



Women in
Thoracic
Surgery

ORACLE

To further the achievements of women practicing thoracic surgery by providing mutual support and facilitating professional advancement

President's Corner

By Margarita Camacho, MD



We are very much looking forward to our Annual Meeting during the STS in a few weeks in San Diego. It will be held on Sunday January 28th, from 6 to 8 PM at the STS headquarters hotel, the San Diego Marriott. During our dinner meeting, we will update you on many achievements that occurred in 2006, unfold our plans for 2007 and beyond, and hold our annual elections. We very much look forward to seeing you there, to exchange ideas, spend some quality time together, celebrate our successes and share the tremendous momentum.

Since our last newsletter, we held a very worthwhile fall retreat in Boston in November, which focused on career development. It was repeated in an updated form from the year before, due to its success. We plan to have another one next fall, in the more central location of Chicago, and will let you know well in advance to help you plan accordingly. In October 2006, one of our past presidents, Ajay Carpenter addressed the Women in Thoracic Surgery of Japan at the annual meeting of the Association of Thoracic Surgeons of Japan. This was the "kick-off" meeting for the new Women in Thoracic Surgery of Japan. Approximately 25-30 female CT surgeons were present, and Ajay's address was very well received by both women and men. We are delighted that our increased outreach and visibility over the years may help others around the world begin their own societies of women CT surgeons.

In a few weeks, we will be nominating numerous early-career surgeons to the leadership board of WTS, to help shape the future of our growing successful organization. As you know, our Mentorship Program under Cindy Herrington serves as a model in our field. Lorraine Rubis,

our Membership Chair, has tirelessly kept track of our current members, located past members, and has been instrumental in recruiting new members. Carolyn Dresler, our International chair, met with women CT surgeons in Stockholm, Sweden during the EACTS, and continues to keep in touch with our international colleagues. Kathleen Fenton, our Oracle Editor, and Ginny Litle, our Website Editor, have maintained the crucial communication link, and Nora Burgess, our historian, continues to track the important achievements of our Society and our members. Becky Wolfer, our current secretary/treasurer, will be helping Nora Burgess as our Photo/visual media archivist. Congratulations to our WTS winners of scholarships to attend the STS: Jaime Lewis (Univ. Of Chicago), Vanessa Olbrecht (Johns Hopkins), Gurjyot Bajwa (Rush University Medical Center), Reshma Biniwale (Montefiore Medical Center), Monica Casiraghi (San Raffaele Hospital).

We'll have a lot to talk about at our meeting in a few weeks - see you in San Diego!

Minutes from the Stockholm European Association for Cardio-Thoracic Surgeons



We met for breakfast on the 11th of September around the breakfast table at the First Royal Star Hotel just adjacent to the convention center. It was amusing at the beginning, because most of us did not know the others. Thus, we would query each woman entering to the restaurant - are you a CT surgeon?! We had Adelheid End (Austria), Eva Berglin (Sweden), Paola Ciriaco (Italy), Lidia Libretti (Italy), Franca Melfi (Italy), Fany Chronidou (Greece), Carolyn Dresler (France), and Brigid Scanlan Eiyneck from Scanlan International. We started off by introducing ourselves, where we came from and what we do in our practices.

There was a discussion concerning the number of women in each of our countries and how we could reach them. Also, there was an interesting review of how CT surgeons are trained in different countries and how surgeons do specialize in one or the other - cardiac versus thoracic. Also, a discussion centered around the difficulty of promotion and exposure

and how this varied from country to country. At the current meeting women served as moderators for only two sessions.

Along these lines, it was felt that it would be better not to have a separate WTS organization in Europe. This could be seen as too threatening, marginalizing, isolating and those present felt that the downsides were not worth the formal formation of such a group. For the time being, the women present felt that they very much did want to go on meeting in a similar fashion as this gathering. We also sought ways to improve contact and communication with other women in Europe. Dr. Bodil Brandt reportedly has formed a 'section of women thoracic surgeons' and I will pursue finding more about this. Adelheid is organizing a meeting for whom she is the principal organizer, and she discussed the difficulty of attracting funding for it.

