

Guest Faculty

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Speaker Disclosures

Dr. Fang is a consultant for Artisure. Dr. Blackstone is a Principal Investigator for Enteromedies Maestro Trial, Associate Principal Investigator for NIH/NIDDK Longitudinal Trial of Bariatric Surgery Patients, Ethicon Endosurgery: Consultant, Proctor Panel, Grant Recipient, Fellowship Award, and Surgical Review Corporation: Board of Directors. Dr. Kletscher is a preceptor and proctor for PVP laser ablation of the prostate, American Medical Systems. Dr. Oleynikov is a shareholder in Virtual Incision Corporation.

Drs. Chiasson, Foster, Money, Notrica, Siemionow, Prokuski, McDougall and Mr. Shalgian have nothing to disclose.

Schedule

Friday, November 6, 2009

- Noon **Registration**
- 1:00 p.m. **Welcome and Announcements**
Amy Waer, MD & Vafa Ghaemmaghami, MD
- 1:10 p.m. *“Skin Substitutes: Current Trends?”*
Kevin Foster, MD
- 1:35 p.m. *“The Shape of Things to Come – Bariatric Surgery”*
Robin Blackstone, MD
- 2:00 p.m. *“Mini Robots for Single & Natural Orifice Surgery”*
Dmitry Oleynikov, MD
- 2:25 p.m. Break & Visit Exhibitors
- 3:00 p.m. *“Minimal Access Surgery: Current Status”*
Rob Schuster, MD
- 3:25 p.m. Trauma Papers (4)
Corey Detlefs, MD
- 3:50 p.m. *“Surgical Stabilization of Clavicle Fractures with Associated Thoracic Injury”*
Laura Prokuski, MD
- 4:15 p.m. *“The First U.S. Face Transplant: from the Laboratory to the Operating Room”*
Maria Siemionow, MD
- 5:00 p.m. Cocktail Reception

Saturday, November 7, 2009

- 7:00 a.m. **Registration**, Continental Breakfast, Visit Exhibitors
- 8:00 a.m. *“What’s Crazy, Sexy and Cool in Fetal Surgery”*
Garrett Lam, MD
- 8:25 a.m. *“Plastic & Hand Surgery: Pushing Microsurgery to the Limits”*
Joe Zoldos, MD & Lloyd Champagne, MD
- 8:50 a.m. *“Hybrid Maze Procedure for the Treatment of Atrial Fibrillation”*
Ken Fang, MD
- 9:15 a.m. *“Healthcare Reform”*
Christian Shalgian
- 9:45 a.m. Break & Visit Exhibitors
- 10:15 a.m. *“Treatment of Supra Renal Aortic Aneurysm”*
Samuel Money, MD
- 10:40 a.m. “Teaching Surgeons in the 21st century”
Kanav Kahol, PhD
- 11:05 a.m. *“Endovascular Developments for Cerebrovascular Disease Management”*
Cameron McDougall, MD
- 11:45 a.m. Lunch & Visit Exhibitors
- 12:30 a.m. **General Business Meeting**
- 1:00 p.m. General Surgery Papers (4)
Dennis Weiland, MD
- 1:40 p.m. *“Laparoscopic Pancreas Resection”*
James Cashman, MD
- 2:05 p.m. *“Trans-anal Endoscopic Microsurgery: Managing Rectal Tumors in the 21st Century”*
Patrick Chiasson, MD
- 2:30 p.m. Break & Visit Exhibitors
- 3:00 p.m. *“Thoracoscopic Diaphragmatic Hernia Repair”*
David Notrica, MD
- 3:25 p.m. *“PVP-Laser Ablation of the Prostate”*
Bruce Kletscher, MD
- 3:50 p.m. *“Bariatric Surgical Emergencies: What Every Surgeon Should Know”*
Robin Blackstone, MD

ARIZONA CHAPTER AMERICAN COLLEGE OF SURGEONS

Presents:

