

# Association for Surgical Education





# Association for Surgical Education ANNUAL REPORT 2009

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# About the ASE

**History** 

#### **Past Presidents**

1981 Royce Laycock, MD 1982 Royce Laycock, MD 1983 Anthony Imbembo, MD 1984 Bruce Gewertz, MD 1985 Peter Lawrence, MD 1986 Patricia Numann, MD 1987 Richard Bell, MD 1988 Norman Snow, MD 1989 John Provan, MD 1990 Hollis Merrick, MD 1991 Debra DaRosa, PhD 1992 James Hebert, MD 1993 Ajit Sachdeva, MD 1994 Merril Dayton, MD 1995 Gary Dunnington, MD 1996 Nicholas Coe, MD 1997 Chris Jamieson, MD 1998 Richard Spence, MD 1999 Richard Schwartz, MD 2000 Richard Reznick, MD 2001 Nicholas Lang, MD 2002 Leigh Neumayer, MD 2003 Michael Stone, MD 2004 John Murnaghan, MD 2005 Kimberly Anderson, PhD 2006 Donald Jacobs, MD 2007 Donald Risucci, PhD 2008 Philip Wolfson, MD 2009 Barry Mann, MD

The original motivation for the creation of the Association for Surgical Education (ASE) was to improve the quality of medical student education in surgery. The ASE planning group consisted of Drs. Norman Snow, David Heimbach, Royce Laycock, Anthony Imbembo, Gordon Schwartz and Bruce Gewertz who founded the organization in 1980. The inaugural meeting took place in Louisville, Kentucky in 1981 and was attended by approximately 30 people. In the early 1990's, the ASE embraced educational research as a major part of the organizational mission and developed a number of programs that promoted the scholarship of discovery as it related to the entire surgical education continuum. In more recent years, education has become an increasingly more common career focus for academic surgeons. Accordingly, the ASE has adapted its structure and programs to address the interests and needs of our growing and diverse group of graduate students, residents, surgeons and educators.



The ASE Logo The ASE logo is comprised of a book, quill and scalpel, symbols of surgical education and training.

# About the ASE

# Organization

The ASE is a 501-(c)-3 non-profit organization and is governed by a Board of Directors. The Board of Directors is comprised of the officers, committee chairs and several members who serve as liaisons to other surgical and medical organizations. The majority of ASE committees are completely open to all its members, and the committee members elect their leadership. The ASE Executive Committee is comprised of the officers and the executive director and addresses issues that arise between the biannual meetings of the full Board of Directors. The organization is headquartered in Springfield, Illinois and is administered by an executive director, Ms. Susan Kepner, and a staff member, Ms. Brenda Brown.

### **Mission Statement**

The mission of the Association for Surgical Education is to promote, recognize and reward excellence, innovation and scholarship in surgical education.

### **Statement of Core Values**

We believe that education is essential for individual growth and global progress.

We believe that continuous learning is vital to succeed in a changing environment.

**We believe** that effective collaboration employs our diversity to improve ideas, enrich experiences and increase productivity.

**We believe** that enduring organizational effectiveness depends upon trust, transparency, integrity and mutual respect.

**We believe** that a commitment to innovation and scholarship is crucial to progress.

# **Vision Statement**

The ASE aspires to impact surgical education globally.

### **Current Board of Directors**

#### **OFFICERS**

President David A. Rogers, MD, MHPE Vice-President/President-Elect Thomas Lynch, MD Vice-President Linda Barney, MD Treasurer Mary Ann Hopkins, MD Secretary Dimitri Anastakis, MD, MHPE, MHCM

#### **COMMITTEE CHAIRS**

Curriculum Rebecca Evangelista, MD Information Technology James Rucinski, MD Educational Research Susan Steinemann, MD Faculty Development Celeste Hollands, MD Membership Maura Sullivan, PhD Program Mary Klingensmith, MD Assessment and Evaluation Loretto Glynn, MD Clerkship Directors Steven Goldin, MD, PhD Coordinators of Surgical Education Christie Legler Awards Linnea Hauge, PhD Nurses in Surgical Education Cathy Schwind, RN, MSN Simulation Daniel Jones, MD Graduate Surgical Education Mary Klingensmith, MD

#### **MEMBERS**

Executive Director Susan Kepner, MEd Past Presidents Barry Mann, MD; Donald Jacobs, MD; Donald Risucci, PhD ASE Recorder Paul J. Schenarts, MD American College of Surgeons Ajit Sachdeva, MD (ex-officio) ASE Foundation Hollis Merrick, MD (ex-officio)

#### LIAISON MEMBERS

Association of American Medical Colleges Council on Academic Societies Debra DaRosa, PhD; Merril Dayton, MD Alliance for Clinical Education Kimberly Ephgrave, MD; Rebecca Evangelista, MD; Robert Nesbit, MD; Robyn Stewart, MD

**Association of Program Directors in Surgery** John Mellinger, MD

Association of Academic Surgeons Mary Klingensmith, MD

American College of Surgeons- ASE Governor Donald Jacobs, MD

# About the ASE



# **Named Lectureships and Awards**

# Philip J. Wolfson Outstanding Teacher Award

This award is given annually to a maximum of four individuals who are actively involved in surgical education and who are considered by their chair, peers or residents/students to be outstanding teachers. The award was renamed in 2008 to honor the memory of Philip J.Wolfson, MD, a truly outstanding teacher and ASE President.



# The J. Roland Folse Invited Lectureship in Surgical Education

In 1993 the ASE created this named lecture to recognize the significant and enduring contributions of Dr. J. Roland Folse to the ASE and to surgical education. Individuals are invited to give this lecture based on exemplary contributions to their respective disciplines.

# Message from the President

have a distinct recollection of the first Association for Surgical Education meeting that I attended. I was startled by the passion that everyone had for surgical education. I was also surprised that individuals who had already made notable contributions in surgical education were willing to talk to me about my ideas and provide advice and encouragement. I left this meeting with a new level of enthusiasm for my work and a commitment to learn more about surgical education. Fortunately, I was among the group of individuals who had been accepted into the inaugural class of the Surgical Education Research Fellowship (SERF). I began a program of active learning about educational research as I did my SERF project. I had the privilege and great enjoyment of presenting that and subsequent work from the podiums of the annual meeting. I was encouraged to join the Educational Research Committee, where I began to establish relationships that would lead to a number of enriching collaborative projects. Subsequently, I became Chair of this committee and was able to participate on the Board of Directors. I received funding for educational research projects from the ASE Foundation. In the past several years, I have celebrated the accomplishments of residents and surgeons younger than I (an increasingly larger group!), as they receive recognition for their teaching and educational research. Most recently, I had the honor of being selected to become an officer of the ASE that has resulted in the ultimate privilege of being President of this unique, enriching, and important organization.

This inaugural Annual Report is one way that I've tried to partially repay my debt to the Association for Surgical Education. The ASE has an interesting history and a number of exciting programs, but some of the stories and explanations seemed to exist in oral form only. Even the written organizational story is scattered among various places. I felt that we should realign some of the resources that we were committing to the print version of our newsletter, *FOCUS on Surgical Education*, toward the creation of an Annual Report that would tell the story of the ASE and the significant impact that it has had on surgical education. It is a story that I find exciting to read and hope that you enjoy this first effort. However, the written account will never match the excitement that one encounters at the annual meeting, and so I encourage you to attend our next meeting in San Antonio, Texas, April 20-24, 2010.

Many people contributed to the content of this report, and it is truly a collaborative effort. I would like to extend a special note of gratitude to Susan Kepner, our Executive Director, for keeping track of our history and checking the report to assure that it was factual. I would also like to thank Carol Cohen whose perspectives from more than 30 years of working in academic surgery has helped us to make certain that the story told was comprehensible to someone relatively new to the organization, but whose editorial input also substantially improved the quality of the language used to tell this story.

David A. Rogers, MD, MHPE *ASE President* 



# Message from the Executive Director



s we embark on this inaugural Annual Report, the Association for Surgical Education strives to continue to be at the forefront of surgical education in order to meet the needs of our valued and future members. We are also undergoing a strategic planning process that will set the future direction of the ASE. This strategic plan will be a follow-up to the one that was completed in 2005. While our 2005 strategic plan was to improve the operation and governance of the ASE as an organization, it is now our goal to determine where to focus our energies and resources to best serve the needs of our membership.

