



ORACLE

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

President's Corner



Women Leaders and Female Role Models

By Virginia R. Litle, MD

“Among medical doctors, cardiothoracic surgeons are frequently described as being the archetypical surgeon-aggressive, dominating, authoritarian, action-oriented, materialistic and extroverted.” This quote from the 1996 Archives of Surgery article,

“Experiences of Women in Cardiothoracic Surgery,” by Dresler C et al., summarizes the strong adjectives commonly used to describe our surgical colleagues. These characteristics could be considered requisite for becoming a clinical leader. However, it may be argued that equally important attributes to have, particularly if one wants to develop and sustain a strong clinical volume, are affability, ability and availability. Certainly these latter characteristics were exemplified by Dr. Carolyn Reed, who with her can-do spirit and energy, became a surgical leader and a role model for women in thoracic surgery. Dr. John Ikonomidis, Chief, Division of Cardiothoracic Surgery at Medical University of South Carolina, wrote a wonderful tribute to his friend and mentor Dr. Reed in the recent Thoracic Surgery Foundation for Research and Education (TSFRE) **newsletter**. He summarized her numerous leadership positions in surgery. Dr. Reed was a Governor in the American

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College of Surgeons, President of the Southern Thoracic Surgical Association (STSA), and an honorary President of the Society of Thoracic Surgeons (STS). She was a role model for members of our organization: first woman president of the STS, first woman elected to the American Board of Thoracic Surgery, and the first woman to be president of a major thoracic surgery organization, the STSA.

As I hope you all know by

Continued...

now, the Carolyn E. Reed Traveling Fellowship was recently established to honor the memory of Dr. Reed. After the brainstorming of WTS Past Presidents, Drs. Ajay Carpenter and Yolonda Colson, last fall, the seed for the Reed Award was planted. Dr. Carpenter, a Director on the TSFRE Board, then introduced the idea to Dr. Alec Patterson, President of TSFRE. We appreciate Dr. Patterson and the TSFRE Board for supporting our effort to establish an Award in honor of Dr. Reed. The support of the TSFRE was instrumental in circumventing non-insignificant challenges to fundraising and organizational exposure, which was crucial in getting this award funded in such a short period of time. In collaboration with TSFRE and as a coincidental amalgam of our organization's missions, we combined innovation and the education of

women to establish the Carolyn E. Reed Traveling Fellowship. This specific Fellowship will fund annually a woman thoracic surgeon to learn a new technology to improve the care of patients at her institution. In our working with the TSFRE

leadership, Priscilla Page, (TSFRE Executive Director), and Dr. Patterson, Dr. Reed indirectly elevated the WTS exposure and support from our professional organizations: STS, AATS and the Graham Foundation, STSA and WTSA. Dr. Patterson has been a long-time supporter of women in cardiothoracic surgery. Most notably, Dr. Patterson is Chief of Thoracic Surgery at Washington University where our vice president Dr. Jennifer Lawton is a full professor of cardiac surgery, Dr. Mara Antonoff, our Social Media Director, is a CT surgery resident and Dr. Lisa Brown, our Lead Resident Liaison, is a CT surgery resident. In addition to the many valued institutions supporting WTS as listed on our **homepage**, Washington



Photo 1. Drs. Patricia McCormack, Carolyn Reed, Carolyn Dresler, Leslie Kohman and Jemi Olak



Photo 2. Drs. Reed and Olak

TOP 10 "Reedisms"

10. *Never let the little things get you down.*
9. *Humor is an important part of residency and life in general.*
8. *Anger is a self-defeating emotion.*
7. *Always remember that you can learn from anyone.*
6. *Humility is always around the corner to prevent arrogance.*
5. *Mentors will change with time and as aspirations change.*
4. *One can learn a lot about how not to act or lead from a negative relationship.*
3. *To constantly grow and realize change is essential to self-renewal.*
2. *Learn how to play the game.*
1. *[Playing the game] does not mean that you have to be subsumed.*



Photo 3. Drs. Reed, Olak and friend in Taos, NM

University deserves special notation as an apparent model program for women in CT Surgery. Not knowing Dr. Reed well myself, I asked her long-time friend and a past President of WTS Dr. Jemi Olak to dispel any potential misconceptions that Dr. Reed could be an archetypical materialistic, dominating and authoritarian (translation = dull and boorish) figure. Dr. Olak revealed a Carolyn with a joie de vivre (translation = bright and affable) as she shared with us pictures of the Carolyn, who loved a celebration (Photo 1), the Carolyn who was an avid supporter of the General Thoracic Surgery Club with its more relaxed, learning-can-be-fun ambiance, and the Carolyn who enjoyed the

outdoors (Photos 2 and 3). Last summer we profiled Dr. Reed in our Surgeons of Excellence segment, in which the top ten "Reedisms" from the 2006 WTS 20th Anniversary Address were summarized (see right insert). A Reedism tweet could read: Be strong. Laugh. Avoid negative energy. Be open minded and humble. Learn from your experiences. Evolve. Model Carolyn Reed.