2009 Annual Scientific Meeting

November 6-7, 2009

DoubleTree Paradise Valley Resort
5401 N. Scottsdale Road,
Scottsdale, AZ 85250



Sponsored by
The American College of Surgeons

Arizona Chapter, American College of Surgeons Officers & Planning Committee

Rifat Latifi, MD FACS *President*

Amy Waer, MD FACS *President Elect*

Dennis Weiland, MD FACS *Secretary-Treasurer*

James Warneke, MD FACS *Past President*

Richard Gray, MD FACS *Cancer Chair*

Corey Detlefs, MD FACS *Trauma Chair*

Michael Probstfeld, MD FACS *Governor at Large*

John Ferrara, MD FACS *Program Chair*

Vafa Ghaemmaghami, MD FACS *Co-Program Chair*

Joni Bowers *Executive Director*

Officers & Planning Committee Disclosures

Dr. Weiland has disclosed that he receives speaker honorariums from Cubist and Wyeth. All other persons with the Arizona Chapter, American College of Surgeons involved in the planning of this activity have declared that they and their family members have no financial interest/arrangement or affiliation with one or more corporate organizations offering financial support or educational grants for this continuing medical education activity or with a corporate organization with a direct interest in the subject matter of this activity.

Conference Site

The conference will be held at the DoubleTree Paradise Valley Resort, Scottsdale, AZ. The Hotel is located at 5401 N. Scottsdale Road, Scottsdale, AZ 85250 and a block of rooms has been reserved for this meeting at the rate of \$139 single/double plus \$3 housekeeping gratuity fee until **October 14, 2009**. Reservations made after that date is based on a first come, first served basis. Remember to identify yourself with this meeting when making reservations. The number for reservations is 1-800-222-8733.

Program Description

This is a post-graduate course designed for practicing surgeons. The format consists of lectures by surgical experts in their fields to be followed by panel discussions for questions by the surgeons. Resident essay contests for trauma and general surgery subjects will also be held Sunday morning. Time for refreshments, networking, participant and faculty interactions and exhibits is included in the schedule.

Needs Assessment

The Meeting Planning Committee selected these topics after careful review of evaluations from previous meetings and requests from Chapter members.

Accreditation

The American College of Surgeons is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

CME Credit

The American College of Surgeons designates this educational activity for a maximum of **9.5 AMA PRA Category 1 Credits™**. Physicians should only claim credits commensurate with the extent of their participation in the activity.

Practice Gaps

- ◆ Minimally Invasive surgery continues to evolve with the introduction of new techniques and technology. With increasing focus upon the development of Natural Orifice Surgery, it is soon to become a mainstay in every modern rectal surgical practice.

- ◆ Current endoscopic technology is very limited and does not allow the degree of freedom and dexterity to perform many procedures. Robotic technology holds a promise of improving the surgeons' ability.

- ◆ 2.6 million Americans are reported to have Atrial Fibrillation, yet only a small percentage of the general medical community knows about the maze procedure. Since this is a procedure that can potentially cure this disease, and not just control the complications associated with it (which medical therapy has been doing for centuries) it is imperative that the medical community be educated about all available treatment options.

- ◆ One of the great areas of burn and wound research is development of a viable skin substitute. Clinically available skin substitutes all have disadvantages: none is ideal. This lecture will educate attendees on the current state of the science of developing skin substitutes.

- ◆ Obesity prevention and treatment is entering a new era of coverage by many insurance companies. The primary indication for obesity surgery has changed from a need for weight loss to a need to address the multitude of metabolic problems the patient suffers. New emerging technology may allow less invasive procedures which yield similar results and tempt surgeons and gastroenterologists into the field. The patients will be best served by interventional therapy which takes place in the setting of a comprehensive and multi-disciplinary program. Many surgeons have no experience of the modern era of metabolic surgery and this short introduction may provoke interest in the field.

- ◆ Current knowledge is presently to do open repair of supra-renal aneurysms. The newer techniques involve debraching techniques followed by endovascular repair and by fenestration of the endografts.

- ◆ A practice gap exists in the surgical treatment of congenital diaphragmatic hernia (CDH) due to rapid changes in prenatal, immediate postnatal and technical advances allowing novel treatment options for CDH.

- ◆ Currently over 250,000 bariatric procedures are being performed in the United States. Some of these patients will experience complications and seek care at their nearest emergency room. An understanding of current procedures and common complications and how to address them is critical to minimizing downstream problems. Morbid Obese patients or previously morbid obese patients have unique physiology and co-morbid disease which can impact the options for care. General surgeons practicing in the community should be aware of these unique patients, situations and complications and understand the referral network of bariatric surgeons in Arizona which exist for complex cases.

- ◆ Congress has been debating health care reform legislation during this past year. Many surgeons have not heard the details of what is included in the proposed pieces of legislation and how reform legislation will impact them.

- ◆ This discussion aims to expose the general surgeon to advanced minimal access techniques and outcomes that they may not have been exposed to in their practices.