Change is a natural occurrence and one that reminds us to assess the past in order to provide for the future. As a result, changes are evolving at the ASE to keep pace with expanding communication and teaching technologies. Many of our Committees are working diligently to organize and implement these and other improvements.

For example, the Educational Clearinghouse of the ASE, established in 1983, has served as a valuable repository for a variety of training, teaching, performance evaluation, and faculty development materials to surgical educators world-wide. We are now consolidating these large volumes of materials, as many are no longer available in hard-copy print. We will rely on the ASE Committees to make recommendations, provide current materials of value to the membership, and transition toward electronic materials only. We are also migrating from a print version of *FOCUS on Surgical Education*, the ASE's publication since 1983, toward having this information reside on our website. This will continue to include articles that our membership has enjoyed over the past years, including Board of Directors, Committee and ASE Foundation reports, along with features such as Review of the Literature, Educator's Corner, Just a Byte and Invited Articles from our members.

In addition, we've partnered with the Association of American Medical Colleges' MedEdPORTAL repository and encourage our members to consider this peerreviewed venue as a home for their educational scholarly works as well as a valuable resource of educational materials.

In an attempt to be sensitive to environmental concerns, we have migrated to electronic mailings and notifications of important ASE announcements as well as calls for abstracts and submissions. This has the added benefit of being budgetfriendly for our Association as we continue to strive to be responsible stewards of our valued financial resources.

As I begin my 20th year with the ASE, I continue to be amazed at the dedication, passion and commitment shown by so many of you who have dedicated your professional lives to the field of surgical education.

The future for the ASE is exciting, and there is much to do as we continue to meet the needs and challenges of the surgical education community in an era of technological growth, limited resources, and medical reform.

Susan Kepner, MEd *Executive Director* 

# Message from the ASE Foundation President

he Association for Surgical Education Foundation has existed for more than 15 years and during that period has provided substantial funding that has positively impacted surgical education through a number of excellent programs. The most well known of these are the Center for Excellence in Surgical Education, Research and Training (CESERT) Grants program and the Surgical Education Research Fellowship (SERF).

The current economic situation has made fundraising challenging, but the ASE Foundation Board has moved aggressively to assure that it can continue to support the ASE mission and vision. A number of new members have been added to the Board, and I have challenged them to provide leadership to the organization by regularly contributing to the Foundation, encouraging their colleagues to contribute and identifying corporations that might be willing to provide financial support.

To realize these goals, all ASE members were encouraged to contribute \$30.00 to recognize that we will be holding our 30th meeting next year. We also altered the ASE website to make contributions on-line easier and remind members of this opportunity when they renew their annual membership dues on-line. Moreover, we began recognizing exemplary cumulative giving by members during our most recent annual meeting. Although this is somewhat of a cultural shift for our organization, we have achieved some significant success. During the most recent fiscal year, we received contributions from 68 of our members totaling over \$16,000.

The next part of the ASE Foundation's strategies relates to our corporate partners. Instead of concentrating on a few large gifts, we have broadened our appeal to seek gifts of any amount from a variety of companies who might have reasons to support the educational goals of the ASE Foundation. Ms. Carol Cohen was retained by the ASE Foundation to help us identify potential corporate donors and to assist us in preparing corporate grant applications. We are committed to devote more of our efforts to maintaining these relationships as we seek to develop new ones. During the most recent year, we received contributions from Covidien, Inc., Medical Education Technologies, Inc., and Stryker Corporation. A significant gift from Ethicon Endo-Surgery, Inc. provided substantial support for the Surgical Education Research Fellowship Program and, in appreciation, have renamed it the Ethicon Surgical Education Research Fellowship. Our total corporate contributions this fiscal year were \$47,500.

The third part of the strategy involves developing an institutional category of supporter. Many of our programs, including CESERT, SERF and our Excellence in Teaching Awards, provide a benefit to Departments of Surgery and other institutions. Thus, we elected to create an opportunity for those departments to support our efforts as well as solicit the Chairs of the departments that had received direct scholarly support.

The programs supported by the ASE Foundation have flourished and expanded, and it has been exciting to see them grow in the past years. It is imperative that we all support the Foundation to be certain that these programs continue to evolve to meet the needs of the surgical community and our membership in future years.

Hollis W. Merrick, MD ASE Foundation President



### **Committee on Curriculum**

### Rebecca Evangelista, MD, Chair Ranjan Sudan, MD, Vice-Chair

The Committee on Curriculum continues to explore innovations in curriculum development with a focus on helping educators fulfill the educational needs for student-level course requisites as well as for those students pursuing surgery as a career choice. Collaborative efforts of members produced the current edition of the Manual of Surgical Objectives for undergraduate teaching and the Surgical Educators Handbook that serves as a navigational aid for educators in a problem-based format. The Committee continues to sponsor the "Thinking Out of the Box" lunch program for sharing innovative teaching ideas at the ASE Annual Meeting and helped develop the Surgical Interest Group Website for students pursuing surgical careers.

Currently, the Committee is engaged in the continued development of the ASE PowerPoint Teaching Modules designed for use by faculty or residents for medical student education. Framed after the *Manual of Surgical Objectives*, these casebased modules, enriched with images, radiographs and literature references enable faculty and resident educators to guide students through discussions of common problems encountered in surgical practice. Committee members are also currently engaged in revising the *Manual of Surgical Objectives* to include common required skills and adjust the current language to provide rigorous, measurable objectives.

# **Committee on Assessment and Evaluation**

### Loretto Glynn, MD, Chair Adnan Alseidi, MD, Vice-Chair

The ASE Committee on Assessment and Evaluation serves as a resource on all issues related to the assessment and evaluation of teachers, learners, and educational programs. As a key component of our activities, the Committee sponsors a workshop during Surgical Education Week. Recent topics include use of 360 degree evaluations in surgical education, evaluation of the "soft" competencies, development of a surgical Objective Structured Clinical Examination, and creation of narrative comments for trainees. The Committee has initiated a project to obtain follow-up evaluation from workshop participants to insure that the needs of participants are being met on a longer-term basis. In addition, there is ongoing collaboration with the Curriculum Committee to develop assessment tools for the PowerPoint Teaching Modules they have created.

# **Committee on Faculty Development**

### Celeste Hollands, MD, Chair Jeanie Savas, MD, Vice-Chair

The purpose of the Faculty Development Committee is to assist the ASE members with teaching responsibilities in their development as surgical educators. The committee sponsors workshops at ASE meetings (recent workshops have included interactive sessions on Coaching Towards Excellence in Professionalism and Effective Communication and How Surgeons Teach in the Operating Room) and has developed materials that can be taken from workshops and meetings and disseminated by attendees to surgical educator colleagues at their home institutions. The Committee has developed a teaching dossier, has completed and published a national study on part time academic faculty, and has completed a national survey on volunteer surgical faculty. Currently the Committee is working on a core faculty development curriculum containing short (10-15

minutes) and long (60-90 minutes) modules on a series of 12-24 faculty development topics. Collaboration with the other committees such as the Simulation Committee is ongoing for this project which will produce these modules for members to disseminate to their home institutions.

# Committee on Educational Research

### Susan Steinemann, MD, Chair Ravi Sidhu, MD, MEd, Vice-Chair

Promoting the best in research activities of ASE members by encouraging, coordinating and stimulating all aspects of educational research is the primary goal of this Committee. This is achieved by improving communication, coordinating grant review and funding, and sponsoring educational activities. Communications include informing the membership of educational and grant/funding opportunities as well as mentoring capabilities. Educational activities include sponsoring workshops and related activities for the promotion of educational research skills of ASE members. Other activities include the integration and promotion of educational research within the ASE by forming essential liaisons with other Committees. A current project of this Committee is a major revision of the Manual for Surgical Education Researchers that will be published by Cine-Med.

# **Committee on Information Technology**

### James Rucinski, MD, Chair Gregory Cherr, MD, Vice-Chair

The purpose of this Committee is to share information with the ASE membership on how to use information technology to improve the quality of surgical education programs. While the Committee attracts ASE members who are "tech" savvy, it is open to anyone with an interest in information technology including novices. The Committee has completed a number of projects designed to keep the ASE membership up-to-date on computer hardware, software and on-line services. The Informational Technology Committee is currently reviewing the appearance and functionality of the ASE website.

