President's Message

As summer winds down, it is a pleasure to send a greeting to all members and friends of the Southern California Chapter of the American College of Surgeons. It has been a tumultuous year, with healthcare reform looming on the horizon. With uncertainty being the buzzword of the day, it is reassuring to know that we can count on the Chapter’s Annual Scientific Meeting at the Four Seasons Biltmore Resort in Santa Barbara. The meeting will be Jan. 19-21, 2011 and we have once again arranged for a block of rooms at a discounted rate of $350/night. Reservations can be made directly with the hotel at (805) 565-8299, prior to Dec. 21. Simply mention the Southern California Chapter of the American Colleges of Surgeons to get the discounted rate.

Once again, we hope that you will join us, and please bring the family. Again this year, we will have ample social and scientific activities to keep everyone interested. Additionally, once again, we have arranged with the Four Seasons to be sure that their “Kids for all Seasons” Program, which provides exceptional child care/activities at a nominal fee, will be available at key times during the conference including a movie/pizza night on Saturday night.

The scientific program — put together by Program Chair, Vince Rowe, MD, Associate Program Chair, Ali Salim, MD, and Assistant Program Chair, Andrew DeFronzo, MD – has been assembled to include material of interest not only to general surgeons, but also those in our major subspecialties. Additional highlights of the program will once again be a luncheon for our Women in Surgery group and a breakfast for the Young Surgeons, where our guest speakers will specifically address issues of relevance to these groups.

Highlighting the social program will once again be the Friday evening cocktail reception with its traditional abundance of food, drink and fun. Our guest speakers will address a broad range of topics. Featured this year are Dr. Steven Wexner from the Cleveland Clinic in Florida, Dr. Carlos Pellegrini, Chairman of the Department of Surgery at the University of Seattle in Washington and Dr. David Hoyt, Executive Director of the American College of Surgeons and a member of our Chapter.

Calendar

• Abstract submission deadline
  Friday, Sept. 17, 2010
  Visit www.socalsurgeons.org/acs/pages/meetings.html for details

• 2011 Annual Scientific Meeting
  Jan. 21-23, 2011
  Four Seasons Biltmore Resort
  www.fourseasons.com
  1260 Channel Drive, Santa Barbara
  Call 805/565-8299 by Dec. 21, 2010
to get discounted $350 room rate.

• 2012 Annual Scientific Meeting
  Jan. 20-22, 2012
  Four Seasons Biltmore Resort
  www.fourseasons.com
  1260 Channel Drive, Santa Barbara

Healthcare Legislation

Not surprisingly, the main topic of discussion for most surgeons this past year has been the changes recently enacted in healthcare legislation and healthcare reform. The American College of Surgeons has taken an active role, strongly pushing to make the eventual outcome favorable for surgeons. A major player for the American College of Surgeons is, of course, our guest and member Dr. David Hoyt. He will update us on the direction healthcare reform has taken and on how it will impact surgeons, and how we can best work with the new rules that will soon be a reality for all of us.

See PRESIDENT on page 2
Commission on Cancer Liaison Report

This update will summarize the previous year’s activities as SCCACS’s cancer liaison for the Commission on Cancer:

1) A number of agenda items were covered during our chapter’s January 2010 Cancer Liaison Physician (CLP) meeting. First were introductions and also a welcome to the new CLP members for our state.

Our keynote presentation centered on the collaboration with the American Cancer Society and resources they offer. Emilia Jankowski, Vice President, American Cancer Society, joined us with a presentation on physician volunteerism and services available to the chapter from the American Cancer Society. I continue the co-chair of the Physician Engagement Committee for the American Cancer Society.

Our next chapter Liaison Physician meeting will be in Santa Barbara on Jan. 23, 2011.

2) I was re-elected to the ACOS, Commission on Cancer. This is an additional three-year membership in the governing body of the ACOS Cancer program. It was an honor to be re-elected and represent the SCCACS on a national level.