Mentoring was discussed - and with much enthusiasm. A next step, if

possible, would be to organize a meeting similar to the one being held in Boston, which would help with providing leadership, negotiating, mentoring type of skills. We would try to find a central location and funding. It was felt that getting time off to attend ANY meeting was difficult, and there is no institutional support for such a trip. I took this one to research the possibilities. Franca offered Pisa, and the meeting that she will be hosting in 2007 as a potential location.

We adjourned and moved to the convention center - all very pleased that we were able to meet each other.

We want to give a special thank you to Brigid Scanlan Eiyneck who provided financial support for the breakfast, and her ever-present enthusiasm.

Addendum: I have contacted Bodil Brandt - there is not such an organization of women thoracic surgeons - BUT, she is interested in participating with us.

A Brief Bio of one of our newly-certified women!

Virginia R. Litle, M.D. graduated from the Brown-Dartmouth Program-in-Medicine and completed an internship and residency in General Surgery at the University of California, San Francisco. Dr. Litle subsequently completed a Surgical Oncology fellowship at the University of Pittsburgh Medical Center followed by a Cardiothoracic residency also at the University of Pittsburgh. Dr. Litle has extensive experience in thoracoscopic/laparoscopic (minimally invasive) esophagectomy, laparoscopic anti-

reflux surgery and repair of giant paraesophageal hernias and minimally invasive palliation of advanced airway and esophageal malignancies including use of stents and photodynamic therapy. Her translational research interests include molecular detection of occult metastatic disease in lung and esophagus cancer. She is currently an Assistant Professor of Surgery in the Department of Cardiothoracic Surgery at Mount Sinai Medical Center in NYC.

WTS would like to recognize and thank our current institutional members

Leslie Kohman, MD
William A. Baumgartner, MD
Robert S.C. Higgins, MD, MSHA
Doug Mathisen, MD
Cindy Herrington, MD
Fred Crawford, Jr. MD
Thomas D'Amico, MD

George L. Hicks, Jr. MD
J. Nilas Young, MD
Irving I. Kron, MD
Robert Kormos, MD
Michael Mill, MD
Marvin D. Peyton, MD

Women's Heart Disease Different from Men's

Women who have chest pain but no evidence of clogged arteries on conventional imaging tests are nonetheless four times more likely to eventually be hospitalized for heart failure, suffer a heart attack or stroke, or die than women without heart disease symptoms, according to a study presented at the American Heart Association's Scientific Sessions 2006. Researchers from the University of Florida studied 564 women with chest pain who underwent coronary angiography to track blood flow through key arteries and were found to have no visible obstructive coronary artery disease and compared them with 1,000 Chicago-area women of similar age and race who were free of documented heart disease. The women with chest pain had a four-fold increased risk of developing serious cardiac complications or dying within the study's five-year follow-up period, independent of the influence of age, race, history of hyper-tension or diabetes, and other factors. (Health Science Center News, 11/14/06)

WTS Scholarship Winners who will attend the STS in 2007

WTS Scholarship Winners who will attend the STS in 2007

Gurjyot Bajwa

Rush University Medical Center
Thoracic Surgery Resident, First Year
903 S Ashland Ave., #101
Chicago, IL 60607
jannat01@hotmail.com

Reshma Biniwale

Montefiore Medical Center, Bronx, NY
Thoracic Surgery Resident, Second Year
3450 Wayne Avenue, Apt 17J
Bronx, NY 10467
rbiniwale@hotmail.com

Monica Casiraghi

San Raffaele Hospital
Thoracic Surgery Resident, Fifth Year
Milan, Italy
mcasirag@med.unc.edu
San Raffaele Hospital
Via Olgettina 60
Milan, Italy

Jamie D Lewis

University of Cincinnati College of
Medicine
General Surgery Resident, Third Year
1832 Mears Avenue
Cincinnati, OH 45230
Jaime.lewis@uc.edu

Vanessa Olbrecht

Johns Hopkins University
School of Medicine
Medical Student, Fourth Year
Vanessa@jhmi.edu
601 North Eutaw Street, Apt 506
Baltimore, MD 21292

WTS Congratulates our Members who have New Positions

Nora Burgess

Medical Chief Financial Officer & Assistant Physician in Chief
Kaiser Permanente San Francisco Medical Center

Carolyn Dressler

Branch Chief for Tobacco Control in the Arkansas Department of Health, and Associate Professor in the College of Public Health, Department of Policy and Management, with an appointment at the University of Arkansas Cancer Center.

