



## FOUNDATION for SURGICAL FELLOWSHIPS

## 2014-2015 ANNUAL REPORT



# THE FOUNDATION FOR SURGICAL FELLOWSHIPS ENVISIONS A WORLD IN WHICH SURGEONS RECEIVE OPTIMAL EDUCATION AND TRAINING IN ADVANCED SURGICAL TECHNIQUES — WITH THE GOAL OF IMPROVED PATIENT CARE.

Dear FSF Friends and Supporters:

I am honored to serve as President of the Foundation for Surgical Fellowships. Like you, I believe deeply in the importance of fellowships in helping general surgeons master their skills and adopt new life-changing procedures and technology. We share the same end goal of improved patient care – faster, easier recoveries and better outcomes.

In today's healthcare world, fellowships are increasingly more critical to a new surgeon's training. The issues in residency are complex and well documented. In short, general surgery residents are simply not receiving the exposure to the complex procedures that they need. For example, during five years of surgical residency, an average resident will do 90 Minimally Invasive Surgery cases, most of which are relatively less complex cases such as cholecystectomy. In contrast, during one year of fellowship training, a surgeon will do, on average, over 275 complex cases in the chosen discipline. Honing their surgical skills for more complex operations, including pre- and post-operative care, is the primary reason that 80% of surgical residents pursue fellowship training. The Foundation for Surgical Fellowships is the primary independent source of funding for these fellowships.

As you read through our 2014-2015 Annual Report, I hope you will take away two main points. First, that fellowships continue to be a driver in the availability of complex surgical procedures that have a tangible financial and quality of life benefit for patients. Second, that we are grateful to you, our donor, for understanding that funding fellowships now depends on the full community of stakeholders doing their part.

On behalf of the Board, staff and grant recipients of the Foundation, thank you for your dedication and generous support of our mission.

Sincerely, Dennis Fowler, MD President



"FUNDING FELLOWSHIPS NOW DEPENDS ON THE FULL COMMUNITY OF STAKEHOLDERS DOING THEIR PART."

## WHY SURGICAL FELLOWSHIPS MATTER

## Training drives 300% increase in adoption

According to the results of a survey of 268 former MIS fellows, "the integration of a fellowship-trained MIS colleague into a general surgery practice resulted in a 300% increase in the proportion of appendectomies, ventral hernias, inguinal hernias, and colectomies performed laparoscopically."

<sup>1</sup>Surgical Endoscopy (2013) 27:1267-1272

## \$14B in savings

"Minimally Invasive Surgery Could Save \$14 Billion," was the headline of one of the articles published on the potential annual cost savings for six minimally invasive general surgery procedures compared to the comparable open approach. The primary factors are shorter hospital stays, lower infection and complication rates and less employee absenteeism.<sup>2</sup>

<sup>2</sup>JAMA Surgery (2013); 148(7): 641-647

### High Quality Surgical Outcomes



Fellowship graduates achieved high-quality surgical outcomes from the very beginning of their post fellowship practices, which are comparable to those of their experienced mentors.<sup>3</sup>

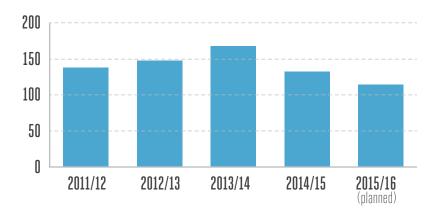
<sup>3</sup>Surgical Endoscopy (2010) 24:138-144

## YOUR SUPPORT MAKES A DIFFERENCE

Since it was founded in 2010, the FSF has...

Funded 669 fellowship positions

#### **# OF FSF FUNDED POSITIONS PER YEAR:**



Awarded over \$36,260,000 in grants

"THE FELLOWSHIP
STRENGTHENED MY SKILLS
WHICH WERE INADEQUATE
FOLLOWING RESIDENCY. I
WAS ABLE TO INTRODUCE
NEW PROCEDURES IN
SEVERAL HOSPITALS"

- FORMER FSF FUNDED FELLOW, GREAT FALLS, MT

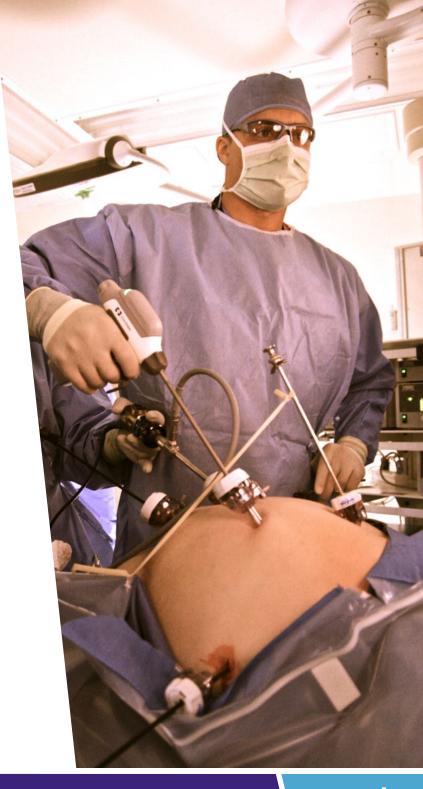


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## FSF AWARD PROCESS

Fellowship programs from across the country apply to the FSF. In a blinded process, the programs are ranked based on the quality of training facilities, methodologies and technologies; the academic, scholarly and innovative activities of faculty and fellows in a given program; and the volume and variety of cases to which fellows are exposed.