3) I continue as your chapter state chair for the Commission on Cancer, CLP program. This is a three-year appointment expiring in 2012.

I was awarded the annual State Chair Outstanding Achievement Award at the ACOS Clinical Congress in October, 2009. I wish to thank all of you, especially the CLP physicians, who helped me throughout the year as your state chair.

5) Last May, I attended the ACOS State Chair meeting in Chicago. This was a three-day meeting with workshops in CLP recruitment and support. Also covered was tumor registry support and community outreach participation. This meeting was a worthwhile experience, which will help in my interaction with our local Cancer Liaison Physicians.

6) In August 2010, I attended the Cancer Liaison Program Summit in Chicago. The Summit brought thought leaders from around the country together to talk about the Cancer Liaison Program. Attendees include those involved in the Cancer Liaison Program from different vantage points. This approach will facilitate a review of the Cancer Liaison Program, a discussion

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"What's New"

The ever-popular “What’s New” sessions will cover endocrine surgery, trauma/critical care surgery, vascular surgery, bariatric/minimally invasive surgery, and colorectal surgery. I am also pleased to announce that “Surgical Jeopardy” -- a surgical facts competition between all of the Southern California residency programs -- will be back, bigger and better than ever. We will maintain a similar format to last year but have upgraded our Jeopardy Response System. We anticipate that all programs will participate. Please be sure to be present to cheer on your favorite team and witness the awarding of the Second Annual Dowden Cup.

Call for Abstracts

Abstracts for Annual Scientific Meeting program participation are now being accepted through close of business on Friday, Sept. 17. Most presented papers selected for oral presentation will be included in a special issue of the American Surgeon. This is, as always, a great forum for young surgeons and for surgical trainees to get experience in presenting and publishing. Details are posted at http://socalsurgeons.org/acs/pages/abstracts.html.

In this era of cost containment and Advamed guidelines, we need your help, more than ever, in recruiting industry participation for the meeting. Industry support covers roughly half the cost of the meeting and allows us to keep the membership dues and registration fees at a modest level. Our industry vendors also give us an opportunity to view the latest technology and conduct one to one discussions regarding technology, pharmaceuticals, and other tools that we utilize in our practices. If you have any special association with industry representatives who have supported us in the past, or who have expressed an interest in doing so in the future, please forward your contact information directly to Jim Dowden, our executive director, at administrator@socalsurgeons.org. He will do the footwork and follow-up necessary and provide the vendor with a selection of opportunities that are available for participation.

Please visit http://socalsurgeons.org/acs/pages/meetings.html if you have not received specific information on abstract submission or hotel reservations. Registration details will be sent soon. Once again, I hope that you and your family find time to come to Santa Barbara to enjoy the program that the Program Committee has assembled and to partake in the many opportunities for education, recreation, and relaxation that are an integral part of our Annual Meeting.

Michael J Stamos, MD, FACS
President, SCCACS
Current membership in the Southern California Chapter of ACS is 1,491 members. This breaks down into 872 Active Fellows, 603 Senior Fellows and 16 Associate members. The Chapter membership represents just over 48% of all ACS Fellows in the Southern California region. We need your help in reaching your colleagues.

Chapter membership in the California Medical Association’s legislative bodies is directly proportional to the number of members that the Chapter has. We need a bigger voice in CMA to ensure that we have the opportunity to appropriately represent the interest of surgeons on legislative matters and other policy issues that come before the CMA. The more members we have, the more seats at the table we have to represent your interests.

Membership also provides the resources that the Chapter needs in order to continue to provide an outstanding annual Scientific Conference, financial support to surgical Residents to attend and participate in that meeting and to reward those who submit outstanding papers, and to carry out other activities of the Chapter. The Southern California Chapter of ACS provides member surgeons with unique services not offered in most other areas of the country. We are the only Chapter that provides a free subscription to The American Surgeon. This journal is provided to active members throughout the year. The Chaper also funds the cost of participation on the various CMA legislative bodies and meetings by surgeons representing this region. We are one of the few Chapters that conducts a major Scientific Conference, bringing outstanding nationally known surgeons to present to our members.