Kathleen Fenton

Hospital Infantil Manual de Jesus Rivera, "La Mascota"
Managua, Nicaragua
(also see article)

Lorraine Rubis

Student, Master of Medical Management at Tulane University
(also see article)

and...Congratulations to **Carolyn Reed**, President of the STSA!!!

2007 WTS OFFICERS

President: Margarita Camacho, M.D.
Mcamacho@SBHCS.com

Vice President: Nora Burgess, M.D.
nora.burgess@kp.org

Secretary/Treasurer: Joanne Starr, M.D.
starrdoc28@aol.com

Oracle Editor: Kathleen Fenton, M.D.
KathleennF@msn.com

Website Editor: Virginia Litle, M.D.
virginia.litle@mountsinai.org

WTS Website: www.wtsnet.org

Why Nicaragua?

Dr. Kathleen Fenton has recently begun a new adventure by relocating to Nicaragua to work closely with the local medical team as a new national program for congenital heart surgery is initiated.

Nicaragua is a beautiful country in Central America, with mountains, volcanos, lakes, and shores on both the Pacific and Atlantic coasts; it has many natural resources but its most valuable and attractive assets are the people. With a population of approximately 5.5 million, whose mean age is only in the 30s, Nicaragua sees an estimated 500-800 children per year born with congenital heart defects requiring surgery. Medical teams from the International Children's Heart Foundation as well as from Belgium, Duke University and others have been coming to Nicaragua two or three times a year to perform congenital heart surgery for about 10 years. Although much of the population lives below the poverty line, Nicaragua has the personnel

and the financial resources to be able to run a cardiac surgery program of its own. There is a children's hospital in Managua (see photo) which is already staffed by pediatric cardiologists, pediatric intensivists and anesthesiologists and which has recently been designated by the Minister of Health to be the national referral center for pediatric cardiac surgery. The new cardiac surgery program will be jointly sponsored and funded by the Ministry of Health and by domestic and international donations. Sponsored by the International Children's Heart Foundation, Dr. Fenton plans to spend two or three years working with the local medical team in this hospital while the program gets started.

In her own words: "This is a great adventure for me, an opportunity to learn a new culture both inside and outside the hospital, to work with great people and to really participate in the growth and development of a program and a country."



"La Mascota" Hospital in Nicaragua



Surgery in Nicaragua. Left-to-right: Leticia Meneses, RN, Kathleen Fenton, MD, Sergio Hernandez, MD, and Martina Pavanic, RN.

Is There Life After Cardiac Surgery?

By Lorraine J. Rubis, MD

Not too many years ago, it was difficult to conceive of a life without getting up before the sun, making ICU rounds and starting the morning at 7:45 AM in the OR. It is fair to say my whole life circle was the OR, my office, the hospital and my condo. My friends, who were all hospital based, tried to include me in their festivities, but after being called out from event after event, even they gave up. Yet, I never felt I was missing out on anything! I loved my work, and the intangible rewards I reaped from my work carried me on a constant high.

The time came, however, when my life changed. It didn't occur overnight. Circumstances (mostly political) were changing around me and I was standing still, trying to stop the forward progression of events. Technology was progressing very rapidly but I no longer had the desire to chase every innovative twist to performing bypass grafts. I felt I did very well using the tried and true techniques.

I slowly came to the realization it was time to quit! Yes, quit performing surgery!

My period of OR withdrawal, initially severe, was very short lived as I saw a world of opportunity before me.

