

Pennsylvania Surgical News

October 2023

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A collaborative monthly publication of the Keystone and Metropolitan Philadelphia Chapters of the American College of Surgeons providing resources and educational content for the Pennsylvania Surgical Community

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ACS Chapters American College
of Surgeons

Metropolitan Philadelphia
Chapter

ACS Chapters American College
of Surgeons

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Robbi-Ann M. Cook, CAE
Executive Director

Happy Halloween! Hard to imagine we are entering the final two months of 2023! Leaves are changing color, temperatures are dropping, and the Keystone and Metro Philly Council members are beginning preparing for 2024 events.

It was great to see and connect with several members at the ACS Clinical Congress in Boston last weekend and thank you to those who took time to head over to Tony C Sports Bar to network and watch Game 6 of the Phillies playoffs. Check out the photo collage of those members I was able to capture. If you have photos you would like to have posted to the websites, please send

them to me.

Congratulations to all our new Fellows who were inducted into the College at Convocation on Sunday, October 22nd. I would also like to take this opportunity to thank our Keystone and Metro Philly Chapter Governors who represent the membership and Pennsylvania issues at the College. Dr. Jeffrey Kolff has completed his term as a Chapter Governor and we thank him for the past six-years of commitment to representing the Metro Philly Membership. Dr. Ned Carp has been elected to assume Dr. Kolff's place with Dr. Niels Martin serving as an alternate Governor. Thank you both for beginning your term.

Remember, the local Chapters are an extension of the American College of Surgeons. Your voice here in Pennsylvania is needed to tackle legislative issues, practice concerns, and provide resources and mentoring. If you have not taken the leap to join the local Chapter, you are encouraged to make that commitment to your local colleagues. The dues renewal period will open in mid-November for the 2024 membership year. Make sure you support YOUR local House of Surgery!

As always, if you have comments, suggestions, or an article of interest, please email me at rcook@rmcmanagementsolutions.com.

Robbi

Robbi-Ann M. Cook, CAE
Executive Director, Keystone & Metropolitan Philadelphia Chapters

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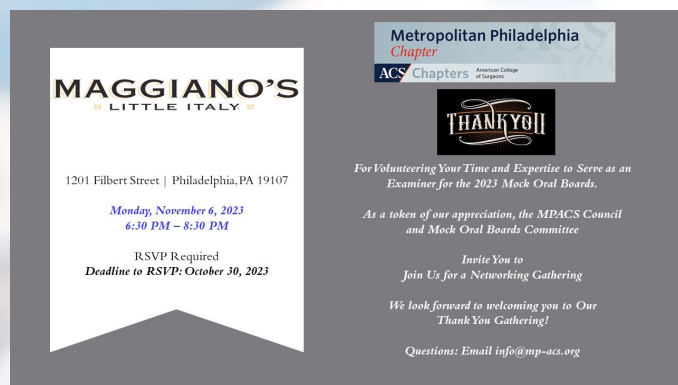
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Editorial Team
Robbi-Ann M. Cook, CAE
Shannon Marie Foster, MD, FACS

Calling MPACS Mock Oral Board Examiners

As a token of appreciation for taking time from your busy schedule to assist with the 2023 Mock Oral Board Examinations, join the MPACS Council and your fellow examiners at Maggiano's on Monday, November 6th for a networking "Thank You". If you have not RSVP'd, there is still time. Email [Robbi Cook](mailto:Robbi.Cook@mp-accs.org) by Friday, November 3rd.



**HAVE YOU CHANGED POSITIONS?
MOVED OR HAVE A NEW EMAIL ADDRESS?**

**UPDATE YOUR CONTACT INFORMATION NOW
TO MAKE SURE YOU ARE RECEIVING UPDATES**

**GO TO YOUR MEMBER PORTAL AND UPDATE
TODAY**

**Keystone: www.kc-accs.org
Metro Philly: www.mp-accs.org**



10 Most Frequent Malpractice Allegations

Beckers provided the most common reasons physicians face professional liability allegations, according to Medscape's 2023 "Physicians and Malpractice Report."

1. Failure to diagnose or a delay in diagnosis: 35%
2. Complications from treatment or surgery: 27%
3. Failure to treat or delayed treatment: 22%
4. Poor outcome or disease progression: 20%
5. Wrongful death: 15%
6. Patient suffered an abnormal injury: 10%
7. Errors in medication administration: 3%
8. Improperly obtained or lack of informed consent: 3%
9. Failure to follow safety procedures: 2%
10. Poor documentation of patient instruction and education: 2%



The Keystone and Metro Philly Chapters continue to monitor and track legislative issues affecting surgical practice and other healthcare related issues.

To view a complete list of Pennsylvania bills being monitored and tracked by ACS State Affairs and the Keystone and Metro Philly Chapters, visit ACS' online [State Legislative Tracker](#).

Pennsylvania is one of seven states still with active legislation sessions. The other states include Massachusetts, Michigan, New Jersey, North Carolina, Ohio, and Wisconsin.



