STSNEWS



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OUR MISSION IS TO ENHANCE THE ABILITY OF CARDIOTHORACIC SURGEONS TO PROVIDE THE HIGHEST QUALITY PATIENT CARE THROUGH EDUCATION, RESEARCH, AND ADVOCACY

49th Annual Meeting Just Weeks Away

T's almost here! The STS 49th Annual Meeting will kick off on Saturday, January 26, and will be packed with exciting debates, important research presentations, networking opportunities, and much more.

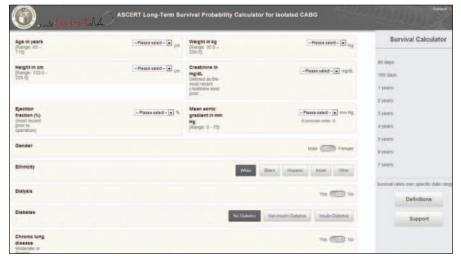
Weekend Highlights

Saturday will feature standalone courses held in conjunction with the Annual Meeting. One is jointly sponsored by STS and the Society of Cardiovascular Anesthesiologists and is titled "Intraoperative Echo and Decision Making in Cardiovascular Surgery." The course will provide instruction on standard intraoperative transesophageal echocardiogram imaging techniques and their interpretation.

New this year is a course co-sponsored by STS and the American College of Chest Physicians. The "Primer on Advanced and Therapeutic Bronchoscopy: Theory and Hands-On Session" course will start off with lectures and case presentations covering endobronchial ultrasound and airway obstruction, and then move into hands-on workstations to familiarize attendees with many types of equipment.

And as always, STS/AATS Tech-Con 2013 begins on Saturday with sessions on

(continued on page 6)



The new STS long-term CABG survival probability calculator can estimate a patient's probability of survival up to 7 years.

STS Unveils Long-Term CABG Survival Calculator

After months of work, the Society recently released a new survival probability calculator designed to estimate long-term survival following isolated CABG surgery for patients with particular combinations of risk factors. The calculator is available for download in the App Store for iPad and Google Play for Android devices. It is also available on the STS website at ascertcalc.sts.org.

The calculator is based on a risk model derived from linking STS Adult Cardiac Surgery Database data (version 2.52) to Centers for Medicare & Medicaid Services MEDPAR data as part of the STS-ACC ASCERT grant. The results of this linked registry study can be found in a recently published article in *Circulation* titled "Predictors of Long-Term Survival After Coronary Artery Bypass Grafting Surgery: Results From the Society of Thoracic Surgeons Adult Cardiac Surgery Database (The ASCERT Study)."

This new calculator estimates the long-term probability of survival following an isolated CABG surgical procedure in patients 65 years and older, using inputs on

(continued on page 3)



9 IOM Report





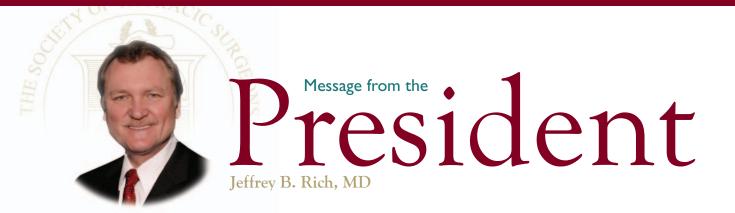


Washington Scene









This past year has been one of ground-breaking technological advancements, extensive collaboration, and important health policy decisions. As STS President, I've had the opportunity to participate in numerous panels, committees, and partnerships that have driven the cardiothoracic surgery field forward and opened many doors for STS in particular. Now, as we begin a new year, I'm encouraged by the achievements that we have made and look forward to exciting developments to come.

One of our biggest successes came in May, when CMS released a National Coverage Determination for transcatheter aortic valve therapy. This capped off months of work for STS surgeon leaders and staff. The NCD was important on many levels, and firmly established the role of the heart team—including the need for a cardiac surgeon to be part of the decision-making process.

On a related note, I appeared before an FDA advisory panel in June to discuss the successful collaboration among STS, ACC, FDA, and CMS that led to the initial FDA approval and Medicare coverage of Edwards Lifesciences' SAPIEN transcatheter heart valve. In October, FDA expanded the approved indication for the device to include patients with aortic valve stenosis who are eligible for surgery, but who are at high risk for serious surgical complications or death.

Our collaborative efforts with the ACC strengthened in 2012 with the STS/ACC TVT Registry, which has seen tremendous growth over the past year. Already, more than 150 sites have enrolled and more than 2,000 patient records have been entered. The Registry helps to enhance the monitoring of TAVR devices by serving as a repository for clinical data, and its creation has been made possible through ongoing collaborative efforts among STS, ACC, FDA, CMS, and Edwards Lifesciences. Read more about these milestones in the article on page 11.

STS is also collaborating with ACC in an application to sponsor an Investigational Device Exemption trial related to alternative access sites for TAVR. Our application was submitted in December and is pending approval.

In addition to the TAVR developments, the Society saw additional health policy achievements this year. In October, I represented

STS at a White House meeting to discuss "Physician Specialists and Delivery System Transformation." I highlighted the Society's experience with registry-based quality improvement and payment solutions and touted the benefits of the heart team concept for improving patient care and outcomes.

Additionally, I served on the Medicare Evidence Development & Coverage Advisory Committee that convened in November to review available evidence on the use of ventricular assist devices for the management of heart failure. The Society subsequently was invited by CMS to provide input on credentialing criteria for the use of VADs, both in residency training and after surgeons enter the workforce.

Another important milestone in 2012 was the publication of results from the ASCERT and SYNTAX clinical trials, which demonstrated advantages of coronary artery bypass grafting over percutaneous coronary intervention in many patients. STS will continue to monitor the results from these studies and work to inform the public about them, especially to assist patients afflicted with multivessel coronary artery disease. ASCERT II is already under way.

The work that STS does is often enhanced by collaboration with other professional organizations, government agencies, and industry partners. During the past year, STS has strengthened its relationships with international professional societies, including the European Association for Cardio-Thoracic Surgery, the European Society of Thoracic Surgeons, and the Asian Society for Cardiovascular and Thoracic Surgery. Of particular note, several of our colleagues from Asia will present during the International Reception and Symposium at the upcoming Annual Meeting, which this year will focus on the treatment of rheumatic mitral valve disease.

This is just some of the progress that has occurred over the past year, and there's much more to come. It has been an honor serving as your President, and I look forward to seeing many of you at the Annual Meeting in Los Angeles in just a few weeks. I hope you enjoy this issue of STS News.

STS News is a quarterly publication for members of The Society of Thoracic Surgeons.

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If you have a comment regarding the content of this publication or story ideas for future issues, please contact us:

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STS Unveils Long-Term CABG Survival Calculator (continued from cover)

31 patient demographic and clinical variables, such as age, weight, creatinine level, smoking history, and number of diseased vessels. The user provides the observed values for each of the variables listed and results are displayed over a series of nine points in time, ranging from 90 days to 7 years.

Because ASCERT data are limited to patients age 65 and older and focus on longer-term outcomes, this new calculator is intended to be a supplement to, not a replacement for, the current 30-day isolated CABG risk calculator that has been available on the STS website since 2005.

Users of the short-term risk calculator will be familiar with the benefits of incorporating a risk calculator tool into clinical practice, including its use as a discussion guide with patients regarding potential outcomes of an isolated CABG procedure.

"Previous risk models were valuable tools to estimate the short-term risks of CABG surgery, typically within 30 days of operation. This new model addresses a question that is just as important, or even

more important, to patients and their families—if I have CABG surgery, what is the probability, given my risk factors, that I will be alive several years from now? Such information should be useful for patient counseling, procedure selection, and shared decision making," said David M. Shahian, MD, Chair of the STS Workforce on National Databases and its Quality Measurement Task Force.