- ◆ Since the advent of in utero transfusion of the fetus in 1963, the fetus has now become recognized as a viable patient. However, enthusiasm for fetal procedures and invention of new procedures has outstripped both the availability of data for definitive benefit and time for ethical consideration as to the effects and repercussions of fetal therapy. There remains a great need for bioethical equipoise in the undertaking of any in utero endeavor.

- ◆ Historically, surgical procedures involving the pancreas have been performed using an open technique. With the advancement of laparoscopic instruments and imaging, some of these pancreas procedures can be performed safely and effectively laparoscopically.

- ◆ Extreme microsurgery techniques and reconstructive techniques are available in a paucity of locations around the country especially in the private practice situation. Distal microsurgery reimplantation, reimplantation of avulsed parts, reconstructive hand surgery for devastating injuries, and advanced free tissue transfer techniques seem to be limited to academic university practices but possibly should be more widely practiced.

- ◆ This presentation is intended for an audience that by and large would not have frequent contact with Endovascular Neurosurgical treatments and therefore may not be aware of options available for their patients. It is hoped that exposure to a range of recently developed techniques may broaden horizons both for individual patients and by way of cross-pollination amongst specialties.

- ◆ For many years the TURP has been the standard of therapy for relief of symptomatic prostatic enlargement. Recently, the PVP-Laser ablation of the prostate has become an increasingly popular, minimally invasive, highly successful alternative to the TURP.

- ◆ Internal fixation of clavicle fractures has been traditionally reserved for open fractures and floating shoulders. Recently evidence has emerged that surgical fixation of clavicle fractures improves outcomes in patients with significant fracture shortening. Clavicle fractures associated with significant chest trauma (multiple rib fractures, pneumothorax) is also emerging as a valid indication for surgical fixation. Patients with this constellation of injuries report improvement in pain and respiratory effort after internal fixation of the clavicle fracture.

- ◆ Currently, the face transplant procedure is considered as clinical research, but the hope is that progress in the field, with more face transplant cases performed, will bring it into routine clinical practice.

- ◆ With the new developments in simulation technology and current efforts from Accreditation Agencies there is a gap in knowledge on the role of simulation in surgical education.

Educational Objectives

At the conclusion, the attendee should be able to:

- ◆ Describe advantages/disadvantages to robotic general surgery and describe potential hazards to SILS/NOTES

- ◆ Address the increasing role of trans-anal endoscopic microsurgery in the management of both benign and malignant tumors of the rectum.

- ◆ Explain the pathophysiology of Atrial Fibrillation, and use the surgical treatment option available for its cure.

- ◆ List clinical indications for skin substitutes, describe three types of skin substitutes currently in clinical use, and discuss current research in skin substitutes.

- ◆ Comprehend the current environment driving the surgical treatment of obesity and recognize upcoming technology in the treatment of obese patients.

- ◆ Demonstrate the different treatment techniques for repair of supra-renal aneurysm and educate surgeons on the newer fenestrated endograft techniques.

- ◆ Recognize the changing approach to congenital diaphragmatic hernia (CDH), the current state of fetal intervention for CDH, and the technical aspects of thoracoscopic repair of CDH.

- ◆ Achieve an understanding of anatomy of current bariatric procedures being performed and review the workup and surgical options for important complications of each procedure as well as utilizing the referral network for bariatric surgeon support in Arizona.

- ◆ Educate surgeons on how potential health care reform legislation will affect them.

- ◆ Compare open techniques to state of the art surgical endoscopic techniques and recognize pancreas lesions appropriate for minimally invasive surgery.

- ◆ Describe several procedures performed on fetuses in the womb and introduce the organizations both internationally and locally, that can provide resources for in utero care.

- ◆ Demonstrate advanced techniques in reconstructive plastic and hand surgery.

- ◆ Discuss developments in endovascular techniques that have dramatically altered treatment paradigms for common cerebrovascular illnesses.

- ◆ Comprehend laser physics and its relationship to the prostate gland and become familiar with the equipment and technique of the PVP-Laser ablation of the prostate.

- ◆ Recognize indications for surgical fixation of clavicle fractures in the multiply injured patient.

- ◆ Be familiar with background information regarding the need for facial transplantation, be aware of experimental animal studies and cadaver studies performed in preparation for facial transplantation, and that the first IRB approval for facial allograft transplantation in humans was based on over 20 years of extensive research in the field of composite tissue allograft transplantation.

- ◆ Realize the impact simulation may have on surgical education of the Future.