESS representative on the College's Advisory Council for General Surgery as Dr. Victor Pricolo completes a term of hard work within that body for our organization. A new Executive Committee representative from my state of New Hampshire will also be introduced as Dr. Joseph Meyer concludes his term of service.

It is a privilege to undertake the task ahead as your new President and I look forward to seeing you in Burlington next month. Please feel free to share your thoughts with me on how the NESS might enhance its service to the surgical community.

***The Society will also work to build greater awareness and support of the spring Resident and Fellow Research Day ....***

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## FROM THE PRESIDENT

(continued from page one)

year will be a "Specialty Group" breakfast session where attendees will be able to choose their topic of discussion from On-Call Reimbursement, Maintenance of Certification, and Acute Care Surgery. As these issues are controversial ones currently facing our practices, we anticipate these portions of the meeting to be well-attended.

An additional new element of the Burlington meeting will be an optional Hands-On Ultrasound course taking place on Saturday afternoon with "Overview of Ultrasound Guided Breast Biopsy" and "Ultrasound Imaging of Liver / Abdominal" as topics. We appreciate the support of B-K Medical Systems in making this an important part of the scientific program. We also extend our appreciation to Olympus America, Inc. for their unrestricted educational grant in support of the 2007 Annual Meeting.

The social portion of this year's Annual Meeting will include an early evening cruise of Lake Champlain aboard the Spirit of Ethan Allen as our Welcome Reception. Light hors d'ouvres and cocktails will be provided but please remember to make your dinner plans for later that evening after the boat returns. A special part of the President's Banquet on Saturday night will be the presentation of our

traditional Nathan Smith Award along with some memorable musical entertainment.

The 88th Annual Meeting is not one to miss as you meet your NESS participation requirement. More importantly, however, are the discussions of podium and poster presentations, the camaraderie of fellow surgeons, the scenic setting of the lake with its surrounding mountains, and the numerous activities available through the hub of Burlington that will make the 2007 event a special one for all.

Thank you again for the honor of serving as your NESS president and I look forward to seeing you in Vermont.

***More importantly, however, are the discussions of podium and poster presentations, the camaraderie of fellow surgeons, the scenic setting of the lake with its surrounding mountains.....***

John P. Welch, M.D.

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## From the NESS Representative to the ACS Board of Governors

Charles M. Ferguson, MD

The Board of Governors of the American College of Surgeons met October 8 and 11 in Chicago. Much of the meeting was devoted to a discussion of the Surgeons's Diversified Investment Fund which has recently been opened to fellows as an investment tool, providing the same management team as is currently managing the College's investments, with returns remarkably better than market averages. Fellows are urged to review the prospectus, available from the College, and consider it as an investment tool.

The Board of Governors expressed its support for Operation Giving Back. Operation Giving Back, while still in its development stage, has surpassed all its goals and is realizing greater than expected growth on every front. It is currently linked with 37 other volunteer organizations providing coordination of available positions and volunteers. The Board feels that OGB sends a visible message of who surgeons are, what they do, and what matters to them, and can be used as a marketing/branding tool for the College with the public.

The Board of Governors approved a request from its Committee on Socioeconomic Issues to develop criteria for a Humanitarian Award, in addition to the Surgical Volunteerism Award already initiated.

The Board of Governors approved the report of its Committee on Surgical Practice in Hospitals and Ambulatory Settings regarding the matter of sentinel events (OR errors such as wrong-site surgery and retained foreign bodies). The Board reiterated the committee's recommen-

dations that the College: promote patient safety CME credits; include patient safety programs in the Clinical Congress, and designate these programs as meant to fulfill patient safety and medical liability CME requirements. In addition, the Board approved and reiterated the recommendation that the College continue to support practice guidelines, outcomes research, and innovative programs to promote a culture among surgeons of patient safety and teamwork.

Dr. Mark Malangoni, Chairman of the Board of Governors, presented an analysis of the Governors Survey. Physician Reimbursement/Medicare/Medicaid topped the list of Governor's concerns, followed by Health Care Reform and its impact on practice. These issues are being vigorously addressed by the College, and on the legislative level by the American College of Surgeons Political Action Committee. It was pointed out by Dr. Warshaw that only 3,000 surgeons contribute to the Surgeons PAC, at an average level of only \$300.