For more information about this new survival probability calculator, contact Scott Firestone, Research Coordinator, at sfirestone@sts.org or (312) 202-5866.

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Practice Management Summit Frames Challenges, Opportunities in Cardiac Health Care Delivery

By Vinay Badhwar, MD, Chair, Workforce on Practice Management, and V. Seenu Reddy, MD, MBA, Chair, Task Force on Practice Communication

he Affordable Care Act will be front and center at the upcoming STS Practice Management Summit, to be held on Sunday, January 27, 2013, as a part of the STS 49th Annual Meeting in Los Angeles. Given the impact that this legislation will have on physician practices, the program will provide attendees with information on how they can adapt.

Measuring and attaining quality has been a long-term focus of our specialty and that of STS. Similarly, the shift in emphasis from volume to value has been a focus of payers and health systems alike. This trend will likely accelerate in the coming years. With the goal of highlighting these and other key health care reform issues, the 2013 STS Practice Management Summit will provide an interpretation of health care trends that will directly impact cardiothoracic surgical practice.

The Summit will also offer insights on how to define the surgeon's value to health systems and review the impact of new technology on the delivery of cost-efficient health care. Specifically, the Summit program will cover:

- Value-Based and Outcome-Directed Care;
- The Future of Public Reporting (including an update on the AVR composite);
- Lessons Learned from Acute Care Episode Demonstration in CT Surgery and Cardiology;
- Tabulating Health System Value in Cardiac and General Thoracic Surgery Program Development;
- Post-Market TAVR Approval and Fiscal Realities in the Community; and
- Updated Reimbursement Projections in CT Surgery for 2013–2014.

Given the excellent Summit attendance in recent years, the content has been expanded for 2013 to ensure coverage of issues common to those in both academic and private practices. In addition, the Summit welcomes the participation of practice managers and administrators. Special registration provisions have been made to include our practice administration colleagues, as they have critical roles in today's practice environment.

While onsite registration is possible, pre-registering online for this important ticketed event is strongly encouraged. Sign up at www.sts.org/annualmeeting. We look forward to your participation and welcome your discussion.

The Practice Management Pearls column will return in the spring issue of STS News.



On Milestones

Robert A. Wynbrandt • Executive Director & General Counsel

Te again interrupt the series of guest columns recently appearing in this space to bring you a year-end/year ahead view of the Society from the STS staff perspective. It has clearly been a year of significant milestones for the Society, regardless of one's vantage point, with yet another year of major milestones on the horizon.

As Jeff Rich aptly notes in his President's message (see page 2), 2012 was a year in which STS once again broke new ground, particularly in the arenas of medical device approval and reimbursement coverage in the United States. With TAVR technology as the backdrop and with colleagues from the American College of Cardiology as our primary partners, virtually all of our departments, from Government Relations to the STS Research Center to Education and beyond, were

engaged in significant projects aimed at addressing this disruptive technology. Even our headquarters office got into the act, with teams of industry representatives coming to Chicago to meet with Jeff and other STS leaders for purposes of exploring how corporate and professional society leaders could appropriately pursue

their common interests to serve patients with the aid of new technology.

Other important milestones played significant roles in the lives of the STS staff this past year, from the rookies (12 of our employees have been with the Society for less than 1 year) to the veterans. Just to name a few: the Society took on management of the Thoracic Surgery Foundation for Research and Education (February 1) and CTSNet, Inc. (March 1), with those entities joining the Southern Thoracic Surgical Association, the Thoracic Surgery Directors Association, Women in Thoracic Surgery, and the Joint Council on Thoracic Surgery Education as specialty organizations for which the Society now provides administrative management services; hosted its first quality improvement webinar (on blood conservation, with 636 participating sites); was, to the best of anyone's knowledge, for the first time in its history the subject of a cover story in a magazine for association management professionals; conducted its first standalone VADs symposium (to critical acclaim); rolled out a new long-term CABG survival calculator to complement our existing short-term CABG risk calculator (see page 1); and

introduced a variety of communications initiatives, including publication of the electronic *STS Weekly* for Society members and other new e-newsletters that are targeted for specialized audiences (e.g., representatives from companies exhibiting at our Annual Meeting and STS-PAC supporters), as well as a new press release program that has garnered increased (and well-deserved) public attention for *The Annals*. And of course the biggest milestone celebrated by the STS staff this past year was its own 10th birthday; we've come a long way since our 9.5 FTEs opened these doors on the 23rd Floor of 633 North Saint Clair on June 1, 2002.

And yes, we have some pretty significant milestones to look forward to in 2013, as we initiate the celebration of the Society's 50th year during our upcoming Annual Meeting

in Los Angeles, culminating with our milestone birthday party a year later in Orlando. The number 50 also will have prominence in the year ahead as it relates to the STS staff, with the number in our ranks slated to pass that threshold by midyear. Other milestones to look forward to include the Society's participation in the ABIM

Foundation's Choosing Wisely® initiative that is designed to encourage physicians and patients to discuss alternative treatment options and share in medical decision making (more on this Tuesday morning, January 29, in Los Angeles); the addition of anesthesiology data to the Adult Cardiac Surgery Database; and an expansion of the Society's webinar offerings.

As with life in general, the experience of a dynamic, multifaceted organization like the Society is not just composed of one milestone success/celebration after another. There are jarring wake-up calls in life (the Sandy Hook Elementary School tragedy being the most recent as of this writing), and the STS family is not spared its share of sadness, as exemplified by the recent deaths of giants Hal Urschel and Carolyn Reed (see pages 5 and 13). As all of us enter the New Year after a holiday season in which it felt especially important to express our love and appreciation for others who hold important positions in our lives, know that the entire STS staff wishes you and yours the milestones of good health and happiness in the year ahead. We look forward to seeing you in Los Angeles.

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STS Members 'FOCUS' on Reducing Human Error in the OR

Several STS members are participating in a multidisciplinary program intended to reduce human errors in the operating room by encouraging cardiothoracic surgery team members to work closely together.

The Flawless Operative Cardiovascular Unified Systems (FOCUS) initiative was first proposed in 2004 by Bruce Spiess, MD, a cardiac anesthesiologist. Dr. Spiess will be among those highlighting FOCUS at the upcoming STS 49th Annual Meeting, as part of the Associate Membership Symposium on Sunday, January 27.

"The FOCUS initiative provides a unique opportunity for all members of the team to improve outcomes by enhancing collaboration and communication with tools from human factors engineering and other safety-critical, high-reliability disciplines," said STS member Juan Sanchez, MD, Professor of Surgery at the University of Connecticut Health Center, who participates in the program.

Other STS members who are involved in the FOCUS initiative include Thoralf Sundt, MD, Richard Prager, MD, Paul Uhlig, MD, Abelardo DeAnda, MD, Michael Culig, MD, and Ross Ungerleider, MD.

Several of these members have joined with cardiac surgery nurses, perfusionists, and anesthesiologists to write a scientific statement commissioned by the American Heart Association titled "Patient Safety in the Cardiac Operating Room," which will include recommendations for current action and future research regarding the reduction of errors in the cardiac operating room. The statement is expected to be published sometime this spring.

Learn more about FOCUS by attending the Associate Membership Symposium at the STS 49th Annual Meeting. Register online at www.sts.org/annualmeeting.

Past President Delivers Gibbon Lecture

STS Past President Robert A. Guyton, MD, FACS gave the prestigious John H. Gibbon Jr. Lecture at the American College of Surgeons Clinical Congress in Chicago this past October.

