STS 2023 Will Celebrate Scientific Triumphs, Surgeon Camaraderie

After 2 years of virtual-only programming, The Society’s 59th Annual Meeting, January 21 – 23 in San Diego, California, promises an in-person experience that’s better than ever—with late-breaking abstracts, challenging case presentations, immersive experiences, and never-before-seen scientific discoveries and surgical techniques.

(CONTINUED ON PAGE 6)
Following rave reviews last year for the first STS Coronary Conference, the second annual event will take place June 3 – 4, 2023, in Miami, Florida.

The 2023 conference will be an important opportunity for surgeons to learn and discuss advanced techniques with top international experts, and to connect with peers from throughout the world. With the resurgence and demonstrated benefits of coronary artery bypass graft (CABG) surgery, this event will present a strong opportunity to enhance knowledge, abilities, and skills for the procedure.

Last year’s inaugural conference attracted surgeons from 18 countries who received training on critical issues around the indications and caveats of revascularization, the multiple forms of CABG, and all aspects of perioperative therapy. STS Canadian Director Marc Ruel, MD, MPH, head of the Division of Cardiac Surgery at University of Ottawa Heart Institute, and Joseph F. Sabik III, MD, surgeon-in-chief at University Hospitals, Cleveland, Ohio, served as last year’s course directors and will do so again in 2023. Also joining as program chairs are Sigrid Sandner, MD, director of the Coronary Revascularization Program at Vienna General Hospital, Austria; and David Glineur, MD, PhD, surgeon at University of Ottawa Heart Institute, Canada.

Registration is open now at sts.org/coronaryconf.
**Member News**

**Imam Takes Over as Lagonne Chair**
Mohammed N. “Mo” Imam, MD, has been appointed chair of the Department of Cardiothoracic Surgery at NYU Long Island School of Medicine. From 2016 to 2022, Dr. Imam was chair of cardiothoracic surgery and executive director of The Heart Institute in Staten Island, New York. His areas of expertise include coronary bypass grafting, minimally invasive valve surgery, transcatheter aortic valve procedures, surgery for arrhythmia, mitral valve repairs, minimally invasive aneurysm repair, and lung cancer surgery. He has been an STS Member since 2003.

**Wilder Joins Staff at Brigham and Women’s Hospital**
Fatima G. Wilder, MD, has joined the Thoracic Surgery Division at Brigham and Women’s Hospital in Boston, Massachusetts. Prior to this appointment, Dr. Wilder was a cardiothoracic surgery fellow at Johns Hopkins University Hospital in Baltimore, Maryland. An STS Member since 2016, she serves on the STS Workforce on Diversity, Equity, and Inclusion.

**Guy Brings Robotic Expertise to Georgia**
T. Sloane Guy, MD, MBA, is the new director of Minimally Invasive & Robotic Cardiac Surgery at Gainesville’s Northeast Georgia Physicians Group and Georgia Heart Institute. Dr. Guy will be the first-ever robotic heart surgeon to perform procedures at Northeast Georgia Medical Center Gainesville. Previously, he served as vice chief of the Division of Cardiac Surgery, clinical director of cardiac surgery, and director of minimally invasive and robotic cardiac surgery at Thomas Jefferson University Hospital in Philadelphia, Pennsylvania. He has chaired the STS Task Force on Robotic Surgery, and he has been an STS Member since 2006.

**Szeto Assumes Endowed Chair at Penn**
Wilson Y. Szeto, MD, has been selected for the Julian Johnson II endowed chair at Penn Medicine in Philadelphia. Dr. Szeto joined the Penn faculty in 2015, and in 2017 he was appointed vice chief of clinical operations and quality in the Division of Cardiovascular Surgery. Currently serving as secretary of the STS Board of Directors, he has been an STS Member since 2007.

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**The Annals Names Reviewers of the Year**

The Reviewer of the Year award is announced annually to recognize outstanding peer reviewers for The Annals of Thoracic Surgery. The Editorial Board highlights a winner in each of the three main disciplines—Adult Cardiac, General Thoracic, and Congenital Heart Surgery—in addition to highlighting one trainee/resident award winner.

*The Annals* recognizes these 2022 contributors who consistently provided a combination of high-quality, thorough, and professional reviews in a timely manner:

- **Adult Cardiac**
  - Heidi J. Reich, MD
  from Central California Heart and Lung Surgery, Fresno, California

- **General Thoracic**
  - Alejandro Bribriesco, MD
  from Cleveland Clinic, Cleveland, Ohio

- **Congenital**
  - Nishant Saran, MBBS
  from Mayo Clinic in Rochester, Minnesota

- **Trainee**
  - Alejandro Suarez-Pierre, MD
  University of Colorado, Aurora, Colorado

“Reviewing for *The Annals* is an act of generosity, a responsibility to uphold high standards, and a privilege,” said editor Joanna Chikwe, MD, FRCS. “This year’s winners demonstrated extreme dedication, and their work helped authors conduct better studies and write better papers.”

“The Annals is tremendously grateful for this year’s recipients for safeguarding the quality and integrity of scholarly communication,” Dr. Chikwe continued. “Their work, and the work of other contributors, has made *The Annals* the most cited journal in cardiothoracic surgery.”

STS experts interested in peer reviewing for *The Annals* are invited to join the Reviewer Volunteer program, which provides senior editors with a qualified pool of potential reviewers when editors are working with manuscripts in different areas of expertise. For more information, contact theannals@sts.org.

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Send news about yourself or a colleague to stsnews@sts.org. Submissions will be printed based on content, membership status, and space available.
“STS research and analytics services are increasingly used by physicians, researchers, payers, pharma, and industry for quality improvement initiatives, comparative effectiveness research, post-market surveillance, clinical trials, and basic and translational research.”
It's hard to believe my year as President is already complete. There were several memorable moments, including Coronary Congress in early summer in Ottawa, Ontario, Canada, followed by resident Boot Camp, AQO, and a great EACTS meeting in Milan, Italy. In early December, STS/EACTS and LACES put on an excellent cardiac meeting in Cartagena, Columbia, attended by more than 300 Latin American surgeons and other participants. This year’s meetings generated a lot of value for surgeons, residents, students, and industry partners enjoying the opportunity to be back together in person.

This past year, STS has been investigating ways to broaden its reach and impact internationally. To this end, we have proposed bylaws changes—to be reviewed at the STS Business Meeting at STS 2023—that will promote equal standing for members across the world.