Seventy-three percent of Governors responding to the survey felt that workforce issues are a significant problem. Particular problems are staffing of ERs, getting specialists to cover trauma call, and adequate hospital and physician reimbursement for trauma. The Board of Governors is concerned that surgeons are losing the moral high ground with the public, legislators and payors regarding the issue of emergency responses to surgical calls. This is an area which will continue to require attention.

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### Editor's Corner

(continued from page one)

***One of the great "intangibles" of the NESS is the contacts that we make and the ability to email or call a NESS colleague for advice.***

He was admitted with severe blunt trauma. He was in tamponade and his vitals signs were diminishing rapidly. I came right in performed a sternotomy to relieve the tamponade and treat a sternal fracture. He also had a laparotomy and splenectomy prior to the sternotomy. His abdomen had to be left open. Another injury was a tear of his thoracic aorta just distal to the ligamentum. I elected not to fix the aorta. The patient was critically ill but slowly showed improvement. I then spoke with Dr. Len Jacobs from Hartford hospital about his article in this issue of our newsletter. I then took the opportunity to ask him for his advice on this young trauma patient. He provided sage advice. Dr. Neil Hyman was asked for his advice regarding his abdo-

men and small bowel. The patient continued to improve and was ready for transfer to a rehabilitation facility near his home in Connecticut. For follow up of his thoracic aortic injury I contacted Dr. John Elefteriades at Yale. John promptly responded and gave me his office contact information and told me he would be glad to follow up with this patient.

As I looked back at this amazing case, I noticed all of the surgeons who are NESS members who in some way or another have participated in this young man's care. One of the great "intangibles" of the NESS is the contacts that we make and the ability to email or call a NESS colleague for advice. We are a close-knit society and I have always felt I could contact another NESS member for advice.

I hope you all have a memorable summer with your family. I am looking forward to seeing you in September.

### NESS GOLF OUTING

Vermont National Country Club  
Saturday, September 29th / 12:30 pm Shotgun Start  
\$100, include green fees, cart, bag lunch and prizes!  
Details available at registration.

Sponsor: Bruce J. Leavitt MD



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## Report of the Representative to the ACS Advisory Council for General Surgery

Victor E. Pricolo, MD

The Advisory Council for General Surgery of the American College of Surgeons met in Las Vegas, NV, on April 23, 2007, during the last Spring Meeting of the ACS.

The Council is composed of a representative from each of the eight U.S. regional surgical Societies, one each from the American Surgical Association, the American Society of General Surgeons, the Canadian Association of General Surgeons, the RRC for Surgery, the American Board of Surgery, the ACS Board of Regents, the ACS Candidate and Associate Society, the Young (<45 yo) Surgeons Committee, five Members-at-Large, two ACS Staff Liasons and chaired by Dr. Mark Malangoni.

Numerous topics were brought forward for discussion, including several action items.

Each representative provided a report on his/her Society or Organization.

Dr. Finley reported on the February meeting of the Regents, including activities of the ACS Professional Association, a property in Washington and the web portal (e-FACS.org). Preparations are underway to commemorate the Centennial of the ACS in 2013.

A retreat for the ACS Division of Education was scheduled for July 2007. The ABS' Surgical Council on Resident Education (SCORE) will keep working on a curriculum that should reflect the changes required to prepare the general surgeons of the future.

Drs. Hart and Cutter reported on the data collected from a questionnaire sent to surgical residents and practicing surgeons. Over 700 responded: over 90% see ACS as the leading organization to shape the future of general surgery; about 70% currently practice general surgery; about 20% of residents plan to practice general surgery; 40 % of practicing surgeons and 50% of residents oppose the concept of Acute Care Surgery.

Dr. Feliciano was elected Chair of the Advisory Council for General Surgery, with Dr. Cogbill as Vice-Chair.

The NESS representative brought forward for discussion the topic of duty hours for practicing surgeons, as requested by the NESS Executive Committee. His introduction focused on several considerations. Next year's graduating surgical residents will have trained exclusively under the 80-hour week rules;

- ♦ Why would they want to be available for over 80 hours a week in practice?
- ♦ If medico-legal concerns about fatigue exist for a 30 year-old resident, what about a 50 or 60 year old attending?
- ♦ Is the Acute Care Surgery movement trying to train "surgical hospitalists" and become the future of general surgery?
- ♦ What role models are our residents seeing during their surgical education?
- ♦ Are shift work, team concept and protected free time more important to our current and future surgeons than availability and continuity of patient care?