# Committee on Nurses in Surgical Education

### Cathy Schwind, RN, MSN, Chair Maggie Boehler, RN, MSN, Vice-Chair

This Committee is comprised of nurses who are currently working within their respective Departments of Surgery across North America to provide instruction, guidance and support to medical students throughout their surgical undergraduate education. In keeping with the Association's goals, the members of this Committee have developed similar objectives so that they can actively participate as colleagues and collaborators. Responsibilities of the Nurse Educators, outside the realm of the surgical clerkship, include conducting research, participating on departmental and institutional committees, and mentoring and collaborating at the local, regional and national levels.

# **Committee on Coordinators** of Surgical Education

#### *Christie Legler, Chair Trish Arbella, Vice-Chair*

The Committee on Coordinators of Surgical Education develops resources to support, educate and inspire coordinators in surgery. This Committee addresses the educational needs of medical students in surgery and is focused on developing effective plans and goals to make the surgical clerkship successful. The Committee provides helpful information and guidance to coordinators and enables them to get involved in group discussions on issues surrounding medical student education. The Committee meets during the Annual Meeting and conducts business via e-mail and conference calls throughout the year. The Committee is focused on two projects. The first is a career development program for clerkship student coordinators. The second is to develop a web-based forum to allow discussion of emerging topics, sharing of best practices, and networking with colleagues.

### **Committee on Surgery Clerkship Directors**

### Steven Goldin, MD, PhD, Chair Stephen Yang, MD, Vice-Chair

The Committee on Surgery Clerkship Directors was formed at the ASE meeting in Tucson in March 2006 to provide a forum specifically for Clerkship Directors to share ideas and address problems common to all surgery clerkships. These areas include curriculum, evaluation, resources and meeting Liaison Committee on Medical Education (LCME) requirements. The Committee has been working on creating a national curriculum for surgery clerkship directors, and a poster related to that effort will be presented at the AAMC meeting this year.

The Committee has also been developing a database containing contact information for all North American Clerkship Directors with a goal of producing a yearly survey about clerkship-related information and support. This survey will be used for research purposes and help establish uniformity in teaching methodologies to all Clerkship Directors. The survey will also provide important information that may be used by Clerkship Directors to justify institutional support and to define criteria for academic advancement.

The Committee is now reaching a tipping point in its membership with one of the largest ASE Committee attendances at both its ASE and ACS meetings. Further support and participation by all Surgical Clerkship Directors and Coordinators are welcomed, and all Surgical Clerkship Directors and Coordinators are invited to these biannual meetings.

# **Committee on Simulation**

### Daniel Jones, MD, Chair Daniel Scott, MD, Vice-Chair

The mission of the Simulation Committee is to promote the development, adoption and scientific analysis of simulation-based training for surgeons and other healthcare professionals from related fields. The Committee had its first program devoted to simulation training at the 2009 ASE Annual Meeting, and another program is planned for the coming year. The Committee is also developing a textbook devoted to simulation in surgical education that will be published by Cine-Med. Finally, a subcommittee of the group is planning a survey to determine the simulation-related educational needs of the ASE and broader surgical education community.

### **Committee on Graduate Surgical Education**

#### Mary Klingensmith, MD, Chair James Korndorffer, MD, Vice-Chair

The Graduate Surgical Education Committee was formed at the ASE meeting in Salt Lake City in April 2009 to provide a "home" in the ASE for those whose primary focus is graduate medical education. The Committee hopes to promote educational scholarship among residency and fellowship program directors, serving as a group in which "best practices" in surgical education research can be shared. In addition, the Committee hopes to expand the reach of the ASE by including surgical directors of other specialties who would like an outlet and home for their surgical education scholarship.

### **Committee on the Program**

### Mary Klingensmith, MD, Chair Chris Brandt, MD, Vice-Chair Paul J. Schenarts, MD, ASE Recorder

Membership on the Committee on Programs is by presidential appointment. The most recent ASE meeting took place at the Grand America Hotel in Salt Lake City, Utah. There were a total of 687 attendees for 2009 Surgical Education Week. A total of 109 abstracts were submitted for consideration by the Program Committee. Twenty of 86 eligible submissions (23%) were accepted for podium presentation, and an additional six were accepted for mini-podium presentation. Twelve abstracts were accepted for poster presentation and nine for workshops. Overall 43% of the total submissions were accepted. Dr. Ari Tekian presented the J. Roland Folse Lectureship, and Dr. Linnea Hauge gave the annual "What's New in Surgical Education" presentation. Dr. Barry Mann's Presidential Address was entitled "Promoting a Culture of Ownership."

A total of 15 podium presentations were submitted as manuscripts and are currently under review for consideration for publication in *The American Journal of Surgery.* The Proceedings from the 2009 ASE meeting have been accepted for publication in *Teaching and Learning in Medicine.* 

The Program Committee began planning the 2010 meeting on the last day of the 2009 meeting. The Program Committee felt that the mini-oral presentations had been successful, and this portion of the meeting will be expanded. To that end, a number of process changes will be modified this year to support the goal of selecting the best materials for presentation at the meeting. Dr. Kevin Eva has accepted the invitation to give the J. Roland Folse Lectureship, and Dr. Carla Pugh has agreed to give the "What's New in Surgical Education" presentation.

# **Committee on Membership**

### Maura Sullivan, PhD, Chair

Membership on this Committee is by presidential appointment. The purpose of this group is to develop strategies and projects that attract new members and keep current members actively involved in the ASE. Current efforts include a membership drive targeted at Surgery Clerkship Directors, Program Directors, Nurse Educators and Clerkship Coordinators. In addition, efforts are underway to attract surgeons involved in areas outside of general surgery, specifically faculty who are involved in new integrated residency programs. The ASE membership currently stands at 880 members, including 95 residents and 19 medical students. The graph below shows the total ASE membership over the past decade.



### **Committee on Awards**

### Linnea Hauge, PhD, Chair

Membership on this Committee is by presidential appointment. The mission of this group is to develop the criteria and process for selecting the annual recipients of the Philip J. Wolfson Outstanding Teacher Award and ASE Distinguished Educator Award. Nominations for the 2010 recipients of those awards have been received and are under review. The Committee on Awards has also been charged by the ASE President to develop criteria to recognize exemplary contributions by surgery residents to surgical education.

# **Collaborations With Other Organizations**

# Association of American Medical Colleges

Council of Academic Societies Liaison Members -Debra DaRosa, PhD Merrill Dayton, MD

Organization of Resident Representatives -Catherine Lewis, MD Catherine Schermer, MD

MedEdPORTAL Associate Editor – Amalia Cocbran, MD

Surgical education is a broad area and so collaboration with other organizations is essential for the Association for Surgical Education to accomplish its mission and realize its vision.

Founded in 1876, the Association of American Medical Colleges (AAMC) originally represented only medical schools. Today, membership is comprised of the 131 United States and 17 Canadian accredited medical schools, nearly 400 major teaching hospitals, and 94 academic and professional societies. The ASE is an organizational member of the Council of Academic Societies (CAS) that is one of the three governing councils of the AAMC, along with the Council of Deans (COD) and the Council of Teaching Hospitals and Health Systems (COTH). The ASE also has representation on the AAMC Organization of Resident Representatives. The ASE has recently become a partner in the AAMC MedEdPORTAL project, a peer-reviewed web-based repository of materials designed to improve medical education.

# American College of Surgeons

ASE Governor -Donald Jacobs, MD

The American College of Surgeons (ACS) is a scientific and educational association of surgeons that was founded in 1913 to improve the quality of care for the surgical patient by setting high standards for surgical education and practice. The ASE has a unique relationship with the ACS as Dr. Ajit Sachdeva, an ASE Past-President and current member of the Board of Directors, is the Director of the ACS Division of Education. Further, many of the ASE members are also Fellows of the American College of Surgeons and serve on a number of educationallyoriented ACS committees. The ASE is presently collaborating with the ACS and the Association of Program Directors in Surgery on a project that involves developing an intern preparedness curriculum. The ASE and ACS also continue to collaborate with others in the Web Initiative for Surgical Education of Medical Doctors (Wise-MD) project to enhance the teaching of common surgical problems to medical students, residents, nurses and allied health workers through state-of-the-art technologies including animation, computer graphics and video.

