

Southern Thoracic Surgical Association  
60th Annual Business Meeting  
Scottsdale, Arizona  
November 1, 2013  
5:00 PM

DR. CERFOLIO: Why don't we go ahead here and let's try to get going, if we can. First, I hope everybody is having a good time, hope everybody gets to have time with their families tonight and enjoys what makes the Southern the Southern.

I would like to welcome everybody to the annual business meeting, number one, and really most importantly, and it's going to be funny that my name is on this list, because I look at these guys on this list, I should be serving them coffee, obviously, but I would like these past presidents to stand:

Dr. Baumgartner; Dr. Coselli;  
Dr. Grover, what an honor to have Dr. Fred Grover here; John Hammon is here; Walter Merrill;  
Dr. Joe Miller; Dr. Keith Naunheim; Dr. Robert Sade; Ross Ungerleider; and Donald Watson, Jr.  
Past presidents, thank you so much for being here and everything you have done for us.

(Applause).

DR. CERFOLIO: And this is our list of all the people on our Council. I appreciate all the

hard work that everybody has done. Would you all just stand briefly and just acknowledge all the work that you have done. Thank you so much.

(Applause).

DR. CERFOLIO: And the very best part of this meeting is that now I get to shut up and you don't have to listen to me. I'm done. Thank you. Yes, applaud, after going 15 minutes over earlier this afternoon. I apologize for that.

And I would like to call Dr. David Jones to the podium to run our meeting.

David.

DR. JONES: Okay, we will have the report of the secretary-treasurer.

I would ask that we have a motion to approve the 2012 annual business meeting minutes.

(Motion made, second and approved).

DR. JONES: Okay, so moved.

In terms of the membership category, we have active members of which there are 714 as of just a few days ago; senior members 372; we have a new category of resident members, which are now up to 18; 10 honorary members, for a total of about 1,100 STSA members.

Of the new applications, there were 28 elected to active membership, 15 resident members. I think we have some of the new members here at the annual business meeting, and if I call your name and if you can stand if you are here.

Umraan Ahmad; Carl Backer; Mark Berry; David Bichell; John Brown; Rafe Connors; Steven Cummings; Benjamin Haithcock; Matthew Hartwig; Dawn Jaroszewski; Sandeep Khandhar; Jim Kirklin; Damien LaPar; Nicholas Lopez; Thomas Maxey; Soumya Neravetla; Wiley Nifong; Keith Sommers; Randy Stevens; John Stulak; Chadwick Stouffer; and Betty Tong.

Please join me in welcoming our new members.

(Applause).

DR. JONES: We will now turn to the financials. The STSA financial history over the past five years, this is actual numbers. You can see that we continue to have more revenue than expense, and that's a good thing.

Net assets from the audited financial statements in 2012, we had about \$1.8 million, and, as you may remember, I think it was last year we

transferred approximately \$300,000 over to our investment portfolio as well. The net assets, again, about \$1.8 million.

Our portfolio is \$1.4, investment is about \$870,000 between 2008 and 2012. So we have been saving money, investing money, and I think it has been a good time to be in the market, obviously, these past two years.

With respect to our annual meeting, a couple of important points as we look at the actual numbers from 2012 and then compare them to the 2013 budget, and then we will talk briefly about some changes as we budgeted for 2014. You can see that our net income to date in 2013 is \$77,000. You will note that there is a slight decrease budgeted in 2014 for the revenue. If you compare 2012, it was \$663,596 and now down to \$561,000, and a lot of this has to do with a decrease in the number of vendors that we have had and corporate level support for the meeting. This is not unique to the STSA, but it's something that we are going to readjust our budgeting, I think, to more accurately reflect what we anticipate we will have for our 2014 meeting.

Okay, Dr. Cerfolio.

DR. CERFOLIO: Well, we have some tokens to award. First of all, our vice-president, A. J. Carpenter, would you please come on up to the podium. A. J., one of the best parts of this meeting was me getting to know you and we had such great telephone conversations, and you were very kind because you could have ripped me up a lot more than that, and it's my honor to present this to you, the certificate of appreciation.

Thank you. Congratulations.

(Applause).

DR. CERFOLIO: Now we get to get our new expert lawyer, Dr. Shanda Blackmon, and Dr. Jennifer Lawton. Would you please come up. They have been on the Council and they're going off the Council now.

(Applause).

DR. CERFOLIO: Dr. Merrill.

