

Vision. Leadership. Scholarship.

AATS Update

AMERICAN ASSOCIATION FOR THORACIC SURGERY



PRESIDENT'S MESSAGE

Shaf Keshavjee, MD

I am grateful for the incredible honor and privilege to serve as the 102nd President of the AATS. As the first and longest established cardiothoracic surgical association, the AATS, with a steadfast focus on excellence, leadership, scholarship, and innovation, has shaped the evolution of our specialty — and most importantly the care and treatment of patients with cardiothoracic disease — over the last century.

As we cross the threshold into the next 100 years, the AATS is well-positioned to continue to lead globally in the field and practice of cardiothoracic surgery, with a commitment to action and long-term positive change. It is imperative that the makeup and focus of our specialty reflects the diversity of the patient population we serve, towards removing inequalities in the specialty and cardiothoracic health of society.

The success of the 101st Annual Meeting speaks to our ability to widely engage the members of our profession across nearly 80 countries. The reach and impact of the AATS is in fact further extended with the opportunities provided through virtual communications and on-demand access to content. We also recognize that this does not replace the immense value of in-person communication, networking, and exchange of ideas. As we look ahead to the next year, I look forward to the transition back to in-person meetings (with some virtual offerings) and seeing you all at the 102nd Annual Meeting in Boston, MA, Saturday, May 14 to Tuesday, May 17, 2022.

Continued on page 4



Was This An Adventure?...

Marc R. Moon, MD

My first AATS meeting was 1992 in Los Angeles, but when I became a faculty member at Washington University in 1998, I could no longer go. I was the youngest of our group and, as a consequence, had to stay home to "hold down the fort" while my senior partners attended in person. I remember once saying to Dr. Thor Sundt, "its ok — that meeting is for old guys." Boy was I wrong, unless of course you now consider me one of the "old guys"!

I became a member in 2003 and have not missed a meeting since. At Wash U, we have worked out a more equitable approach, having our faculty split the weekend so all can attend, and thankfully, the meeting, in contrast to what I thought when I was young, is no longer only for "old guys". One of the most important transformations we have experienced during my tenure in the Association, is the shift of our focus from the past to the future.

In 2004, as a new member of the Cardiac Biology Club, I practiced over and over the customary initiation presentation of my laboratory work, trying to impress the luminaries that were sitting in the audience waiting to tear my science apart. Thankfully that did not happen, and as I soon learned, the

Continued on page 4

VOL. 3 | ISSUE 2 | June 2021

WHAT'S INSIDE?

Page 2

▼ Secretary's Report

Page 3

AATS Board of Directors

Page 3

▼ Membership

Page 6

Meetings

Page 7

▼ Important Dates

Page 9

News

Page 10

AATS Foundation

Page 14

Publications

SECRETARY'S REPORT



David R. Jones, MD

As Secretary of the AATS, it is my pleasure to provide our membership with the Secretary's Report for the past year. Further details on my report as well as the other Annual Reports of the Association are available to members at **aats.org**.

Governance

Since our last meeting, the Board has been working with outside consultants to ensure that the Association is structured for continuous growth in the future. As such, the Board has amended and Staff has re-operationalized the

strategic plan, previously set in September of 2019, with a focus on the following areas:

- ▼ The implementation of a Quality Gateway to enhance the care of patients with cardiothoracic disease;
- ▼ Serving as the preeminent organization that fosters and disseminates innovations to advance patient care;
- ▼ To continue to be the international leader in cardiothoracic surgical skills acquisition and didactic learning;
- ▼ To develop a diverse community of cardiothoracic surgical leaders;
- ▼ And to provide cutting-edge digital educational content to the surgical community.

Our Association has come a long way in an unprecedented year to see growth in many areas including education, diversity, and clinical excellence — all designed to ensure that the AATS is well-positioned for future growth.

First and foremost, tremendous progress has been made in the implementation of the revolutionary AATS Quality Gateway. This program represents a monumental and much needed step forward in how our community uses data to deliver higher quality care to our patients and facilitate clinical and research collaboration.