Dr. Guyton's talk, "Critical Aortic Stenosis—Who Now Is Inoperable?," focused on both the impressive advances made in the field of transcatheter aortic valve replacement (TAVR) and the reasons why TAVR may not always be the right option for patients. Dr. Guyton



explained that the procedure may sometimes be performed on patients who are elderly, disabled, or sick without a careful evaluation of whether the benefit is really worth the risk.

He also stressed the importance of preoperative evaluation in assessing whether aortic stenosis is really the root of the problem or if other comorbid health issues are causing insurmountable disability, meaning that valve replacement may not necessarily help.

In Memory of Carolyn E. Reed, MD STS Treasurer, 2007–2012



The Society mourns the loss of Carolyn E. Reed, MD, who passed away on November 16 at the age of 62.

Dr. Reed received her medical degree from the University of Rochester School of Medicine in 1977, where she was a member of Alpha Omega Alpha Honor Medical Society, and completed her surgical residency at New

York Hospital-Cornell Medical Center. After a surgical oncology fellowship at Memorial Sloan-Kettering Cancer Center, she returned to New York Hospital-Cornell Medical Center to complete a cardiothoracic surgery residency.

In 1985, Dr. Reed moved to the Medical University of South Carolina to build its thoracic oncology program. Most recently, she held the titles of Professor of Surgery; Alice Ruth Reeves Folk Endowed Chair of Clinical Oncology; Chief, Section of General Thoracic Surgery; and Deputy Director of Clinical Affairs at the Hollings Cancer Center.

"Thoracic surgery has prematurely lost one of its greats."

– William A. Gay Jr., MD

In addition to serving as STS Treasurer from 2007 to 2012, Dr. Reed was Chair of the American Board of Thoracic Surgery from 2005 to 2007 and President of the Southern Thoracic Surgical Association from 2006 to 2007. She also served on the editorial board of *The Annals of Thoracic Surgery* from 1996 to 2005.

"Thoracic surgery has prematurely lost one of its greats. While Carolyn Reed was, in many ways, a pioneer who contributed much to our field, I think that the best was yet to come," said William A. Gay Jr., MD. "She was a compassionate clinician, a gifted teacher, and most importantly, a true and loyal friend to the many who knew her well. Her laugh and good humor were infectious, bringing a smile at times when a smile was sorely needed. Her absence will leave a deep void in our lives."

Dr. Reed's presidential address at STSA's 54th Annual Meeting in 2007 highlighted the compassion she brought to her clinical practice.

"Humanism incorporates the notion of error. We will make mistakes. We must admit them, study them, learn from them, and not let error paralyze us. I believe too often we hide our emotion. I have promised myself that the day I no longer walk out of the hospital with tears in my eyes after the loss of a patient will be the day I quit medicine," she said during her speech.

49th Annual Meeting Just Weeks Away (continued from cover)

coronary revascularization strategies, how to improve coronary artery bypass grafting results, and extracorporeal membrane oxygenation. The program continues on Sunday with sessions on the changing landscape of aortic valve therapies, tracheal replacement, and more.

Also on Sunday-in addition to Tech-Con and the STS Practice Management Summit, as described on page 3—there are several other course options, including the STS/AATS Cardiothoracic Critical Care Symposium and parallel surgical symposia on general thoracic and congenital heart surgery. The day will wrap up with the International Reception and Symposium, which will provide insight into treating rheumatic mitral valve disease, including the optimal timing of the operation and when to replace instead of repair a valve. Speakers will present views from around the world-The Netherlands, Vietnam, Saudi Arabia, India, Thailand, and the United States.

Exciting Research Unveiled

Learning about new scientific research is always an important part of the Annual Meeting. The Richard E. Clark Papers and J. Maxwell Chamberlain Memorial Papers represent some of the most exciting work in the field.

This year's Richard E. Clark Papers, which highlight research made possible by the STS National Database, include:

- Adult Cardiac Surgery: Preoperative Beta-Blocker Use Should Not Be Used as a Quality Metric for Coronary Artery Bypass Grafting: A Statewide, Multi-institutional STS Adult Cardiac Surgery Database Analysis
- General Thoracic Surgery: Evaluation of the Reliability of Clinical Staging of T2N0 Esophageal Cancer: A Review of the STS General Thoracic Surgery Database
- Congenital Heart Surgery: Multiinstitutional Experience with Surgery for Ebstein's Malformation: An Analysis of the STS Congenital Heart Surgery Database

The J. Maxwell Chamberlain Memorial Papers chosen this year are:

- Adult Cardiac Surgery: Composite Analysis of 189,793 Medicare Patients with Multi-vessel Coronary Disease Demonstrates a Long-Term Advantage for CABG Compared to Stent Placement
- General Thoracic Surgery: National Cooperative Group Trials of "High-Risk" Patients with Lung Cancer: Are They Truly High-Risk?
- · Congenital Heart Surgery: Effect of Conduit Type and Size on Right Ventricle-Pulmonary Artery Conduit Durability in Infants Less Than 2 Years

of Age: A Congenital Heart Surgeons' Society Study

And that's just the tip of the iceberg: The 49th Annual Meeting will feature dozens of oral abstract presentations during the scientific sessions on Monday and Tuesday. Additionally, you'll be able to stroll through 99 posters throughout the meeting.

Check Out What's New

In addition to the new STS/ACCP course, this year's meeting will have a variety of offerings that you haven't seen in the past. On Tuesday, new parallel sessions include "Cardiothoracic Surgical Education," "Clinical Trials: Reflections on Old and Plans for New," and "What CT Surgeons Need to Know about Vascular Surgery in 2013." Tuesday afternoon, STS will continue the spirit of collaboration by pairing up with the Society of Cardiovascular Anesthesiologists for the new "SCA @ STS" session, which will take a look at the disparate utilization of blood products and discuss the risks of transfusion.

If you haven't already booked your spot to attend one of the largest and most prestigious cardiothoracic surgery meetings in the world, be sure to register soon at www.sts.org/annualmeeting, as pricing will increase after January 18. If you have questions about registration, contact Debbie Watrous, Meetings Coordinator, at dwatrous@sts.org or (312) 202-5836.



Mark McClellan to Give Ferguson Lecture

The Thomas B. Ferguson lecture at the STS 49th Annual Meeting will be presented by Mark B. McClellan, MD, PhD, on Monday, January 28, at 8:30 a.m.

Dr. McClellan is currently the Director of the Engelberg Center for Health Care Reform at The Brookings Institution. He is the former Commissioner of the

Food and Drug Administration and Administrator of the Centers for Medicare & Medicaid Services.

Dr. McClellan earned his medical degree from Harvard and his PhD in economics from the Massachusetts Institute of Technology. He is one of the most respected leaders on US health care policy and has implemented major reforms throughout his career, including the Medicare prescription drug benefit, the FDA's Critical Path Initiative, and methods of helping consumers and providers utilize quality and cost of care information.

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 the American Association for Thoracic Surgery. Dr. Ferguson also served as Editor of The Annals of Thoracic Surgery from 1984 to 2000 and is credited with raising both the academic and international profiles of the journal.

Carolyn Clancy to Present Lillehei Lecture

STS will welcome Carolyn M. Clancy, MD



as the speaker for the C. Walton Lillehei lecture at the upcoming STS 49th Annual Meeting. Dr. Clancy will give her talk on "Making Science Count: Overcoming the Challenge to Patient-Centered Care," on Tuesday, January 29, at 10:45 a.m.

Dr. Clancy currently serves as Director of the Agency for Healthcare Research and Quality at the US Department of Health & Human Services, a position she's held since 2003. Prior to this appointment, she led AHRQ's Center for Outcomes and Effectiveness Research.