# **Collaborations With Other Organizations**

# Alliance for Clinical Education

Liaison Members -Kimberly Ephgrave, MD Rebecca Evangelista, MD Robert Nesbit, MD, Robyn Stewart, MD

The Alliance for Clinical Education (ACE) is a multidisciplinary group of organizations of Clerkship Directors that was formed in 1992 to enhance clinical instruction of medical students. ACE's mission is to foster collaboration across specialties in order to promote excellence in clinical education of medical students. The Alliance for Clinical Education is gaining momentum as the "goto" group for the AAMC on emerging issues regarding clinical education for medical students. The ASE-appointed liaisons will be active in a number of projects related to clerkship directors and medical student education. One of these projects is an evaluation of the impact of the electronic health record on medical student education.

### Association of Program Directors in Surgery

### Liaison Member -Jobn Mellinger, MD

The Association of Program Directors in Surgery (APDS) was founded in 1977 and consists of the Program Directors and Associate Program Directors of ACGME accredited General Surgery residencies in the United States. APDS is also the sponsoring organization for general surgery program coordinators. The tenth Surgical Education Week will be held in 2010 and represents on-going collaboration between the ASE and APDS. The ASE and APDS have co-sponsored the Residents as Teachers Workshops held during past Surgery Education Week meetings. Currently, the ASE, APDS and ACS are partners in the intern preparedness project.

# Association for Academic Surgery

Liaison Member -Mary Klingensmith, MD

The Association for Academic Surgery (AAS) was founded in 1967 and has grown significantly over the years, being widely recognized as an inclusive surgical organization with over 2,500 member surgeons. The objective of the AAS is to stimulate young surgeons and surgical scientists to pursue careers in academic surgery and provide support so they can establish themselves as investigators and educators. Active members have traditionally been surgeons who held academic positions. This is a new collaboration for the ASE.

# American Board of Surgery – Surgical Council on Resident Education

### Representatives -Donald Risucci, PbD Barry Mann, MD

The American Board of Surgery (ABS) is an independent, non-profit organization founded in 1937 for the purpose of certifying surgeons who have met a defined standard of education, training and knowledge. The ASE is an organizational member of Surgical Council on Resident Education (SCORE) which is working to develop a new curriculum for general surgery training in the United States.

# Philip J. Wolfson Outstanding Teacher Award

The Outstanding Teacher Award was renamed in 2008 to honor the memory of Philip J. Wolfson, MD, a distinguished physician, surgeon, educator, colleague and friend whose untimely passing during his tenure as President of the ASE was a great loss to all those he inspired and to the academic and surgical communities at large. Dr. Wolfson's dedication and passion to teaching and training medical students, residents, and young surgeons were recognized throughout his professional career. Dr. Wolfson received the Outstanding Teacher Award in 1999.



To be recognized by an organization of such outstanding and dedicated educators, and to be in the same category as the talented and passionate teachers who have also won this award is humbling. This award, in addition to being a great honor, contributed to my education portfolio and my promotion to Associate Professor of Surgery.

- NANCY SCHINDLER, MD 2007 Philip J. Wolfson Outstanding teacher Award Winner This award is given annually to a maximum of four individuals who are actively involved in surgical education and who are considered by their chair, peers and/or residents/students to be outstanding teachers. Nominees for these awards must possess the

qualities of an outstanding teacher which include: commitment to teaching, expert knowledge, innovation, enthusiasm and stimulation of interest, encouragement of problem solving, ability to provide feedback and effective evaluation, role modeling of professional characteristics, accessibility and openness to new ideas.

### 2009 WINNERS

### Barbara J. Pettitt, MD

#### Emory University

Dr. Pettitt is a pediatric surgeon and has been at Emory School of Medicine for her entire post-fellowship career. She currently serves as the Chief of Pediatric Surgical Services at both Grady Health System and Hughes Spaulding Children's Hospital in Atlanta. She has served as the Surgical Clerkship Director since 2002 and Director of the M4 Surgery Programs since 2004. She has long been active in the ASE, serving on numerous committees in leadership capacities, including the clerkship directors committee, assessment and evaluation, and faculty development. Dr. Pettitt is earning a Masters of Health Professions Education from the University of Illinois at Chicago.

She has been responsible for a number of curricular innovations at Emory including a Surgical Anatomy and Operative Techniques course for M4 students, Technical and Laparoscopic and Professionalism Skills Labs for M3s, and some uniquely named innovations including The Emory Board, a low tech tube and board trainer for teaching the Seldinger technique for central venous catheter insertion, and a manual called *The Care and Feeding of Your M3*, a house officers guide to 3rd year medical students.

Dr. Pettitt's enthusiasm for and gratification from teaching medical students and interns is further highlighted by excerpts from her personal statement of education philosophy... "I walk from student to student, observing, correcting, and offering suggestions [to junior clerks on tying knots]. These are medical students and by nature perfectionists. They are uncomfortable with the unfamiliar awkwardness many of them feel learning this new skill and need encouragement to slow down, analyze their movements, and accept that it will require practice to become better."

"I have spent 23 years watching hands. The hands of medical students learning basic skills like suturing and knot-tying, the hands of interns performing their first appendectomy, the hands of surgical residents doing a bowel resection. I am a teacher of novices and while I enjoy polishing the skills of the more advanced learner, I am most delighted when, after breaking down a movement or procedure into its component parts and patiently watching an intern or student struggle to master it, the "light bulb" comes on, and that magnificent smile of accomplishment spreads across his or her face. It is these excited moments for which a teacher lives."

Dr. Pettitt's students respond similarly to her passion, dedication and nurturing in their evaluations...

"Dr Pettitt's lectures were all awesome; [We] can't think of a better director for such a challenging clerkship; She's fair, kind and an amazing teacher; Thank you for taking care of us; Dr Pettitt was fantastic as usual; Thanks to Dr. Pettitt for having our back."



Barbara J. Pettitt, MD



Rebekah Naylor, MD



Rebecca Minter, MD

### **Rebekah Naylor, MD**

#### University of Texas Southwestern

Dr. Naylor was the first woman to graduate from the general surgery program at University of Texas Southwestern and Parkland. Upon completion of her training, she spent 28 years of her professional career in missionary medicine and surgery in Bangalore, India. During her time in India, she developed numerous programs including a residential nutrition rehabilitation program for mothers and children and residency training programs in Surgery, Medicine, Pediatrics and Obstetrics and Gynecology, all of which became accredited programs. Dr. Naylor demonstrated a unique and rich talent for teaching in a variety of settings unusual to most surgeons. She educated a great deal of individuals, including allied health workers who could continue to administer her programs and make them selfsustaining. She also established a three-year nursing school which bears her name.

In 2002 Dr. Navlor returned to Dallas, where she serves as Director of Student Education. Her chairman notes that despite her part-time status, "her accomplishments with education exceed those of full-time directors. Somehow she packs an incredible amount of student program administration, direct student teaching and student mentoring into the days she is present at the medical center." She also serves as editor and contributor to the web-based student curriculum The Virtual Patient which has now been disseminated to 11 other medical schools. She has developed a 4th year elective for students entering surgery called Preparation for Surgical Internship and a second elective called Surgery in a Developing Country. She has received numerous medical student teaching awards and was recognized by the chief

residents at University of Texas Southwestern with a special award for teaching and mentoring.

In her statement of education philosophy she writes, "From earliest childhood I understood the importance of sharing what I had with others. As I matured, I realized that one of the greatest things I could share was knowledge. In so doing, I was equipping others to lead productive lives marked by personal fulfillment and benefit to society."

### **Rebecca Minter, MD**

#### University of Michigan-Ann Arbor

Dr. Minter is an Assistant Professor of Surgery (Section of General Surgery) and Medical Education at the University of Michigan. She serves as 3rd year student clerkship director, has developed proficiency-based skills curricula for both laparoscopic and open techniques, developed and administers an M3 skills curriculum, and has developed a professional development seminar for surgical residents.

While her work and accomplishments at the University of Michigan School of Medicine are numerous, especially noteworthy is her dedication and commitment to national organizations that develop, administer and certify graduate training. From the time she was a surgical resident she served on numerous committees for the AAMC and ACGME. She has worked for the National Board of Medical Examiners USMLE Step 1 Committee, the American Board of Surgery ABSITE Committee and currently serves on several committees for the American College of Surgeons, including chair of the recently formed ACS/APDS/ASE Entering Surgery Resident Preparatory Curriculum Committee.