DR. MERRILL: First of all, I want to personally thank the Council members for all their hard work. We have put together a fine annual meeting this year, and I do appreciate everything that everyone has done, and I want to especially

thank Megan Drumm and Beth and the staff for an exceptional year.

Now I want to invite Dr. Blackmon, if you will come back to the podium here. She is going to present to you the proposed changes in bylaws.

DR. BLACKMON: The changes in the bylaws, which have been provided to you, included a meeting of the Council, and we wrote a new mission statement. That mission statement has been added to the beginning part of the objectives of the bylaws.

We have added a student category and associate member category to the other member categories. We have better defined that of honorary member and have increased our definitions of associate, student and resident members. We have increased the qualifications to transfer from a resident to a student, and we have also reduced the practice time necessary to become a member from two years to one year.

Do I have a motion to vote to accept the changes? Second? All those favor? Any not in favor?

(Motion made, seconded and passed).

DR. MERRILL: Next, I want to again thank the committee members for their very hard work this past year and want Kris Guleserian and Neal Kon to come forward and give a report of the postgraduate committee.

DR. KON: The postgraduate course went great, right, Kris?

DR. GULESERIAN: It went wonderfully, yes.

DR. KON: Everybody had a great time, everybody learned a lot. We appreciate everybody's input.

DR. GULESERIAN: The input from those who attended said it was the best postgraduate course that they had ever attended in the history of the STSA.

(Applause).

DR. MERRILL: All right. We will ask Dr. Scott LeMaire to come forward for the program committee.

DR. LEMAIRE: Thank you, Dr. Merrill.

I wanted to start by acknowledging my co-chair, Charles Fraser, as well as the other program committee members listed here. In

addition to the program committee members, the abstracts were also reviewed by this additional panel, who volunteered their time to review the large number of abstracts we had. So I want to thank them and acknowledge their hard work as well, as well as Megan and Beth for all their help putting together the program.

I just want to share with you some of the data on the abstract submissions. This year we had 258 submitted. Ultimately 87 were selected for presentation. That represents a 34% acceptance rate.

Now, overall here, the first column are the current numbers for 2013. The second column for comparison are last year's numbers. So you will notice that there is about a 10% decrease in overall abstract submissions, and this was primarily driven by a nearly 25% reduction in adult cardiac submissions.

Of note, the comments that we received from the 2012 meeting related to which topics were of most interest and where there was the biggest need generated some information that we used to help put the program together. The top three

topics that members felt they needed more information on during the meeting were TAVR, minimally invasive and robotic surgery, and mechanical support for heart failure. So I think you will notice throughout the program we have got these topics well covered in response to what we received in the survey after the last meeting. So it will be important again to give us good feedback for what you felt about this meeting and what you would like to see going forward to the next meeting.

One change in the program structure this year was the addition of invited discussants to the basic science forum. The goal there was to increase the amount of discussion and the attendance to that, and I think the attendance this morning was spectacular, much, much better than last year, and there was great discussion of all the papers. There wasn't a single paper that went without several questions, and it was a really great session. So thank you all for attending and I think that's something we should continue on in the next year.

And then I will conclude by briefly

mentioning the Hawley Seiler Resident Competition Award to let you know we have got 19 competitors this year. The presentations have been fantastic so far. The manuscripts and the presentations are being judged by the Council, the program committee, and the moderators, and the winner will be announced tomorrow night.

And that concludes my report.

DR. MERRILL: Thank you very much.

Dr. Tribble, will you come forward and give us a membership committee report.

DR. TRIBBLE: There were 28 applications for membership this year for regular membership. Twenty-four of those were accepted without any question. There were several that were tentatively accepted based on the approval of the bylaws change, the one-year eligibility need instead of two years that we approved a few minutes ago. So that vote allowed those three people to be added to the list. There was one person who did not meet any of our eligibility requirements yet, but we in the Council meeting tentatively accepted this person's application based on a proposal for a change in the bylaws next year.

Basically, our group thought and brought to the Council meeting here that there was one category of eligibility that we thought had been, I'm not going to say overlooked because it has been considered in the past, but we thought was one that should be considered, and that is to consider people to be eligible for membership in the STSA if they had done their general surgical residency in a southern program, a program represented by our group. We thought, just as a comparison, that five years in general surgery where you probably made your decision to go into cardiothoracic surgery was at least as good an eligibility requirement as one year of cardiovascular research in the south.