A graduate of Boston College and the University of Massachusetts Medical School, Dr. Clancy trained as a general internist. She holds an appointment as a Clinical Associate Professor in the Department of Medicine at the George Washington University School of Medicine and also serves as Senior Associate Editor for Health Services Research.

Her research interests have focused on improving health care quality and patient safety and reducing disparities in care associated with patients' race, ethnicity, gender, income, and education. As AHRQ Director, she launched the first annual report to Congress on health care disparities and health care quality.

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."



General thoracic surgeons and STS members Cameron D. Wright, MD, John C. Kucharczuk, MD, and Todd S. Weiser, MD gave presentations during the General Thoracic Surgery Database session. Mitchell J. Magee, MD (not pictured) also participated in the session.

AQO Has Successful Run in Dallas

This past October, 425 data managers met in Dallas for Advances in Quality & Outcomes (AQO): A Data Managers Meeting, now in its ninth year. The meeting provided opportunities to learn about new data specifications for the STS National Database, connect with colleagues, and interact with surgeon leaders. The next AQO conference will be held in Boston on September 26–28, 2013.



Members of the Texas Regional Data Managers group welcomed attendees to the AQO conference in Dallas.

Updated Guideline on Use of Antiplatelet Drugs Now Available

STS has updated its clinical practice guideline on the use of antiplatelet drugs during heart surgery. The new guideline, published in the November 2012 issue of *The Annals of Thoracic Surgery*, takes into account newly available antiplatelet therapies, new scientific information, and a broader use of antiplatelet drugs, such as before lung and vascular procedures.

The new 2012 antiplatelet therapy recommendations address:

- New tests used to evaluate the effects of antiplatelet drugs at the bedside, which may allow better decision making for patients who require urgent operations and who have taken preoperative antiplatelet drugs, as well as help monitor the need for platelet transfusions;
- Management of patients taking antiplatelet drugs before non-cardiac operations, including lung and vascular procedures;
- Management of newer antiplatelet drugs, such as ticagralor and prasugrel, around the time of cardiac operations;
- Treatment options in patients who require urgent operations and are on antiplatelet drugs;
- Timing of operations for patients taking antiplatelet drugs; and
- Additions to the multidisciplinary management of patients on antiplatelet drugs undergoing cardiac surgery.

The full text of the updated guideline can be accessed at www.sts.org/antiplateletguideline.

Member News



Young Honored for Work with Children

J. Nilas Young, MD was honored this past October with the 2012 World of Children Health Award, a prestigious tribute recognizing his work treating children with congenital heart defects in Russia.

Dr. Young, who is Chief of Cardiothoracic Surgery at the University of California Davis Health System, co-founded the Heart to Heart International Children's Medical Alliance in 1989. The nonprofit organization educates physicians in Russia to develop pediatric cardiac surgical programs. Dr. Young has been an STS member since 1981.

Submit news about yourself or a colleague at stsnews@ sts.org. Submissions will be printed based on content, membership status, and space available.



Lee Joins New Heart Center

Richard Lee, MD, MBA has joined Saint Louis University Hospital as co-director of the new Center for Comprehensive Cardiovascular

The "C4" will offer patients a range of collaborative treatment options that utilize knowledge and

techniques from cardiac surgeons, cardiologists, and other specialties. It is expected to open sometime in 2013.

In his new role, Dr. Lee will also serve as Vice-Chairman of the Department of Surgery. Previously, Dr. Lee was an Attending Cardiac Surgeon at Northwestern Memorial Hospital and the Surgical Director for the Center for Heart Rhythm Disorders at the Bluhm Cardiovascular Institute. He has been a member of STS since 2005 and serves on the Workforce on Health Policy, Reform, and Advocacy.

Get a Glimpse of STS/ AATS Tech-Con 2013

Interactive presentations on the most novel therapies in adult cardiac and general thoracic surgery will enhance the superior educational experience at STS/AATS Tech-Con 2013, to be held on Saturday, January 26, and Sunday, January 27, in conjunction with the STS 49th Annual Meeting.

The program will open with a joint cardiac and general thoracic surgery session that will look to the future and discuss how cardiac and general thoracic surgeons can innovate. Separate cardiac and general thoracic surgery sessions will follow with discussions on coronary revascularization strategies, how to improve coronary artery bypass grafting (CABG) results, and extracorporeal membrane oxygenation (ECMO). General thoracic and cardiac surgery will have parallel tracks on Sunday. Among the topics featured in the general thoracic surgery sessions are peroral

endoscopic myotomy, minimally invasive foregut techniques, and tracheal replacement. The adult cardiac surgery track will focus on the changing landscape of aortic valve therapies, next generation transcatheter aortic valve replacement (TAVR) devices, congestive heart failure, and much more.

Don't miss these exciting, cuttingedge presentations! Make plans now and register for STS/AATSTech-Con 2013 at www.sts.org/annualmeeting. Registration is separate from the STS 49th Annual Meeting.

Saturday, January 26, 2013

I:00 p.m. – 2:45 p.m. Joint Session – Cardiac and General Thoracic

Moderators: Gregory P. Fontana, New York, NY, and Keith S. Naunheim, St. Louis, MO

3:15 p.m. – 5:00 p.m.
Cardiac Track I – Coronary
Session I: Coronary
Revascularization: Strategies

Moderators: Robert W. Emery, Minneapolis, MN, and Robert A. Guyton, Atlanta, GA Session II: Can CABG Results Significantly Improve? Is Facilitating Technology Required?

Moderators: Robert S. Poston, Tucson, AZ, and William E. Cohn, Houston, TX

3:15 p.m. – 5:00 p.m.

General Thoracic Track I –

Current Technology Update

Moderator: Marc de Perrot,

Toronto, ON, Canada 5:00 p.m. – 6:30 p.m. STS/AATS Tech-Con 2013

Sunday, January 27, 2013

Reception

8:00 a.m. – 9:35 a.m.

Cardiac Track II – The Changing

Landscape of Aortic Valve

Therapies

Moderators: Gregory P. Fontana, New York, NY, and Joseph E. Bavaria, Philadelphia, PA

8:00 a.m. – 9:35 a.m. General Thoracic Track II – A Look into the Future of Thoracic Surgery

Moderator: M. Blair Marshall, Washington, DC 10:20 a.m. – 11:35 a.m.

Cardiac Track III – Next

Generation TAVR Devices

Moderators: Arvind K. Agnihotri, Boston, MA, and Robert C. Hagberg, Hartford, CT

10:20 a.m. – 11:35 a.m.

General Thoracic Track III

– Endoluminal, Minimally
Invasive, and Ex-Vivo

Moderator: Joseph B. Shrager,

Stanford, CT
1:15 p.m. – 2:50 p.m.

Cardiac Track IV – Leaking Valves and Failing Pumps Session I: Mitral Valve Disease Moderators: Michael Argenziano,

New York, NY, and Nirav C. Patel, New York, NY

Session II: Congestive Heart Failure

Moderators: John V. Conte, Baltimore, MD, and Nicholas G. Smedira, Cleveland. OH

3:20 p.m. – 4:30 p.m.

Cardiac Track V – Thoracic

Vascular

Moderators: Ali Khoynezhad, Los Angeles, CA, and Joseph S. Coselli, Houston,TX

STS Leader Contributes to IOM Report

his past September, the Institute of Medicine released a report, "Best Care at Lower Cost: The Path to Continuously Learning Health Care in America," which lays out a comprehensive plan for moving the country toward a more efficient and effective health care system.

T. Bruce Ferguson Jr., MD, Chair of the STS Workforce on Health Policy, Reform, and Advocacy, served on the Committee on the Learning Health Care System in America, which developed the report.