STS 2023 is really shaping up. Early attendance figures look as good as ever, but what is most energizing is the program. Dr. Adil Husain, Ms. Michele Rush, and their team have put together a great meeting. It is designed to give attendees some time during the day to go for a walk or grab lunch with a spouse, friend, or colleague—to not just talk about work/life balance, but to actually live it a bit.

Themes for this year’s meeting include:

• Education, not just of our students and residents, but of ourselves.
• Social unrest: avoiding noise while navigating equitably and inclusively.
• Data and how we should be using it.

To this end, we have three great invited speakers lined up. One is Dr. Francisco Cigarroa, one of my surgical colleagues in San Antonio. He previously dabbled in administration as president of our medical school, and then as chancellor of the entire UT system, before going back to just being a very talented and hardworking director of organ transplant programs. He will be delivering the Vivien Thomas Lecture to open our annual meeting. Please make every effort to be there Saturday morning as it promises to be awesome.

Our Thomas Ferguson Lecturer is a great orator, the Rev. Max Lucado, who will be speaking about “recalling our calling.” I’ve come to know Max well and I respect him tremendously. This talk will resonate with everyone about why we went into medicine and surgery and how to continue to enjoy the many great parts of our profession. It will not be evangelical, just something good for our souls.

Finally, we can all be really excited about Dr. Peter Smith agreeing to deliver the C. Walton Lillehei Lecture. He is going to be speaking about how CABG still is, in many cases, the best possible treatment for coronary disease. There is likely no one who has used data better than Dr. Smith to highlight our worth to patients, institutions, and to the health care industry. He almost singlehandedly helped us prevail with RVU based reimbursement over a decade ago. His talk on “the collision of a belief system with the evidence” will no doubt highlight just that.

Dr. Jo Chikwe and her team at The Annals continue to help us strengthen knowledge and skills as a key part of the STS experience. The research center and STS National Database have made progress this year in achieving quality and consistency of data to assess and benchmark performance. STS research and analytics services are increasingly used by physicians, researchers, payers, pharma, and industry for quality improvement initiatives, comparative effectiveness research, post-market surveillance, clinical trials, and basic and translational research. In addition, US News & World Report, starting in 2023, will track STS lobectomy outcomes through the GTSD—generating a lot of interest from hospitals! Learn more on page 7.

One thing which has been sad for so many of us was the sudden loss of Dr. Sean Grondin. As stated before, Sean was simply a wonderful man, surgeon, husband, father, son, teacher, and leader. His loss so soon was hard to fathom and remains simply hard to even process. His knack of spending time where it mattered and finding the right “fit” for whatever the situation is even more poignant now.

So, hope all enjoyed a wonderful holiday season and are looking forward to an even better 2023.

God Bless,
John
STS 2023 Will Celebrate Scientific Triumphs, Surgeon Camaraderie

“The ability for colleagues and friends to gather in person for the first time in several years will be a palpable opportunity to not only share intellectual knowledge but also—perhaps more importantly—reconnect on a personal level,” said S. Adil Husain, MD, chair of the STS Workforce on Annual Meeting. “We have each experienced many unique challenges since our last in-person meeting and this reunion of sorts will be a valuable elixir for us all.”

The program planning committee received a record number of exciting abstract submissions in all subspecialty areas, Dr. Husain said. They designed the program with a focus on blending top-scoring science with highly respected invited speakers, with an emphasis on interaction and discussion time.

Adult Cardiac Offerings Target Optimal Outcomes
Parallel sessions in adult cardiac surgical topics explore why cardiac surgeons should be involved in pulmonary embolism response teams, the management of severe aortic stenosis in young adult patients, optimizing care for infective endocarditis, the heart team approach to complex tricuspid valve disease, and much more.

Hands-on courses cover annular enlargement and mitral valve repair, while “In the OR with” videos take attendees on an immersive journey as world-class surgeons demonstrate complex aortic arch reconstruction, minimally invasive mitral valve repair, and the Ross procedure. The J. Maxwell Chamberlain Memorial Paper and Richard E. Clark Memorial Paper will unveil outcomes data in large patient groups—the former on coronary artery bypass grafting versus multivessel percutaneous intervention, and the latter on the effect of surgical strategy in isolated tricuspid valve procedures.

Congenital Program Is Dynamic with Data
Data-driven outcomes, evidence-based guidelines, and optimizing the landscape for the current and future congenital surgery workforces feature prominently in the congenital surgery curriculum. “To Train or Not to Train?” will include a debate on the regulation of fellowship positions, and “Leveling the Playing Field” will explore whether it’s useful for lower-volume centers to partner with high-volume centers to deliver best results.

Engaging video and abstract presentations will demonstrate single leaflet neocuspoidization with autologous pericardium, position of the autograft and homograft in the Ross-Konno procedure, neonatal palliation for high-risk single ventricle heterotaxy, and a novel hybrid palliation technique for a premature newborn prior to Norwood single ventricle palliation. The inaugural James S. Tweddell Paper investigates the creation of an STS adult congenital heart surgery risk model, and the Clark paper analyzes the STS National Database for patterns in the management of tetralogy of Fallot.

General Thoracic Sessions Showcase Next-Gen Techniques
Parallel sessions in the general thoracic program highlight topics including controversies in transplant practices, immunotherapy and targeted molecular therapy, and challenging esophageal consults, while an Ask the Experts session titled “Elegant Solutions to Lung Disasters” will show attendees how to salvage pulmonary resections gone wrong. Attendees will gain hands-on expertise in complex central airway reconstruction, and an “In the OR with” video demonstrates uniport segmentectomy and left lower lobectomy.

Among the abstracts are a 20-year experience with salvage esophageal reconstruction with colon interposition, a one-step classifier for molecular differential diagnosis between multiple primary lung cancer and intrapulmonary metastasis, the evolution of pain control for adult pectus excavatum repair, and how the number of involved structures affects outcomes in thymic epithelial tumors. The Chamberlain Paper examines racial disparities in patients awaiting lung transplant, and the Clark Paper pinpoints how urgent paraesophageal hernia repair in elderly patients is associated with worse outcomes.

Perioperative, Critical Care Topics Bring Results into Practice
An array of offerings in perioperative and critical care includes controversies in perioperative blood management, building an ERAS cardiac program without added cost, contemporary approaches to pain management, phenotypes and unique characteristics of cardiogenic and postcardiotomy shock, and new regulatory standards for resuscitation. A hands-on course covers the V3 exam—volume status, venous access, ventricular function—for CT surgery.

The Clark Paper, “The Price of Delay: RV Failure and Biventricular Support” utilizes relevant findings from the Intermacs database, and the Chamberlain Paper demonstrates that the COVID-19 pandemic is associated with increased mortality, failure to rescue, and cost across all socioeconomic statuses.