A very spirited discussion ensued, with several suggestions. The ACS should have a leadership role and prevent regulatory steps from US Congress. There is very little data on the adverse effects of "fatigue" on outcome. Fitness and health may be more important than age alone. The impact of these changes will be different in academic versus rural/community practices. Surgeon's stress may be worse than fatigue for patients and surgeons and their families. Less hours of surgical education may make our graduates feel less prepared and cause them more stress during their residency. More residents may feel inadequately prepared, seek fellowship training and/or limit their practice to certain areas of expertise. The future of general surgery is again in question.

A significant amount of time was spent finalizing the plan for next year's Clinical Congress, since there is not going to be a Spring Meeting.

The next Clinical Congress of the ACS will be held in New Orleans in early October, 2007.

***The NESS representative brought forward for discussion the topic of duty hours for practicing surgeons, as requested by the NESS Executive Committee. His introduction focused on several considerations. Next year's graduating surgical residents will have trained exclusively under the 80-hour week rules....***

## From the NESS Representative to the American Board of Surgery

Lenworth M. Jacobs, MD, MPH, FACS

The American Board of Surgery was founded in 1937. The main mission of the American Board of Surgery is to assure the public that their surgeons are professional, competent, and extremely well informed practitioners. Initially, once a surgeon had passed the qualifying examination and had successfully completed the oral examination, they would be certified by the American Board of Surgery as a surgeon competent to practice surgery. In 1976, the Board mandated that surgeons would have a timed certificate which assured the public of their competence for ten years. At the end of that time, there would be a written examination which all surgeons who wish to continue certification by the American Board of Surgery would have to complete successfully. They would then be recertified for another ten years. This process had been in place until 2005.

The American Board of Surgery has instituted a rigorous maintenance of certification (MOC) process which includes a letter of certification from the Chief of Surgery in the hospital in which the surgeon practices, a commitment to ongoing education as evidenced by successfully completing an educational program such as SESAP and participation in a national quality outcome program such as CMS' Physician Quality Reporting Initiative or The National Trauma Data Bank. This process has to be completed and verified by the American Board of Surgery every three years. At the tenth year, the surgeon has to complete a

written recertification examination. The process is designed to give ABS diplomates greater opportunities to assess their practice and to demonstrate their commitment to lifelong learning and high quality care.

Initially, once a surgeon had passed the qualifying examination and had successfully completed the oral examination, he/she would be certified by the American Board of Surgery. The participation in a national quality program gives confidence to patients and colleagues that the surgeon's practice is competent and safe. By implementing a comprehensive and rigorous evaluation process and verifying this with written certification and cognitive evaluations the ABS will continue to maintain a leadership role and demonstrate to the government, the public, the regulatory agencies, and other interested parties that surgeons are being competently and professionally evaluated. The details of the MOC process of the American Board of Surgery are available on the American Board of Surgery website. The American College of Surgeons has developed electronic linkages with the American Board of Surgery to enable a surgeon to electronically enter CMEs which are approved by the American College of Surgeons. This process is designed to make it easy for surgeons to comply with the MOC.

For additional information, please visit the ABS website: [www.absurgery.org](http://www.absurgery.org)/click on the section of Maintenance of Certification.



## Visit the New England Surgical Society's Website

# [www.nesurgical.org](http://www.nesurgical.org)

- ◆ Preliminary Information on the 2007 Annual Meeting and the Hilton (formerly Wyndham Hotel) in Burlington, Vermont;
- ◆ Links to the abstracts presented at the 88<sup>th</sup> Annual Meeting;
- ◆ Society activities and information on upcoming events.

