Embracing Failures Serves as a Catalyst to Success

Dr. Richard L. Prager, MD highlighted the importance of performance measurement.

Richard L. Prager, MD took attendees on a journey of quality improvement initiatives in cardiovascular surgery, highlighting the STS National Database and the Michigan Society of Thoracic and Cardiovascular Surgeons Quality Collaborative, the latter of which he now directs.

Keith S. Naunheim Elected 2018-2019 STS President

Saint Louis University surgeon will focus on health care delivery and reimbursement

Keith S. Naunheim, MD

An STS member since 1988, Dr. Naunheim has served on numerous committees and workforces; most recently, he was the Society’s Secretary and First Vice President. Dr. Naunheim also has chaired the Workforce on Nomenclature and Coding, the Council on Health Policy and Relationships, and the Workforce on Media Relations and Delivery and Reimbursement.
We are your partner, and we’re here to stay
As others leave the cannula market, we continue to invest. It’s what we’ve been doing for more than 35 years, bringing you reliable, trusted favorites — such as DLP™, Bio-Medicus™, and Soft-Flow™ — for each type of patient and procedure.

Stop by our booth to experience our commitment to you.
Commitment

Together — with your skilled knowledge and our enabling technologies — we can deliver the right therapies for each individual with coronary artery disease (CAD). The changing cardiac surgery landscape is challenging, and we stand with you as one healthcare team, striving to find new solutions for CAD.

Stop by our booth to celebrate 20 years of Octopus devices.
Critical Care Pioneer to Give Lillehei Lecture

Three Honored for Remarkable Dedication to STS

New Officers, Directors Elected

Critical Care Pioneer to Give Lillehei Lecture

The 2018 C. Walton Lillehei Lecturer will be Robert H. Bartlett, MD, a groundbreaking and internationally recognized medical researcher, surgeon, and professor. He will give a talk on “The History and Evolution of ECMO.” Dr. Bartlett is best known for developing this life-saving heart-lung technology. When Dr. Bartlett and his team first started using ECMO, the mortality rate for infants with lung failure was 90%; eventually, the survival rate became 90%. Primarily used in the beginning for babies in critical condition, ECMO is now the dominant short-term life support mechanical technology worldwide.

“The concept of using mechanical devices to keep people with no heart or lung function alive is new in the last 50 years,” explained Dr. Bartlett. “No one believed you could do that, and now we do it routinely.”

The Lillehei lecture honors C. Walton Lillehei, MD, one of the world’s preeminent cardiac surgeons who was considered to be the “father of open heart surgery.”

Three Honored for Remarkable Dedication to STS

Distinguished Service Award recognizes commitment to the Society and the specialty

TS honored three respected and extraordinary contributors with its 2018 Distinguished Service Award, presented yesterday evening at the Annual Membership (Business) Meeting.

“Marshall Jacobs, Cameron Wright, and Francis Nichols are on the frontline, giving back in ways that help other surgeons, help our specialty, and—in the end—help our patients. These three surgeons deserve to be recognized as exceptional individuals,” said 2017-2018 STS President Richard L. Prager, MD.

Marshall J. Jacobs, MD Baltimore, Maryland

An STS member since 1991, Dr. Jacobs has served the organization in many capacities, including as Chair of the STS Workforce on Congenital Heart Surgery and his current role on the Workforce on National Databases—particularly as Chair of its Congenital Heart Surgery Database Task Force. He also has served on the Committee for Congenital Heart Surgery Initiatives and the Workforce on Evidence Based Surgery.

Dr. Jacobs has been a cardiothoracic surgeon and clinical investigator for 30 years, with special emphasis on congenital heart disease, pediatric heart transplantation, and pediatric cardiac critical care. In addition to his clinical career, he is the author of more than 250 peer-reviewed publications.

A graduate of Yale College and Harvard Medical School, Dr. Jacobs trained in general and cardiothoracic surgery at Massachusetts General Hospital (MGH), where he also was a fellow in Cardiovascular Research. He currently holds the positions of Professor of Surgery at The Johns Hopkins School of Medicine and Director of Pediatric Cardiac Surgery Outcomes Research at The Johns Hopkins Hospital.

“Dr. Jacobs’s tireless efforts in the complex world of congenital heart surgery and his expertise in helping to build a database around it make him very deserving of this award,” said Dr. Prager. “With his thoughtful and keen intellect, he recognizes the challenges and diagnostic complexities in the congenital world. Dr. Jacobs has been phenomenal.”

Cameron D. Wright, MD Boston, Massachusetts

An STS member since 1991, Dr. Wright currently is an STS Director-at-Large and serves on the Meetings and Education Council Operating Board. He previously chaired the American Board of Thoracic Surgery in addition to serving on several STS governance bodies, including the Council on Health Policy and Relationships, the Quality, Research, and Patient Safety Council Operating Board, the Workforce on National Databases (chairing its General Thoracic Surgery Database Task Force for many years), and the Workforce on Coding and Reimbursement.