Equity Is Paramount in Wellness, Education, Quality
Surgeon wellness and career advancement take center stage at STS 2023. A “Surgical Families” session explores unique situations including adoptive parents, parents of children with special needs, surgical trainees and parents, two-surgeon households, and single-parent surgeons. A session on ergonomics helps surgeons avoid injuries that can curtail a career, and Annals Academy provides tips on publishing impactful research.

In the quality and education realms are sessions on the preoperative assessment of frailty beyond the “eyeball test” and making sense of hospital star ratings, while intriguing
abstracts investigate how communication patterns in the OR are affected by task difficulty, how male versus female candidates regard diversity in selecting jobs and training programs, and harnessing natural language processing to evaluate gender bias in letters of recommendation for cardiothoracic surgery applicants.

“The plenary session invited speakers will offer a unique opportunity for attendees to self-reflect both personally and professionally,” added Dr. Husain. The Vivien T. Thomas Lecture will be delivered by Francisco G. Cigarroa, MD, who directs the transplant center at the University of Texas Health Science Center San Antonio. Bestselling author Max Lucado will present the Thomas B. Ferguson Lecture, and Peter K. Smith, MD, principal investigator for the Duke University site in the Cardiothoracic Surgery Clinical Trials Network, is this year’s C. Walton Lillehei Lecturer. The Presidents Reception—at a bayfront restaurant and cocktail venue featuring a floating reception hall and a skyline lounge—will celebrate not only the term of current STS President John H. Calhoon, MD, but also the legacies of Past Presidents Sean C. Grondin, MD, MPH, FRCS and Joseph A. Dearani, MD, who oversaw the Society’s governance with innovation and grace during the peak of the COVID-19 pandemic. Space is limited for the reception, and attendees must add it to their cart during registration.

“We have lost several admired colleagues in recent times, Dr. Tweddell and Dr. Grondin in particular,” said Dr. Husain. “We will value our ability to celebrate their contributions to our subspecialty as well as to acknowledge the loss of other cherished members within our Society.”

General Thoracic Database Enters Best Hospitals Transparency Arena, Congenital Database Powers Groundbreaking Trial

The trusted data in the STS National Database™ has been a cornerstone for scientific research and quality improvement for more than three decades—and recently its General Thoracic (GTSD) and Congenital Heart (CHSD) surgery databases made major leaps toward demonstrating their importance across the United States.

GTSD Participants Can Earn Credit for Transparency

US News & World Report recently announced its decision to create a new Public Transparency measure to be used in its Best Hospitals rankings in Pulmonology & Lung Surgery. The measure will be based on whether a hospital elects to publicly report its lobectomy outcomes on the GTSD public reporting website as of February 12, 2023.

“This is a boon for high-performing hospitals who participate in the GTSD,” said Vinay Badhwar, MD, chair of the STS Council on Quality, Research, and Patient Safety.

“Those who already are publicly reporting their outcomes to the Database now have the option to earn Transparency best rankings, and GTSD participants who were not publicly reporting were given the means to opt in last month.”

Dr. Badhwar added, “For hospitals who are not GTSD participants, the time to join is now.”

The next edition of Best Hospitals will feature the new Public Transparency measure, and the measure will have a weight of 3% in the adult Pulmonology & Lung Surgery specialty rankings. “The same measure will be included in the Procedures & Conditions statistical analysis, and it likely will be used in calculating the Lung Cancer Surgery ratings,” wrote US News’ Ben Harder.

This means that, by simply enrolling in the STS National Database Public Reporting initiative, hospitals can receive the transparency credit.

More than 100 thoracic surgery programs nationwide are already publicly reporting their surgical outcomes. US News will review the GTSD public reporting site in February 2023, and they release their Best Hospitals lists once a year.

If a hospital joins GTSD in 2023 and enrolls in public reporting, they will be eligible to receive the transparency credit in 2024.

CHSD Makes History with Infant Surgical Trial

In a first-of-its-kind multicenter, NIH-funded randomized trial within a registry, investigators have found that infants undergoing cardiopulmonary bypass surgery experienced no difference in outcomes when they received prophylactic glucocorticoids versus placebo. Results from the study, made possible by the CHSD and 24 participating sites, appeared last month in the New England Journal of Medicine.

“With an NIH award of over 5 million dollars, our team successfully conducted a multicenter, prospective, randomized, placebo-controlled, registry-based clinical trial with participants enrolled at 24 sites participating in the CHSD,” said Jeffrey P. Jacobs, MD, principal investigator for the grant, titled “Leveraging existing registry resources to facilitate clinical trials.” With data curated in the CHSD, researchers were able to randomize
outcomes for 1,200 infants and newborns undergoing open-heart surgery. Glucocorticoids have been used for decades in this surgical population, but until now, their benefits have remained unconfirmed. With this CHSD analysis, the research team assessed a primary outcome composite of operative mortality, 13 individual major complications, and postoperative length of stay.

“Among infants undergoing surgery with cardiopulmonary bypass, prophylactic methylprednisolone did not significantly decrease the likelihood of a worse outcome in adjusted analysis,” the authors wrote, noting that methylprednisolone additionally was associated with increased postoperative hyperglycemia requiring insulin.

The publication of these results is a reflection of the quality and power of the Database, said Dr. Jacobs, who served on STS’s Workforce on National Databases and as chair of its Congenital Heart Surgery Database Task Force. Based on his experiences, he emphasized, “The STS Congenital Heart Surgery Database is the premier registry in the world for pediatric quality assessment and research.”

Database Makes Never-Before-Seen Science Possible at STS 2023

At the upcoming STS Annual Meeting in San Diego, presenters will unveil novel scientific discoveries gleaned from the robust data curation in the STS Adult Cardiac, Congenital, General Thoracic, and Intermacs/Pedimacs Databases, including

- Frozen elephant trunk versus traditional limited repair in acute type 1 aortic dissection
- Variables affecting survival in pediatric patients supported with ventricular assist devices
- Targeted molecular therapy and immunotherapy for lung and esophageal cancer
- Postcardiotomy shock and 30-day outcomes in patients with severe left ventricular systolic dysfunction
- Survival outcomes for patients undergoing lung transplant
- Establishment of an STS adult congenital heart surgery risk model
- The impact of surgical strategy on isolated tricuspid valve outcomes
- Practice patterns in the management of tetralogy of Fallot

Oral exams are tough. STS can improve your performance.