As articles elsewhere in the newsletter indicate, your Chapter leaders are representing you in a variety of ways at a time when medical practice is in great turmoil and under significant stress. To ensure your voice continues to be heard, your continued support of the Chapter is vital. But equally important is your assistance in reaching out to your colleagues who are not currently part of the Chapter to encourage their membership and their involvement.

We have invited area ACS Fellows to join the Chapter to represent the surgical profession at all levels affecting our practice. We have a full-color recruitment brochure available listing membership benefits. You can view this on the Chapter’s Web site at www.socalsurgeons.org/acs/pages/membership.html (click on View or Download next to Membership Brochure).

If you know a colleague who’s not part of the Chapter, please encourage him/her to accept this invitation to join SCCACS. Or invite them to download the Chapter membership application posted at www.socalsurgeons.org/acs/pages/membership.html.

The Chapter is doing much and providing many services for a relatively modest annual investment on your part. Much more can be done. Please contact us (310/364-0193) if you need membership applications and brochures to give to your colleagues, or if you have suggestions on how we can encourage them to join.

**C. James Dowden, Executive Director**

*Southern California Chapter, American College of Surgeons*
California Medical Association Report

The Reform Age – Historical perspective on health care reform act

In the 1500s, John Calvin & Martin Luther took on the Catholic Church over its abuses. Henry VIII was so irritated with the church, he created the Church of England and declared himself the head of it. These reforms and others that followed shared a common fate: They succeeded or failed based on significant numbers of the population buying into their ideas. Validation of reform came only by will of the people. It took many years for some of the changes -- probably because of the slowness of information and the lack of media to spread the word.

Move ahead 500 years or so and note that we are literally awash with reformers. We are told we need to reform Wall Street, Main Street, Banks, Oil drilling, Health Care – even the BCS. There are economic drivers in all of these reforms. If you can corral enough fearful people and bury them with tons of information at warp speed, chances are good that the reform will take hold. Naysayers are, at least temporarily, silenced, ridiculed, and left in the dust.

But note that many of our reformers from the 16th Century came to fail as time passed as the naysayers got their day in court.

Historical Perspective

Since my task is to write about health care reform, I’ll try to use the historical perspective above in what follows.

The healthcare reform act is now the law… Thousands of pages of it. It is quite likely no one person has read all of it. If enough people had, we’d probably not yet have passed a bill. The information and the media to disseminate it focused on the problems: The uncovered masses, the high cost of medical care, practice variations, etc. The reformers say that’s all handled. The fact that the uncovered masses can eat cake till 2014 doesn’t seem to fire up anyone.

The fact that we need to remove 500 billion (more or less) from health care over time has a religious ring to it. US healthcare is widely touted as the best there is, but the reformers allege that that will remain true after the money is gone. Their grand design of Mayo clinics on every corner may not fly. Try putting one in Brawley -- and, if any Brawleyits read this -- I think it’s a fine town. On this issue, the naysayers, though muted, have begun to voice concerns that US doctors cannot all be salaried in the next 10 years and vigorous attempts to do so may provoke a real doctor shortage. Then again, the California House recently passed a bill that would erode the corporate bar to the practice of medicine, allowing hospitals and other entities to hire physicians. What the Senate does, is to be seen.

My favorite is practice variation. One of the largest drivers of this is malpractice insurance which leads to the ugly practice of defensive medicine. No fix for this in the bill -- only a couple of bucks to study the problem. The reformers would have us believe that the practice of Medicine should be as simple as opening a can of Campbell soup. That may be so, but it’s counter-intuitive to the idea that our noble calling should seek the best and brightest.