Dr. Wright graduated with honors from the University of Michigan and the University of Michigan Medical School. He completed his internship and residency at MGH and became board certified in both surgery and thoracic surgery. With a special interest in quality and patient safety in surgery, Dr. Wright chairs the MGH Department of Surgery Quality Assurance. He also is Associate Chief of the Division of Thoracic Surgery and an Associate Program Director at MGH, as well as a Professor of Surgery at Harvard. Dr. Wright serves as a colonel in the Medical Corps of the US Army Reserve and completed three tours of duty in Iraq and Afghanistan.

“Dr. Wright is a clinical leader in general thoracic surgery, as well as a recognized and thoughtful commentator in the world of general thoracic surgery,” said Dr. Prager. “His ability to provide instrumental guidance in coding and reimbursement has been most helpful, and he is universally viewed as a thoughtful discussant on complicated issues.”

Francis C. Nichols III, MD Rochester, Minnesota

Dr. Nichols—an STS member since 1993—is currently the Chair of the STS Workforce on Coding and Reimbursement, while also serving on the Health Policy and Relationships Council Operating Board. His previous STS experience includes service on the Workforce on Patient Safety.

After graduating with honors from the University of Virginia School of Medicine, Dr. Nichols completed a residency at the Mayo Clinic. With more than 30 years of diverse thoracic and vascular surgery experience, he currently holds the positions of Chair of Thoracic Surgery at the Mayo Clinic and Professor of Surgery at the Mayo Clinic College of Medicine.

“Dr. Nichols works behind the scenes of our specialty via STS, effecting change in coding and reimbursement,” said Dr. Prager. “His dedication, commitment, and desire to help have been unheralded—until now. This award signifies how important his efforts are to all of us in cardiac and thoracic surgery.”

The Distinguished Service Award, established in 1969, recognizes individuals who have made significant and far-reaching contributions to STS.

New Officers, Directors Elected

In addition to electing Keith S. Naunheim, MD as the Society’s new President, STS members elected several new officers and directors yesterday evening.

Robert S. D. Higgins, MD, MSHA was elected First Vice President, and Joseph A. Dearnari, MD was elected Second Vice President. Joseph F. Sibik III, MD was reelected Secretary, and Thomas E. MacGillivray, MD was reelected Treasurer.

Kevin D. Accola, MD, Vinod H. Theurani, MD, and Ara A. Vaportyan, MD also were elected or reelected as Directors-at-Large.

Ferguson Lecture Highlights Health Care Reform

Not one, but two speakers have been chosen for the Thomas B. Ferguson Lecture, which will be presented on Tuesday morning.

John Z. Ayaniyan, MD, MPP will deliver “Health Care Reform: Why It’s Still Needed and Where It’s Headed.” He is the Director of the Institute for Healthcare Policy and Innovation at the University of Michigan.

Karen Joyst Maddox, MD, MPH will present “The Future of Payment Reform in Medicare.” She is a practicing cardiologist at Washington University in St. Louis who has served as a health policy advocate for the Department of Health and Human Services.

Thomas B. Ferguson Lecture Tuesday 9:00 a.m. – 10:00 a.m. Grand Ballroom

John Z. Ayaniyan, MD, MPP

Karen Joyst Maddox, MD, MPH

Following the two presentations, there will be a panel discussion on health care reform with Keith S. Naunheim, MD, Richard L. Prager, MD, David M. Shabian, MD, and Alan M. Speir, MD.

The Ferguson Lecture was established in 2002 and recognizes Thomas B. Ferguson, MD, one of the few individuals to serve as President of both STS and AATS.
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Longitudinal Sternal Stabilization

Reinforce the sternum
Maximize success

over 2,000 devices implanted <0.01% complications

83% stronger than wire alone*

$0 device cost reentry

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*Worcester Polytechnic Institute, 2018
Sternal Fixation Mechanical Comparison, Worcester, MA,
www.klsmartinnorthamericainc.com
Developed in conjunction with Dr. Jeko Madjarov,
Carolinas HealthCare System
Patient #8,992,530. Additional Patents Pending
Options for Aortic Valve Replacement Vary in Younger Patients

Aortic valve replacement is one of the most common open heart procedures performed by cardiothoracic surgeons. Although the choice of approach is fairly standard for patients older than 70 years, the best approach for younger patients is less clear.

American and European guidelines on valvular heart disease recommend mechanical prostheses for patients younger than 60 years, but the use of bioprosthetic valves has substantially increased, and some studies have shown that mid- to long-term survival rates are similar for both types of valves.