STS Mock Oral Exam Course: Coming Spring 2023
A Great Surgical Mind and Friend:
Sean C. Grondin, MD, MPH, FRCSC
1966–2022

The world of cardiothoracic surgery lost an iconic role model and champion for the profession with the passing of Sean C. Grondin, MD, MPH, FRCSC. The Society of Thoracic Surgeons’ 2021 President.

A master surgeon and medical educator, Dr. Grondin, 56, passed suddenly in November after inspiring hundreds of surgeons throughout their careers, raising the quality of the profession, and saving the lives of countless patients.

An academic surgeon, Dr. Grondin took very seriously the responsibility of inspiring and supporting his colleagues to be better surgeons and researchers, and to improve the profession as a whole. For the past 20 years, he was highly regarded as a “surgeon’s surgeon” and leader at Alberta Health Services and Professor of Surgery at the University of Calgary Cumming School of Medicine in Alberta, Canada.

“Never ever was it all about Sean,” said his long-time colleague and friend Susan Moffatt-Bruce, MD, PhD, chief executive officer at the Royal College of Physicians and Surgeons of Canada. “He had a heart of gold—there is just absolutely no doubt about that.”

Focus on What Mattered Most

Dr. Grondin’s priorities were his family, good relationships with others, and constant drive for top quality in all aspects of cardiothoracic surgery, Dr. Moffatt-Bruce said.

He brought friendship, collegiality, and opportunity to his fellow surgeons, not just by talking, but by opening doors. His word and intentional actions were influential, and he used them to help others earn committee appointments, visiting professorships, fellowship opportunities, and other avenues for development that would enhance knowledge and skills.

“When I would go to a meeting, perhaps what I looked most forward to was seeing Sean. If I was down about something, he lifted me up, he helped put problems in perspective,” said Douglas E. Wood, MD, chair of the Department of Surgery at the University of Washington and past STS president. “As a close friend, he fulfilled what was most important—he was loyal, non-judgmental, present, and a source of comfort and inspiration.”

Dr. Grondin, the first Canadian general thoracic surgeon to become STS President, called it “a highlight of my career.” With good decision making and intuition about surgeons’ needs at a difficult time, he guided the Society through the COVID-19 pandemic. Dr. Grondin was also a strong proponent of tracking patient outcomes to improve surgical quality. During his time as STS President, he enabled further development of the STS National Database to bring accountability for patient outcomes and identify areas for improvement.

A Canadian Who Touched the World

Dr. Grondin was born in Edmonton, Alberta, Canada, where he spent most of his youth and adult life, but his perspective grew globally.

He developed a broader view of who received surgical care, who did not, how patients everywhere fared following surgery, and what could be done to correct racial and socioeconomic care disparities. This viewpoint drew him to earn an MPH in clinical effectiveness from Harvard University in 1999 and helped him advance equities in cardiothoracic surgery.

Dr. Grondin attended medical school and completed a general surgery residency at Dalhousie University in Halifax, Nova Scotia, Canada. He completed a thoracic surgery residency at the University of Toronto, a thoracic oncology fellowship at the Brigham and Women’s Hospital in Boston, Massachusetts, and a second fellowship in minimally invasive thoracic surgery at the University of Pittsburgh in Pennsylvania.

After his fellowships, he practiced at Northwestern University Evanston Hospital in Illinois before returning to his native Canada at Foothills Medical Center, where he headed the clinical and academic sides of the Department of Surgery from 2016 to 2020.

Dr. Grondin received many awards and honors, including the Royal College of Physicians and Surgeons of Canada “Mentor of the Year,” and multiple visiting professorships throughout the world. In 2016, he earned the highly competitive James IV Association of Surgeons Canadian Traveling Fellowship and used this opportunity to exchange knowledge with thoracic surgeons in China, Australia, England, and Scotland.

He was a Regent at the American College of Surgeons and incoming president of the Western Surgical Association, and he had served as a leader in every Canadian thoracic surgical association, including past president of the Canadian Association of Thoracic Surgeons.

Working Hard for Patients, Family

Throughout all his accomplishments and in his humble demeanor, Dr. Grondin would say, “I am not the smartest person in the room. I just work hard.”

He did the same for his patients, and they cherished him. “Thank God for this man every day and that he graced me with his surgical skills. He is the best surgeon and those who are fortunate to be his patient have the second best shot of their life,” one patient wrote.

He passed his work ethic on to—and was tremendously proud of—his grown children, Kate and Ben. An avid outdoorsman, soccer and hockey player, and labradoodle owner, Dr. Grondin extended his passions well beyond the OR. He credited his wife, Cathy, for being the glue that held everything together and making his life complete.

“He legacy lives on in every surgeon he has helped to shape, and as such, the pursuit of excellence in cardiothoracic surgery continues,” Dr. Moffatt-Bruce said.
Latin America Cardiovascular Surgery Conference Makes a Resounding Return

The Latin America Cardiovascular Surgery Conference made a strong comeback in December after the COVID-19 pandemic shut down the in-person program for the last three years.

More than 300 surgeons, trainees, and industry representatives gathered in Cartagena, Columbia, for 2 solid days of education, discussion, and networking.

The conference emphasized cultivation of up-and-coming surgeons: 75 received a scholarship to attend. Supporting their work, the crowd browsed through more than 60 poster presentations and listened attentively to presentations of new research and surgical techniques with the aim of improving surgery and related care. Nearly one-third of attendees participated in the Residents Symposium.

Another 100 attendees gathered at the conference’s symposium “Women of the World in Cardiac Surgery: Bringing Balance to Our Field.” The 2022 session was a milestone—the first time that attendees from three continents convened to talk about challenges, opportunities, and barriers facing women in the surgical profession.

One of the most popular features of the conference focused on training for the latest surgical techniques and devices. Edwards Lifesciences, Artivion, and Terumo Aortic sponsored hands-on wet labs on mitral and tricuspid valve repair and replacement, the Ross procedure, and a comprehensive overview of innovative approaches to aortic surgery.

Catch up with conference activity, photos, and recollections by browsing #LatAmCardiac2022.

AQO Proves a Valuable Resource for Data Managers

AQO was held in October 2022 to help data managers from surgical teams to effectively utilize the STS National Database™ as part of their work to improve clinical outcomes and patient safety. Data managers learned from surgeon leaders, data managers, and Database platform experts, and expanded their knowledge of the newest research discoveries and clinical guidance. Experts also presented four learning tracks to master each component of the Database: Adult Cardiac, Congenital, General Thoracic, and Intermacs/Pedimacs.