The Good News

Lest you think this is an anti-reform rant, I think the bill has many good features. It caps many of the insurance industries abuses while keeping them in the game. This has the positive effect of mollifying the 85% of the population covered by them. Of course, mandated coverage for all should sweeten the pot for insurance. It attempts to provide affordable health insurance which is a laudable goal. Everyone should vote for it. However if the policy is cheap enough, perhaps the reimbursement will be cheap as well.

The infatuation with primary care needs reform. If you incentivize these folks by paying a bonus for good outcomes, what does one

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of the potential for program growth and development, a look at opportunities for program enhancement, and development of a strategy and plan for the future of the Cancer Liaison Program.

7) The Commission on Cancer (CoC) has partnered with the American Cancer Society (ACS) for more than 90 years to help prevent, diagnose and treat cancer through research, education, advocacy and service. As a CLP, your role is to serve as a physician champion, keep your cancer committee abreast of CoC initiatives and help facilitate the relationship with the ACS. Is your local ACS representative attending your Cancer Committee meetings? Consider a collaborative project for 2010. Please let me know if your hospital has had a particularly successful CQI project that would be of interest to other facilities as well. I have recently participated with my local American Cancer Society chapter presenting Colorectal Screening Prof. Ed. to primary care physicians. We need more physicians who would be willing to be local presenters for this American Cancer Society CRC project. A PowerPoint presentation is available. I will continue to solicit participants for this collaborative venture.

8) Annual CLP Breakfast Meeting at Clinical Congress

Don’t miss this opportunity to meet with your State Chair and network with other Cancer Liaison Physicians in your state! The CoC is hosting its Annual Cancer Liaison Physician Breakfast on Monday, Oct. 4, 2010 in conjunction with the American College of Surgeons Clinical Congress in Chicago.

I have been honored to be your state cancer chair for the past year. Contact me at 626/449-6606 or recabare@usc.edu regarding any Commission on Cancer problems or questions.

James Recabaren, MD, FACS
State Chair, Southern California Chapter ACS
Commission on Cancer

See CMA REPORT on page 5
ACS donations fund member benefits, activities

The American College of Surgeons holds a restrictive 501c(3) tax-exempt status that limits the range of services it can provide to and on behalf of its Fellows. Notably, the College’s tax classification forbids participation in any kind of political activity. When the ACS Board of Governors voted unanimously in favor of a College affiliate establishing a Political Action Committee (PAC), a new organization with the more flexible 501c(6) tax-exempt status had to be created. That affiliated corporation, ACS Professional Association (ACSPA), can offer a broader range of activities and services of benefit to surgeons and their patients, including an expanded legislative action program that features a PAC.

This corporation allows the College to continue the standard-setting and educational activities that have always been at the heart of its mission. ACSPA also expands opportunities to provide more direct benefits to surgeons and their patients.

For further information about ACSPA-SurgeonsPAC, visit www.facs.org/acspa/about.html.

CMA REPORT continued from page 4

do with non-complaint patients who will guarantee poor outcomes? Get rid of them, letting them seek care where many do anyway -- the ERs. Better yet, I’d practice concierge care and cherry pick up front.

The media reminds everyone that the doctors (i.e., the AMA and CMA) supported this bill. In fact, the organizations did, but, in the General Surgery news, a poll is quoted that 80% or so of docs oppose it; it seems plausible that those 80% are, in the main, the 80% of docs who don’t belong to the AMA. The ACS, on the other hand, stuck to its principles, demanded malpractice reform, SGR repeal, access to care, opposed the bill and so far nothing re: principles. The trouble is, doctors as a whole don’t really know what they want. I’ve said this before, the House of Medicine is more like a hotel—people check in with an issue and leave when it’s resolved.

The good news about these organizations is that they’re media darlings and do help sway (a) legislators and (b) the public. They thus have the ability to, over time, reform the reform.