The Association has continued to partner with our colleagues in the STS to develop two clinical practice guidelines. These documents should provide important clinical insight and guidance to the cardiothoracic community. During our last meeting, the Association established four Clinical Practice Standards Committees who have been working diligently on the creation of seven expert consensus documents, four of which were presented during the 101st Annual meeting.

These documents will be accessible in the JTCVS and if you were unable to view the presentations live, they will be available on-demand. As you know, articles of this caliber are typically developed over years and at great expense. The efficiency and high quality of the finalized product shown by our members working on this project exemplifies the commitment to leadership in education of AATS Members.

This past year, the Association emphasized its commitment to increasing diversity and health equity. On Friday, April 30, 2021, the AATS Leadership Academy Committee held a program focused on the importance of diversity and inclusion for future cardiothoracic leaders. I would like to thank the Academy's faculty and attendees for their participation in an excellent and thought-provoking program.

The Recruitment, Engagement, and Diversity Committee drafted and implemented a Diversity, Inclusion, and Equity Statement which is now available on aats.org. Additionally, the Committee is in the process of developing a new AATS Fellowship program which will pair a diverse pool of future leaders with AATS mentors over a period of two years.

Although the Covid-19 pandemic has limited the ability for the Scientific Affairs and Government Relations Committee to be working with government entities, the Committee has taken this time to reflect on past accomplishments and better understand the impact the Association and its activities has had on surgical scientists. The research, led by Drs. Joseph Woo and Hunter Mehaffney, is a testament to our membership's commitment to rigorous academic exchange and dedication to mentorship. I hope you all take the time to review their findings in JTCVS in the coming weeks.

An area of focus for the Association has been to strengthen relationships with partner organizations. As such, the AATS is a signatory on the Women in Thoracic Surgery's (WTS) grant from the "Equality Can't Wait Challenge" to establish a platform for change that will recruit, mentor, and coach female cardiothoracic surgeons, and to conduct research to inform women's health and health policy. Addition-



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AATS Board of Directors

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New Member Spotlight

AATS welcomed 33 new members in 2021. The 7 new members below graciously share their thoughts on the AATS and how they were inspired to apply for membership.



David Kalfa, MD Columbia University, New York, NY USA

What was your first experience with the AATS?

"My first experience was I did my first presentation while I was still a resident. I presented my PhD work on heart valve tissue engineering. Fantastic memory."



Julian Smith, MD Monash Health, Glen Iris, VIC Australia

How do you plan on becoming involved in the organization?

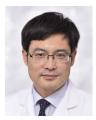
"By bringing a perspective from Australia and New Zealand who have a rich history of clinical excellence and innovation in Cardiothoracic Surgery."



Tomasa Centella, MD Hospital Ramon y Cajal, Cirug, Madrid, Spain

What does the AATS mean to you?

"I consider that AATS represents the highest level of Scientific Societies in the field of Cardiothoracic Surgery. Becoming a member of this Society represents a tremendous honor for me."



Hecheng Li, MD Ruijin Hospital, Shanghai, China

Why did you want to become an AATS member?

"To get more opportunity to communicate with top thoracic surgeons, to improve our academic level."

Continued on page 5



International AATS Membership: Global Differences United by Excellence

Clifford W. Barlow, FRCS(CTh)

More than a year of turmoil following the COVID-19 pandemic has passed. International healthcare provision, leadership, co-operation, and dedication have provided life-saving care. Extraordinary scenes of sacrifice by healthcare providers of all backgrounds and cultures and from countries rich and poor

have blanketed our TV screens. Global research, education, and team working have delivered innovative treatments and new vaccines in record time. We have lost family members, colleagues, and friends and our lives have forever changed.

The challenges presented by COVID-19 for cardiothoracic surgeons have been and remain daunting. We are learning about novel pathophysiology. Some treatments have promise and others do not. We have provided ECMO support in the acute phase of the disease and lung transplantation in the chronic

Continued on page 5

President's Message continued

As the Association's new President, I would like to continue to honor our past while advancing our future. The AATS was initially founded as an association for thoracic surgery for the US and Canada, but is now inclusive of cardiovascular surgery globally and is truly international in scope. Despite some subtle geographic differences in the nature of 'cardiothoracic surgery' as a specialty in North America and, in fact, globally, we unite under the AATS with a common mission to *Promote Scholarship, Innovation, and Leadership for Thoracic and Cardiovascular Surgery*.