Continued...

Career and Leadership Development Conference

By Rosemary Kelly, MD

The 2013 Women's Career and Leadership Development Conference for Women Cardiologists and Cardiothoracic Surgeons was held February 1-2 at the ACC Heart House in Washington D.C. The conference directors, Drs. Athena Poppas and Mary Norine Walsh, created this annual conference in 2008 to diversify the cardiology and cardiothoracic surgery fields by creating a vibrant community of women physicians that will strengthen their nonclinical professional skills, provide opportunities to enhance their professional standing, and encourage them to

assume leadership positions within their fields. This one-and-a-half day course supports the advancement of women cardiologists and cardiothoracic surgeons within their careers and professional societies. This was the first year that the conference was expanded to include cardiothoracic surgeons, and I was honored to serve as a panel member. The overall goal of the conference is to improve participant competence at recognizing their own personal and professional characteristics as well as enhance strategies to optimize participation within the medical workforce. The conference limits attendance to encourage networking in a supportive, more personal setting. It was a dynamic meeting that attracted women in training and

practice who were interested in advancing their careers and positioning themselves as emerging leaders both locally and nationally.

The conference began with a networking dinner featuring a keynote address by Dr. Anne Curtis, Chair, Department of Medicine at SUNY Buffalo. She spoke with candor as she described the choices, challenges and successes she has experienced. She also revealed the depth of commitment it takes to aspire to such positions. Her talk regarding her path to leadership was inspiring

and challenging while demonstrating that physician leaders can truly make a broad impact on healthcare and education. It was the perfect kickoff to a meeting directed at developing the next cadre of leaders in cardiology and cardiothoracic surgery.

The main day of conference began the next morning. The program focused on professional development topics for women physicians. The format included lectures, breakout sessions, panel discussions, and social events for networking. The incredibly high quality speakers shared their insights which were directed specifically to the concerns of women leaders. The main sessions were led by Mike Monahan, MA of Healthcare Resource Associates who focused on the large themes of leadership and professional goal setting. He focused on helping the participants develop a personal career plan with attention to an action plan that would address barriers and opportunities for implementation. He was authentic and practical by providing useful techniques

that can easily be implemented upon returning home.

The breakout sessions addressed age-old concerns of negotiation skills, conflict management and effective communication. It was fascinating, entertaining and educational. And who doesn't encounter these issues almost daily at some level? I came away with new skills and a very specific reading list (included on page 6 of this article). My favorite tip was from Barbara Linney, MA from the American College of Physician Executives, who strongly suggested preparing for difficult conversations by writing it out ahead of time to mentally prepare yourself and to uncover your own barriers prior to the actual encounter. In addition to the speakers, there were panelists from cardiology as well as myself from cardiac surgery to round out the perspectives of physicians in academic and private practice.

By the end of the conference, the faculty and attendees had multiple opportunities to interact and share experiences. All had gained new perspectives on topics of leadership so rarely taught in our profession, yet fundamental to effective communication and team management. From my perspective, this was a unique setting to interact with my cardiology colleagues, and I thoroughly enjoyed the entire

meeting. I was surprised at the similarities that women cardiologists and cardiac surgeons face in regard to gender bias and career advancement. I came away with renewed commitment to advancing women leaders and developing a much needed support system. It was a unique opportunity to expand a professional network to include medicine colleagues. Clearly, we share a critical interest in advancing women leaders in our fields. This conference is a fantastic, collaborative opportunity for women cardiothoracic surgeons and will open the door for career advancement education with the added bonus of an enhanced alignment with their medical colleagues. I would strongly encourage women cardiothoracic surgeons interested in leadership development to consider attending this conference next year.

Continued...