The project was borne out of the IOM's realization that the US health care system cannot continue along its current path. The committee estimated that in 2009, \$750 billion—about 30% of health spending nationwide—was spent on unnecessary services, excessive administrative costs, fraud, and other problems.

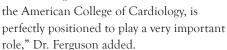
The report details 10 recommendations for building a health care system that learns from past mistakes to improve quality, outcomes, and cost. The recommendations range from developing an infrastructure for collecting clinical data, to better involving patients in medical decision making, to restructuring payment models to reward effective, efficient care.

"Systems need to be developed within health systems to not only manage patients from a quality point of view, but also from a cost and care delivery efficiency point of view," Dr. Ferguson said.

Participation of medical specialty societies like STS is essential to implementing

the report's recommendations, he said.

"There's a very real opportunity here to leverage the assets that professional medical organizations can bring to the table. STS in particular, with our resources like the STS National Database and our experience collaborating with



One IOM recommendation encourages medical specialty societies to increase transparency on the quality, value, and outcomes of the care provided by their members—a goal that STS is already working toward with STS Public Reporting Online and the Consumer Reports public reporting initiative.

Another recommendation encourages organizations to develop and promote evidence-based clinical practice guidelines. The Society's Workforce on Evidence Based Surgery has spent many years developing evidence-based guidelines that provide practical assistance to STS members. Currently, 15 STS-generated clinical practice guidelines are available at www.sts.org/guidelines.

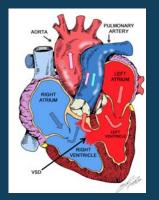


STS leader T. Bruce Ferguson Jr. (far right) participates in a panel discussion regarding an Institute of Medicine report that he helped develop.

"The report contains many challenges for STS and its members as well. Full and complete transition to a delivery system with the patient firmly at the center of focus requires a re-engineering of past perceptions and practices," Dr. Ferguson said. "Determining how to integrate the STS National Database into the era of electronic health records and 'Big Data' will be a challenge as well for all organizations with clinical database assets."

Dr. Ferguson explained that the next steps are for health care system stakeholders to carefully evaluate the report and determine how they can move in this direction. The IOM Roundtable on Evidence-Based Medicine will function in an ongoing supervisory role in the rollout, implementation, and adoption of the report.

The full report can be accessed at www.iom.edu/Reports.aspx.



PATIENT INFORMATION ADDED TO STS WEBSITE

Patients can now learn more about pediatric heart disease from the Patient section of the STS website. These newly added pages offer general information about pediatric heart disease, as well as more specific details about ventricular septal defect, tetralogy of Fallot, and transposition of greater arteries. Access them at www.sts.org/patient-information/what-pediatric-heart-disease.

Illustration by Steven P. Goldberg, MD

STS Awards 40 Looking to the Future Scholarships

The Society will soon welcome the best and brightest medical students and general surgery residents to the STS 49th Annual Meeting in Los Angeles as part of its Looking to the Future Scholarship program.

"The quality of the applicants has been phenomenal. Each year, it becomes harder and harder to select the ideal candidates," said Ara A. Vaporciyan, MD, Chair of the Workforce on Thoracic Surgery Resident Issues.

Currently, 20 medical students and 20 general surgery residents are awarded scholarships to attend the STS Annual Meeting. For the 2013 scholarship, 84 medical students and 73 residents applied.

Initiated in 2006, the program was developed to identify and encourage general surgery residents who are considering, but not yet committed to, a career in cardiothoracic surgery. In 2011, medical students became eligible. Since its inception, the program has awarded scholarships to 184 general surgery residents and medical students.

"A high percentage of the awardees have gone on to secure training positions in CT surgery," Dr. Vaporciyan said. "They are now 'paying back' the program by sponsoring new awardees and helping with the selection process."

During their time at the STS Annual Meeting, scholarship recipients meet cardiothoracic surgeon leaders and attend educational sessions. Each scholarship recipient is assigned a mentor to answer questions, facilitate introductions, and assist in planning a schedule of educational programming.

Special events are also planned. The 2013 program for medical student scholarship recipients will feature an overview of the history of cardiothoracic surgery and how to plan for a career in CT surgery. Additional topics will include a review of current residency options, a review of available resources for medical students interested in CT surgery, and perspectives from integrated and traditional residency program residents and junior faculty on their career choices.

Scholarship recipients can be identified in Los Angeles by orange ribbons attached to their badges. Please take a moment to say hello and welcome them to the STS 49th Annual Meeting. For questions regarding the STS Looking to the Future Scholarship program, please contact Megan Drumm, Affiliate Manager, at mdrumm@sts.org or (312) 202-5864.

2013 Looking to the Future Scholarship Recipients - Residents

Eric P. Anderson University of North Dakota School of Medicine

Jennifer L. Dixon Scott and White Memorial Hospital

Bradley M. Genovese UCLA Medical Center

Jennifer M. Hanna Duke University Medical Center

Christopher T. Holley University of Minnesota

Young K. Hong National Cancer Institute

Joshua W. Kuethe University of Cincinnat College of Medicine

Jesse L. Madden University of Utah

Graeme E. McFarland University of Alabama at Birmingham

Vahagn C. Nikolian University of Michigan Health System

Natalia S. Partain University of South Florida College of Medicine

Nicholas H. Pope University of Virginia Health System

Amy E. Reppert University of Colorado

Michael D. Sgroi University of California Irvine

Renganaden Sooppan Thomas Jefferson University Hospital

Nicholas A. Stephens The University of Texas Medical School at Houston

Joel Sternbach

Northwestern University

Princess N. Thomas Medical Center of Central Georgia

Scott C. Tiedebohl Penn State Medical Center, Hershey

Thomas C. Tsai Brigham and Women's Hospital-Harvard Medical School

2013 Looking to the Future Scholarship Recipients – Medical Students

Andria R. Balogh University of California Los Angeles

Thomas J. Desmarais Geisel School of Medicine at Dartmouth

Stephen P. Duquette Temple University School of Medicine

Catherine Go

University of Pittsburgh Medical Center

Natalie A. Homer Northwestern University

Ariel W. Knight University of Washington School of Medicine

Michael J. Kramarz University of Pennsylvania

Timothy D. LawYale University School of Medicine

Scott L. Maddalo New York University School of Medicine

Kathleen M. Matic (Kassouf) The Ohio State University

College of Medicine

Emma C. McDonnell

Emma C. McDonnell
The Johns Hopkins
University

Emmanuel Mensah Harvard Medical School

Sara P. Myers

University of North Carolina - Chapel Hill

Asishana A. Osho
Duke University School
of Medicine

Jennifer L. Philip

The University of Chicago Pritzker School of Medicine

Zachary Plummer Indiana University

Ajinkya Rane

Cleveland Clinic
Naomi M. Sell

Jefferson Medical College

Rodolfo Silva

University of California Davis

Tara R. Skebba

Washington University School of Medicine in St. Louis

STS/ACCTVT Registry Celebrates 150 Sites and 2,000 Records

The STS/ACCTVT Registry recently marked two significant milestones in its growth with the enrollment of the 150th site and the entry of the 2,000th patient record in December.

The Registry, which launched just over a year ago in December 2011, serves as the main repository for clinical data related to transcatheter aortic valve replacement (TAVR).

"We reached 2,000 patient records pretty quickly, so we know this valuable technology is being applied across the country. Perhaps just as important is the fact that cardiothoracic surgeons and cardiologists are working together to report the detailed information that will help us learn from experience and tailor the procedure to the right population," said Fred H. Edwards, MD, Director of the STS Research Center.