When our committee's proposal was proposed to the Council, the Council unanimously agreed that it would be appropriate to propose that as a bylaws change. So it will have to go through the yearlong process of being sent out for the opportunity for the members, all members, to review that and be voted on at next year's meeting. Therefore, we did agree that this one person who had trained in the south in general surgery but had

trained outside the south in thoracic surgery and was working in a program outside the south would become eligible next year if that bylaws change is approved.

The only other activity was that we had 15 resident applicants that did apply for membership and all of their applications were in good order and we accepted them.

I think that concludes our report.

DR. MERRILL: We need to call for a motion to accept the proposed new members.

DR. TRIBBLE: Okay. These are the names of the people who applied this year that I just described as being approved. These are the resident applicants. There are two pages of them. That is pretty straightforward.

(Slide shown of 2013 Resident Member Applicants).

DR. TRIBBLE: And then these are the regular applicants that we approved, and I will just scroll through these briefly.

(Slide shown of 2013 Regular Applicants).

DR. TRIBBLE: Again, all of these

persons' applications were in good order with appropriate letters, et cetera.

So I would like to call for a motion to approve this group.

(Motion made, seconded and approved).

DR. TRIBBLE: All right, the motion carries.

DR. MERRILL: Dr. Freeman is the CME director-elect, and Vinod couldn't be here tonight, so we will ask Dr. Freeman to give the report of the CME. Thank you.

DR. FREEMAN: Thank you, Dr. Merrill. Two important points to make. We are going through our CME reaccreditation process. Megan and her team have done an incredible amount of work over the last year. We have some conference calls coming up in the next two weeks. We are hoping to be reaccredited with commendation, which would extend our accreditation. Again, the staff has done an incredible job with that and we will be supporting them during that process over the next couple of weeks.

The other change for this year based on membership feedback, we have put the CME process

online, so you will notice the kiosk out here with the computers. You can sign in there with your e-mail as your user name, and your password is in the bottom left corner of your badge. That's your STSA number. You can do that once you get home up until November 16th online. So please don't forget to do that and claim your CME.

And that's all I have, Dr. Merrill.

DR. MERRILL: Thank you very much. We will look forward to a resounding approval by the ACCME.

Dr. Naunheim, would you come forward, please, to do your first nomination.

DR. NAUNHEIM: Thank you, Dr. Merrill. It's my privilege to represent the nominating committee. As you know, the nominating committee is comprised of the last five presidents. We met this fall over a long evening spent sipping bourbon. This certainly spurred our intellect, sharpened our judgment, and allowed us to make measured and thoughtful decisions about this slate of nominees that I'm about to present to you.

The very first, essentially, nomination we have to make is on this gentleman, who you all

know. He is the man with that little effete goatee that he has, but he is a true gentleman of the south. We would like to present as a nominee John Hammon for the position of historian. He is going to give us the historian's report.

Before he gives us the report, we have to agree that he is up to being historian. And those of you who know him may have some questions, but I can tell you the man can drink bourbon and he's going to make a damn fine historian. So I would like to call for any other nominations. No other nominations? Motion? Second? All in favor, real loud now for John, aye.

(Motion made, seconded and passed).

DR. NAUNHEIM: John, would you like to come up and give us the report.

DR. HAMMON: This has not been a good year for the STSA or thoracic surgery in general as we have lost not only very loyal and productive members of our own Association but thoracic surgery in America and, in many cases, throughout the world.

The first to report on is Dr. Thomas B. Ferguson. Dr. Ferguson died on Sunday, May 26,

2013, one week after open heart surgery at Mt. Sinai Hospital in New York for a heart valve replacement.

Dr. Ferguson was a very outstanding member of our specialty. He attended Duke University and trained in general surgery at Duke before going to Barnes Hospital and Washington University and trained under Evarts Graham. He then joined the faculty and did the first open heart procedure in St. Louis after going to Minnesota, bringing back a heart-lung machine, and working for a year to get it to the point where he was satisfied with it, which was a great thing since the patient did survive, which was not usually the case in 1956.

He was a very active member of the thoracic surgery community. He had a disagreement with his dean in the early 1960's and went into private practice in Florida, but only stayed four years and came back to Washington University, where he stayed for the remainder of a very long and distinguished career.

He was a founding member of the Society of Thoracic Surgeons and is one of the very few

surgeons to have served as president of the STS as well as the American Association for Thoracic Surgery, and in recognition for his contributions he received the Lifetime Achievement Award from the AATS in 2009.