Leadership Resources

- **Essentials of Medical Management.** 2nd edition, Ed. Wesley Curry and Barbara J. Linney, MA, 2011
- **Positive Leadership in Health Care: Building on Strengths, Managing Around Weaknesses,** Ed. Wesley Curry and Barbara J. Linney, MA, 2005
- **Physician Executives: What, Why, How.** 2nd ed., George E. Linney, Jr, MD, CPE, FACPE and Barbara J. Linney, MA, 2000
- **A Career Guide for Physican Executives: 2nd edition of Hope for the Future,** Barbara J. Linney, MA 2006
- **Turn Your Face: How to Be Heard and Get What you Want Most of the Time,** Barbara J. Linney, MA, 2010
- **Crucial Converations: Tools for Talking when the Stakes are High.** Kerry Patterson, Joseph Grenny, Ron Mcmillan, Al Switzler 2012

Negotiation Skills

- **Getting to Yes: Negotiating Agreement Without Giving In.** Roger Fisher, William Ury, Bruce Patton (Editor) 1991
- **Beyond Reason: Using Emotions as You Negotiate.** Roger Fisher, Dinel Shapiro. 2005
- **The Physician's Comprehensive Guide to Negotiating.** Steven Babitsky, James Mangraviti 2007
- **Women Don't Ask: Negotiation and the Gender Divide.** Linda Babcock Sara Laschever. 2003
- **No Ceiling, No Walls: What women haven't been told about leadership from carrer start to the corporate boardroom.** Susan L. Colantuono. 2010
- **Hardball for Women: Winning at the Game of Business.** Pat Heim, Susan Golant (contributor). 1999

The 2013 Scanlan/WTS Traveling Mentorship Scholarship Program a Success!

By Davida A. Robinson, MD

The Scanlan/WTS Traveling Mentorship Program was established in 2012. Spearheaded by WTS Vice President, Dr. Jennifer Lawton and longtime WTS supporter, Brigid Scanlan Eiyneck, the program aims to provide exceptional opportunities for women medical students and general surgery residents with a strong interest in pursuing a career in cardiothoracic surgery to spend an elective rotation being closely mentored with a female practicing cardiothoracic surgeon. The award includes \$2,500 to be used towards travel-related expenses accrued during the travel elective. After an expedited application process for the inaugural program, two recipients were chosen out of

twelve applicants. The scholarship recipients Dr. Puja Kachroo, a general surgery resident at UMDNJ, and Laura Trujillo, a second year medical student at the Mayo Clinic, were mentored by Dr. Manisha Shende at UPMC in Pittsburgh and Dr. Yolonda Colson at the Brigham & Women's Hospital in Boston, respectively.

Scholarship recipient Laura Trujillo remarked that the experience was instrumental in not only providing her with exposure to the complex surgical management and multidisciplinary collaboration involved in the care of lung cancer patients, but also exemplified the possibility of being able to tailor



Dr. Yolonda Colson pictured with her mentee, Laura Trujillo.

the type of practice and lifestyle you desire within the field of cardiothoracic surgery. We look forward to the continued success of the WTS/Scanlan Traveling Mentorship Scholarship program in providing future cardiothoracic surgeons with opportunities that may not otherwise be available.

In Memoriam

Carolyn Elaine Reed, MD



March 4, 1950 - November 16, 2012

Online Applications for the Carolyn E. Reed Traveling Fellowship Award Now Being Accepted

WTS is pleased to announce a new fellowship opportunity for women thoracic surgeons, the TSFRE/WTS Carolyn E. Reed Traveling Fellowship. The inaugural TSFRE/WTS Carolyn E. Reed Traveling Fellowship is named in honor of thoracic surgeon Carolyn E. Reed, a committed surgeon, educator, researcher, and champion of the advancement of women in the field of thoracic surgery. This fellowship will be awarded in 2014. The aim to this travelling fellowship is to provide practicing general thoracic surgeons exposure to new, cutting edge technologies/techniques with the expectation that ultimately these skills and new technologies will be incorporated into their clinical practices. The application process through TSFRE's website, www.tsfre.org is now open.

Qualified applicants include women who were board certified in the year 2010 or earlier. Applicants should have an active practice in general thoracic surgery and a desire to expand skills within the thoracic surgery specialty.

The 2014 Carolyn E. Reed Fellowship recipient will be selected by a committee of WTS and TSFRE leaders and will be announced in February 2014. Training is to be completed within one year of selection. The deadline to submit application materials is October 15, 2013.