Dr. Minter's statement of education philosophy highlights teaching as a partnership and stresses high expectations for herself and for the student or resident...

"I always felt that I learn as much from my students and residents as they hopefully learn from me."

"In the end, we have been successful if the students and residents that we train are individuals that we would want caring for our loved ones and ourselves in the future."

Dr. Minter's commitment to educating her students and residents is echoed by their evaluations of her...

"Dr. Minter is great! She made more of an effort to take time out and teach us than any other attending I've encountered thus far. She's a wonderful teacher. She explains things very clearly and really got me to think. She is extremely friendly and approachable."

"Dr. Minter is an incredible educator and was always very fair in the ways that she appreciated student input and worked to create an effective learning environment for students. I really appreciated the constructive feedback that she gave as well as the genuine interest she took in me as a learner."

"She demonstrates that you really can balance a real life and a surgical career overall, she's a very persuasive argument to go into surgery!"

### Previous Winners of the Outstanding Teaching Award

#### 1996

Kimberly Ephgrave, MD William Rambo, MD Michael Stone, MD Gerald Zelenock, MD

#### 1997

Karen Deveney, MD John Millili, MD Israel Penn, MD

#### 1998

Christopher Baker, MD Sean Harbison, MD Barry Mann, MD

#### 1999

James McCoy, MD Philip Wolfson, MD Mary Alice Helikson, MD

#### 2000

Steven Evans, MD Ernest Grable, MD John R. Potts, III, MD Thomas Berne, MD

#### 2001

Lisa Coletti, MD Virginia Eddy, MD Arnis Freiberg, MD Thomas Read, MD

#### 2002

Thomas Lynch, MD Keith N. Milliken, MD Jay Prystowsky, MD John Weigelt, MD

#### 2003

Kenneth Burchard, MD Andre Campbell, MD Hilary Sanfey, MD Anne Mancino, MD

#### 2004

Robert Bower, MD James McKinsey, MD Philip Redlich, MD, PhD Pamela Rowland, PhD

#### 2005

Mary Klingensmith, MD Andrew MacNeily, MD John Mellinger, MD Sherry Wren, MD

#### 2006

Karen Brasel, MD Myriam Curet, MD Paul J. Schenarts, MD David Soybel, MD

#### 2007

Paul Belliveau, MD Michael Cahalane, MD D. Scott Lind, MD Sarkis Meterissian, MD Nancy Schindler, MD

#### 2008

Paul Gauger, MD Kimberly Lomis, MD Ravi Sidhu, MD, MEd Lorin Whittaker, Jr, MD

# Distinguished Educator Award

The Distinguished Educator Award is given to an individual who has demonstrated excellence as a master educator. In addition to recognized skills as an excellent teacher, nominees for this

For me personally, the award was particularly meaningful with the struggle for credibility for educational research I had experienced during my early years as an academic surgeon. This award provided validation for those efforts and has served in the years since as inspiration to continue the quest to improve the quality of the educational experience for students and residents in training.

- GARY DUNNINGTON, MD 1999 DISTINGUISHED EDUCATOR AWARD WINNER award have a portfolio with clear documentation of significant contributions in: educational leadership, curriculum development, education research and participation in national education meetings, educational

publications in peer review journals, creation of innovative teaching programs and the development of CME programs, educational software and/or videotapes.

### Previous Winners of the Distinguished Educator Award

1996 – Richard Reznick, MD 1997 – Ajit Sachdeva, MD 1998 – Richard Schwartz, MD 1999 – Gary Dunnington, MD 2000 – Merril Dayton, MD 2001 – Debra DaRosa, PhD 2001 – Richard Dean, MD 2002 – Richard Spence, MD 2003 – Glenn Regehr, PhD 2004 – L.D. Britt, MD 2005 – Hollis Merrick, MD 2006 – Stephen Evans, MD

# Haemonetics Best Paper Award

A single podium presentation is selected each year for this recognition. All of the members of the Program Committee independently evaluate the quality of both the presentation and the scientific rigor of the work. This award is underwritten by an endowment from Haemonetics Corporation.

#### 2009 WINNER

### Melina Vassiliou, MD

Dartmouth-Hitchcock Medical Center

### How Should We Establish the Clinical Case Numbers Required to Achieve Proficiency in Flexible Endoscopy?

Melina C Vassiliou MD, Benjamin K Poulose MD, Pepa A Kaneva MSc, Brian J Dunkin MD, Jeffrey M Marks MD, Riadh Sadik MD, Gideon Sroka MD, Stephen D Pooler MD, Klaus Thaler MD, Gina L Adrales MD, Jeffrey W Hazey MD, Jenifer R Lightdale MD, John D Mellinger MD, Gerald M Fried MD

**Introduction:** The Residency Review Committee (RRC) mandates that surgical residents perform 35 upper endoscopies and 50 colonoscopies during their training. Alternatively, gastroenterology fellows are required to do 130 and 140 cases, respectively. The purpose of this work is to challenge the current case number recommendations and methods by which proficiency in flexible endoscopy is determined. GAGES (Global Assessment of Gastrointestinal Endoscopic Skills) was developed to objectively measure endoscopic skills during clinical procedures. GAGES upper endoscopy (UE) and colonoscopy (C) are 5-point Likert scales created by experts. Pilot data have shown GAGES to meet high standards of reliability and validity.

Methods: GAGES was used to assess 114 flexible endoscopic procedures (65 UE, 49 C) performed by surgeons, gastroenterologists and trainees at 9 different institutions. Demographic information and self-reported procedure numbers were recorded. Mean scores for endoscopists who had performed less than the minimum number (Novices) of procedures established by the RRC for each specialty were compared to the groups who had performed more than the required cases (Experienced). Case numbers were then plotted against GAGES assessments to establish where scores begin to plateau. For each of the means 95% confidence intervals (CI) were calculated. Scores were compared for the Novice and Experienced at the different cut-off levels using the Student's t-test.



Melina Vassiliou, MD

#### **Previous Best Paper Award Winners**

- **1991 Gary Dunnington, MD** Needs Assessment of How and What Should be Taught in the Operating Room.
- **1992 Joelle Lescop, MD** Use of a Large Scale OSCE in the Quebec Licensing Examination: What Can Surgical Educators Learn from the Experience?
- **1993 Gary Dunnington, MD** A Pilot Experience with Competency-based Clinical Skills Assessment in a Surgical Clerkship.
- **1994 Margaret Dunn, MD** The Assessment of a Surgical Pattern Recognition Examination.
- **1995 Nancy Baxter, MD** The Choice of Surgery as a Career: The Impact of Gender.
- **1996 Carol Hutchison, MD** The Effectiveness of a Focused Technical Skills Training Course for First Year Surgical Residents.
- **1997 Barry Mann, MD** Whipple Origami: Use of a Paper-Cut as an Adjunct to Teaching the Whipple Procedure by Video.
- **1998 Dimitri Anastakis, MD** Transfer of Technical Skills Training from the Bench Model to the Human Model.
- **1999 Steven Fukuchi, MD** The Oncology Game: Teaching a Multidisciplinary Approach to Cancer Treatment During Surgical Clerkship via an Interactive Board Game.
- 2000 Lorelei Lingard, PhD Team Communication in the Operating Room: An Observational Study of Sites of Tension.
- 2000 William Miles, MD Assessment of Residency Candidates: The Role of Blinded Interviews.

- 2000 Daniel Scott, MD Laparoscopic Skills Training: Quantifying the Learning Curve.
- 2001 Lorelei Lingard, PhD Communicative Tension in the Operating Room: Team Members' Differing Perceptions of Sources, Characteristics, Effects and Resolutions.
- 2001 Barry Mann, MD Game-based Learning: A Computer Game Format Enhances Student Understanding of Surgical Management Algorithms.
- 2002 Dimitri Anastakis, MD Evaluating the Effectiveness of a Two-year Curriculum in a Surgical Skills Centre.
- 2003 Laura Musselman, MD Do the Ends Justify the Means? Educational Rationalizations of Intimidation and Harassment in Surgery.
- 2004 Paul J. Schenarts, MD Does Resident Continuity of Care Matter? The Effect of a Nightfloat Coverage Scheme on Morbidity and Mortality at a Regional Level 1 Trauma Center.
- 2005 Cordula Wetzel, Dipl-Psych The Effect of Stress on Surgical Performance.