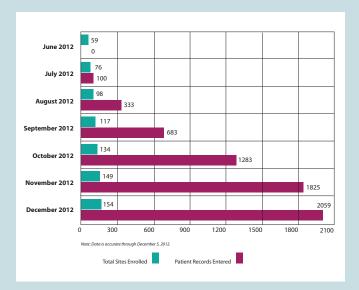
As of December 5, 121 of 154 participating sites had submitted patient data, and the TVT Registry support staff continues to diligently recruit new sites and provide training to Registry site managers. As more manufacturers develop TAVR devices, the Registry is positioned to provide a repository of longitudinal outcomes that will enhance monitoring for the safety and effectiveness of these devices.

"Reaching this milestone solidifies that our new paradigm for clinical data registries is not only feasible but also very functional. Collaboration among professional societies, government agencies, and industry has coalesced to establish a registry meeting the needs of multiple stakeholders," said Michael J. Mack, MD, STS Immediate Past President and Chair of the TVT Registry Steering Committee.

Engaging in this model of a multi-stakeholder partnership has enabled all parties with a vested interest to identify and define a robust set of data elements and outcomes measures needed to track the safety and effectiveness of these devices. This allows for the development of quality measurement systems for the lifecycle of a device, from market introduction to long-term health outcomes.

"This is an incredible accomplishment and truly reflects an early win for our growing Research Center. The TVT Registry is a wonderful model for the types of research engines envisioned by our Board of Directors when it established the STS Research Center, and it strategically aligns with the mission and vision of our Research Center," said Robert A. Wynbrandt, STS Executive Director & General Counsel.

For more information on the STS/ACC TVT Registry, contact Hilary Kirk, TVT Registry Project Manager, at hkirk@sts.org or (312) 202-5879. You can also learn more at www.tvtregistry.org.



STUDENTS AND RESIDENTS GET A GLIMPSE OF CT SURGERY

On October 1, medical students and general surgery residents received hands-on experience in cardiothoracic surgery during the Cardiothoracic Surgery in the Future course, held in conjunction with the American College of Surgeons Clinical Congress in Chicago.

STS partnered with ACS in sponsoring the event. The course directors were James I. Fann, MD, from Stanford University Medical Center, Thomas E. MacGillivray, MD, from Massachusetts General Hospital,



Scott J. Swanson, MD gives a demonstration of a VATS lobectomy.

and Daniel L. Miller, MD, from Emory University.

The event started with dinner, during which attendees heard from Walter H. Merrill, MD on the projected needs of CT surgery and received an update on 6-year integrated CT surgery programs from Richard H. Feins, MD.

The wet labs were next, featuring several cardiac and general thoracic stations that covered procedures such as aortic valve replacement, chest wall reconstruction, vessel suturing, and more.



Min P. Kim, MD helps attendees learn about rib fracture repair and chest wall reconstruction.

Of those attendees who responded to a follow-up survey, 89% said they would recommend the event to their peers.

"The tactile aspects of doing surgery are what I find attractive, so hands-on practice/learning was ... far more enticing than any speech or talk could possibly be," one attendee said.

"As a medical student, it was empowering and enlightening to not only do cool wet labs, but also to engage and interact with CT surgeons," said another.



Walter H. Merrill, MD covers the topic of mitral valve repair.



The results of the contentious fall elections have brought exciting opportunities for STS to develop broader relationships with the legislative and executive branches of government. As President Barack Obama gets ready to start his second term, the 113th Congress will convene with a similar makeup than before the election. Republicans retained their majority in the House of Representatives, though their advantage shrank from 49 to 33 members. In the Senate, the Democrats expanded their majority from 51 to 53 members, with all

STS-PAC Supports Congressional Candidates

Democratic incumbents winning their respective races.

Two STS members in Congress ran for re-election this past fall. Rep. Larry Bucshon, MD (R-IN) won his race and will keep his seat in Indiana's 8th District. Rep. Charles Boustany, MD (R-LA) won a run-off election on December 8 against another incumbent, Representative Jeff Landry (R-LA), whose district was re-drawn last year.

Candidates supported by STS-PAC fared well this past election cycle, with 54 of 67 supported candidates earning victories. STS-PAC supported five non-incumbent Senate candidates, and three were elected. Of the Republicans supported by STS-PAC, 28 of 34 candidates were elected. On the other side of the aisle, 26 of the 33 Democrats supported by STS-PAC were elected.

Even though the campaign season is over, STS-PAC's work is not done. For the Society to maintain its leading position as a trusted source for health care policy guidance, STS needs the support of all its members.

Update on Committee Leadership

As the majority/minority ratios for the incoming 113th Congress have remained largely the same, we may see little change in committee leadership in both the House and Senate.

House Ways and Means Committee Chair Dave Camp (R-MI) and Ranking Member Rep. Sander Levin (D-MI) should retain their positions; however, longtime congressman Rep. Fortney "Pete" Stark (D-CA) lost his bid for re-election, and Democrats will have to fill his seat as the ranking member on the House Ways and Means Committee Subcommittee on Health.

The House Energy and Commerce Committee will most likely retain its current Chairman, Rep. Fred Upton (R-MI), and Ranking Member, Rep. Henry Waxman (D-CA).

In the Senate, Sen. Tom Harkin (D-IA) will remain Chair of the Committee on Health, Education, Labor, and Pensions. It is likely that Sen. Lamar Alexander (R-TN) will take over as the top Republican on the Committee with the departure of current Ranking Member Sen. Mike Enzi (R-WY), who is term-limited as the Republican Committee leader. Senate Finance Committee Chairman Sen. Max Baucus (D-MT) and Ranking Member Sen. Orrin Hatch (R-UT) are likely to remain at their posts, but the Committee is losing four members to retirement.

Challenges Ahead

With economic challenges still looming large, it was apparent from the post-election tone struck by both the President and congressional Republican leaders that cooperation between the two parties is a prerequisite to moving forward. Included among those challenges is the need to repeal the Sustainable Growth Rate formula, eliminate the threat of sequestration of federal health care funds, and develop a new Medicare physician payment model that ensures individual medical specialties can—and have incentive to—control the growth rate of their services and payments by identifying the most effective and appropriate treatments for patients.

The Society is calling on each of its members to take a leadership position by demonstrating the vital role of cardiothoracic surgery in health care policy. STS members interested in becoming more involved in these advocacy efforts should contact STS Government Relations staff at advocacy@sts.org.

For further information on STS-PAC, visit www.sts.org/pac.

In Memory of Harold C. Urschel Jr., MD STS Past President, 1983–1984



The Society mourns the loss of STS Past President Harold C. Urschel Jr., MD, who passed away on November 12 at the age of 82.

"Hal Urschel was a special man," said STS Past President Robert L. Replogle, MD. "I'm aware that there are many candidates for 'special' people, but Urschel was unique."

Dr. Urschel received his medical degree from Harvard Medical School and completed his internship, residency, and chief residency at Massachusetts General Hospital in Boston. He served as Chief of Experimental Surgery at

the National Naval Medical Research Center in Bethesda, Md., before moving to Dallas and joining Baylor University Medical Center, where he served as Chair of Cardiovascular & Thoracic Surgical Research, Education & Clinical Excellence. He also held the position of Professor of Cardiovascular & Thoracic Surgery at The University of Texas Southwestern Medical School.

In addition to serving as STS President from 1983 to 1984, Dr. Urschel was President of the Southern Thoracic Surgical Association, the American College of Chest Physicians, and the Texas Surgical Society.

In Dr. Urschel's presidential address at the STS 20th Annual Meeting in 1984, he talked about the challenges facing cardiothoracic surgery and emphasized the importance of humanism.

"A holdfast in science is essential, but this represents only a part of the strength of surgery. By maintaining the ancient bond with humanity itself through charity—the desire to relieve suffering for its own sake—surgery need not fear change if civilization itself survives," he said.