Boss of Medicare/Medicaid

This brings to mind the appointment of Donald Berwick, MD, the boss of Medicare/Medicaid. This has the earmark of a Saturday night massacre. This fellow is an academic pediatrician from Harvard who is touted as an expert on quality of care issues. It has been stated that at the extremes of age we require the same sort of care -- and in my case, that may be true, but I’d feel better if the big man had actually seen or treated a Medicare patient.

Furthermore, Dr Berwick said, as quoted in the LA Times, “it’s not that we need rationing, it’s that we can’t do it blindly.” He is an admirer of Britain’s nation health service and a devotee of a single payor system. Not my kind of guy, but I may be the minority. Certainly, to date, no medical organization has opposed this appointment. The CMA and AMA must surely sense the displeasure outside their tents, watching newer and markedly louder organizations try to reform the reforms.

I would posit that reformation will go on for a long time, with steps forward and back. In fact, a bill recently introduced in the House would put the public option back into the reform package. These to-and-fro motions require constant surveillance by large groups of people. Surely, if 80% of us are unhappy, we must find a voice. Someday. Not on my watch.

This is my last column for the Chapter, so sincere thanks to you who’ve responded pro and con on my efforts. Comments to dgaspard@iopener.net. Stay in the game.

Donald J. Gaspard, MD, FACS
Delegate, California Medical Association

California Medical Association monthly newsletter available

California Medical Association’s Center for Economic Services has a monthly newsletter, CMA Practice Resources (CPR). It's full of tips and tools to assist physicians and their office staff in improving efficiency and profitability.

It’s free to subscribe. The subscription form is easy to complete. It asks for basic contact information, along with your position, preferred e-mail format (HTML or text), names of physicians in your practice and whether or not you’re members of CMA. The CMA states, You can rest assured that we will never sell our mailing list. Your privacy is very important to us.

For further information or a subscription form, call Jennifer Williams at 916/551-2061 or send an e-mail to economicservices@cmanet.org. You can also register online at http://www.cmanet.org/news/cpr/Register.aspx.
Young Surgeons Representatives' Report

The 2011 SCCACS Annual Scientific Meeting is shaping up to be of particular interest for local young surgeons. While the previous Young Surgeons Breakfasts have been very successful and enlightening for the younger contingent, plans are underway to provide an even greater appeal to resident and associate members of SCCACS, along with younger fellows attending the meeting.

This year’s breakfast will be a full breakfast on Saturday morning, and all Chapter members under 45 years of age are invited and encouraged to attend. Speaking at the breakfast this year will be Dr. Carlos A. Pellegrini, the Henry N. Harkins Professor and Chair, Department of Surgery at the University of Washington.

Surgical Jeopardy

Back by popular demand, Surgical Jeopardy will return to the Annual Scientific Meeting in 2011. This year, residents from nine Southern California residency programs will compete for the annual trophy, as well as bragging rights in the battle of the brains. This year will mark the third year the competition takes place. This year’s winners will enjoy their names listed on the Dowden Trophy, along with that of their residency program. Three preliminary rounds will pit three programs against one another, with the winner of each round advancing to final jeopardy for the tournament of champions.

Last year’s competition was one of the highest attending events for the Annual Scientific Meeting, and

Young Surgeon’s Travel Stipend

This year will mark the third year the Young Surgeon’s Travel Stipend will be awarded on a competitive basis. The purpose of the stipend is to encourage young surgeons to participate in local Chapter and national College activities by providing a stipend (this year $2,000) to be used at the discretion of the young surgeon over 18 months for meeting attendance. The only restrictions are that the stipend be used for meeting attendance expenses, that it be applied towards any meeting of the local Chapter or a national ACS meeting and that winners be present at the breakfast to receive the award. Three travel stipends will be awarded at the Young Surgeon’s Breakfast in Santa Barbara for a total of $6,000. Stipend applications are posted on the chapter’s website at www.socalsurgeons.org/acs/pages/young.html. The deadline for submission is Monday, Jan. 3, 2011.