**ACS Clinical Congress—October 22-25, 2023
Boston, MA**





Dr. Henri Ford Inducted as ACS President at 2023 Clinical Congress

Henri R. Ford, MD, MHA, FACS, was installed during Clinical Congress as the 2023-2024 ACS President, succeeding E. Christopher Ellison, MD, FACS. At the end of Convocation, he delivered his Presidential Address and promoted his theme, Achieving Our Best Together: #Inclusive Excellence.

“The past 3 decades have not only reinforced the concept that we achieve our best together but have also demonstrated convincingly and unequivocally that inclusive excellence is essential to accelerate progress and heal all patients with skill and trust,” Dr. Ford said. “It is our pledge to carry the mantle in the struggle for health equity and never waver from our core values as surgeons. This is our duty, this is our purpose, this is our calling.”

Dr. Ford is the dean and chief academic officer of the University of Miami Miller School of Medicine, where he has focused on developing the next generation of surgeon leaders, increased research funding, and worked to make the Miller School one of the most diverse medical schools in the US. [[READ MORE](#)]

Click [HERE](#) to watch Dr. Ford’s acceptance speech, the Power of Inclusive Excellence.

ACS Leadership Announcements

The following leadership positions were announced during ACS Clinical Congress.

Tyler G. Hughes, MD, FACS, and Deborah A. Kuhls, MD, FACS, were inducted as the First- and Second Vice-President, respectively, during Convocation.

Officers-Elect

- **President-Elect:** Beth H. Sutton, MD, FACS
- **First Vice-President-Elect:** Nancy L. Gantt, MD, FACS
Second Vice-President-Elect: Dennis H. Kraus, MD, FACS

Board of Regents

- **Chair:** Anthony Atala, MD, FACS
- **Vice-Chair:** Fabrizio Michelassi, MD, FACS

New Regent: Liane S. Feldman, MD, FACS

[See re-elected and current Officers and Regents on the ACS website.](#)

Board of Governors

- **Chair, Executive Committee:** Lillian S. Kao, MD, FACS
- **Vice-Chair, Exec Committee:** Marion C. Henry, MD, FACS
- **Secretary, Exec Committee:** Cherrisse D. Berry, MD, FACS
- **Diversity Pillar Lead: Wendy Ricketts Greene, MD, FACS**
- **Quality, Research, & Optimal Patient Care Pillar Lead:**
Sundeep G. Keswani, MD, FACS
- **Communications Pillar Lead:**
Joseph V. Sakran, MD, MPH, MPA, FACS

[See re-elected and current Governors and Pillar Leads on the ACS website.](#)



Dear Colleague,

The American College of Surgeons remains very concerned regarding the humanitarian suffering and loss of life in the Middle East.

We have been contacted by several Fellows and friends of the College requesting support for existing relief efforts. To date, however, despite our outreach and communications with Fellows in the region, we have not received any requests for volunteers or supplies from either the Israeli or Palestinian governments nor from non-governmental agencies (NGOs) active in the region.

Although the ACS does not deploy volunteers in conflict zones, we are willing to support and promote organizations that are active in the region who may need volunteers, supplies, or other support. We encourage you to [email us](#) the contact information and details for any governmental agencies or NGOs that can be added to our list of entities to be supported in the region.

Several ACS online and in-person educational resources for the management of trauma and disasters are available. These include:

- [Military Clinical Readiness Curriculum \(mCurriculum\)](#) – FREE online course
- [STOP THE BLEED®](#) – FREE online course plus supplies information
- [Disaster Management and Emergency Preparedness](#) – In-person or online course
- [Advanced Trauma Life Support® \(ATLS®\)](#) – In-person course

Also available are [resources and opportunities](#) to participate in activities supported by our ACS Health Outreach Program for Equity in Global Surgery (ACS H.O.P.E.) surgical volunteerism and training program.

As we receive updates on ways the ACS and our members can participate in relief efforts in the Middle East, we will share them with you.

Sincerely,
Michael J. Sutherland, MD, MBA, FACS
Director, ACS Division of Member Services

Girma Tefera, MD, FACS
Director, ACS H.O.P.E.

Feeding Body and Soul

The holiday season is fast approaching, meaning holiday parties and festivities. This following article was published in *Harvard Health Publishing*, in August 2023, but the concepts are relevant throughout the year.

Intuitive eating rejects a diet mentality and encourages us to pay attention to natural cues for hunger and fullness. How might you benefit?

[Maureen Salamon](#) and [Toni Golen, MD](#), author and medical reviewer, share the following insights into dieting, health eating, and maintaining your well-being.

Feeling battered by years of dieting? You've seemingly tried everything to lose weight: low-calorie, low-sugar, low-fat, low-carb — and frankly, low-satisfaction — regimens that left you worse off and worn out.

If the description fits, you may be drawn to an entirely different approach. Called intuitive eating, the decades-old concept is designed to help people stuck in the cycle of dieting build a better relationship with food. Fundamental is the notion that our bodies intrinsically know what, when, and how much to eat to stay nourished. But a lifetime of relentless messaging — from orders to "clean your plate" to parades of stick-thin models — have stopped many of us from listening to that inner voice.