2006 – Sarkis Meterissian, MD Is the Script-Concordance Test a Valid Instrument for Assessment of Intra-operative Decisionmaking Skills?

- 2007 Mario Leyba, MD The Effect of Fatigue on Cognitive and Psychomotor Skills of Surgical Residents.
- 2008 Rishi Balkissoon Lost in Translation: Unfolding Medical Students' Misconceptions of How to Perform the Clinical Digital Rectal Examination.

**Results:** Upper endoscopy mean scores for Novice and Experienced endoscopists, when the cut-off was set at 35, were 14.3 (n= 25; 95% CI 12.8-15.8) and 18.5 (n= 45; 18.0-19.0) compared to 15.7(n=43; 14.7-16.8) and 18.9 (n=27; 18.5-19.5) when the limit was 130. Similarly, for colonoscopy, the GAGES scores were 12.0 (Novice, n=27; 10.4-13.7) and 18.8 (Experienced, n=26; 18.3-19.3) at a 50case minimum and 12.5 (Novice, n=29; 10.8-14.2) and 18.8 (Experienced, n=24; 18.3-19.4) for 140 cases. Interestingly, the curve of case numbers plotted against GAGES plateaued at 50 for upper endoscopy and 100 cases for colonoscopy.

**Conclusions:** The current surgical and gastroenterology case number recommendations for upper endoscopy and colonoscopy may not represent the experience needed to achieve proficiency. GAGES scores could help define proficiency in basic endoscopy, and where the scores plateau might be a more accurate point of reference to guide training programs and case requirements.

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# The J. Roland Folse Invited Lectureship in Surgical Education

Individuals are invited to give this lecture based on substantial contributions in their field.



The 2009 lecturer was Ara Tekian, PhD, MHPE, who delivered a presentation entitled, "Enhancing Patient Safety Through the Use of Simulation."

#### **Previous Folse Lecturers**

- **1994 Walter Pories, MD** It's Time We Trained Doctors for the Next Century, Not the Last One
- **1995 Lawrence Weed, MD** New Premises and New Tools for Medical Education
- 1996 Mark Roberts, PhD The Future of Medical Education
- 1997 Takeo Kanade, PhD Robotics and Computer-Assisted Medical Interventions: Opportunities and Issues
- **1998 Ronald Tompkins, MD** Managed Care and Surgical Education: <u>Are</u> They Compatible?
- **1999 Glenn Steele, Jr, MD, PhD** Developing Skills for Managing the Business of Surgical Education
- 2000 Atul Gawande, MD Creating the Educated Surgeon: Problems and Possibilities
- 2001 Brian Castellani, PhD The Development of Professionalism: Curriculum Matters
- 2002 Halie Debas, MD Surgical Education: Trajectory of Concern
- 2003 Edward Verrier, MD The Use of Hybrid CD Internet-Based Curriculum in Surgical Education
- 2004 Sherman Hines Seeing Beyond the Obvious
- 2005 Harlan Coben Writing the Novel and How It Has Nothing To Do with Medicine
- 2006 Sir Ara Darzi, MD Technological Advances in Surgical Education
- 2007 Leonard Marcus, PhD Meta-Leadership for Surgical Educators
- 2008 Linda de Cossart, ChM Safer Patient Care: Attending to the Invisible Elements of Clinical Practice

# **ASE Financial Statement**

### Association for Surgical Education Statement of Financial Position

### Year Ending June 30, 2009

#### **CURRENT ASSETS**

Cash and Cash Equivalents	\$158,696
Investments	\$103,559
Accounts Receivable	\$73,377
TOTAL CURRENT ASSETS	\$335,632
TOTAL ASSETS	\$335,632
CURRENT LIABILITIES	
Accounts Payable and Accrued Expenses	\$7,821
UNRESTRICTED NET ASSETS	\$327,811
TOTAL LIABILITIES AND UNRESTRICTED	
NET ASSETS	\$335,632

Unaudited

### Association for Surgical Education Statement of Revenue and Expenses

### Year Ending June 30, 2009

#### REVENUE

Meetings	\$177,073
Membership Dues	\$163,139
Clearinghouse Sales	\$6,924
Other Revenue	\$12,407
Interest Income	\$898
TOTAL REVENUE	\$360,441
EXPENSES	
Meetings	\$112,177
Committees	\$5,395
Publications	\$34,999
Administration	\$183,091
SERF Program	\$10,000
Foundation Transfer	\$2,000
TOTAL EXPENSES	\$347,662
CHANGE IN NET ASSETS	\$12,779
Net Assets, Beginning of Year	\$322,853
Net Assets, End of Year	\$335,632

Unaudited

# **ASE Foundation**

# Profile

The ASE Foundation is a 501-(c)-3 non-profit organization that was established in 1993. The Foundation was established for the purpose of raising funds to support ASE programs. The Foundation's fundraising efforts promote giving by members, corporations and institutions. The Foundation presently provides support for the Phillip J. Wolfson Teaching and Distinguished Educator Awards, Annual Haemonetics Best Paper Award, Center for Excellence in Surgical Education, Research and Training (CESERT) Grants and Surgical Education Research Fellowship (SERF) Program. The ASE Foundation is governed by an independent Board of Directors.

### ASE Foundation Board of Directors

#### OFFICERS

Chairman - Richard Reznick, MD President - Hollis Merrick, MD Vice President - Daniel Dempsey, MD Secretary - Donald Jacobs, MD Treasurer - Nicholas Lang, MD

#### DIRECTORS

Merril Dayton, MD Armour Forse, MD Gerald Fried, MD Linnea Hauge, PhD Sean Harbison, MD Mark Hochberg, MD Gerald Isenberg, MD Daniel Jones, MD Susan Kepner, MEd James Korndorffer, MD Barry Mann, MD Frank Price Katherine Price Donald Risucci, PhD David Rogers, MD, MHPE Hilary Sanfey, MD Daniel Scott, MD

# Center for Excellence in Surgical Education, Research and Training Grants

The Center for Excellence in Surgical Education, Research and Training (CESERT) Grants Program was established in 1999. It is competitive, peer-reviewed, and targets innovation intended to enhance the effectiveness of surgical education and training.



Professionally, this grant has helped me in my academic pursuits but, more importantly from a personal perspective, it taught me that being persistent and receptive to provided feedback pays off at the end. Overall, I am grateful to the ASE for allowing me to conduct, through the CESERT grant process, a well thought out and designed study that is likely to impact significantly surgical skills training.

- DIMITRIOS STEFANIDIS, MD, PHD

The Grants Review Committee consists of ASE and ASE Foundation members, outside experts and the Chair of the ASE Educational Research Committee. Applicants must be members of the ASE, or if members of another national surgical organization, they must

be mentored or endorsed by ASE members. All grant dollars directly support educational research, and the ASE and the ASE Foundation absorb all administrative overhead costs associated with the program. The impact of this program has been substantial resulting in approximately 46 national presentations and 33 peerreviewed publications.