A three-way debate during this afternoon’s Adult Cardio: Aortic Valve/Novel Technologies session will shed light on this issue. Three cardiothoracic surgeons will discuss the case of a 50-year-old patient with severe symptomatic aortic insufficiency and a non-aneurysmal bicuspid aortic valve, with each surgeon presenting a different approach: isolated valve repair, mechanical aortic valve replacement, and bioprosthetic aortic valve replacement.

“Prosthetic valve choice is important to our patients because the kind of valve chosen acts as a surrogate for life expectancy and need for reoperative heart surgery,” said Dr. Sultan. “However, in the absence of SOV aneurysm, isolated aortic valve repair may not be as durable. Patients may require reoperation at 10 years or less.”

With regard to valve replacement, mechanical aortic valve replacements may outlast a patient’s life, but require anticoagulation and are associated with bleeding risks. In contrast, bioprosthetic aortic valves do not require therapeutic anticoagulation, but carry greater risk for structural valve deterioration, with reoperation or transcatheter aortic valve replacement being needed at an average of 13 years.

Dr. Sultan encouraged attendees to come with questions and help stimulate discussion about each of the viewpoints.

“We want attendees to go home with a better understanding of the most appropriate option based on the specific advantages and disadvantages of each approach, the clinical characteristics of the patient, and the patient’s preferences,” he added.
Learn about LSI’s automated instrumentation for minimally invasive aortic and mitral valve replacement at LSI Booth 537 and experience hands-on training in our LSI Innovation Boutique.
The information listed here is accurate as of January 11, 2018. The information for these products and services was provided by the manufacturers, and is subject to change. This publication should not be construed as a product endorsement bySTS.
New product developments in its titanium atrium. The CERAMO and Superplast instruments designs for unmatched atrial exposure of the left atrium. The ENDOCAMELEON® telescopes. The IMAGE1 S™ Camera Architecture and innovative visualization capabilities. Ninamed Inc Camarillo, CA

KLS Martin 901
JVL Martin, FL
KLS Martin, a responsive company, is focused on the development of innovative products for orthopedic, cardiac, and thoracic surgery. New product developments in its titanium plating systems allow these products to be used for rapid sternal fixation and reconstruction.

Koros USA, Inc 328
Moorepark, CA
Koros Medical manufactures and distributes coronary artery bypass, aortic valve replacement, internal mammary artery, and mitral valve retraction, pediatric and adult stent grafters, reamers, and stainless steel needle holders and forceps. High-demand state-of-the-art instruments include the Internal Mammary Artery Tower, SWIFT, and Pro-Retractors.

Kreg Therapeutics 221
Melrose Park, IL
Life Net Health 325
Pleasant Prairie, WI
LivaNova 313
Arvada, CO

LocumTenens.com 326
Alpharetta, GA
Since 1995, LocumTenens.com has been a leader in placing physicians and advanced practice professionals in short-staffed health care facilities. LocumTenens.com also operates the largest job board in the industry, providing free access to thousands of jobs in all medical specialties.

LSI Solutions 537, 637
Las Vegas, NV
LSI Solutions’ RAM® Device is an automated, dual curved needle anular suturing device that places a circa 15mm wide hollow needle in a single, economical delivery. The SAVIT® Suture Device is an automated, dual curved needle anular suturing device that places sutures through the sewing cuff in one squeeze. With 11 years of proven clinical results, COR-KNOT™ is suture fastening technology you can trust.

Med Alliance Solutions 824
Sycamore, IL
ISO 13485-certified medical device distributor committed to providing high-quality specialty devices for thoracic surgery worldwide. Exclusive US distributor of French instrument manufacturer Delacroix-Chevalier and operational partner of Michigan-based SurgiCardiovascular for open heart surgical products.

Medallia AG 803
McKernan, MN
Medallia is the standard of care in the operating room. With the unique combination of transit time flow measurement and high-frequency ultrasound imaging guidance to help reduce and minimize the risk of negative postoperative outcomes, Medallia’s quality assessment technology offers surgeons quantifiable validation and guidance for cardiovascular, vascular, transplantation, and neurosurgery.

MedPartners locum Tenens 112
Coral Springs, FL
MedPartners locum Tenens specializes in placing well-qualified physicians and advanced practice clinicians in locum, locum-to-locum, and direct hire thousand-provider positions while making this process as seamless as possible for client facilities. Its highly skilled recruiters assist in this process from prequalification to final placement.

Medtronic 1313
Eden Prairie, MN
As a global leader in medical technology, services, and solutions, Medtronic provides medical innovations and health of millions of people each year. The company uses its deep clinical, therapeutic, and expertise to address the complex challenges faced by health care systems today. Let’s take health care further. Together. Learn more at Medtronic.com.

Gore & Associates 1406
Flagstaff, AZ
The Gore Medical Products Division has provided solutions to medical problems for more than 20 years. More than 35 million Gore medical devices have been implanted worldwide. Products include surgical, endovascular, interventional devices, surgical materials, and sutures for use in vascular, cardiac, and general surgery. For more information, visit www.goremedical.com.