Dr. Ferguson often attended STSA meetings, and I remember him tutoring me on my presentation for the Tiki Award a couple of years ago, and he was very, very, I would have to say, "generous" to me after I gave what I thought was a less than adequate presentation.

He got this award of Lifetime Achievement from The American Association for Thoracic Surgery, and writing about that, cardiac surgeon Dr. Jim Cox, a member of this Association, said, and I quote, "Tom's greatness has been built on genuine substance, uncommon grace, singular generosity, and an infectious laugh." I can certainly attest to that myself.

He is survived by his wife, Elizabeth Shanley Ferguson, two sons and two daughters. One of his sons, Bruce Ferguson, is a thoracic surgeon well known to this Association and a member.

The second is Brewster Harrington from

Memphis, Tennessee, who died in January of 2013. He attended medical school at the University of Arkansas and graduated in 1937. He then did his surgical and cardiac surgery training in Houston under Dr. DeBakey. He then moved to Memphis, where he joined the clinical faculty of the University of Tennessee medical school and practiced for the remainder of his career at Methodist Hospital in Memphis.

He was an excellent teacher of surgical residents and had many residents rotate with him at Methodist Hospital, where he was universally admired. He was a past president of the STSA in 1988. He is truly a southern gentleman, having had many conversations with him. He was an avid golfer, and I played golf with him for a number of years here at the Southern. He is a loss to our Association.

The next is Carolyn E. Reed, who died tragically just a few weeks after our meeting last year. She died as a result of a really heroic battle with pancreatic cancer.

She was born March 4th in Farmington, Maine. She graduated with honors from the

University of Maine and was a member of Phi Beta Kappa. She subsequently received her MD degree from the University of Rochester, where she was a member of AOA. She then moved to New York where she received her general and cardiothoracic surgery training at New York Hospital Cornell Medical Center, during which time she had a fellowship in surgical oncology at Memorial Sloan-Kettering Cancer Center.

She was then recruited to go to the Medical University of South Carolina in 1985, where she finished her career. She rose rapidly through the ranks and played numerous very important roles in her medical center.

Beginning in 1996, she was recognized each year on one or more top doctors' lists. She became the go-to thoracic surgeon in the state of South Carolina, not only for patients but also for her peer physicians with thoracic diseases.

She had an incredible passion for the care of patients but also their families, and they demonstrated their love for her regularly with many letters and phone calls.

She was a widely renowned surgical

educator. She was completely committed to medical student and resident education. In 1987 she received the Student Teaching Award at the medical university and was subsequently nominated for the Golden Apple Teaching Award on four separate occasions, which is a real honor.

Throughout her career, Dr. Reed was a strong advocate for research as a way to find more successful treatment for cancer. To this end, she held numerous important research grants from the National Institutes of Health as well as other funding organizations. She was the editor of the textbook *General Thoracic Surgery*, the 7th Edition, which is widely recognized as the Bible for general thoracic surgery.

She was a very loyal member of the Southern Thoracic Surgical Association, and she served as secretary-treasurer in 2006; she served as president, the very first woman to serve as president in this organization.

She was subsequently elected as chairman of the American Board of Thoracic Surgery 2005-2006, and was the first woman to serve as the leader of this organization. She served on

numerous editorial boards, including the Journal of the American Cancer Society, the Annals of Thoracic Surgery, and others.

It is truly ironic that Carolyn, who is a friend to us all and a wonderful leader, succumbed to cancer, a disease that she spent her entire life trying to cure.

The next is Herbert E. Sloan, who passed away in May of 2013 at age 98. Dr. Sloan was born in Clarksburg, West Virginia, on October 10, 1914. He was the son, grandson, nephew and brother of physicians. He graduated Phi Beta Kappa from Washington and Lee University in 1936 and was first in his class at Johns Hopkins University School of Medicine. He was chief resident at Hopkins and completed his general surgery residency there in 1944.

During the postwar occupation of Korea, he served in the medical corps, commissioned as first lieutenant and finishing as a major as a tribute to his leadership skills. He arrived at the University of Michigan in 1947, having been directed there because of his interest in thoracic surgery gained in the military. He joined the

first thoracic training program in this country headed by Dr. John Alexander and Dr. Cameron Haight. He finished his training there in 1941 and joined the faculty as the third full-time faculty member. He was promoted to professor of surgery in '62 and had an almost amazing career.