# Recipients of CESERT Grants

• Deepak Dath, MD, Helen MacRae, MD, MA – Are Advanced Laparoscopic Skills for Senior Residents Learned in a Short Training Course and Transferred to Operations? (\$24,821)

• George Velmahos, MD, PhD – Cognitive Task Analysis for Teaching Technical Skills in an Inanimate Surgical Skills Laboratory. (\$41,280)

• Helen MacRae, MD, MA, Mylene Ward, MD - How Accurate is Self-Assessment of Technical Skill, and Does Self-Assessment Improve by Evaluating Peers' Performance? (\$22,139)

Lorelei Lingard, PhD, Richard
Reznick, MD, MEd, Glenn Regehr, PhD,
Sherry Espin, MEd, Isabella DeVito, MD
Developing Research-based Video
Cases to Teach Novices to Recognize,
Interpret, and Resolve Tension in OR
Team Communication: A Multidisciplinary
Education Initiative. (\$30,427)

■ Jeffrey Cadeddu, MD, Daniel Jones, MD, George Kondraske, PhD – Human Performance Capacity Profiles and Their Relationship to Laparoscopic Surgical Performance: Evaluation of Medical Students, Surgical Residents and Staff Physicians. (\$86,754)

 Debra DaRosa, PhD, David Rogers, MD, Reed Williams, PhD, Linnea Hauge, PhD, Heather Sherman, MPH, Kenric Murayama, MD, Keith Millikan, MD, Alex Nagle, MD, Gary Dunnington, MD
Development and Evaluation of a Model for Teaching Surgical Skills and Judgment. (\$76,737)

• Kyle Wanzel, MD, Dimitri Anastakis, MD, Stanley Hamstra, PhD, David Mikulis, MD, Mary-Pat McAndrews, PhD - Cortical Mapping of Surgical Residents on Tasks of Surgical Skills and Mental Rotations. (\$17,411) Reed Williams, PhD, Cathy
Schwind, MS, Ross Silverman, JD, Gary
Dunnington, MD, John Fortune, MD,
John Sutyak, MD, Georges Azzie, MD,
Robert Bower, MD, Karen Horvath, MD,
John Potts III, MD, Erik Van Eaton, MD,
Margaret Boehler, MS – A Study of
Information Transfer and
Communication Practices Among
Surgeons When Transferring
Responsibility for Patient Care.
(\$75,103)

#### Roger Kneebone, MD, PhD,

Krishna Moorthy, MBBS, MS, Debra Nestel, PhD, Charles Vincent, PhD, Jane Kidd, PhD, Sir Ara Darzi, MD, Cordula Wetzel, Dipl-Psych – Recognizing the Affective Component within Surgical Learning: A Safety-Centred Intervention. (\$97,000)

 Tiffany Grunwald, MD, MSEd, Kali Luker, BA, Maura Sullivan, PhD, MSN, Sarah Peyre, MSEd, Randy Sherman, MD – The Use of a Cognitive Task Analysis-Based Multimedia Program to Teach Surgical Decision Making in Flexor Tendon Repair. (\$31,011)

Sarkis Meterissian, MD, Bernard Charlin, MD, PhD – Is the Script-Concordance Test a Valid Instrument for Assessment of Intra-operative Decision Making Skills? (\$20,100)

 Rebecca Minter, MD, Paul Gauger, MD – Computer-Aided Laparoscopic Simulators for Training Surgical Residents. (\$50,000)

Alex Levin, MD, Martin McKneally, MD, PhD, Ross Upshur, MD, MA, MSc – The Formal and Informal Curriculum in Surgical Residency Bioethics Education. (\$35,708) **Ravindar Sidhu, MD, MEd,** Rose Hatala, MD, MSC, Marc Broudo, George Pachev, MD, Eric Webber, MD, Gordon Page, MD – Determining the Utility of the Mini-Clinical Evaluation Exercise as a Competency Assessment Tool of Surgical Residents. (\$34,033)

Dimitrios Stefanidis, MD, PhD,
B. Todd Heniford, MD, Mark W. Scerbo,
PhD, Warren D. Smith, PhD, William
Hope, MD, Ramon Berguer, MD, Daniel
J. Scott, MD – Applying Automaticity
Theory to Simulator Training to
Enhance Operative Performance.
(\$30,720)

**Jeffrey Chipman, MD,** Connie Schmitz, PhD – Evaluating the Reliability and Validity of the Family Conference OSCE Across Multiple Training Sites. (\$28,508)

**David Rogers, MD, MHPE**, Lorelei Lingard, PhD, Sherry Espin, PhD, Margaret Boehler, MSN, Reed Williams, PhD – An Investigation of Intraoperative Conflict Management of Surgeons. (\$33,739)

**D. Scott Lind, MD,** Adeline M. Deladisma, MD, MPH – The Use of a Virtual Character-Enhanced Simulator to Teach and Assess Breast History and Examination Skills. (\$75,567)

Nick Sevdalis, PhD, Roger Kneebone, MD, PhD, Fernando Bello, PhD, Rajesh Aggarwal, MD – Stress Management Training for Surgeons: Developing a Simulation-based Intervention. (\$50,000)

# Ethicon Surgical Education Research Fellowship

The Ethicon Surgical Education Research Fellowship (SERF) Program is one of the Foundation's most successful initiatives. This one year home-site Fellowship is limited to 16 highly motivated surgical educators with an original educational research project



The Surgical Education Research Fellowship (SERF) not only allowed me to gain more insight into surgical education but to develop relationships with other education-oriented surgeons. - JEFFERY CHIPMAN, MD who have met a competitive and rigorous application and review process. Each Fellow participates in a carefully structured didactic educational program that includes

attendance of two seminars and the SERF Forum and is assigned an expert in the field of study to serve as mentor/advisor. This program is led by Kimberly Schenarts, PhD, an ASE Past-President.

### **SERF Graduates**

 Alivia K. Cetas, MD – Axillary Node Surgery is Compromised by Sentinel Lymph Node Biopsy and Resident Work Hour Restrictions.

**Jeffrey Chipman, MD** – A Multi-Institutional Study of the Family Conference OSCE: A Reliable Assessment of Professionalism and Communication.

**Jeannette Capella, MD** – Validation of a Trauma Team Performance Observation Tool.

**Joseph Iocono, MD** – Use of a Middle Fidelity Model to Teach Laparoscopic Pyloromyotomy.

**Debra Kuhls**, **MD** – Anatomically-Based Surgery for Trauma (ABST): A Pilot Study to Teach Surgical Exposures.

 Alan Ladd, MD – Early Outcomes from a Pre-Internship Surgery Preparatory Elective in Medical School.

**Tiffany Lasky, DO** – Teaching Principles of Mechanical Ventilation to Medical Students Using High and Low Fidelity Simulation.

**Rich Parent, MD** – A Pilot Study of Simulation versus Lecture for Training Surgical Residents in Perioperative Patient Safety.

 Mary Santos, MD – Morbidity and Mortality (M&M) Case Presentations: Measuring Resident Competency.

Mohsen Shabahang, MD – Does Peer Assessment Contribute to the Evaluation of Professionalism and Communications Among Medical Students?

**Rebecca McAlister, MD** – Predictors of Obstetrics and Gynecology (OBGYN) Career Choice Among Contemporary U.S. Medical Graduates: Have They Changed Over time?

• Celeste Hollands, MD – Surgery Interest Groups and Students' Perception of Surgical Lifestyle.

• Yolanda Becker, MD – Effect of Physician Assistants on Resident Education.

Sherry Wren, MD – Application of a Minimum Standard: Does it Influence the Performance of Elite Medical Students?

**Daniel Jones, MD** – Videotrainers Improve Laparoscopic Operative Performance.

Mary Klingensmith, MD – Is Education a Viable Route to Academic Promotion for Women Surgeons?

**• Kathryn Mendoza, PhD** – Time Away From Work: What Do Surgical Residents Do?

• Christina Rehm, MD - Which Remedial Programs Are the Most Successful?

• Susan Steinemann, MD – Effect of a Novel Curriculum on Informed Consent for Bedside Procedures.

**Paul Schenarts, MD** – The Effect of a Rotating Night-Float Coverage Scheme on Preventable and Potentially Presentable Morbidity at a Level I Trauma Center.

• Vijay K. Maker, MD - The Good Surgeon.

• Amalia Cochran, MD, MA – Mentoring and the Surgical Clerkship: Are We Having an Impact?

**Daniel Birch, MD** – A Needs Assessment Study for Undergraduate Surgery in Preparation for Curriculum Revision.

• Anne Mancino, MD - Developing a Systematic Approach for Evaluation of Lecture Content.

John Simenstad, MD – Teaching Clinical Decision Making in a Changing Health Care Market.

John Millilli, MD – Can Bayes Theorem be Adapted to Provide Feedback on Surgeons' Operative Performance? **David Rogers, MD** – Computer Assisted Learning vs. a Lecture and Feedback Seminar for Teaching Basic Surgical Technical Skills.

• Kristine Leeper, RN, MS – A Delphi Approach to Determine Measurable Criteria for Medical Student Education in Basic Aseptic Technique.

**Dan Poenaru, MD** – Innovation in the Surgical Clerkship: Removing the Requirement for General Surgery.

**Barry Mann, MD** – Screening to the Converted: An Educational Intervention in Selected African-American Churches Finds Parishioners Well Screened.