My surgical background served me well when I taught Anatomy & Physiology to a group of incoming nursing students at a local community college. The student level of commitment, however, fell far short of the surgical residents I had worked with and after three semesters, I was pursuing another endeavor. My next adventure outside the OR was as Physician Advisor for Utilization for the hospital – attempting to decrease the hospital's length of stay, which was considerably prolonged beyond the Medicare mean. This gave me a new perspective on the 'hospital as a community'. My job involved attempting to change physician behavior – a very difficult assignment for which I was not adequately prepared. I saw a need for improvement in countless areas of the hospital and this really caught my interest!

I am now enrolled in a master's program, MMM or Master of Medical Management at Tulane University, which is filling in the gaps in my knowledge in the areas of business and management. My goal is to be a leader in the changes that are necessary for medicine to be a financially profitable and once again, the most highly respected profession.

Job Opportunities

We would like to start a new column in the Oracle to list academic, private practice and training (residency/fellowship) openings. Please send information to the Oracle Editor (KathleennF@msn.com) regarding available positions.

WTS 2007 Elections

2007-2008 President:
Margarita Camacho

2007-2008 Vice President:
Nora Burgess (President Elect 2008)

2007-2009 Secretary: Joanne Starr

Board of Directors:
2007-2009 Patty Thistlethwaite
2007-2009 Cindy Herrington
Write in _____

Serving for another year of a two-year term on the BOD is Yolonda Colson 2006-2008. Margarita, Nora and Joanne are automatically on the BOD because of their office. Becky, Mary Boylan and Carolyn D's terms are over in Jan 2007.

Members at Large, Nominees are:
Jennifer Walker
Kim Gandy
Kris Guleserian
Betty Kim
Jessica Donnington
Mary Maish
Meena Nathan
Write in _____

Committee Chairs, appointed, not elected

Membership: Lorraine Rubis

International Membership:
Carolyn Dresler, Adelheid End

Mentoring: Cindy Herrington

Archivist: Nora Burgess

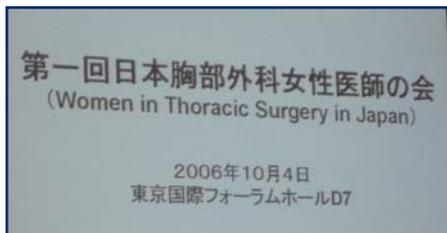
The Oracle Editor: Kathleen Fenton

Website editor: Virginia Litle

By-Laws: Lorraine Rubis

Women in Thoracic Surgery: A Tradition of Mentorship

By Ajay Carpenter, MD



On October 4, 2006 the inaugural meeting of Women in Thoracic Surgery of Japan was held in conjunction with the Association of Thoracic Surgeons of Japan. The audience included more than 30 women surgeons, the president of ATSJ, and several men surgeons from Japan and Europe. I was privileged to open the meeting. Before the meeting I was asked to discuss the history of WTS, and on the evening I arrived in Tokyo Dr. Aya Saito asked me to explain to the attendees why there was need for an organization of women in thoracic surgery. Following is the text of that presentation.



Women in Thoracic Surgery: A Tradition of Mentorship

The question was posed to me last night: Why do we need an organization for Women in Thoracic Surgery in Japan? Simply put, we need a “place” where women can enjoy collegial interactions and where mentoring can be fostered to assure a bright future for our profession. I’ll tell you a story of evolution. I’ll describe the history of WTS in North America and how the combining of individual goals and

vision has built a tradition of mentorship that is a significant contribution to the future vigor of our profession.

Let’s start with a brief history of thoracic surgery in the United States and how women participated.

The American Board of Thoracic Surgery (ABTS) was first established in 1948. It was the culmination of 3 years’ planning by appointed members representing the American Association of Thoracic Surgery (AATS) and the Society of Thoracic Surgeons (STS). The first certificates were awarded in 1948 to the founding members of the first board. The first examination was administered in 1949. It was not until 1961 that the first women applied to and were admitted as diplomates of the ABTS.

Nina Starr Braunwald passed her examination for certification in April 1961. Dr. Braunwald went on to a distinguished career, the highlights of which included designing and implanting the first bioprosthetic aortic valve. She was the first, of many, to manage a busy clinical practice while enjoying a successful marriage and raising her family.