He was considered a pioneer in thoracic and cardiovascular surgery. He performed the first successful open heart surgery in the state of Michigan in 1956. In 1960, he was the first to successfully perform this type of congenital heart surgery on infants.

Outside of the operating room, he served as editor of the Annals of Thoracic Surgery for 15 years. He also was president of the Society of Thoracic Surgeons and of the American Association for Thoracic Surgery.

Perhaps his greatest contribution was the time he spent as secretary-treasurer of the American Board of Thoracic Surgery from 1973 to 1986. I will never forget my experience with the board when I took my examination and watched Dr. Sloan walk through each of the examining rooms

for each period of time of the examinations and saw his gentle but very firm nature in dealing with examiners and examinees alike.

His numerous honors and awards include the Society of Thoracic Surgeon's Distinguished Service Award and many others. Dr. Marvin Kirsh, one of the surgeons trained by Dr. Sloan and well known to many of us, wrote that Dr. Sloan "demanded excellence in himself and others." He leaves that important legacy to us all.

Dr. Malcolm Thomas of Lubbock, Texas, passed away February 12, 2012, here in Phoenix where he had retired. He was born in 1931 in Baton Rouge, he graduated from Tulane University medical school, and completed his internship at Jefferson Davis Hospital University College of Medicine in Houston. He continued medical training and had a fellowship in surgery at MD Anderson Hospital and Tumor Institute in Houston.

After his time in the military, he settled in Lubbock, Texas, where he was in private practice for the remainder of his career. He was well known as a very ethical and fine surgeon, and he received the Hippocratic Award for Excellence in Medicine

in 2009. He was a charter member of the STSA and attended many of the meetings in the past, although he has not been in good health and has not attended many meetings in recent years.

The last surgeon to talk about is Harold Urschel. Harold Clifton Urschel, Jr., "Hal," passed away on November 12, 2012, at the age of 82. He was born in Toledo, Ohio. He had an interesting and unusual childhood. His father was an engineer, an inventor and entrepreneur who founded the Urschel Engineering Company.

During Hal's early childhood, his family moved to rural Arkansas, where his father developed a zinc and copper mining company. He was home schooled by his mother, who instilled in him a lifelong desire for learning.

While in the Ozark Mountains of Arkansas, he nurtured his love for the outdoors, which continued throughout his life, exemplified by his passion for hunting and fishing. His mother recognized the need to civilize this rough and tumble young boy, so they returned to Ohio, where he spent his high school years.

After his familiar moved to Bowling

Green, the academic environment provided by Bowling Green University had a very significant academic influence on Hal. Bowling Green also happened to be where the Cleveland Browns professional football team had their summer camp. Under that influence, he became an outstanding high school football player, becoming an all-state selection in football. He was recruited by several major college teams, including Ohio State and Michigan, however, his mother thought Princeton University would be the best for her son, who was also an outstanding academic student.

He graduated from Princeton with an undefeated football career his freshmen and senior years, and his football team in his senior year was ranked No. 2 nationally in the United States.

He went on to Harvard Medical School and trained in surgery at the Mass General. The most significant event in his eventful life, however, was not medical. He had a chance meeting with a Wellesley undergraduate, Betsey Bradley, the daughter of two physicians. Her mother was an internist, her father, a navy career physician.

Betsey and Hal were an ideal fit. She was

every bit as much of a national achiever as her husband.

It is almost impossible to go through all of Hal's achievements along with Betsey's; it would take over an hour. So I would like to sum up Hal's career.

In focusing on his brilliant career, Hal would have to be described as an iconoclastic curmudgeon. He was at once simultaneously aggressive, kind, caring, brutally honest and diplomatic. He was intensely devoted to his family, his friends, his faith and his profession. He and Betsey were tireless in their professional activities, and at the time of his death they were at the American Heart Association meeting in Los Angeles where he was presenting material on his latest research interest, the use of stem cells for the treatment of heart failure.

He was the past president of the Society of Thoracic Surgeons, the Southern Thoracic Surgical Association, the American College of Chest Physicians, and the Texas Surgical Association. He was chairman of the Residency Review Committee for Thoracic Surgeons and

chairman of the American Board of Thoracic Surgery.

Hal's favorite quotation is by Hippocrates inscribed on the wall of building 5 at the Harvard Medical School: "Life is short, the art is long, the occasion instant, the experiment perilous, and the decision difficult."