Dorothy Andriole, MD – Communication
Apprehension: Clinical Clerkship Performance and
Specialty Choice.

• Myriam Curet, MD – University and Practice-Based Physicians' Perspectives on the Content of a Surgical Curriculum.

Sean Harbison, MD – Faculty and Residents Opinions Regarding the Role of Morbidity and Mortality Conferences.

Jay Prystowsky, MD – Construct Validity and Instruction Effectiveness of a Virtual Reality Model for I.V. Catheter Placement.

**Joel Teichman, MD** – Urological Needs Assessment for Primary Care Practice.

 Will Miles, MD – Evaluation of Blinded vs.
Un-Blinded Interviews on Rank Order of Surgical Resident Applicants: Two Institutions' Analysis.

• Paul Dabrowski, MD – Residents' Reported Trauma Experience vs. Actual Experience: An Accurate Measure?

• Kimberly Nagy, MD – Evaluating the Experiences of Medical Students Completing an Elective in Trauma Surgery.

**Edward Y. Sako, MD** – Factors Influencing Outcome on the American Board of Surgery Certifying Exam.

**Patricia C. Bergen, MD** – Documentation Characteristics of the High Risk Resident.

### 2009-10 Surgical Education Research Fellows

Sonal Arora, MD Greg Gallina, MD Jonathan Geffen, MD Iman Ghaderi, MD Jon Gould, MD Nick Hamilton, MD Shane Lewis, MD Danny Little, MD Nell Maloney, MD Erica Mitchell, MD Brook Nelson, MD Dara O'Keeffe, MD Evan Ong, MD Ajita Prabhu, MD Julia Shelton, MD Hannah Zimmerman, MD

# **ASE Foundation Financial Statement**

### ASE Foundation Statement of Financial Position Year Ending June 30, 2009

### ASE Foundation Statement of Revenue and Expenses Year Ending June 30, 2009

CURRENT ASSETS			Unrestricted	Temporarily Restricted	Permanently Restricted	TOTAL
Cash and Cash Equivalents	\$76,529	REVENUE		Restricted	neonicea	
Investments	\$38,638	Contributions	\$50,917	\$12,500	\$ O	\$63,417
TOTAL CURRENT ASSETS	\$115,167	SERF Program	\$24,104	+1=,900	+ 0	\$24,104
		Investment Income	\$2,592	\$114	\$1,564	\$4,270
DECTRICTED ACCETS		Other Income	\$2,585	\$7,776	1	\$10,361
RESTRICTED ASSETS	¢0 421	Unrealized Loss	, ,,			,, , , , , , , , , , , , , , , , ,
Cash and Cash Equivalents	\$9,421	on Investments	\$(15,970)			\$(15,970)
Investments	\$71,161	Net Assets Released from Restrictions	\$69,879	\$(68,315)	\$(1,564)	\$ O
TOTAL RESTRICTED ASSETS	\$80,582	TOTAL REVENUE	\$134,107	\$(47,925)	\$ 0	\$86,182
TOTAL ASSETS	\$195,749	<b>EXPENSES</b> Program				
Unrestricted Net Assets	\$115,167	SERF Program	\$49,104			\$49,104
Temporarily Restricted	\$30,582	CESERT Grants	\$66,667			\$66,667
Permanently Restricted	\$50,000	Other Program Expen	ses \$11,147			\$11,147
TOTAL NET ASSETS	\$195,749	Total Program Expens	es \$126,918	\$ 0		\$126,918
Unaudited		Overhead	\$1,800	\$ O		\$1,800
		Total Management and General Expenses	\$ 1,800		\$1,800	
		TOTAL EXPENSES	\$128,718	<b>\$</b> O	\$ O	\$128,718
		CHANGE IN NET ASSE	ETS \$5,389	\$(47,925)	\$ 0	\$ (42,536)
		Net Assets, Beginning of Year	\$136,341	\$51,944	\$50,000	\$238,285
		Net Assets, End of Year	\$141,730	\$4,019	\$50,000	\$195,749
		TT. 11/ 1				

Unaudited

# **ASE Foundation Donors**

The ASE Foundation relies on gifts from individuals, corporations and institutions to support its surgical education programs. The ASE Foundation gratefully acknowledges these gifts given during the most recent fiscal year (July 1, 2008 - June 30, 2009).

#### Individuals

Helen Amoriggi, MD Frank Baciewicz, MD Linda Barney, MD Yolanda Becker, MD Patricia Bergen, MD John Bohnen, MD Karen Borman, MD Mary Burda, MD Alfred Chahine, MD Arthur Cooper, MD Ms. Claudia Davis Merril Dayton, MD Daniel Dempsey, MD Serge Dube, MD Gary Dunnington, MD Nabil Ebraheim, MD Jill Endres, MD Rebecca Evangelista, MD Virginia Fraser, MD Paul Gauger, MD Amy Goldberg, MD Michael Goldfarb, MD Mark Hardy, MD Alden Harken, MD James Hebert, MD Mark Hochberg, MD Mary Ann Hopkins, MD

Karen Horvath, MD William Hulbert, MD Hubert Huebl, MD Fernando Joglar, MD Mary Klingensmith, MD Ms. Christie Legler Keith Lillemoe, MD D. Scott Lind, MD Fred Luchette, MD Thomas Lynch, MD David McClusky, MD Hollis Merrick, MD Rebecca Minter, MD John Murnaghan, MD Robert Nesbit, MD Michael Nussbaum, MD Nicholas Osborne, MD David Page, MD Anthony Panos, MD Ms. Rhonda Peavy Ms. Diane Poskus Mr. & Mrs. Frank & **Katherine** Price Richard Prinz, MD Carla Pugh, MD, PhD H. David Reines, MD James Rucinski, MD Hilary Sanfey, MD Mary Santos, MD

Paul Schenarts, MD Kim Schenarts, PhD Constance Schmitz, PhD Mohsen Shabahang, MD Norman Snow, MD Richard Spence, MD Susan Steinemann, MD Robyn Stewart, MD Gustavo Stringel, MD Lorin Whittaker, Jr., MD Warren Widmann, MD Clifford Yaffe, MD

#### Corporate

Ethicon Endo-Surgery, Inc. Covidien, Inc. Medical Education Technologies, Inc. Stryker Corporation

# Highlights from the Annual Meetings



From left, John Murnaghan, Debbie Murnaghan and Walter Pofahl enjoy the ASE banquet.



Philip Redlich is congratulated by Karen Brasel, Amy Pierre and Tracy Milkowski (L-R).



From left, Dan Jones, Greg Modrall, Patricia Bergen and Rebekah Naylor enjoy the reception.



From left, Nick Sevdalis, Michael Edwards and Dan Jones enjoy the ASE banquet.



Nick Lang (second from right) congratulates (L-R) Lisa Coletti, Arnis Freiberg, Virginia Eddy and Thomas Read on receiving the ASE Outstanding Teacher Award.



Barry Mann, Hilary Sanfey, Kathleen Liscum, Susan Kaiser, Phil Wolfson, Chris Yarman and Chris Brandt (L-R) enjoy the ASE Banquet.

# Highlights from the Annual Meetings



Patricia Numann, Hilary Sanfey and Rebecca Britt (L-R) at the ASE reception.







John Tarpley at the ASE Banquet.

Tilda and Barry Mann, Claire and Richard Spence, Pam Rowland and Alan Marr (L-R) at the ASE reception.



Norman Snow and Kim Schenarts at the ASE reception.

From left, SIU Members Gary Dunnington, Maggie Boehler, David Rogers and Cathy Schwind at the ASE reception.

# Highlights from the Annual Meetings



Linda Barney congratulates Roger Kneebone on behalf of Cordula Wetzel receiving the Haemonetics Best Paper Award.

Northwestern Members Julie Corcoran, Debra DaRosa, Joseph Schneider, Megan Weltschaff (top, L-R) John Schindler and Nancy Schindler gather for a



Richard Wait and Nicholas Coe catch up at the ASE Reception.



Philip J. Wolfson Teaching Award Recipients Lorin Whittaker, Kimberly Lomis, Ravi Sidhu and Paul Gauger (L-R).



Mary Klingensmith presents at the "Thinking Out of the Box" Luncheon.



Sara Kim, Aaron Jensen and Hugh Foy at the ASE Banquet.



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