We look forward to an outstanding attendance this year and to seeing you all in Santa Barbara in January.

Karen Lane, MD
Kevin Patel, MD
SCCACS 2010 Young Surgeons Representatives

California physicians required to notify patients about license

Physicians in California must inform their patients that they are licensed by the Medical Board of California, and include the board’s contact information, effective June 27, 2010. The notice must contain the following information:

NOTICE TO CONSUMERS
Medical doctors are licensed and regulated by the Medical Board of California
(800) 633-2322
www.mbc.ca.gov

Physicians may provide this notice to patients by one of following methods:
1) Prominently display the sign in at least a 48-point type Arial font;
2) Have the notice signed and dated by the patient in their file in the office; or
3) Include the notice in at least 14-point type above their signature line in letterhead, discharge instructions or other documents given to patients or their representative.

The purpose of Title 16, California Code of Regulations section 1355.4 is to provide consumers with information on where to go with a complaint about a California doctor. Physicians failing to comply with this new regulation could receive a citation and a fine.

More information about this regulation is available on the board’s website at www.mbc.ca.gov -- click on "Notice to Consumers regulation" under "What's New" on the home page. The sign may be printed from the board’s website.
2011 Annual Scientific Meeting

We are excited to announce the Southern California Chapter ACS Annual Scientific Meeting 2011, which will be held Jan. 21-23, 2011, at The Biltmore, Four Seasons Resort in Santa Barbara. The Program Committee—Chair, Vincent Rowe, MD FACS; Associate Chair, Ali Salim, MD, FACS, and Assistant Chair, L. Andrew DiFronzo, MD FACS—are working diligently to make this another educational and fun meeting.

Highlights of the Annual Scientific Meeting include:

**Guest Faculty**

**Steven Wexner, MD, FACS, FRCS, FRCS(Ed), FASCRS, FACG**
Professor of Surgery
Chairman, Department of Colorectal Surgery
Cleveland Clinic Florida

**Carlos A. Pellegrini, MD, FACS, FRCSI (Hon)**
The Henry N. Harkins Professor and Chair
Department of Surgery
University of Washington

**David Hoyt, MD FACS**
Executive Director
American College of Surgeons

* High-quality oral presentations of original papers
* Young Surgeons’ breakfast
* Friday evening cocktail reception with hors d’oeuvres
* Kids for All Seasons program for families with children 4-12.
* Women in Surgery luncheon — Students, residents and practicing surgeons welcomed.
* New Rapid-fire oral presentation format for posters
* Wine & Cheese Reception
* What’s New in Surgery topics: Endocrine, Vascular, Colorectal, Trauma, Surgical Education, Bariatric

**Specialty Sessions and their Chairs**

- General (Laparoscopic Surgery Chair: Kevin Reavis, MD; UCI
- CardioVascular Surgery Chair: Carlos Donayre, MD; Harbor/ UCLA
- Colorectal Surgery Chair: Tony Senegore, MD; USC
- Breast Surgery Chair: Farin Amersi, MD; Cedars-Sinai
- Head & Neck Surgery Chair: Vishad Nabili, MD; UCLA
- Pediatric Surgery Chair: Dan DeUgarte, MD; UCLA
- Plastic Surgery Chair: Wesley Schooler, MD; USC
- Trauma Surgery Chair: Darren Malinoski, MD; Cedars-Sinai

We look forward to seeing you in Santa Barbara Jan. 21-23, 2011. Sign on to www.socalsurgeons.org/acs for meeting registration and hotel reservation information. Early-bird discounted conference registration deadline is Dec. 31. The block of hotel rooms sells out early, so make your reservations early. Hotel room block deadline is Dec. 21.

Vincent L. Rowe, MD, FACS
Program Chair
Save The Dates!

2011 Annual Scientific Meeting
Four Seasons Resort, The Biltmore
Santa Barbara, CA
Jan. 21–23, 2011

Surgical Residents and medical students may register free of charge