Intuitive Surgical 814
Sunnyvale, CA
Intuitive Surgical, Inc designs, manufactures, and markets surgical robotics systems. Their new system, the da Vinci® Surgical System, technology designed to allow surgeons to perform many complex procedures minimally invasively.

JACCME 1715
Warva, IN
JACCME pioneered the world’s first rigid sternal closure system applied presternotomy: the “JACCME® Rollers”. JACCME Medical is a company and culture committed to creating innovative, transformational technologies that facilitate open access to care, improving surgical and patient outcomes. Visit Booth 1715 and see how the company “thinks outside the paradox.” Get more information at JACCME.com.

Kapp Surgical 731
Cleveland, OH
Kapp Surgical is a custom design shop that designs surgical instruments and implants, manufactures them, and sells them, as well as distributes domestically and internationally. Kapp’s exclusive products include the Cosgrove Heart Retractor, Strip Tr’s surgical organizer, and cardiovascular closure systems, all FDA approved with several pending approval.

Karl Storz Endoscopy 312
El Segundo, CA
Karl Storz offers solutions for thoracic surgery, including standard endoscopy devices and surgical instruments that offer economic solutions for minimally invasive surgery. The ENDOCAMELEON® Telescopes allows surgeons to adjust viewing directions from 0° to 120° without changing textbooks. The “IMAGE1® S Camera Architecture System provides brilliant, natural color rendition and innovative visualization capabilities.

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Hayes Locums 937
Wood, TN
HCA owns and operates more than 170 hospitals across the United States, making it one of the nation’s leading providers of health care services. HCA believes that exceptional patient outcomes only come through a dedicated community of care, placing physicians at the forefront.

Heart Valve Society 932
Beverly, MA
The Heart Valve Society held its inaugural meeting in May 2015 at the Grimaldi Forum in Monte Carlo, Monaco, with more than 430 medical professionals, plus 80 industry partners. Whether you are a cardiologist, surgeon, researcher, or another member of the crucial valve disease treatment team, the HVS welcomes you to become part of something very unique. Membership is available online.

International Society for Minimally Invasive Cardiothoracic Surgery 924
Beverly, MA

Interface Diagnostics 108
Parsippany, NJ
Interface Diagnostics is a public molecular diagnostics company providing specialty molecular tests focused primarily on thyroid, esophageal, pancreatic, and lung cancer. The company’s most recently launched product is MyPlex® for Lung Cancer, which differentiates local recurrence of cancer vs formation of new primary tumors. Interface also offers ThyGeNiX, ThyraMiR, PancGeNiX, and BarenGeNiX.

G.S. Innovations 1628
Las Vegas, NV
G.S. Innovations provides a variety of health care solutions to many different industries. The company develops and identifies the best medical devices to help medical professionals overcome their challenges.

Hackensack Meridian Health 1525
Wall, NJ
Hackensack Meridian Health is a leading, not-for-profit health care network in New Jersey offering a complete range of medical services, innovative research, and life-enhancing care aiming to serve as a national model for changing and simplifying health care delivery through partnerships with innovative companies and focusing on quality and safety.

Fehling Surgical Instruments, Inc 1001
Denver, CO
Fehling Surgical Instruments, Inc is the leader in fine crafted surgical instrumentation that has focused on cardiovascular surgery for more than 30 years. The company features minimally invasive valve sets, including NEW retractor designs for unmatched atrial exposure of the left atrium. The KRAMO and Suprastent instruments are designed specifically for cardiovascular procedures (needles holders, forceps, clamps, and MISCS).

Frymire Associates 1100
Menlo Park, CA
Frymire Associates is a network of experienced medical device market professionals who specialize in conducting exploratory and qualitative research with leading physicians from a variety of specialties. Frymire Associates’ services encompass qualitative methods, such as in-depth interviews and focus groups, studies fielded at major medical meetings, and web-based research.

General Thoracic Surgery 332
Zumbrota, MN
Founded in 1988, the General Thoracic Surgical Society is a patient-operated support harness applied postoperatively to splint surgical wounds. Benefits include improved patient compliance, faster return to premorbid respiratory levels, fewer wound complications, and better postoperative mobility. It is useful for both chest and heart surgery, fractured rib, and other chest trauma patients.

General Cardio/Heart Hug 832
San Jose, CA
The Heart Hugger Sternum Support Harness is a patient-operated support harness applied postoperatively to splint surgical wounds. Benefits include improved patient compliance, faster return to premorbid respiratory levels, fewer wound complications, and better postoperative mobility. It is useful for both chest and heart surgery, fractured rib, and other chest trauma patients.