The Database puts unique analytical power in the hands of individual institutions. STS is dedicated to helping users master the Database to assist in each institution’s work for continued analysis of outcomes and perpetual efforts for improvement.

In addition, virtual AQO access also brings users the opportunity to attend the “AQO Hot Topics” webinar for each Database registry in January 2023. Speakers from the actual meeting will return and answer questions from virtual attendees.
The Resilient Surgeon Podcast Releases New Episodes

Do not miss The Resilient Surgeon podcast, now in its second season! This STS podcast has been a smash hit with audiences who appreciated the insights they could apply to their lives inside and outside the OR.

“The choice of guests featured this season parallels a paradigm I developed called ‘Best Self Pie,’” said Michael A. Maddaus, MD, host of The Resilient Surgeon. “I prefer the term ‘best self’ to the word ‘wellness’ because it is an intuitive and personal reference point that we all have—if we are aware enough.”

The first piece of the “pie”—individual habits and activities such as sleep, diet, exercise, gratitude, and connection with others—were covered in the podcast’s first season. Season 2, which began airing in August, covers the additional pieces—self-awareness, purpose, and connection at work and home.

Listeners say they can truly relate to the biweekly episodes because they’ve lived the same experiences. More recent episodes included:

Rich Diviney, retired US Navy Seal officer
Commander Diviney also authored The Attributes, 25 Hidden Drivers of Optimal Performance. Drawing from his 20-plus years of experience in the Navy, Diviney came to understand that even individuals at the highest levels of physical and mental capabilities can sometimes fail to perform in specific situations. He determined that an individual’s ability to succeed is determined by attributes, not skills. Attributes such as patience, resilience, situational awareness, and adaptability inform behaviors, and each person has a unique combination of attributes that dictates how they behave, react, and perform. Diviney shares how his time with the Navy Seals helped him develop his strongest attributes and how others can come to understand their own. Through careful examination of these attributes, people can build better relationships and teams and ultimately unlock their potential.

Brian Little, PhD
Dr. Little is a world-renowned psychologist and an expert on personalities. He has written three bestselling books on personality and has a TED Talk called “Who Are You, Really?” that has been viewed more than 20 million times. He was voted a favorite professor at Harvard University from 2002-2004 and is current professor at the University of Cambridge. In the podcast, he discusses the importance of self-awareness and how understanding our own personality traits can help us make better, more meaningful connections with those around us at work and at home. Learn about the Big Five Personality Traits—openness, conscientiousness, extraversion, agreeableness, and neuroticism—and the profound impact they can have on how our lives unfold and flourish. Drs. Maddaus and Little share examples of these different personality traits and provide insights into how we can harness the unique qualities which truly allow us to be our best selves.

Christine Porath, PhD
Professor Porath is an associate professor at Georgetown University McDonough School of Business. She has dedicated her career to understanding the business and personal impacts of how people treat one another in the workplace and how the influence of leaders plays a huge role in happiness and engagement at work. The need for human connection is part of our genes; Porath’s work identifies today’s modern technologies and self-sufficient mindset as disconnecting factors that lead to increased anxiety, depression, and other mental health challenges. She is a frequent contributor to the Harvard Business Review and has authored articles in the New York Times, Wall Street Journal, and Washington Post.

The Resilient Surgeon is part of STS’ Surgical Hot Topics ongoing podcasts. Subscribe via your favorite podcast app, or find episodes at sts.org/podcast. Social media postings about The Resilient Surgeon series will include the hashtag #BeYourBestSelf.

Save the Date for the 2023 Coding Workshop

Health Information Management professionals with proficient coding skills are a must for any practice. Their work analyzing clinical statements and assigning standard codes according to the widely used classification system has significant impact on maximizing reimbursement. Industry and government data collection used for research, resource allocation, and other purposes also relies heavily on information generated by coding professionals.

Learn the latest coding changes for 2023 by attending or sending your coders to the 2023 STS Coding Workshop: Best Practices for Cardiothoracic Surgery. Taking place virtually February 10 – 11, this 2-day workshop will address new and revised codes affecting cardiothoracic surgical practices. The event will feature live sessions at conveniently scheduled times as well as recorded sessions that registrants can watch at their convenience. Learn more at sts.org/codingworkshop.
Applications Due February 1 for 2023 STS Leadership Institute

As the 2022-2023 class of the STS Leadership Institute concludes its curriculum in late January, a new cohort will soon be chosen for 2023-2024.

Applications opened in December for the curriculum, which starts with the first virtual session on March 23. The STS Leadership Institute develops skills for cardiothoracic surgeons that have become vital as healthcare delivery grows more complex and rapidly transforms. Physicians who have the necessary leadership skills are essential for medical teams to adapt and work together effectively in order to provide the best patient care.

The STS Leadership Institute is targeted for early career (0-7 years in practice) and mid-career (8-15 years in practice) surgeons who are STS members. It includes five events: three virtual sessions and two in-person meetings. The capstone event will take place in San Antonio, Texas, in conjunction with STS 2024. Selected applicants are required to participate in all five events of the series.

Participants will work in tracks specific to their career standing and will have ample time to interact with the program’s faculty of prestigious leaders. Course Directors for the 2023-2024 program are Mara B. Antonoff, MD, David T. Cooke, MD, Dawn S. Hui, MD, Anita R. Krueger, MD, Tom C. Nguyen, MD, and Ram Kumar Subramanayan, MD, PhD. Now in its fourth year, the STS Leadership Institute teaches key physician leadership skills that can influence career progression.

Applications are due online by Wednesday, February 1 and can be submitted at sts.org/leadershipinstitute-apply.

Step Up and Mentor Early Career Surgeons

The STS Board of Directors urges everyone in an STS leadership role to volunteer with STS’ Mentorship Program. Trusted advisors are needed and vital to raise the next generation of surgeons.

Seasoned surgeons are quick to credit those who mentored them along the way, and STS seeks to build these same relationships for up-and-coming surgeons who will no doubt face the rigors of the profession. The program matches trainees and younger surgeons with mid- or later-career surgeons who share their clinical or research interests and/or have been through similar experiences or challenges.

The Mentorship Program launched in 2021 and has received numerous requests from early career surgeons for guidance, advice, and collaboration to reach their career goals.

A few weeks after applications are submitted, STS matches mentees with mentors and facilitates initial contact by email. After that, the mentor and mentee will drive their own experience and how they communicate.

Sign up through the easy-to-use mentorship portal, sts.org/sts-mentorship-program. For more information about the program, contact mentorship@sts.org.