His loss leaves an empty spot in the STSA, particularly in our meetings, where he was such an enthusiastic and very much opinionated participant. However, we are very lucky that Hal's lovely wife, Betsey Bradley Urschel, is with us today, and she promises me that she will attend our meetings in the future. For that, we are very lucky.

That ends my report. Will everyone stand, please, for a moment of silence to honor our departed members.

(Moment of silence observed).

DR. MERRILL: Thank you very much, John.

I would like now to invite Dr. Edmunds, if he'll come forward for the report of the Annals.

DR. EDMUNDS: Like the STSA, the Annals is still solvent. Can you put on my slides,

please, editor's report.

Here are the highlights comparing 2012 with 2013. You can see that subscriptions are about the same, submissions are also about the same, but what's going up are the original scientific articles in our office, called OAs. We have had an increase by 60 OAs over the previous year, 2011, and because of the contract with Elsevier, we can only publish a certain number per year, so that we published 370 in both years, but the acceptance rate goes down as more submissions come in, and we are stuck with having to publish about the same number.

The registration of all of you at our website is almost 19,000, as you can see. The submissions from North America went up a little bit, but the big submissions, the increase, is largely offshore, and particularly China and Taiwan.

CME, continuing medical education, credits, you see uses and users. The uses have gone up to almost 60,000 by the time this slide was made, but it's out of date now because it's well over 60,000. We are increasing about 1,000 a

month.

The impact factor went down a little bit in 2013. That does vary a little bit year to year. We had 44 more articles in our denominator, which Thomson Reuters will not explain, but I am not particularly worried about that because that was not an important thing before.

Next slide. This is what happened to the STSA 2012 to 2011. We had seven less submissions as you see at the bottom. We published considerably fewer than we did the year before at this time, and this is data to the end of August. It is only for two trimesters of the year. Under review we still have three and we are waiting for revision for four. Boy, have we been pounding on those authors but with little result so far. We rejected four more, so the rejection rate is a little higher this year, but it averages around a 75% acceptance rate.

Next slide shows the bar graph of the submissions, which you can see in the bars, and the impact factor you can see in the black dots. The main thing to me is the fact that we are getting an increasing number of submissions, and it

appears to be different from the preceding five or six years.

Next slide. We have a new CME address. CTSNet is no longer hosting journals. They didn't ask me about that decision, I would have opposed it, but I don't make the decisions. So we have a new address at the Elsevier Health Advantage, and I hope that those of you who are interested in taking CME will write down the Web address. Other than that, nothing has changed. You still have your portfolio, you have four CME exercises a month, and hopefully that will help you get recertified when your state says it makes you recertify for your license.

We have got another project coming up that I would just like to show you. Next slide. We are going to update the Annals website. The Annals website was established in January 2003. Now we have nearly, as you saw before, 19,000 registrants, some of whom are still alive. There is an unknown number who have died, missing, gone, quit, whatever. We don't know who is who. So we need to find out.

As you know, those of you who have

registered at the website, you identify your interest and expertise. At least two in the room have identified all 365 keywords. They are absolutely geniuses, only when I send them a review, I don't get it back. Beginning January 1st, 2014, every registrant, even if nothing has changed, has to re-register. We do have to know who has a heartbeat. We are going to be open for six months. We are going to try to remind you every kind of way we know. The STS won't support a dirigible at the annual meeting, so we will have to go without that. But those who do not by June the 30th are dropped out of the bucket.

So that's the end of my report, and I hope you will re-register. Wait until the second of January. I don't want any hangovers contaminating the data.

Thank you.

(Laughter and applause).

DR. MERRILL: Thank you very much,  
Dr. Edmunds.

Now we would like to have Dr. Putnam come forward and give the report of the ACS Board of Governors.

DR. PUTNAM: It has been my privilege to represent the Association to the Board of Governors of the American College of Surgeons. The College had their annual meeting in October in Washington, D.C. and continues its advocacy and educational efforts on behalf of all of its members.

There has been a restructuring of the Board of Governors committees to align with the ACS committees, which gives the governors an opportunity to engage in various ACS mission areas. Healthcare reform is still the number one concern based upon the annual Board of Governors survey. The College is focusing on a value-based reimbursement payment model as a replacement for the flawed SGR.

The finances of the College are intact. The number one revenue source at this point is the quality programs, which has surpassed members' dues as the number one financial support model.