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Johnson & Johnson Medical 937
Cleveland, OH
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HCA 937
Wood, TN
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Heart Hospital Baylor Plaza, The 1425
Plano, TX
The Heart Hospital Baylor Plaza is a cardiovascular specialty hospital in North Texas that opened in May 2015. Over the past 10 years, its quality outcomes and guest satisfaction scores have been recognized, praised, and acknowledged from international giants in the health care field. Visit TheHeartHospitalBaylor.com to learn more.

Heart Valve Society 932
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The Heart Valve Society held its inaugural meeting in May 2015 at the Grimaldi Forum in Monte Carlo, Monaco, with more than 430 medical professionals, plus 80 industry partners. Whether you are a cardiologist, surgeon, researcher, or another member of the crucial valve disease treatment team, the HVS welcomes you to become part of something very unique. Membership is available online.

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Nadia International 1109
Austin, TX
Educational/surgical bronze sculptures for the thoracic surgeon. Museum-quality limited editions are created by the world famous sculptor Ronadé. More than 7500 surgeons in 77 countries collect his fine works of art. Introducing MIRACLE OR: LIFE II and IN G.O.D.’s Hand II at the 2018 meeting.

O National Death Index 206
Hyattsville, MD

Novo Innovations 225
Las Vegas, NV

Olympus America Inc 1307
Center Valley, PA
Olympus Medical Systems Group develops solutions for health care professionals that help improve clinical outcomes, reduce overall costs, and enhance quality of life for their patients. By enabling less invasive procedures, innovative diagnostic and therapeutic endoscopy, and early stage lung cancer evaluation and treatments, Olympus is transforming the future of health care.

P & M Harmony 106
Las Vegas, NV

Peters Surgical 307
Plymouth, MA
Vitalitec Geister will be displaying all its products, highlighting the Peters CV Suture, Enclose II Anastomosis Assist Device, Cygnet Flexible Clamps, Intrack Atraumatic Temporary Clamps and Inserts, and Geister ValveGate and ValveGate PRO line.

Otto Trading Inc. 320
Santa Ana, CA
Visit the Oxford University University Press stand to browse prestigious surgery books at an exclusive conference discount, and collect your free sample copies of the journals of the European Association for Cardio-Thoracic Surgery: European Journal of Cardio-Thoracic Surgery and Interactive CardioVascular and Thoracic Surgery.

Pinnacle Biologics 1532
Chicago, IL
Pinnacle Biologics delivers photodynamic therapy (PDT) to patients through its line of products. By administering an FDA-approved biopharmaceutical drug that is selectively retained in tumors and activated by an FDA-approved laser light, PDT can eradicate tumor cells. The two primary uses for Pinnacle’s drug include the treatment of esophageal cancer and of non-small-cell lung cancer.

Providence Health & Services 220
Seattle, WA
Providence Health & Services is affiliated with Swedish Health Services, Pacific Medical Centers, and Kadlec. Together, the organizations include more than 5,000 employed providers, 35 medical centers, and more than 600 clinics in Alaska, California, Montana, Oregon, and Washington. Providence is currently recruiting providers in nearly all medical specialties throughout the West. providence.org/providerjobs

2018 ANNUAL MEETING EXHIBITORS cont.

2018 EXHIBITOR MAP

STS Exhibit Hall Hours
Tuesday 9:00 a.m. – 3:30 p.m.
**Regional Data Managers:** St. Luke's University Health Network, | JAN. 30-31, 2018

**Staff Care** | Dallas, TX

**STS/CTSNet Career Fair**

**Staff Care**

**Regional Data Managers:** St. Luke's University Health Network, Philadelphia, PA

**STS/CTSNet Career Fair**

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**Staff Care**
Mark Your Calendars!

2018 STS Educational Courses

Symposium on Robotic Cardiac Surgery: Mitral Valve Repair, Coronary Bypass, and More
March 23-24, 2018
Chicago, IL

Symposium on Robotic Thoracic Surgery
May 18-19, 2018
Chicago, IL

STS/ELSO ECMO Management Symposium
July 13-15, 2018
Tampa, FL

Advances in Quality & Outcomes: A Data Managers Meeting
September 26-28, 2018
Hollywood, CA

15th Annual Multidisciplinary Cardiovascular and Thoracic Critical Care Conference
October 4-6, 2018
Washington, DC

ACS/STS Cardiothoracic Surgery in the Future: Technology Overview for Residents and Medical Students
October 22, 2018
Boston, MA

STS/EACTS Latin America Cardiovascular Surgery Conference
November 15-17, 2018
Cartagena, Colombia

Visit sts.org/meetings for the latest information on STS educational programs.
Survey Reveals Key Traits Sought in Mentors

Mentorship in cardiothoracic surgical training has an important influence on personal development, career selection, advancement, and productivity. Despite its importance, mentorship has remained uncharacterized, and its specific role among residents has not previously been assessed adequately.