Boot Camp Training Gives Surgeons High-Intensity Simulation

Sixty first-year residents took a major step forward in cultivating their surgical skills at STS Boot Camp this past fall.

Supervised by 70 surgical leaders from throughout the country, residents were introduced to simulation learning that replicated the OR environment for cardiac and general thoracic procedures. Participants rotated through six immersive, hands-on sessions for cardiopulmonary bypass, vessel anastomosis, open lobectomy/hilar dissection, diagnostic and therapeutic endoscopies, robotic lobectomy/hilar dissection, wire skills, and transcatheter aortic valve replacement. Residents received personalized one-on-one attention to point them on the path to proficiency through the lengthy training ahead.

The educational event, previously hosted by the Thoracic Surgery Directors Association, was made possible through generous industry donations.
Promising Physicians Awarded Looking to the Future Scholarships

STS congratulates the following medical students and general surgery residents who will receive Looking to the Future (LTTF) Scholarships in 2023.

**LTTF Medical Student Scholars**

Nishant Agrawal  
University of Pittsburgh School of Medicine  
Adham Ahmed  
CUNY School of Medicine - New York, NY  
Alan Amedi  
Emory School of Medicine  
Mohammad Arammash  
University of California San Francisco  
Philip Broughton  
University of South Carolina  
Lin Chen  
Case Western Reserve University  
Juliana Cobb  
University of Louisville School of Medicine  
Abeer Dagra  
University of Florida  
Tobias Fauser  
University of Arizona COM - Tucson  
Yan Gernhofer  
University of the Incarnate World School of Osteopathic Medicine, San Antonio  
Carter Glenn  
University of Cincinnati College of Medicine  
Adam Kiridly  
Donald and Barbara Zucker School of Medicine at Hofstra/Northwell  
Ryan Kramer  
Duke University School of Medicine  
Anson Lee  
University of Hawaii John A. Burns School of Medicine  
Hanna Mandl  
David Geffen School of Medicine at UCLA  
Araiye Medlock  
University of California, Davis  
Pournika Muniyandi  
University of Missouri - Kansas City School of Medicine  
Ayesha Ng  
David Geffen School of Medicine at UCLA  
Xuan-Mai Nguyen  
Carle Illinois College of Medicine  
John Nonu  
University of Utah School of Medicine  
George Olverson  
University of Rochester School of Medicine and Dentistry  
Jay Patel  
California University of Science and Medicine  
Adegbemisola Perkins  
University of Tennessee Health Science Center  
Ryan Rebernick  
University of Michigan  
Natalia Roa-Vidal  
University of Puerto Rico Medical Science Campus  
Natalie Schudrowitz  
University of Wisconsin School of Medicine and Public Health  
Shwetabh Tarun  
University of Pittsburgh School of Medicine  
Allie Thompson  
University of Michigan  
Lamario Williams  
University of Alabama at Birmingham

**LTTF Resident Scholars**

Farshad Amirkhosravi, MD  
Houston Methodist Hospital  
Adam Awe, MD  
University of North Carolina - Chapel Hill  
Louisa Bai, MD  
Washington University in St. Louis  
Kian Banks, MD  
UCSF - East Bay  
Sean Burgwardt, DO  
Saint Mary's Hospital - Connecticut  
Ifeanyi Chinedozi, MD  
University of Maryland  
Michael Eisenberg, MD  
University of Texas Health Science Center at Houston  
Katherine Foley, MD, MPH  
LSU New Orleans  
Kathleen Fuentes, MD  
Lahey Hospital and Medical Center  
Hiba Ghandour, MD  
Duke University Hospital  
Gianmarino Gianfrate, DO  
Mercy Health at St. Elizabeth Hospital - Ohio  
Douglas Gouchoe, MD  
Wright-Patterson Medical Center  
Elaine Griffith, MD  
Mayo Clinic - Rochester  
William Head, MD  
The Ohio State University  
Ryan Holcomb, DO, MPH  
Penn State Milton S. Hershey Medical Center  
Lauren Johnson, MD  
University of Arkansas for Medical Sciences  
Jessica Katsiroubas, MD  
New York Presbyterian Brooklyn Methodist  
Alixandra Killian, MD, MPH  
University of Alabama at Birmingham  
Eleanor Kitchell, MD  
University of Arizona - Phoenix  
Nicole Lin, MD, MPH  
Westchester Medical Center - New York Medical College  
Brandon Peine, MD  
East Carolina University  
Terrance Peng, MD, MPH  
UCLA Medical Center  
Ryan Randle, MD  
Oregon Health & Science University  
Marisa Sewell, MD  
Oregon Health & Science University  
Klaudiusz Stoklosa, MD  
Northern Ontario School of Medicine  
Nikia Toomey, MD  
University of Tennessee Health Science Center - Memphis  
Kaity Tung, MD  
SUNY - Buffalo  
Kevin Wang, MD,  
University of Arizona - Tucson  
Noah Weingarten, MD  
Cleveland Clinic Foundation - University of Pennsylvania Research  
Bobby Zhang, MD  
Madigan Army Medical Center - 88th Surgical Operations Squadron

They were selected based on their clinical and research achievements and their dedication to advance in the field. Although STS received applications from many worthy candidates, priority was given to applicants who have not attended a national cardiothoracic surgery meeting or received another CT surgery meeting scholarship.

Future surgeons need to be nurtured, mentored, and inspired to undergo the lengthy training that is required to enter the field. LTTF Scholarship winners will receive unique mentorship to develop their knowledge and surgical skills and encourage them to pursue careers as cardiothoracic surgeons. Learn more at [sts.org/lttf](http://sts.org/lttf).
Whether they know from the start that they’ll emulate their parents’ careers—or they fight tooth-and-nail to carve a different path—there seems to be something in the genes of cardiothoracic surgeons that pulls their children toward their calling.

Hal and Sophia Roberts

For Harold “Hal” G. Roberts Jr., MD, and Sophia H. Roberts, MD, Barnes Jewish Hospital and Washington University in St. Louis, Missouri, is a cornerstone, an alma mater, and a workplace.

Last year, Dr. Hal Roberts joined the Barnes Jewish Heart and Vascular Center, transitioning from a South Florida private practice. He arrived a celebrated member of the surgical team, with more than 20 years of surgeries under his belt, a patent for a 3D mitral annuloplasty ring, the first publication to describe a modification of the Cox Maze IV right atrial lesion set, and a reputation for performing the first TAVR procedure in Broward County, Florida. And another singular distinction: Sophia’s dad.