The College itself has recognized the significant events of transition within a surgical practice, particularly the transition from medical student to resident and resident to

practice, and, as well, for the practicing surgeon they have had some significant efforts placed toward assisting them with maintenance of certification for their ABS certifications.

As your representative, I am very happy to hear from any of you either individually or collectively if there are specific efforts or interests that you would like to have addressed at the College level.

That concludes my report. Thank you.

DR. MERRILL: Thank you very much. I want to give a particular shout out to Jennifer Lawton, who has helped us this year with the mentoring committee, matching up mentors and mentees that are new to the annual meeting.

And I want to remind all of you that we have something new this year. We have the residents' reception that is starting right now from 6 to 7. This is at the Sonwai 1-3, which is near the fountain court. So just work your way down there right after this for the residents' reception from 6 to 7.

Dr. Naunheim, we will invite you back one more time.

DR. NAUNHEIM: So now we need to present the slate of nominees that the nominee committee felt would be the ideal candidates for your leadership in the coming year.

The slate includes, for President, Dr. Richard Prager; for Vice-President, Dr. Jeffery Jacobs; as Councilors, Dr. John Ikonomidis and Dr. Christine Lau; Secretary-Treasurer, Daniel Miller; Historian, already voted on so he could give his report, is John Hammon. And what I neglected to add there, we also would like to nominate as Director of Continuing Medical Education, Dr. Richard Freeman, who actually has been the CME-elect representative up until this point.

And at this point I guess I would first like to see if there are any other nominations from the floor. Second?

(Motion made and seconded to close nominations).

DR. NAUNHEIM: So I would like then a motion to approve this slate. Second? All in favor?

(Motion made, seconded and passed).

DR. NAUNHEIM: All right, so moved. So President Richard Prager, would you come up to the podium, please.

(Applause).

DR. PRAGER: As I said to this group last year, this is without question the highest honor and probably is for most of us who have this opportunity. As we have looked at our list, unfortunately, that Dr. Hammon presented, we realize the friendships and opportunities this group presents to all of us, and we saw it this year with a unique and amazing and personal presidential address. I think all of us are committed to this Society, and I hope we will continue as it has been and have a great year coming forward. So thank you all for your vote of confidence, and I think we will have a spectacular year to come.

DR. NAUNHEIM: And finally that moment you have all been waiting for, the nomination of the President-Elect. This person is a true son of Texas, born in Austin, son of a cardiac surgeon, so he comes by this evil of cardiac surgery naturally. He was an undergraduate at the

University of Texas and gives you a little insight into the spirit of the man when he went there on a golf scholarship and that's the only reason he ever stayed in. He then went to medical school at Baylor medical school and began his general surgical residency at the University of Texas in San Antonio, and continued there in cardiothoracic residency at the University of Texas in San Antonio.

He is a protege of Kent Trinkle. I've heard more Kent Trinkle stories from him that I can care to remember, and only one of them was clean.

He has been an officer in all our major organizations: The American Board of Thoracic Surgery, the TSFRE, the Joint Council and the like. And I would like to present to you our next President-Elect, John Calhoon, and I ask Dr. Hammon and Dr. Coselli to escort him up to the podium.

(Applause).

DR. NAUNHEIM: And you know John, I know he's going to have a few words, but, John, just a few words, okay? Congratulations.

DR. CALHOON: Just a few things. I'm

flattered. Most of you who know me know that the only thing I ever really wanted to do was to be the starter for the golf tournament at the Southern, and now all this stuff has happened. So I'm very flattered about that.

I was kind of back there, Keith, and I was truly kind of half supine and half erect, because I'm from Tulsa, and so I didn't know who the hell you were talking about.

(Laughter).

DR. NAUNHEIM: If you take away the suspense, it's really not a good thing. We just wanted you to feel just a little fear. Did you get a little fear there?

DR. CALHOON: I want you to know I'm erect now. You might not be able to tell.

At any rate, I'd like to move that we adjourn the meeting and go get some of the bourbon that the nominating committee was sipping. Clearly it was very strong; there are so many deserving people. It will be an honor to work with you all again this year and to work with President Prager.

Also just before we close, I'd like a

moment of silence for Lorraine Cerfolio and for those that we lost besides her this year.

(Moment of silence observed).

DR. CALHOON: Amen. Thank you.

(Applause).

DR. PRAGER: We have had a great day.

May I have a motion to close the business meeting.

(Motion made, seconded and approved).

DR. PRAGER: All right.

(The meeting adjourned at 6:05 PM).