Third International Participant Joins STS National Database

The Society is pleased to welcome surgeons from the Division of Cardiovascular Surgery at the Anadolu Medical Center Hospital, Turkey, to the STS Adult Cardiac Surgery Database.



The Society hopes that by broadening the reach of the Database, it will help to improve patient outcomes worldwide.

Anadolu Medical Center Hospital joins the Department of Cardiothoracic Surgery at the Hebrew University Hadassah Medical Center, Israel, and the Department of Cardiac Surgery at TotalCor Hospital, São Paulo, Brazil, as the earliest international participants to join the STS Adult Cardiac Surgery Database.

"As for all cardiothoracic surgeons, our foremost responsibility is to improve the quality and safety of care that our patients receive. Being a participant of the STS National Database will serve not only as a quality improvement tool, but also as a key data resource for our clinical research as well as a benchmarking opportunity," said Sertaç Çiçek, MD, Director of the Division of Cardiovascular Surgery at Anadolu.

International participants receive feedback reports with aggregate benchmarks based on data from North American participants, allowing them to measure their outcomes data against that of US and Canadian participants. Participant data are analyzed and risk-adjusted based on North American risk models.

International participation is currently available for both the STS Adult Cardiac Surgery Database and the STS Congenital Heart Surgery Database. International participation for the STS General Thoracic Surgery Database is planned soon.

Mark Your Calendar For These Upcoming STS Educational Events!

STS/AATS Tech-Con 2013

January 26–27, 2013

Los Angeles Convention Center

STS 49th Annual Meeting

January 26–30, 2013

Los Angeles Convention Center

STS/ACCF Transcatheter Heart Valve (THV) Symposium

April 25-26, 2013 • Dallas, Texas

Advances in Quality & Outcomes (AQO): A Data Managers Meeting September 26–28, 2013

Boston, Massachusetts

STAFF UPDATE

KRISTIN AYERS

Kristin Ayers joined STS on November 27 as the Society's Marketing Manager.

She is responsible for managing all aspects of marketing for the organization. She comes to STS after almost four years at the American Academy of Dermatology, where she started as an intern and finished as a Marketing Specialist. Kristin has a bachelor's degree in marketing and international business with a minor in German from Illinois State University. To contact Kristin, e-mail kayers@sts.org

STS 49TH ANNUAL MEETING EXHIBITORS

Learn about the specialty's newest products, services, and technologies by visiting the following exhibitor partners at the STS 49th Annual Meeting in Los Angeles. Things will kick off with an Opening Reception in the Exhibit Hall from 4:30 p.m. to 6:30 p.m. on Sunday, January 27. The Exhibit Hall will also be open from 9:00 a.m. to 4:30 p.m. on Monday, January 28, and Tuesday, January 29.

A & E Medical Corporation ABIOMED, Inc.

AcryMed, Inc.

ACUTE Innovations

Aesculap, Inc.

Alere Home Monitoring Products/Quality Assured Services

American Association for Thoracic Surgery (AATS)

Anchor Products Co.

Annals of Thoracic Surgery, The

Applied Fiberoptics

Association of Physician Assistants in Cardiovascular Surgery (APACVS)

ATMOS, Inc. AtriCure, Inc.

Atrium Medical/MAQUET

Baxter Berlin Heart

BFW

Bio-Gate USA, Inc. Biomet Microfixation

Broncus Technologies

CardiacAssist, Inc.

Cardica, Inc.

CardioPulse (formerly CAOS)

CareFusion

Caris Life Sciences Castle Biosciences

Chase Medical, Inc.

Cincinnati Sub-Zero

Clear Catheter Systems

Consumer Reports

Cook Medical

CorMatrix Cardiovascular,

Inc.

Covidien

CryoLife, Inc.

CSA Medical

CTSNet

Dallen Medical

Designs for Vision, Inc.

Domain Surgical

Dornier MedTech America,

Dynasil Products

Eastman Chemical Company

EBM Corporation

Edwards Lifesciences

Elsevier

Essential Pharmaceuticals

Estech

Ethicon Endo - Surgery

European Association for Cardio-Thoracic Surgery (EACTS)

European Society of Thoracic Surgeons (ESTS)

Fehling Surgical Instruments

Figure 8 Surgical

First Choice

Genesee BioMedical

Gore & Associates, Inc.

Heart Hugger/General Cardiac Technology

HeartWare, Inc.

HRA Healthcare Research and Analytics

ImaCor, Inc.

International Society

for Minimally Invasive Cardiothoracic Surgery

(ISMICS)

Intuitive Surgical, Inc.

Kapp Surgical Instruments,

Inc

Kardium

Karl Storz Endoscopy

America

KLS Martin, L.P.

Koros USA

Lexion Medical

LifeNet Health

LSI Solutions

MAQUET

MAST Biosurgery

MED Alliance Solutions,

LLC

Medafor, Inc.

Medela, Inc.

Medical Concepts Europe

Medistim

MEDMIX SYSTEMS AG

Medtronic, Inc.

MedXPert North America

Mended Hearts, Inc.

Merrill Lynch

Mountain States Health

Alliance

Nadia International, Inc.

nContact, Inc.

Neomend

New Wave Surgical Corp.

Olympus America, Inc.

On-X Life Technologies, Inc.

Oxford University Press

Pace Medical, Inc.

PECA Labs

Pemco Medical

pfm medical, inc.

Pinnacle Biologics, Inc.

Pioneer Surgical Technology

QED Medical

Quest Medical, Inc.

Regional Data Managers:

STS National Database

Richard Wolf Medical

Instruments

Rose Micro Solutions

Rultract, Inc.

Rumex International, Co.

Sanofi BioSurgery

Scanlan International, Inc.

Society for Heart Valve

Disease, The

Society of Thoracic Surgeons,

Sontec Instruments, Inc.

Sorin Group

Spectranetics

Spiration, Inc.

St. Jude Medical, Inc.

StopAfib.org

Stryker Endoscopy

STS Public Reporting Online

Sunoptic Technologies

superDimension

Surgical Acuity, Inc.

SurgiTel Systems/General

Scientific Corp.

SynCardia Systems, Inc.

Synthes CMF

Teleflex

Terumo Cardiovascular Systems Corporation

Thompson Surgical Instruments, Inc.

Thoracic Surgery Foundation for Research and Education

(TSFRE)

Thoramet Surgical Products.

Thoratec Corporation

Transonic

USB Medical

Varian Medical Systems

Vitalcor, Inc.

Vitalitec Geister Wexler Surgical

This information is accurate as

First-time STS exhibitors are highlighted in teal.

of November 28, 2012.

The Society gratefully acknowledges the following sponsors for their support of the STS 49th Annual Meeting: PATRON SPONSORS

Provided \$25,000 or more

Covidien Ethicon Endo-Surgery, Inc.

Medtronic, Inc. St. Jude Medical SUPPORTER SPONSOR

Provided \$10,000 or more Abbott Vascular

This information is accurate as of December 19, 2012.

STS 49TH ANNUAL MEETING PROGRAM AT-A-GLANCE

January 26–30, 2013 • Los Angeles

FRIDAY, JANUARY 25, 2013

3:00 p.m. - 6:00 p.m.

Registration: STS/AATS Tech-Con 2013 and STS 49th Annual Meeting

SATURDAY, JANUARY 26, 2013

7:00 a.m. - 6:00 p.m.

Registration: STS/AATS Tech-Con 2013 and STS 49th Annual Meeting

8:00 a.m. - 12:00 p.m.

STS/SCA: Intraoperative Echo and Decision Making in Cardiovascular Surgery

8:00 a.m. - 12:15 p.m.

NEW! STS/ACCP: Primer on Advanced and Therapeutic Bronchoscopy: Theory and Hands-On Session

12:00 p.m. – 6:30 p.m.