Two more women, Ann Stitt McKiel and Nermin Tutunji were admitted to the board in October of 1961.

The early growth of women as Thoracic Surgeons was slow. There were undoubtedly many reasons: the time and energy commitments of a practice in thoracic surgery were not compatible with the family life that was highly valued at that time, and there were quiet but strong barriers from more established members of the profession that deterred many women

from choosing the profession. By 1986 there were 28 women diplomates of the ABTS.

During the 1986 meeting of the STS, Dr. Leslie Kohman invited all the women who attended the meeting to gather for informal breakfast meeting. Eight women met for breakfast and discussed networking. The group decided to meet semi-annually during the STS and the AATS. With this simple gathering “Women in Cardiothoracic Surgery” was founded. The first newsletter was sent to 30 women surgeons in 1988. By 1990 the group’s mailing list had grown to 84 including practicing surgeons and residents in the US, Canada, Australia, Bulgaria, China, France, India, Germany and Sweden.

In 1994 the name of the organization was changed to Women in Thoracic Surgery (WTS) to align with the nomenclature used by the STS and AATS. That year the informal newsletter took on a more professional look as the “Oracle”. The Oracle was published and mailed with support from Scanlan International, and had a circulation to 118 surgeons in practice and training.

The first formal gathering of leadership in WTS happened in the fall of 1999 when the president, Dr Rosalyn Scott, invited a group of members to discuss the future of the organization. With sponsorship and facilitation from Baxter-Edwards the group convened in Irvine CA, and called the meeting the Archigia Circle. Over 2 days there was open discussion among the group to define the goals of the burgeoning organization. The important result of the Archigia circle meeting was a clear definition of the mission and goals or WTS:

The mission of Women in Thoracic Surgery is to further the achievements of women practicing thoracic surgery by providing mutual support and facilitating profession advancement. Four goals were defined:

1. Enhance the quality of medical care given to the patients of the members
2. Focus on the development of women thoracic surgeons through a mentoring program
3. Enhance the education of patients concerning heart and lung disease, particularly but not exclusively, among women
4. Enhance the education of women thoracic surgeons through seminars and other training media

On January 31, 2000 WTS held a symposium to honor the first 100 women to earn certification from the ABTS. At that time there were only 98 women diplomates. The keynote speaker was Dr. Eugene Braunwald who presented his thoughts on the life and career of his wife: *Nina Starr Braunwald: Some Reflections on the First Woman Heart Surgeon*. Other speakers included Drs. Renee Hartz, Harold Urschel, Shauna Roberts, William Baumgartner, Robert Wallace, Gerald Burrow and Rosalyn Scott. The symposium had an attendance in excess of 200 and the proceedings were published as a supplement to the *Annals of Thoracic Surgery* (71(2): s1-s54, Feb 2001).

During my tenure as president of WTS, I was fortunate to have Dr. Lorraine Rubis serve as Secretary. Through her determined efforts the Bylaws of Women in Thoracic Surgery were written and confirmed by the membership. This document clearly defined the leadership structure and served as the basis for Articles of Incorporation. WTS was incorporated in 2002 as a 503c non-profit



organization and became a constituent member of CTSnet. The semi-annual meeting and networking luncheon gathered 20 women thoracic surgeons at the Women's Art Museum in Washington DC. Until this meeting today, that was almost certainly the largest gathering of women thoracic surgeons ever.

Dr. Mercedes Dullum assumed the presidency of WTS in January 2003 and instituted the annual leadership retreat. The first retreat was facilitated by Guidant Corp. The group evaluated the previously stated goals of the organization to develop short and long-term goals. It was decided to focus on 2 primary goals for the coming year: Mentoring and Website Development. It was agreed that an annual leadership retreat should be held each fall in preparation for the January business meeting.

The mentoring goal for 2004 focused on graduating residents to assist with the transition to practice. Dr Cynthia Herrington took the lead on this effort and presented the plan to the Thoracic Surgery Directors Association. The first challenge was to identify the women in training and to match them with practicing surgeons of similar interest to help develop mentor-protégé relationships. Using the website development, a web-based program was built to assist with this matching and to provide information and resources to young surgeons.