Intuitive eating rejects the rules and restrictions baked into a diet mentality, which often backfires, leading to yo-yo weight loss and gain. Indeed, evidence suggests about 80% of people who lose significant amounts of weight will regain some or all of it within a year. Instead, intuitive eating encourages us to simply eat when hungry and stop when full. It also takes into account your satisfaction—enjoying the foods you eat—which,

ironically, may lead to weight loss.

"Gaining and losing weight for years and years can be counterproductive and a hard way to live," says Emily Blake, a dietitian from Harvard-affiliated Brigham & Women's Hospital. "Intuitive eating is a framework that integrates mind and body and encourages you to trust in your own ability to feed yourself."

Balance approach—another key principle of intuitive eating is rejecting the idea that foods are inherently "good" or "bad." No longer are pizza, pasta, and burgers on the naughty list. Likewise, salads and fruit are not "better."

"What people find over time is they end up craving a balance of foods," Blake says. "You'll start trusting yourself much more with the ability to eat what feels good to you physically without any emotional distress or guilt. Once you take the morality out of food, you start noticing that while you do crave less-nutritious foods at times, you also often crave fruits and vegetables."

On the flip side, some people misconstrue intuitive eating as a food free-for-all, as explained by Nutrition & Wellness Services Manager at Brigham & Women's Hospital, Nancy Oliveira.

"When people have food freedom, some may choose more ultra-processed, 'craveable' foods. It is a little tricky. It does help you have a better relationship with food overall, but you have to pair that with common sense and solid nutritional information. You have to know that eating potato chips all day long will not help you feel better in the long run," says Oliveira.

Hungry vs. Full—for many trying to adopt intuitive eating, a challenge is reacquainting with natural cues that signal hunger or fullness and responding accordingly. Blake shares, "Most people recognize hunger pangs, but many people

Struggle with fullness. It is not really the American way to recognize being full.”

We recognize that rumbling stomachs or lightheadedness mean you need to eat, pronto. Feeling full is not the same as realizing you are bursting and queasy from overeating.

Oliveira shares, “Sometimes we use the term ‘comfortably unhungry. You feel mentally satisfied because you chose exactly what you wanted to eat, and you feel better afterward, with more energy.”

Mind-Body Benefits—Intuitive eating might result in weight loss, especially when listening to hunger and fullness cues lead you to eat less. In a 2019 research review published in the *Obesity Reviews*, ten studies tracked the eating habits of approximately 1,500 people. Participants following an intuitive eating plan lost about the same amount as those on conventional weight-loss diets, and lost more weight than those who did not change their eating habits.

Blake and Oliveira emphasize weight loss is not the goal of intuitive eating. Learning to respect your body’s “set point” (where your weight naturally falls when you are feeding it adequately and allowing for flexibility with food and movement) - may be more realistic. In a 2021 study published in the *International Journal of Eating Disorders*, it suggests intuitive eating is linked with better self-esteem and body image.

“If people have a tough relationship with food stemming from a long history of dieting, they can feel better emotionally and it also makes it easier to accept where their body is in terms of weight,” says Blake.

Want to read more? Click [HERE](#).

Tips for Intuitive Eating Success

- ◆ **Be Mindful During Meals.** Chew slowly, pause between bites, avoiding distractions such as screens.
- ◆ **Stop Feeling Guilty.** Don’t beat yourself up for any of your choices.
- ◆ **Keep a Food Journal—Skip the Calorie Counting.** Track when you feel hungry and full, when you eat, and how you feel. Shift your focus from nutrient and calorie content to why and what you are eating—that’s useful self-reflection.
- ◆ **Check Your Emotions.** If you feel like eating shortly after your last meal, ask yourself if you are truly hungry, bored, or stressed. This can stem from emotional eating. Try a cup of hot tea, a warm bath, or take a walk.
- ◆ **Don’t Focus on Weight Loss.** You will not listen to your body if you are focusing on the scale. Oliveira recommends focusing just on your body’s signals for at least a month.
- ◆ **Stay Fueled.** If you don’t eat enough during the day, you are more likely to come home to the waiting box of cookies and binge eat them. Blake explains that “part of intuitive eating is making sure you are eating enough over all so you are not trying to practice these principles while starving.
- ◆ **Seek Support.** It is always helpful to work with a registered dietitian or health coach for added insight and support.
- ◆ **Be Patient.** Trust your body’s signals. It will take time. “There is going to be a lot of trial and error where you feel intuitive eating is not working,” says Oliveira. Be patient.

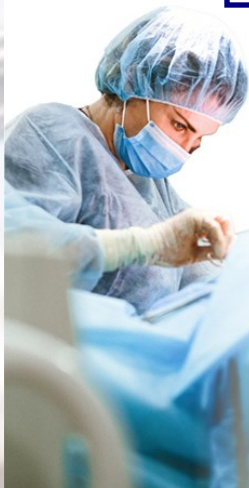


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Or contact Executive Director, Robbi Cook (rcook@rmcmanagementsolutions.com) for additional information.