In a session this afternoon, Elizabeth H. Stephens, MD, PhD, of New York Presbyterian Hospital, will share results from questions related to mentorship in the 2017 Thoracic Surgery Directors Association/Thoracic Surgery Residents Association In-Training Exam Survey. The survey asked about characteristics that residents want in their mentors and the impact of the mentor. “The role of mentorship, including traits sought and its impact, changes throughout training and also varies with gender and program type,” she said.

With regard to gender, more female residents than male residents valued mentors who could serve as role models and help with networking. Women also reported that their mentors were less effective in teaching technical skills and clinical ability. “It’s unclear if these findings are related to the different traits valued by women or to mentors being less effective in imparting specific knowledge and training to women,” said Dr. Stephens.

Can Social Media Bridge the Mentorship Gap?

“Women in surgery often report a lack of mentorship as a significant obstacle to career progression and job satisfaction and also value same-sex mentors as sharing a sense of history and understanding of both personal and professional career paths,” said Mara B. Antonoff, MD, of the University of Texas MD Anderson Cancer Center in Houston, another presenter.

Unfortunately, same-sex mentors for women are lacking in surgery—especially in cardiothoracic surgery, where women represent only about 5% of practicing cardiothoracic surgeons.

Dr. Antonoff and her coauthors hypothesized that social media is a useful supplement to physician and trainee interactions, particularly for women in cardiothoracic surgery who may lack access to same-sex mentors at their own institutions. In a separate survey, the researchers asked trainees in various surgical specialties about the role of social media in enhancing mentorship.

The results showed that approachability, ability to match by field of interest, availability, and sharing of information about daily life made prospective mentors on social media more attractive to all surgical trainees. Compared with trainees in other surgical specialties, cardiothoracic surgery trainees were more likely to say that they valued the role of same-sex mentorship in their career path but lacked exposure to same-sex mentors at their own institutions. In addition, cardiothoracic surgery trainees were more likely than other surgical trainees to use social media for building a network of same-sex mentors. They also were more likely to seek advice from same-sex mentors on work-related topics such as survival, politics, conflicts, and career planning.

“Social media brings a new dimension to networking, allowing for interactions that may be asynchronous and geographically remote,” said Dr. Antonoff. “Social media serves as a valuable tool to enhance networking and mentorship of cardiothoracic surgeons, particularly for women.”

Recognizing the importance of mentorship for the next generation of cardiothoracic surgeons, the STS Workforce on Career Development is creating a platform to connect early career mentees with mentors. Workforce members also are planning a Twitter chat this spring; visit sts.org/career-development for more details on upcoming chats.
Get hands-on instruction from experts in several cardiothoracic surgical procedures.

Put Knowledge into Practice at STS University

C
ap off your Annual Meeting experience by attending STS University on Wednesday morning. These hands-on courses allow attendees to gain experience with a wide variety of cardiothoracic surgical procedures. Expert instructors will work closely with small groups, providing the opportunity for ample questions and individual instruction.

Each STS U course will be offered from 7:00 a.m. to 9:00 a.m. and again from 9:30 a.m. to 11:30 a.m., and you must purchase separate tickets in addition to your Annual Meeting registration. Visit Registration in the Atrium Lobby to see which courses still have availability.

Please note that STS University features only hands-on learning, and attendees are strongly encouraged to review the didactic lectures in advance. View course materials at the STS University viewing station located in the Floridian Ballroom Foyer, online at sts.org/stsuniversity, or through the STS Meetings app.

Course 1: Essentials of TAVR
Course 2: TEVAR and Aortic Arch Debranching Procedures

Course 3: Mitral Valve Repair
Course 4: Valve-Sparing Aortic Root Replacement
Course 5: Aortic Root Enlargement Procedures and Aortic Valve Leaflet Reconstruction
Course 6: VATS Lobectomy
Course 7: Advanced Open Esophageal Reconstruction, and Pectus Surgery
NEW! Course 9: Minimally Invasive Aortic and Mitral Valve Surgery

Claim Continuing Medical Education Credit

The STS 54th Annual Meeting utilizes an entirely electronic evaluation and CME/Perfusion CEU credit claim process. Both physicians and perfusionists can use this system to claim credit, complete evaluations, and print CME/Perfusion CEU certificates. Certificates of Attendance also are available for other attendees and international physicians not wishing to claim CME/Perfusion CEU credit. Attendees will be able to evaluate and claim CME/Perfusion CEU credit for ticketed sessions unless they have registered for those sessions. Please note that CME credit is not available for the Residents Symposium, Residents Luncheon, or STS/AATS Tech-Con 2018.

Attendees can complete the overall meeting evaluations and all individual session evaluations onsite at CME Stations located in the Grand Ballroom Foyer and the Floridian Ballroom Foyer. Certificate printing is available.