The concept of mentorship was first



presented in Homer's *Odyssey* when the goddess Athena took the guise of the nobleman Mentor was served as the trusted counselor to Telemachus. In today's reality, we cannot each be guided by the hand of a goddess, but rather must strive to develop effective mentor-protégé relationships at all levels. Since its inception in 2004, the WTS mentorship program works to facilitate these relationships both within peer groups and between senior / junior surgeons.

The first focus was on residents to provide "safe" haven for counseling and support, and to help with the transition from training to practice. The first step in building a mentorship program for residents was to identify the women who were in training and then to match them to attending surgeons. Through contacts in the American Board of Thoracic Surgery we began to identify women in thoracic residency. The real challenge was to find women based on name alone since the ABTS does not include gender in their database of members. Direct mailing to residency directors helped to further the process and also to identify younger residents still in general surgery with a strong interest in Thoracic Surgery.

Our website, WTSnet, proved an invaluable resource to connect residents with practicing surgeons. Now linked to CTSnet, the website is a resource to improve connections among members and to provide

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educational information to our membership. Members commit to serve as mentors making their own professional and personal interests available on the website and providing contact information. Numerous connections have been established between surgeons and residents or between junior and senior surgeons using this tool. It's been a slow process and became clear that an outreach plan was needed.

In 2004, WTS first offered scholarships for women training in thoracic surgery or general surgery to attend the Society of Thoracic Surgeons (STS) meeting in January of 2005. The response to this offering was very encouraging, and 8 women were selected to receive these scholarships. They attended the STS meeting in Tampa, FL and were presented at the WTS networking dinner. The scholarship program has been a great success, and applications are being reviewed now for the third year.

Once the mentoring program for residents was underway it was time to move forward with career development for young surgeons in academic and in private practice. In November 2006 we will be offering a professionally facilitated program on career development open to all WTS members. This program was held for the leadership group a year ago and met with great enthusiasm. We are optimistic that the overall membership will enjoy the program as well.

This year, 2006, marks 20 years since Dr Kohman first gathered a small group of women surgeons for breakfast. In that short time the organization has grown in size and in function. At our recent 20th anniversary symposium we recognized the achievements of our members. Women now serve in many capacities in the leadership of STS and AATS. The Southern Thoracic Surgery Association (STSA) has elected the

first woman to serve as president of a major thoracic surgery organization. WTS members have served on the ABTS and the Residency Review Committee. The Thoracic Surgery Directors Association (TSDA) includes women serving as Associate Residency Program Directors and now the first Residency Program Director.

There are now 153 women who have earned certification from the ABTS. WTS has membership including women surgeons from North America, Asia, Europe and South America. Today, we celebrate the inaugural meeting of Women in Thoracic Surgery of Japan.

Looking to the future we must focus on the development of women thoracic surgeons through mentoring. In the USA, there has been a steep decline in the applicant pool of residents choosing thoracic surgery. This is probably due to declining prestige and financial rewards, time competition and concerns about the future job market. Mentorship is the key to the growth of our profession. We need to reach out to premedical and medical students, to entry level surgeons, to surgeons in developing careers. We need to expand on world-wide participation.

Last month a small group of women met for breakfast during the European Association of Cardiothoracic Surgeons. Represented were surgeons from Sweden, Italy, France, Austria and Greece. We've seen what can develop from a breakfast meeting and we see today the terrific interest here in Japan.

So I return to the original question posed: Why do we need an organization for Women in Thoracic Surgery in Japan? We need a structure to provide collegial interactions among member. We need a mechanism to develop effective mentorship. And finally, we need these things to assure the vibrant future of our profession.

Mentoring Update

The mentoring program continues to be appreciated by many surgeons, one at a time. The Oracle would like to pass along to you one young woman's thanks, in her own words:

Dear Dr. Cynthia Herrington,

My name's Francesca, I'm an Italian doctor and, first of all, I'm a woman.

I attended the University of Pisa and graduated last March. I got closer to surgery last year, when I met a wonderful woman surgeon (Dr. Melfi) who made me fall in love with thoracic surgery! Now, I'm waiting for a residency at University Hospital of Pisa.