The fundraising effort for this award is ongoing, and it is WTS and TSFRE's intention to make this an annual fellowship opportunity in order to foster the education of woman cardiothoracic surgeons. To learn more or to make a contribution, please visit ww.wtsnet.org.

The following materials are required in order to be considered:

- Completed **online application form**, including a narrative of your proposed educational experience
- A current CV;
- Proposed budget; and
- Sponsor letter of support confirming their ability to provide the proposed experience to the applicant for the anticipated duration of the fellowship.

WTS Member Valerie Rusch Invited Speaker at the Turkish Society of Thoracic Surgeons

Dr. Valerie W. Rusch, an internationally recognized expert in the surgical treatment of cancers of the lung and thorax, was an invited speaker at the VII Annual Conference of the Turkish Society of Thoracic Surgeons. The conference was held in April, 2013 in Antalya, Turkey. The subjects of Dr. Rusch's lectures included the history of women in thoracic surgery and the staging of mesothelioma and lung cancer treatment. Congratulations, Dr. Rusch!



Dr. Rusch (center) at the VII Annual Conference of the Turkish Society of Thoracic Surgeons pictured with other attendees, including Dr. Serife Liman (4th from the left) and Dr. Ayten Cangir (5th from the left).

Valerie W. Rusch, M.D., is a Professor of Surgery at Cornell University Medical College in New York City, and the Alfred P. Sloan Chair at Memorial Sloan-Kettering Cancer Center.

2013 WTS Scholarship Awardees

WTS is pleased to announce the recipients of the 9th annual Women in Thoracic Surgery Scholarship Program for 2012. The topic: "How should a practicing surgeon acquire new skills with evolving techniques/technologies, and, following acquisition of a new skill set, how should she consent her first patient for the new technique?" The scholarship recipients provided insightful responses to this question. Thank you to all of the applicants and members for your participation! We look forward to the upcoming 2014 Scholarship program.



Janet Edwards, MD, MPH
General Surgery Resident
University of Calgary

New skills are best learned in a mentored fashion from colleagues facile with a given procedural or technologic innovation. This method of skills acquisition allows a gradual assumption of responsibility progressing toward independence, and can be accelerated in keeping with the practicing surgeons' baseline abilities. With a truly novel technique or technology, simulation or animal laboratory sessions may be employed. Consent for a first patient should be as transparent as possible, providing patients with the risks and benefits of the new technique, disclosure of the operating surgeon's practical experience with it, and a discussion of alternative procedures and providers.

Natalie Gukasyan
Medical Student
Tulane University

In his novel *Outliers*, Malcolm Gladwell presented the 10,000 hour rule. In short - there is no substitute for focused, deliberate practice in the making of an expert. For a surgeon, skill acquisition should involve as much hands-on time as possible. Simulation, animal models, and practicing techniques with the supervision of a more experienced colleague are viable means for this end. When consenting a patient for a new technique the associated benefits, drawbacks, and unknowns should receive equal attention. The patient should be offered the choice of a procedure with a more established history if one exists.

Hyaehwan Kim, MD
General Surgery Resident
University of Utah

Evolving technology demands the mastery of a skill before the actual operation. When it comes to learning a skill, there is no substitution for repetition. All available means for training should be explored first, including practice runs in the animal and simulation labs. An informed consent should include the pros and cons of each method, and why the proposed new technique is beneficial in the specific case. A novelist Louisa Alcott once stated, "I'm not afraid of storms, for I'm learning how to sail my ship." A well prepared surgeon can sail through the storm, even in a new ship.

Gita Mody, MD
Thoracic Surgery Resident
Brigham and Women's Hospital

Simulation labs including "wet" animal labs provide safe setting in which to both innovate and test new surgical technology. Thoroughly testing techniques and seeking critique of the new skill set from peers will allow the innovative thoracic surgeon to perfect her procedure before introducing it clinically. In order to properly consent her first patient, it will be necessary to fully disclose that the technique has not been used on humans before yet it is the most appropriate approach for the patient's condition. Developing new procedures and devices in the simulation setting will advance the future of cardiothoracic surgery.

