From the President

The Mission of the FSF: A Challenge Worth Meeting

For more than 15 years, an informal and unplanned coalition of hospitals, surgeon practices, and industry has funded fellowship training in non-ACGME accredited fellowship programs. For the past four years, funding from those sources for those fellowships has been funneled through the Foundation for Surgical Fellowships. Although the initial focus of these fellowships was minimally invasive surgery (MIS), the non-ACGME accredited fellowships now provide expert training in many types of complex surgery including hepato-pancreatic and biliary surgery, bariatric and metabolic surgery, colorectal surgery, noncardiac thoracic surgery, flexible surgical endoscopy, as well as other types of complex gastrointestinal surgery. With the exception of colorectal and noncardiac thoracic surgery, advanced training in these types of surgical care is available only through these non-ACGME accredited fellowships.

The future availability of high-quality, complex surgical care throughout the U.S. will be dependent on sustaining these fellowships. Despite the training provided by these fellowships, some forms of complex surgical care are still not available to many patients. For example, we know that MIS is underutilized in many hospitals. A study published in the British Medical Journal (July 2014) by a team of researchers from Johns Hopkins University found that of the 1,000 U.S. hospitals surveyed, MIS procedures were not offered as an option to hundreds of thousands of patients, at times because the surgeons had not received training for those complex surgical procedures. Sustaining fellowship training for complex surgical care will increase the availability of this care to more patients.

The FSF provides essential financial support for sustaining these non-ACGME accredited fellowships in which surgeons acquire the expertise to deliver complex surgical care. Support by industry through the FSF to sustain fellowship training has been further reduced for academic year 15/16. Thirty-four fewer fellowships were funded for next year and each funded fellowship received only about half of the funding they received in the previous year. Our industry partners continue to work in a volatile and uncertain economic environment, and the level of support from industry in the future is unclear.

The problem for the FSF and for the non-ACGME accredited fellowships is serious. I am proud to be working with the FSF Board of Directors and the leadership of the Fellowship Council to identify new sources of funding to support this effort but we need your help too. The FSF needs input and support from the surgical community at large to develop new sources of funding that will sustain the critical training currently being received by fellows. Every effort will be made to identify new sources of funding, including health systems and hospitals, foundations, and individuals.

Please consider supporting the Foundation by making a personal donation using this link: http://bit.ly/1sZmTR6. Please introduce the FSF to any individuals or organizations that you believe might also understand the importance of sustaining this type of life saving surgical training that benefits us all in some way, perhaps even as patients ourselves. For more information or to make a donation, contact Colleen Elkins at Colleen@surgicalfellowships.org or 310-424-3332.


What Are You Up To?

The FSF would like you to keep in touch with Fellows and Program Directors.
Have you moved, received professional recognition, been published or presented at a symposium or conference?

It’s simple!

Just email us: info@surgicalfellowships.org
Or post your news on the FSF Facebook page: www.facebook.com/FoundationforSurgicalFellowships
We will post your exciting news in the FSF Newsletter. We look forward to hearing from you!
From Surgeon to University Trustee to FSF Board of Directors

Dr. Kenneth Forde, one of the founding board members of the Foundation for Surgical Fellowships, is an internationally renowned surgeon, researcher and educator who has trained a generation of leaders. He became involved in FSF to help ensure opportunities for surgeons to receive high quality training in minimal access surgery with goals of responsible practice, technical and clinical competence, and encouraging what is best to assure patient safety. He welcomed the opportunity to join a group of surgical educators dedicated to the same ideals.

In 2006, Dr. Forde retired after a distinguished 45-year career as a teacher, researcher and surgeon at the College of Physicians & Surgeons of Columbia University Department of Surgery. He previously served as the Jose M. Ferrer Professor in Surgery at Columbia University’s College of Physicians and Surgeons and Vice Chair for External Affairs in the Department of Surgery at New York Presbyterian Hospital/Columbia Campus. He currently serves as a member of both the Columbia University and the New York Presbyterian Hospital Board of Trustees.

Having reached the highest ranks of his field in gastrointestinal and colorectal surgery, Dr. Forde was a pioneer in the use of endoscopy as a diagnostic and surgical tool. He also helped launch endoscopy as an academic discipline. “I decided from the start that if I’m going to get anything out of what I was doing—I’m in a great academic medical center, after all—that I shouldn’t just do it, but at the same time demonstrate whether it is useful and teach others how to do it.” He and Dr. Gerald Marks were co-founders of SAGES.

He excelled despite enduring the challenges and obstacles of a different era. While trying to pursue his dream of becoming a surgeon during the 1950’s, he received encouragement and support from students and faculty, but he also regularly encountered racism and bigotry. Upon his retirement from Columbia University, a colleague and former student commented, “Very few obviously black Americans had the opportunity to apply, the nerve to compete, or the ability to succeed, but Ken had (and still has) all three.” Dr. Forde is the recipient of many awards and accolades—including the Kenneth A. Forde Professorship in Surgery, established in 1996 to honor his contributions to academic colorectal surgery. Other awards include many for teaching, humanitarianism and service, along with the SAGES Berci Award. He is also co-author of more than 180 scientific papers, as well as many abstracts and editorials.