Surfing the Internet, I came across the WTS web-site. I'm writing you these few lines just to say that you're all making a great job with your association! I strongly believe that meeting someone who makes you deeply love what you're studying, is a material point in every student's career. Women should help each other to reach every goal they long to, just because...we deserve it!

Sincerely yours,
Dr. Francesca Allidi

Getting to Know You:

The WTS is small but our members are spread out throughout the country and the world. In an effort to help us know one another better, the Oracle would like to periodically present interviews with WTS members. We begin in this edition with our President, Margarita Camacho.

Margarita went to medical school at New York Medical College, did her general surgery residency at Lenox Hill Hospital and her cardiothoracic surgery training at Albert Einstein. She currently practices at Beth Israel Hospital in Newark.

Editor: Margarita, we know about your medical background and your professional biography is available to us on CTSnet. We are hoping to get to know you better as a person. Where did you go on vacation last year?

Dr. Camacho: This year, I went to Vail for skiing with my husband - it is an annual trip we do in late February. The snow is softer (for those occasional falls!) and the hills

are more forgiving than those in the northeast.

Editor: So, you go skiing every year – that sounds wonderful! What is your favorite vacation destination?

Dr. Camacho: My favorite place is the south of France – I have been there several times, but not recently. It's great to start in St. Tropez, travel east along the French Riviera, and cross the border into Italy. The small roadside “unknown” restaurants were awesome, with some of the best food and wine I've had. I hope to return there before too long!

Editor: Can you tell us a little bit about your family?

Dr. Camacho: My husband and I married when we were in our mid-forties, a first marriage for both of us, and after 13 years of being together. We have no children, but after 7 years of marriage, have two wonderful bearded collies that we adore.

Editor: Do you enjoy music? Do you listen to music during surgery?

Dr. Camacho: I like oldies music from the 60's and 70's - not too noisy, and I do like relaxing music in the OR.

Editor: What about sports?

Dr. Camacho: I grew up watching baseball with my younger brother - it is the only sport I can follow and understand. The New York Mets were my first favorite team, and while I admire the Yankees' achievements over the years, my heart is still with the Mets. Their winning games are usually much more exciting.

Editor: What is your favorite part of your work?

Dr. Camacho: Regarding my work – I am the surgical director of our cardiac transplant and VAD program, and I have been very interested in heart failure surgery for the last 15 years. Staying on the leading edge of device therapy is extremely exciting and rewarding, since I have been fortunate to see where we were 15 years ago, and where we are now.



Women in Thoracic Surgery (WTS) is an international organization of thoracic surgeons whose purpose is to:

- Provide quality care to our patients
- Mentor young women interested in pursuing careers in thoracic/cardiac surgery
- Provide educational opportunities for our members
- Educate the public, especially women, regarding cardiac and pulmonary health and disease

To further the achievements of women practicing thoracic surgery by providing mutual support and facilitating professional advancement

President: Margarita Camacho, M.D.
mcamacho@SBHCS.com

Vice President: Nora Burgess, M.D.
nora.burgess@kp.org

Secretary/Treasurer: Joanne Starr, M.D.
starrdoc28@aol.com



2007

Membership Application
(January 1, 2007 through December 31, 2007)

Name: _____

Hospital/Institution: _____

Mailing address: _____

Phone: (office) _____

Address: (home) _____

Phone:(best way to reach you): _____

E-Mail address: _____

Dues: Active membership \$100

International membership: No dues

Associate membership (GS or TS resident): No fee (circle GS or TS)

If you are a GS, TS resident or fellow, please state your year of training _____

Emeritus membership (Retired from practice, or > 70 YO): No fee

Honorary membership: No fee

Optional: Donation to the Nina Braunwald Scholarship Fund through the TSFRE \$ _____

Please remit to:

Lorraine J. Rubis, M.D.

106-4th Street East

St. Petersburg, FL 33715

LJRM@tampabay.rr.com

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Thank you for your support. Visit our website: www.WTSnet.org