An objective scoring process is utilized. Each fellowship program is evaluated and scored in each of three domains: clinical experience, accreditation, and scholarly activity. Programs must be accredited by either the Fellowship Council or the ACGME and achieve a threshold score to be eligible for funding by the FSF.



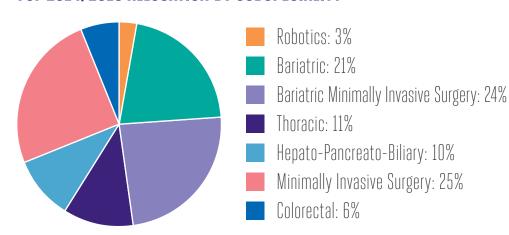
## 2014-2015 YEAR IN REVIEW

## Fellowship positions applied for: **158**Fellowship positions awarded: **113**



Current and Former FSF-Funded Fellows, FSF Reception, April 2015

#### FSF 2014/2015 ALLOCATION BY SUBSPECIALITY



### 2014-2015 PROGRAM AWARD RECIPIENTS

Abington Memorial Hospital

Advocate Lutheran General Hospital

Albany Medical Center

Alta Bates Summit Medical Center

Atlanta Medical Center

Baystate Medical Center

Beth Israel Deaconess Medical Center

Brigham & Women's Hospital

Carolinas Medical Center

Cedars Sinai Medical Center

**Cleveland Clinic** 

Cleveland Clinic Florida

Colon & Rectal Clinic of Orlando/Orlando Health

Cuyuna Regional Medical Center

**Duke University** 

East Carolina University BSOM

**Emory University Hospital** 

Fox Chase Cancer Center

Geisinger Medical Center

George Washington University Medical Center

Greenville Hospital System University Medical Center

Gundersen Lutheran Medical Foundation

Hackensack University Medical Center

Icahn School of Medicine at Mount Sinai

Indiana University

Inova Fairfax Hospital

Jackson South Community Hospital

Lahey Hospital and Medical Center

Lankenau Medical Center

Massachusetts General Hospital

Mayo Clinic Florida

Medical College of Wisconsin

Medical University of South Carolina

Methodist Health System

Methodist Hospital

Montefiore Medical Center

North Shore University Hospital

Northwest Hospital

Ohio State University Wexner Medical Center

Oregon Health & Science University

Orlando Health

Penn State Hershey Medical Center

Providence Portland Medical Center

Rhode Island Hospital

St Francis Hospital and Medical Center

Stanford University

Stony Brook University

Summa Health System

Surgix Minimally Invasive Surgery Institute

Swedish Medical Center

Texas Endosurgery Institute

Thomas Jefferson University Hospital

Tufts Medical Center

University Hospitals Case Medical Center

University Medical Centers at Princeton (UMCP)

University of Alabama at Birmingham

University of Arizona College of Medicine

University of California Davis

University of California Fresno

University of California Irvine

University of California San Diego

University of California San Francisco

University of Florida

University of Florida College of Medicine - Jacksonville

University of Iowa Hospitals and Clinics

University of Kentucky

University of Louisville/James Graham Brown Cancer

Center

University of Massachusetts Medical School

University of Miami Miller School of Medicine

University of Michigan

University of Missouri

University of Nebraska Medical Center

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University of Texas Southwestern Medical Center

University of Virginia Hospital

University of Washington

Vanderbilt University

Virginia Commonwealth University School of Medicine

Wake Forest University Health Sciences

Washington University

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**SAGES** Foundation

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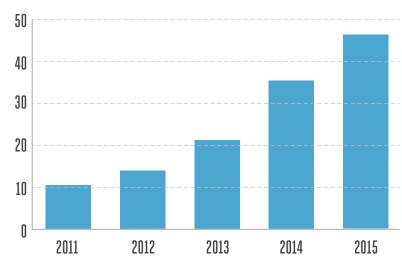
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#### Our Donor List is Growing!



## OUR WORK CONTINUES

For the FSF, our past success is as great as our future challenges. Demand for surgical fellowships continues to exceed available positions. In the last three years, nearly 25% of all certified applicants could not obtain a fellowship position. This is in part because of insufficient funding to support fellowship positions.



Source: Fellowship Council Match Statistics

While demand remains high, funding for these fellowships is at a crossroads. In prior years, nearly 100% of the Foundation's support came from just a few key industry donors. Those donors have cut back for economic and political reasons, and the FSF has had to make hard choices in terms of the size and scope of our awards. For the 2014-15 academic year, our maximum grant award dropped 20%, from \$62,500\$ to \$50,000.

Funding fellowships is no longer the purview of just a few large companies, it is the concern of the surgical community as a whole. Industry, societies, foundations as well as individual donors have given their support for which we are truly grateful.

As we continue to seek out and engage new funders, your sustained commitment and generosity are critical to keeping the Foundation strong. Together we can continue to advance surgical care.



<sup>\*2014</sup> decrease in applicants due to change in match schedule.

## THE FOUNDATION FOR SURGICAL FELLOWSHIPS

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