“On ‘Take Your Child to Work Day,’ cardiothoracic surgeons can pretty much blow it out of the water by bringing their kid to the OR,” Sophia reflected. “Seeing the team dynamic and the real leadership that comes with being the attending surgeon had a lasting impact on me.”

Dr. Sophia Roberts adds that although her siblings didn’t go into medicine, they also considered the experience to be special—and fundamental to understanding their dad as a person.

“I tend to be a bit quieter than baseline,” she explained, “and that initially made me concerned for my ability to lead an operative team.” But observing her father, in addition to other attending surgeons and their diverse personalities, helped to assuage that concern.

“I imagine that my leadership style will channel components of my dad and my other mentors,” Sophia said. “Particularly those who lead without being the loudest person in the room.”

Dr. Sophia Roberts is a third-year resident at Washington University, and she’ll soon be assuming a senior resident role. Before Dr. Hal Roberts accepted the job, he made sure that he had Sophia’s blessing, because they’d be working in the same program.

Sophia has explored many facets of surgery during her training, but her father says that, just as he did, she found that she enjoyed caring for cardiac surgical patients the most.

“As far as Sophia deciding to go into cardiothoracic surgery, I was very flattered, but I made quite sure that she realized what she was getting into,” Dr. Hal Roberts said. “Cardiac surgery can be a physically and emotionally draining field, but it does give me great satisfaction in knowing that the quality and quantity of my patients’ lives are favorably impacted by the care I render.”

The new position at Barnes Jewish has afforded the elder Dr. Roberts the opportunity to teach—a realm he entered relatively late in his career. He calls it his greatest satisfaction, saying, “I have been amazed at how much fun this really is.”

For her academic development, Sophia is working through a fellowship in cardiovascular device innovation. “Delving into engineering is new terrain for me, and I am excited to carry our new devices from concept to pre-clinical testing,” she said, adding, “It’s pretty surreal to have a single dream for so long and then realize you’re living it.”

Dr. Hal Roberts hopes that his daughter will have exposure to classic as well as novel surgical approaches. “Though there will be more and more minimally invasive techniques on the horizon, I always think there will be a role for some of the basic procedures, like coronary artery revascularization, that we have been effectively doing for years.”

Dr. Sophia Roberts learned from her dad that one can be an authoritative leader without being the “loudest person in the room.”

“I initially thought the saying, ‘The days are long, but the years are short,’ was just something we tell ourselves to get through almost a decade of training, but it really rings true,” Dr. Sophia Roberts said. “There is so much to learn to become a skilled and compassionate surgeon. It can be daunting, but the sense of fulfillment surgical training brings keeps me coming back day after day.”
David and John Cleveland

“We’re both extremely pragmatic, to both benefit and fault at times,” says John Cleveland, MD, of himself and his father, David C. Cleveland, MD, MBA.

The elder Dr. Cleveland is an associate professor of surgery at the Heersink School of Medicine, part of the University of Alabama at Birmingham. He’s a giant in congenital heart surgery, having served as chief of pediatric cardiac surgery for the Children’s Hospital in Buffalo, New York, the Children’s Hospital at Medical City Dallas in Texas, and St. Joseph’s Hospital and Medical Center in Phoenix, Arizona. At St. Joseph’s, he founded the Eller Congenital Heart Center and served as its executive director.

As a kid, John Cleveland was acutely aware of the demands of his father’s profession, which often pulled the elder Dr. Cleveland away from time with his wife and three children. He missed some of his kids’ big milestones, from music recitals to winning touchdowns, because he was working to save the lives of “other people’s kids.”

Even so, John was drawn to a surgical career himself—but he was determined to find a course that wouldn’t cause him to miss out on moments with his own budding family. He leaned toward reconstructive plastic surgery.

John’s internship years brought an encounter that for most would be incandescent: He helped treat a man who had been mauled by a grizzly bear. But while his fellow trainees were thrilled at the opportunity to perform a potentially once-in-a-career reconstruction, John realized that he didn’t feel the same rush.

Plastic surgery wasn’t for him, he now understood—and he was just weeks away from starting a plastic surgery residency. Luckily, he was able to slide into a surgical rotation in a different specialty.

“In the operating room, a veteran doctor threw question after question at the rookie,” recounted a feature by the American Heart Association. “Even as the queries became more complex, John—who’d never studied this area, much less trained in it—aced the quiz. The look on the veteran doctor’s face sent John a clear message.”

The area was cardiac surgery. Specifically, pediatric cardiac surgery. And John was a natural.

Since those days, Drs. John and David have developed a deeper understanding of one another—and of how they both lamented the moments they missed.

“I have been surprised by the manner in which my career has allowed me to see my father from a different perspective,” John reflected. “Now that I am a dad myself, working in the same field, I have come to better terms with the demands that this job places on you and how much it can compete with family life. It has certainly increased my empathy and understanding of how my dad had to do things growing up.”

It has also helped John approach his career decisions with a savviness for work/life balance that wasn’t as feasible for his dad.

Dr. David Cleveland was often a lone ship in his profession, having at most one surgical partner to cover for him in an emergency. Dr. John Cleveland landed a fellowship at Children’s Hospital Los Angeles (CHLA) in California, which has a large surgical staff that he described as virtually interchangeable because of their top-notch skillsets.

“I am entering my fourth year as an attending and have taken over as the program director for our congenital heart surgery training program,” Dr. John Cleveland said. “I’m looking forward to continue matching high-quality applicants that our group of surgeons can mold into excellent technicians as well as thoughtful bedside physicians who care for children with congenital heart disease.”

As his career and family have blossomed, John has happily stayed with CHLA, and it allows him the freedom to be present for moments like birthdays and softball games.

The senior Dr. Cleveland recently celebrated a milestone of his own. He has retired from clinical practice, and he’ll now have the time to not only make memories with his kids and grandkids but also to pick up a research project for which he completed pilot data before the pandemic. He and John are working collaboratively. “We are transplanting genetically modified pig hearts into infant baboons with the intention to translate this to clinical care of neonates and infants as a bridge to cardiac allotransplant,” Dr. John Cleveland said. “The current technology used to bridge this fragile patient population is fraught with complications and risk. We believe xenotransplant will prove to be safer and a more appropriately tailored option for these small children.”

The research is funded, Dr. Cleveland said, and it’s slated to kick off this month.

If you know of a unique member experience that should be featured in STS News, contact stsnews@sts.org.
Wiensch said, “We happen to be the charitable arm who can accept donations and give away grant money, but the mission of the Foundation is very seamlessly woven into the fabric of STS.”