Attendees also can complete evaluations and claim credit by visiting sts.org/2018evaluation or using the STS Meetings app. In order to make this process more convenient for attendees, the meeting evaluations will be available online through Monday, February 12, 2018. Attendees can log in to the website with the following information:

Username: 6-digit member ID number located on the upper right corner of their meeting badge
Password: First initial and last name

Data Indicate Improved Outcomes Using LVADs

The use of left ventricular assist devices (LVADs) is increasing, not only as a bridge to transplant but also as destination therapy. This has generated a growing clinical and academic interest in mechanical circulatory support and the treatment of patients with these devices.

In a new session organized by STS and the International Society for Heart & Lung Transplantation, speakers will address these issues for a global audience, including cardiac surgeons, cardiologists, VAD coordinators, and other providers involved in the care of patients with LVADs.

“The goal of the Symposium is to introduce a broad range of practitioners to the most recent clinical trial data and emerging areas of investigation in the field of mechanical circulatory support,” said moderator Gabriel Sayer, MD, of The University of Chicago Medicine.

One topic of particular interest is the optimal approach to LVAD implantation.

The progressive miniaturization of these devices has made minimally invasive implantation an attractive option, but challenges exist, and data comparing outcomes with those of conventional implantation are few. Still, the available data indicate improved outcomes with minimally invasive implantation compared with conventional surgery, and many experts believe that minimally invasive implantation should become the preferred approach, unless otherwise indicated.

Another important area of focus is biventricular failure, which is a particular challenge, as little progress has been made in its treatment. In addition, the outcomes associated with biventricular support have been inferior to those associated with left-sided support strategies. New durable biventricular support options are emerging, however, and speakers will describe these options.

An additional goal of the Symposium is to contrast the American and European experiences with LVAD therapy. Dr. Sayer noted that a highlight will be a presentation by Finn Gustafsson, MD, PhD, of Rigshospitalet in Copenhagen, Denmark, who will discuss the implications of these findings and also will present data from the ELEVATE registry, which was developed to evaluate HeartMate 3 in the post-market approval setting.
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* Chest. 2013;143(suppl 5):7S-37S
** Data on file

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The Society will host three press conferences on Tuesday highlighting some of the exciting research being presented at the STS 54th Annual Meeting. The press conferences will take place at 10:00 a.m. in Room 208.

Coronary Artery Bypass Surgery Compared to Percutaneous Coronary Intervention in Patients Younger Than 50 Years of Age: Long-Term Outcomes
Speaker: Wael I. Awad, MD
St. Bartholomew’s Hospital, London, United Kingdom
Discussant: Robin G. Cohen, MD, University of Southern California, Los Angeles

Factors Associated With New Persistent Opioid Use After Lung Resection
Speaker: Alex A. Brescia, MD, University of Michigan, Ann Arbor
Discussant: David T. Cooke, MD, University of California Davis Health, Sacramento

Consequences of Refusing Surgery for Esophageal Cancer: A National Cancer Database Analysis
Speaker: Sebron W. Harrison, MD, Weill Cornell Medical College and New York Presbyterian Brooklyn Methodist Hospital, New York, NY
Discussant: Mark S. Allen, MD, Mayo Clinic, Rochester, MN

Topics for STS Press Conferences

Patient Outcomes
- Long-term outcomes of patients undergoing coronary artery bypass surgery compared to percutaneous coronary intervention in patients younger than 50 years of age.
- Factors associated with new persistent opioid use after lung resection.

Discussion
- The impact of surgical decisions on patient outcomes.
- The role of new technologies and medications in improving patient outcomes.

Future of Valve Repair

European and North American Strategies Differ for Controversial Procedures

Level I evidence is often missing in cardiothoracic surgical practice, due to a lack of controlled trials. As a result, standard treatment and management may vary between continents.

Those differences will be explored in this afternoon’s collaborative session from STS and the European Society of Thoracic Surgeons (ESTS).

Session moderators Janet P. Edwards, MD, of the University of Calgary in Canada, and ESTS President Kostas Papagiannopoulos, MD, of St. James University Hospital in Leeds, United Kingdom, will lead the comparative discussion on a variety of controversial issues in general thoracic surgery, including the surgical management of lung metastases, multimodal approaches to the treatment of malignant pleural mesothelioma, surgical management of small cell lung cancer, and approaches to treatment of primary chest wall malignancies.

“We selected hot topics that are considered controversial in Europe and North America and chose expert speakers who can give their take on what’s currently happening in each area,” Dr. Edwards said. “Our session will compile the evidence in these domains to help practicing surgeons make the best possible treatment decisions for their patients.”

The speakers will address whether it’s appropriate to operate on lung metastases and whether it actually prolongs survival. Survival after resection of lung metastases likely varies based on many factors, including tumor type. Speakers will provide advice on when metastectomy is advisable, Dr. Edwards said. As for malignant pleural mesothelioma, surgeons will discuss options for multimodal therapy, as well as the availability of clinical trials.