STS/AATS Tech-Con 2013 Exhibits

1:00 p.m. - 2:30 p.m.

STS Cardiopulmonary Bypass Simulation Course

1:00 p.m. – 5:00 p.m. STS/AATS Tech-Con 2013

5:00 p.m. – 6:30 p.m.

STS/AATS Tech-Con 2013 Reception

SUNDAY, JANUARY 27, 2013

7:00 a.m. - 6:30 p.m.

Registration: STS/AATS Tech-Con 2013 and STS 49th Annual Meeting

7:00 a.m. - 8:00 a.m.

STS/AATS Tech-Con 2013 Continental Breakfast

7:00 a.m. - 3:00 p.m.

STS/AATS Tech-Con 2013 Exhibits

7:50 a.m. - 12:00 p.m.

STS Practice Management Summit

8:00 a.m. - 4:30 p.m.

STS/AATS Cardiothoracic Critical Care Symposium

8:00 a.m. – 11:35 a.m.

STS/AATS Tech-Con 2013

1:00 p.m. - 4:00 p.m.

Residents Symposium:

Transitioning from Training to Practice

1:15 p.m. – 4:30 p.m.

Parallel Surgical Symposia: Congenital and General Thoracic Surgery

1:15 p.m. – 4:30 p.m.

STS/AATS Tech-Con 2013

2:30 p.m. - 4:30 p.m.

Associate Membership Symposium: Interprofessional Leadership in the Operating Room and Lung Cancer Treatment

4:30 p.m. – 6:30 p.m.

Scientific Posters Open

4:30 p.m. – 6:30 p.m.

Opening Reception in STS Exhibit Hall

4:30 p.m. - 6:30 p.m.

International Reception and

Symposium: Choosing Repair or Replacement in Rheumatic Mitral Valve Disease

MONDAY, JANUARY 28, 2013

6:30 a.m. - 5:00 p.m.

Registration: STS 49th Annual Meeting

7:15 a.m. - 10:45 a.m.

General Session I

7:15 a.m. – 7:35 a.m.

Opening Remarks

7:35 a.m. - 7:45 a.m.

Introduction of New Members

7:45 a.m. – 8:30 a.m.

Richard E. Clark Paper Presentations

8:30 a.m. - 9:30 a.m.

Thomas B. Ferguson Lecture – Mark B. McClellan

9:00 a.m. - 4:30 p.m.

Scientific Posters Open

9:00 a.m. - 4:30 p.m.

STS Exhibit Hall Open

9:45 a.m. - 10:45 a.m.

Presidential Address - Jeffrey B. Rich

11:30 a.m. – 12:30 p.m. (7 parallel sessions)

Adult Cardiac Session: Arrhythmia Adult Cardiac Session: Heart Failure

Congenital Session: Adult Congenital
General Thoracic Session: New Techniques

and Bioassays

Basic Science Research

NEW! Critical Care

NEW! Affordable Care Act

1:15 p.m. - 5:15 p.m.

NEW! Joint Council on Thoracic Surgery Education: Cardiothoracic Surgical Education

1:30 p.m. - 3:30 p.m.

(6 parallel sessions)

Adult Cardiac Session: Aortic

Adult Cardiac Session: Ischemic Congenital Session: Pediatric Congenital I General Thoracic Session: Lung Cancer I

General Thoracic Session: Lung Transplantation

Transpiantation ∆CC @ STS

ACC @ STS

4:15 p.m. - 5:15 p.m.

Surgical Motion Pictures Matinees: Adult Cardiac, Congenital, and

General Thoracic

4:15 p.m. - 5:15 p.m.

Late-Breaking Clinical Trial Abstract

Presentations

4:15 p.m. - 5:15 p.m.

General Thoracic Session: Mediastinal/Pulmonary I

5:00 p.m. - 6:30 p.m.

Scientific Posters and Wine

5:30 p.m. - 6:30 p.m.

Business Meeting (STS Members Only)

TUESDAY, JANUARY 29, 2013

6:30 a.m. - 4:30 p.m.

Registration: STS 49th Annual Meeting

7:00 a.m. – 8:00 a.m. Early Riser Sessions

7:00 a.m. – 8:00 a.m.

Early Riser Health Policy Forum: Transitioning from the Sustainable Growth Rate Formula—Solutions for Medicare

Physician Payment Reform

8:15 a.m. — I I:45 a.m. General Session II

8:15 a.m. - 9:15 a.m.

J. Maxwell Chamberlain Memorial Paper Presentations

9:00 a.m. - 4:30 p.m.

Scientific Posters Open

9:00 a.m. – 4:30 p.m. STS Exhibit Hall Open

9:15 a.m. - 9:45 a.m.

The Society of Thoracic Surgeons:

Moving Cardiothoracic Surgery Forward

10:30 a.m. – 10:45 a.m. AWARD PRESENTATIONS:

President's Award

TSDA Benson R. Wilcox Award

TSRA Socrates Award

Earl Bakken Scientific Achievement Award

10:45 a.m. - 11:45 a.m.

C. Walton Lillehei Lecture – Carolyn M. Clancy

11:45 a.m. – 12:45 p.m.

Ethics Debate: Patients Declared Dead for Organ Donation Are Not Really Dead: Should the Dead Donor Rule Be Abandoned?

11:45 a.m. – 12:45 p.m.

Residents Luncheon

12:45 p.m. – 2:45 p.m.

(7 parallel sessions) Adult Cardiac Session: Mitral Valve

Adult Cardiac Session: Mitral Adult Cardiac Session: TAVR

Congenital Session: Pediatric Congenital II
General Thoracic Session: Esophageal

General Thoracic Session: Lung Cancer II Patient Safety Symposium: The Nexus of

Data, Outcomes, and Public Awareness **NEW!** SCA @ STS

3:30 p.m. – 5:30 p.m. (7 parallel sessions)

Adult Cardiac Session: General

Adult Cardiac Session: Aortic Valve

Congenital Session: Pediatric Congenital III General Thoracic Session: Mediastinal/

Pulmonary II

and Plans for New

NEW! Cardiothoracic Surgical Education **NEW!** Clinical Trials: Reflections on Old

NEW! What CT Surgeons Need to Know About Vascular Surgery in 2013

6:30 p.m. – 8:30 p.m.

STS Social Event: A Night at the California Science Center

WEDNESDAY, JANUARY 30, 2013

6:30 a.m. - 9:30 a.m.

Registration: STS 49th Annual Meeting

7:00 a.m. – 10:00 a.m.

STS University Courses

The Society of Thoracic Surgeons is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

STS/AATS TECH-CON 2013

TECH-CON 2013
The Society of
Thoracic Surgeons
designates this
live activity for a
maximum of 8.75
AMA PRA Category I
Credits™. Physicians
should claim only the
credit commensurate
with the extent of
their participation in
the activity.

STS/ACCP:
PRIMER ON
ADVANCED AND
THERAPEUTIC
BRONCHOSCOPY:
THEORY AND
HANDS-ON

SESSION
The Society of
Thoracic Surgeons
designates this
live activity for a
maximum of 4.0
AMA PRA Category I
Credits™. Physicians
should claim only the
credit commensurate
with the extent of

STS/SCA: INTRAOPERATIVE ECHO & DECISION MAKING IN CARDIOVASCULAR

The Society of
Thoracic Surgeons
designates this
live activity for a
maximum of 3.25
AMA PRA Category I
Credits™. Physicians
should claim only the
credit commensurate
with the extent of
their participation in
the activity.

STS 49TH ANNUAL MEETING

The society of Thoracic Surgeons designates this live activity for a maximum of 29.5 AMA PRA Category I Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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