STS covers all TSF administrative costs, which is another unusual aspect of its governance, Wiensch explained. “Administrative overhead is necessary to run a foundation, and many association foundations don’t have the luxury of a sponsoring parent organization. But STS supports TSF, which means that every dollar our donors give is spent on doing good. We are using donors’ gifts in a really meaningful and impactful way.”

In the past year, donations have supported 286 cardiothoracic surgery research and fellowship grants, 63 surgical outreach awards and scholarships, 128 travel scholarships to attend educational meetings, and 304 Alley-Sheridan scholarships, fueling work including:

- A mission to save the lives of young patients—and train local staff to save many more—in underserved areas of Peru, where rheumatic heart disease still takes a toll.
- Development of a novel molecular preservation technique to keep donated hearts more vigorous during transport.
- Exploring the role of nonclassical monocytes and lung-restricted antibodies in the development of primary graft dysfunction in lung transplant recipients, with a special focus on patients with cystic fibrosis.
- Studying the impact of PARP inhibitors on esophageal squamous cell carcinoma.
- Training in an immersive congenital clinical research experiences and formal mentorship from renowned pediatric cardiac surgeons, laying the foundations for a future career as a congenital surgeon-scientist.
• Examining the significance of tumor-derived extracellular vesicles in the development of lymph node metastases in patients with gastroesophageal malignancies.

• Investigating metabolic derangements in acute non-ischemic cardiomyopathies.

• A screening program in the Pacific Island Countries Network that will close gaps in patients’ access to lung cancer detection and treatment.

Wiensch also is impressed by the truly international scope of TSF’s sponsored research, education, and outreach. “My first week, I was on a review call for the Francis Fontan fellowship,” she said. “And on that call were reviewers who were in Spain, in Austria, in Latin America, in London—and we were interviewing applicants from all over the world. It was the most wonderfully international call, and I love that the Foundation really puts its money where its mouth is and funds excellent global research and fellowship opportunities.”

The TSF/Francis Fontan Fund International Traveling Fellowship, coadministered by TSF, the Fund, and the European Association for Cardio-Thoracic Surgery, supports a cardiothoracic surgeon’s travel to another institution for the purpose of learning a novel technique, adapting innovative technology, and/or fostering collaboration among surgical investigators—ultimately furthering the progress of surgical practice at the recipient’s home institution.

“We happen to be the charitable arm who can accept donations and give away grant money, but the mission of the Foundation is very seamlessly woven into the fabric of STS.”

The generosity of TSF donors has made a profound impression on Wiensch. “It’s always fascinating to me that people give so much to a career, to a profession, and that they are willing to give back to the organizations that ensure the future of the specialty through volunteer leadership and sharing treasure. The thoracic surgery specialty has defined and enriched TSF donors’ lives,” Wiensch added, “and when they make a commitment to giving back to that specialty through TSF, they’re committing to research, education, and outreach that will benefit the way they practice, and will benefit the future of the specialty.”

STS Members can continue to support critical advancements in cardiothoracic surgery at thoracicsurgeryfoundation.org.

When donors give to The Thoracic Surgery Foundation, they can be confident in knowing that their contributions are directly funding real-world science, education, and outreach that will change the lives of patients and advance the careers of promising surgeons.
Last month, Congress passed legislation that helps mitigate a nearly 9% cut to Medicare reimbursement for cardiothoracic surgery. Instead, cardiothoracic surgeons will experience a 2.08% decrease in reimbursement—which went into effect Jan. 1, 2023.

While the Society’s goal was to eliminate 100% of the pending cuts, its efforts as part of the Surgical Care Coalition (SCC) succeeded in substantially reducing the impact on surgeons in the interim. Throughout the course of 2022, the Society and its SCC partners engaged with legislators to stop the planned cuts.

“STS members who participated in advocacy efforts this year are to be commended for their contributions toward fixing a broken system,” said STS President John H. Calhoon, MD. “Our work will continue in 2023 or until Congress takes action on developing a long-term solution for Medicare payment.”

“These cuts are not sustainable going forward,” added Joseph Cleveland Jr., MD, chair of the STS Council on Health Policy and Relationships. “A long-term solution to Medicare reform is the most important thing in all of this in order to give cardiothoracic surgeons a degree of financial certainty to operate their practices. We need to be here so that we can take care of all patients with heart disease and cancer when they need us most.”

In addition to the Society’s individual efforts, STS’ legislative advocacy is greatly bolstered by its proactive role in the Surgical Care Coalition, a national coalition of 14 medical associations and societies that collectively represent 150,000 surgeons and anesthesiologists. Targeting Congressional leadership, the Surgical Care Coalition unifies the voice of the surgical profession on policy issues related to patient access and care quality.

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In addition to the Medicare cuts that just happened, Dr. Cleveland urges surgeons to think about some of the most profound long-term consequences that loom if drastic Medicare cuts continue; aging Baby Boomers may not be able to find cardiothoracic care if surgeons are forced to limit patients covered by Medicare.

Further, he notes that tomorrow’s promising
surgeons may choose not to enter the profession because of lengthy training, high educational debt, and unpredictable reimbursement—and patients will ultimately suffer. The US shortage of cardiothoracic surgeons is expected to reach severe levels by 2035, according to estimates derived from the STS Adult Cardiac Surgery Database and the American Cancer Society.

Although any surgeon who serves Medicare-covered patients will be impacted by these latest cuts, Dr. Cleveland adds that surgeons in rural or under-served areas and independent surgeons may be affected most. He urges STS members to take the following actions:

1. Make your views known to your federal and local lawmakers. Tell them that you want to take care of Medicare patients in their districts, but cuts might jeopardize this. Find contact information for members of Congress at congress.gov/contact-us.

2. Contribute to the STS Political Action Committee, which helps get surgeon advocates in front of legislators who can support surgeons. Donations can be made at pac.sts.org.

3. Participate in volunteer health policy work with STS that fits your preferences and time. Explore proactive opportunities at sts.org/advocacy or email advocacy@sts.org.

“If we continue on the current path, we face an unsustainable crisis in providing care to our patients with heart and lung disease,” Dr. Cleveland said.
Mark Your Calendar

Upcoming STS Educational Events

- **STS 59th Annual Meeting**
  San Diego, California • Jan. 21 – 23, 2023

- **2023 STS Coding Workshop**
  Virtual • February 10 – 11, 2023

- **STS Workshop on Robotic Thoracic Surgery**
  Norcross, GA • April 20 – 21, 2023

- **2023 STS Coronary Conference**
  Miami, Florida • June 3 – 4, 2023