Discussion of limited-stage small cell lung cancer is expected to address which cases should be managed with surgical resection. Finally, surgeons will explore complex reconstruction following a chest wall tumor. Chest wall tumors are relatively uncommon, and some patients may benefit from multimodal therapy.

Considering existing differences in current practice, as well as possible recommendations for change, may convince general thoracic surgeons to rethink treatment in these domains, Dr. Edwards said.
The Exhibit Hall opened on Sunday evening, and attendees were able to visit with vendors while enjoying refreshments. Residents competed for the STS Jeopardy championship, with the University of Michigan emerging victorious. On Monday, an important session on diversity was held, poster authors discussed their work, and several awards were presented.

As one example of the power of the Quality Collaborative in improving outcomes, Dr. Prager described an initiative to increase use of the internal mammary artery in coronary bypass surgery. The success was the result of identifying rates of use at various sites, offering educational sessions, creating an exclusion form for operating surgeons who chose not to use the internal mammary artery, and providing feedback. Subsequent Quality Collaborative initiatives were successful in reducing ventilator time, decreasing unnecessary blood transfusions, and identifying when the critical or sentinel thought process or care process occurred leading to a patient’s death.

“Cardiac and thoracic surgeons have a unique opportunity with the data we have from our registries in the United States and worldwide to explore our outcomes and comparative performances, and—with understanding and feedback, discussion, and resetting of approaches and goals—create improvements, knowledge, and benefit for patients and our national health care systems,” he said.

Dr. Prager then reinforced the integral role of performance analysis and feedback for success in the sport he loves: tennis. Through short video clips of interviews with players and coaches, attendees heard how performance measurement, performance feedback style and timing, and personal qualities lead to improvement and success.

Dr. Prager captured the essence of the interviews by noting that cardiothoracic surgeons must embrace their failures, as that is the path to greatness, and should always think about getting better—not winning, but getting better—in order to be successful.

“The commitment of [tennis] players is unwavering and the recognition that performance feedback is essential is understood by every player at every level. Perhaps we can learn from their commitment and approaches,” said Dr. Prager.

He added, “Accepting performance feedback and looking at our outcomes is as much about our character as our talent or ability as surgeons, and as our future tennis stars recognize, there always are ways to improve.

“For all of us, while this may seem to be an aspirational narrative, the mastery of the approach, whether it is a hospital network, an individual hospital, or an individual surgeon, our professional innovation, our seeing, will create success,” he said.

“Accepting performance feedback and looking at our outcomes is as much about our character as our talent or ability as surgeons.”

—RICHARD L. PRAGER, MD
QUESTION OF THE DAY

What has been your favorite presentation so far?

TIMOTHY RYAN, MS, NP-C
Omaha, NE

DEEMY REKKAS, MD
Waukesha, WI

LUCAS HENN, MD
Youngstown, OH

DEKEA LITZENDORF, PA
Arlington, VA

"The ethical discussion on ECMO. It's a hot topic right now, and no one has the right answer."

"The abstract presentation on robotic biatrial cryo-maze ablation for persistent lone atrial fibrillation. The fact that such a complex procedure can be done with a minimally invasive technique is amazing. I love anything to do with robotics."

"Michael Mack's presentation. He made the argument for specialized centers for valve surgery to improve outcomes."

"There have been so many, but I'd have to say the President's Address. It was so inspiring. How could you not love it? Plus, tennis happens to be my favorite sport."

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@STS_CTSurgery
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Stay connected

TOP TWEETS

#STS2018

The STS-PAC Board of Advisors meets at #STS2018 in Fort Lauderdale.

Dr. Prager and @DavidCookeMD highlighting the priority of diversity & inclusion @STS_CTSurgery. An honor to be a member of the task force. Important to recognize the POSITIVES and INSPIRE everyone you meet. Mentors are truly impactful at all career stages. #STS2018 #MedEd #tsmsn

Very inspirational presidential address from Dr. Prager - “successful people are comfortable being uncomfortable” #sts2018 @OPreventzaMD

Congrats to Dr. Pena-Oscuivilca, TSF Travel Award recipient, from Peru! Visit STS #807 to learn about awards. #STS2018 @STS_CTSurgery

Cardiologists & CT Surgeons working together to manage valve dz: “A rising tide floats all boats.” -Michael Mack @STS_CTSurgery #STS2018 @JulieDoberne

@AlexBresciaMD answering questions after a great talk on new persistent opioid use after lung cancer surgery at #STS2018 @STS_CTSurgery

Had a great time presenting data on age-mismatching in lung transplant outcomes. Thanks @STS_CTSurgery for the opportunity to present! #STS2018 @david_j_hall
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