Dr. Forde was one of the researchers that first recognized the increased prevalence of polyps in first-degree relatives of colon cancer patients. He consequently recommended routine colonoscopy screenings for these high-risk patients. In 2001, his appearance on “The Today Show” with former co-host Katie Couric was instrumental in educating the public about the risks of colon cancer, while also making television history. As the cameras rolled, he performed a colonoscopy on Ms. Couric, who had lost her husband to the disease, while she—and millions of “Today Show” viewers—watched the monitor as he guided the scope through her large intestine. The series helped to demystify the procedure and resulted in a major increase in colon cancer screenings throughout the U.S.

Throughout his career as a researcher and educator, Dr. Forde has maintained his thrill of learning, “It’s a good sign if you get excited by incisions and taking out stitches, as I’ve always told my students and residents.” Eventually, he envisions that the mission of organizations like FSF may evolve, but only if surgical programs would increasingly provide adequate funding for minimal access surgery training as part of a regular postgraduate education. Until then, he remains committed to the importance of FSF’s vital role in supporting the continued availability of quality surgical training opportunities, and the dissemination of critical knowledge in the field of minimal access surgery.
FSF Fellows Testimonial: Matthew Hubbard

As I begin my one-year fellowship in minimally invasive surgery with a focus on bariatrics, I am able to look back on my general surgery residency training in a new light. I have no doubt that I could have entered into a bread and butter general surgery practice as a safe and competent surgeon. My goals, however, like many surgical trainees today, have always been oriented towards a subset of the general surgery practice. My residency training was excellent and well-rounded, but there seem to be too many different branches of general surgery for a trainee to gain enough experience to advance directly to a cutting-edge, academic, sub-specialized position after only five years.

A specialty practice in bariatric surgery offers me the opportunity to meet many of the professional goals I have had since medical school. I will be able to treat a common medical condition that is both debilitating to patients as well as costly to the health care system. Surgery offers a very robust expectation that someone’s life will improve in both duration and quality. Furthermore, all minimally invasive practices, including those focused on bariatrics, will continue to be on the cutting edge of technological advances in the OR, and surgeons trained in these disciplines will continue to be very sought after.

I am thankful the Foundation for Surgical Fellowships recognizes the need for intensive, high-quality fellowships in areas like Bariatric Surgery. I look forward to continuing my technical, professional, and academic improvement under the guidance of Drs. Clements and Williams. Hopefully, the training afforded to me by the FSF will allow me to pass on my surgical experiences to future generations of surgical trainees.

Recognizing Partners: Covidien

Committed to Advancing Training and Adoption

As a Diamond Benefactor and one of the founding sponsors of the Foundation for Surgical Fellowships, Covidien is a dedicated partner of the FSF. Every year Covidien sponsors Fellowships in multiple surgical disciplines, including bariatric, colon, hernia and thoracic.

A leader in minimally invasive surgery (MIS) products, Covidien is a strong advocate for increased physician adoption of MIS techniques. This position fully aligns Covidien with the FSF, as the core of the Foundation’s mission is to foster consistently excellent surgical innovation, with a requirement that fellowship training be primarily minimally invasive.

“The benefits of MIS are clear-cut: better outcomes, lower costs, shorter hospital stays, more rapid recovery, and lower risk for infection,” says Dr. Michael Tarnoff, Covidien’s Chief Medical Officer. “Covidien has a long history of supporting surgical Fellowships through the FSF, and we place great emphasis on the importance of education and training as the first step in physician adoption of MIS.”

Covidien is a global health care leader that understands the challenges faced by providers and their patients and works to address them with innovative medical technology solutions and patient care products. Inspired by patients and caregivers, Covidien’s team of dedicated professionals is privileged to help save and improve lives around the world. Covidien has more than 38,000 employees worldwide with operations in 150-plus countries.

“FSF is leading the way for innovative surgical educators to apply the principles of advanced MIS in patient care, by supporting the continued availability of postgraduate surgical training opportunities of the highest quality,” notes Adeena Bleich, Executive Director of the FSF. “Covidien was a driving force behind the development of the FSF and their ongoing support as one of our major funding partners has helped ensure the success of our surgical fellowship program. We continue to be grateful to Covidien for their partnership.”

www.surgicalfellowships.org
Save the Date!

Thursday, April 16, 2015

2015 FSF Annual Reception
Meet and Mingle with the Minds, Champions, and Future Leadership of Advanced Surgery

SAGES Surgical Spring Week, April 2015
Gaylord Opryland Hotel and Convention Center in Nashville, Tennessee