Danielle Smith, MD
Thoracic Surgery Resident
Northwestern University

As surgeons, we must constantly update our skill sets. Patients will frequently request minimally invasive procedures and will ask about technological advances. For technical training, there are many resources available through national societies and academic centers of excellence where surgeons can gain exposure to new skills. It is important to be honest with oneself and the patient about experience and comfort with a new technique. The risks and benefits must be discussed, including surgeon experience, and the patient should always be given the option of a procedure that is well-tested and in which the surgeon is proficient.

Jane Yanagawa, MD
Thoracic Surgery Resident
Memorial Sloan Kettering Cancer Center

Working with simulators, animal models, or human cadavers can assist in learning a new procedure or technique. Ideally, one would also have a mentor who could instruct in the learning phase but also proctor in the operating room. Detailed preparations should also be made to train others who will be involved in intra- and post-operative care. To obtain consent, the surgeon should present all relevant data (including other options) and have an open discussion about their experience and preparations made to ensure safety. Once informed, the patient should be assured that their wishes are respected regardless of the decisions made.

2013 AATS MEETING



2013 AATS MEETING



WTS Summer 2013 Oracle Announcements

Membership Update

If you haven't already done so, please pay your 2013 WTS membership dues. Invoices were mailed in March. It is through your support that we are able to continue our outreach efforts to women throughout the world who have chosen this specialty, along with influencing young women interested in cardiothoracic surgery through our scholarship program.

Please also encourage your non-member colleagues to learn more about WTS and consider applying for membership. A sample membership application is included in this edition of the Oracle. Applications are also available at www.wtsnet.org in the "Become a Member" section.

WTS Institutional Members as of July 1, 2013

Brigham and Women's Hospital
 Boston Children's Hospital
 Cleveland Clinic
 Duke University
 Loma Linda University Medical Center
 Massachusetts General Hospital
 Medical University of South Carolina
 New York University School of Medicine
 Northwestern University
 Southern Illinois University School of Medicine
 The Ohio State University
 The University of Texas Health Science Center at San Antonio
 University of Cincinnati
 University of Colorado, Division of Cardiothoracic Surgery
 University of Michigan
 University of Minnesota
 University of Mississippi Medical Center
 University of North Carolina
 University of Rochester
 University of Virginia
 University of Pittsburgh Medical Center
 Vanderbilt University
 Washington University School of Medicine

WTS Congratulates the 2013 Diplomats of the ABTS

Colleen B. Gaughan, MD
 Julia M. Gotte, MD
 Jennifer Lynn Marks, MD
 Deyanira Jerez Prastein, MD
 Amy Lonkar Rahm, MD
 Duykhanh Pham Ceppa, MD
 Jennifer Olivia Chan, MD
 Amy Elizabeth Hackman, MD
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 Theolyn Nan Price, MD
 Jennifer Wan, MD
 Andrea Shari Wolf, MD
 Akhila Yarramneni, MD

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WTS Summer 2013 Oracle Announcements

Save the Date for the upcoming WTS events, to be held in conjunction with the STS Annual Meeting:

- 2014 WTS Membership Meeting & Reception
Monday, January 27, 2014
Orlando, FL.
- 2014 WTS Early Riser Session
Tuesday, January 28, 2014
Orlando, FL.

WTS Congratulates the 2013 Inductees of the AATS

- Katrien Francois, MD
University of Gent
- Kristine Guleserian, MD
UT Southwestern Medical Center



Find WTS on Facebook for the latest news, updates and photos about WTS activities and events. Once you've experienced it, invite a friend!



Follow WTS on Twitter for the latest news, updates and photos about WTS activities and events. Once you've experienced it, invite a friend!

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.



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WTS Membership Application

Name: _____
Institution: _____
Address: _____
City: _____ State: _____
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E-mail: _____ Phone: _____

PLEASE PROVIDE THE FOLLOWING INFORMATION

Your areas of interest in working with WTS (circle all that apply):

WTS Membership Outreach WTS Education WTS Scholarships
WTS Newsletter WTS Mentoring Other (please specify): _____

DUES PAYMENT INFORMATION

U.S. Active - \$1 50 International - \$75 Residents/Students - No charge
Associate - \$1 50 *Institution Benefactor - \$500 *Corporate Benefactor - \$1 500

*For additional information regarding Benefactor membership benefits please contact WTS Headquarters at 312-202-5835

Make check payable to: Women in Thoracic Surgery (Tax ID#: 30-0003353)

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Please note the credit card charge will show The Society of Thoracic Surgeons.
If you have questions, contact WTS Headquarters at 312.202.5835 or wts@wtsnet.org.

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