### UPCOMING ANNUAL MEETINGS

September 28 – 30, 2007  
Hilton (formerly Wyndham) Hotel  
Burlington, Vermont

September 26-28, 2008  
Seaport Hotel  
Boston, Massachusetts



## Maintenance of Certification - Overview

### Program Requirements

MOC Part	ABS Requirement
1) Evidence of Professional Standing	<ul style="list-style-type: none"> <li>• Possession of a valid, full and unrestricted <b>medical license</b>, verified every three years.</li> <li>• <b>Reference letters</b> to be submitted every three years from chief of surgery and chair of credentialing/privileges committee of the institution where majority of work is performed.</li> </ul>
2) Commitment to Lifelong Learning and Self-Assessment	<ul style="list-style-type: none"> <li>• A minimum of 30 hours of Category I and 50 hours overall of <b>continuing medical education (CME)</b> to be performed yearly and verified every three years. <b>Self-assessment</b> in conjunction with CME to be performed and verified every three years.</li> </ul>
3) Cognitive Expertise	<ul style="list-style-type: none"> <li>• Successful completion of a <b>secure examination</b>; diplomates may first take the examination starting three years prior to certificate expiration.</li> </ul>
4) Evaluation of Performance in Practice	<ul style="list-style-type: none"> <li>• Participation in a national, regional or local surgical <b>outcomes database or quality assessment program</b>, verified every three years.</li> </ul> <p>In cases where no such program is available, the ABS will consider the use of individual practice data. Participation in CMS' Physician Quality Reporting Initiative (<a href="#">PQRI</a>, formerly PVRP) meets this requirement.</p> <ul style="list-style-type: none"> <li>• Periodic communication skills assessment based on patient feedback will also be required, but this is not yet finalized.</li> </ul>

<b>Year of Certification or Recertification</b>	<ul style="list-style-type: none"> <li>• Diplomate initially certifies or successfully recertifies.</li> </ul>
<b>Year 1 MOC</b>	<ul style="list-style-type: none"> <li>• CME (Minimum of 30 hours in Category I, 50 overall every year)</li> </ul>
<b>Year 2 MOC</b>	<ul style="list-style-type: none"> <li>• CME</li> </ul>
<b>Year 3 MOC</b>	<ul style="list-style-type: none"> <li>• CME + Self-assessment</li> <li>• Reference letters and evidence of CME + self-assessment sent to ABS by June 30; license status and participation in practice assessment (Part 4) also verified.</li> </ul>
<b>Year 4 MOC</b>	<ul style="list-style-type: none"> <li>• Same as year 1</li> </ul>
<b>Year 5 MOC</b>	<ul style="list-style-type: none"> <li>• Same as year 2</li> </ul>
<b>Year 6 MOC</b>	<ul style="list-style-type: none"> <li>• Same as year 3</li> </ul>
<b>Year 7 MOC</b>	<ul style="list-style-type: none"> <li>• Same as year 1</li> </ul>
<b>Year 8 MOC</b>	<ul style="list-style-type: none"> <li>• Same as year 2</li> </ul>
<b>Year 9 MOC</b>	<ul style="list-style-type: none"> <li>• Same as year 3</li> </ul>
<b>Year 8-10 MOC</b>	<ul style="list-style-type: none"> <li>• Secure examination</li> </ul>

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## About The NESS Charitable Foundation

The NESS Charitable Foundation was established in 2001 and exists to provide financial support for the membership, through the education of the NESS Annual Meetings, as well as the professional development of young surgeons through the NESS Resident and Fellow Research Presentation Day.

Specific contributions currently made by the NESS Charitable Foundation on an annual basis include:

- ♦ Support of the Spring Resident and Fellow Research Presentation Day
- ♦ Sponsorship of the Annual Meeting's Samuel Jason Mixter Lecturer
- ♦ Sponsorship of the Nathan Smith Award at the Annual Meeting
- ♦ Sponsorship of the New Member, Resident, and Poster Prizes awarded at the Annual Meeting

In addition to the above, the Foundation is regularly called upon to help support various initiatives approved by the NESS Executive Committee for the benefit of surgery in New England.

The NESS Charitable Foundation encourages its members to make annual donations to this important resource. Please note that contributions can also be made through the purchase of the official necktie, bowtie, or scarf of the organization as a portion of those proceeds are automatically transferred to the Foundation.

**To make a donation to the NESS Charitable Foundation, please visit the NESS website: [www.nesurgical.org](http://www.nesurgical.org).**



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### INSIDE THIS ISSUE....

- ♦ **Highlights of the upcoming NESS 88th Annual Meeting in Burlington, Vermont on September 28 - 30, 2007**
- ♦ **An update on Maintenance of Certification from the NESS Representative to the American Board of Surgery**
- ♦ **Reports from the NESS Representatives to the ACS Board of Governors and Advisory Council for General Surgery**
- ♦ **An overview of NESS activities from the President and the President-Elect**