This coming year, we have several important initiatives to complete. First, after an invigorating reorganization of the AATS management staff and structure, we will be searching for a new CEO. Second, we will be searching for a new Editor of the Journal of Thoracic and Cardiovascular Surgery as Dr. Richard Weisel completes his term. We are grateful for the remarkable improvements that Richard has made in the JTCVS — bringing it to its highest impact factor ever and the position of the highest impact factor journal in our specialty. Dr. Weisel and managing director Spencer McGrath have invigorated the journal and also introduced two online journals (JTCVS Open and JTCVS Techniques) to launch the AATS publication strategy into the digital age. Third, we will move to pilot and then implement the AATS Quality Gateway (AQG) — to enhance the quality of care of patients with cardiothoracic disease and greatly enable research in the future. Finally, we will launch a renewed AATS website to provide easy access to information and to state-of-the-art and important educational opportunities in our specialty. The new AATS digital universe will encompass regularly updated news and information for the cardiothoracic community, meeting materials and linkage to all virtual and hybrid AATS meetings, JTCVS journal family, educational video library, membership and scholarship application and management, committee participation materials, voting portal, the Quality Gateway, and the AATS Foundation on desktop and mobile friendly interactive platforms.

I am excited to continue with this exciting and important work with our AATS team. As we embark on a new year for the AATS, and continue to battle through the second year of the COVID-19 pandemic, let us remain resilient and focused on the remarkable progress that we can continue to make for our specialty and patients. ightharpoonup

Was This An Adventure continued

AATS was not a group of old guys waiting to destroy my objectives and methods, but a collegial group of leaders dedicated to advancing our field, not only through education to the masses, but rather an honest dedication to scholarship, innovation, and leadership.

As the Chair of the Centennial Committee that organized the historic celebration of our 100th year in 2017, I researched the early years of our organization's existence and found that collegiality and an environment that support the coming generation of surgeons have always been a part of our heritage. The novel initiatives of 2020-2021 from the AATS and AATS Foundation demonstrate that paying it forward is not only a part of our past, but will be a critical aspect of our mission moving forward.

I cannot express in words how truly humbled I am to have served as the President of the American Association for Thoracic Surgery these past 12 months. It has been the greatest honor of my career and in return, I promise to continue to pay it forward to advance the field of cardiothoracic surgery. Thank you. This has, without a doubt, been an adventure. ightharpoonup

Secretary's Report continued

ally, a partnership has been established to host a WTS session during the Annual Meeting and allocate positions for WTS representatives on AATS committees.

Meetings

While in-person meetings have been a cornerstone of our educational offerings, this year, the organization has broadened its offerings to meet the educational needs of our community in new ways.

The virtual 101st Annual Meeting received 761 abstract submissions of which our Program Committee and volunteer reviewers accepted 241 for presentation. This Meeting, combined for the first time with the Aortic Symposium and Mitral Conclave, featured more concurrent sessions than ever before highlighting more than 780 faculty and totaled more than 1,000 recordings and live discussions.

This past fall the AATS held the Surgical Treatment for Arrhythmias and Rhythm Disorders Meeting and the International Thoracic Surgical Oncology Summit both as virtual events. Despite digital meeting fatigue, both events saw increased attendance during the live sessions and provided CME credits for viewers on-demand for a three-month span.

I would like to thank Drs. Todd Rosengart, Joanna Chikwe, Daniela Molena, and Bill Gaynor for their dedication and commitment to expanding the Education Committees' roles and responsibilities. Their ongoing efforts in developing an education curriculum and increasing communication across leadership bodies has resulted in the establishment of the Advisory Council on Education and the AATS Global Grand Rounds webinar series.

Leadership and Committees

The Board is supported by its committees and numerous representatives to help our organization achieve its mission. Members are appointed to each committee based on merit and interest, which is identified through the self-nomination process. This year, the Board received 211 self-nominations and appointed more than two-thirds of the open positions with self-nominees surpassing the Association's benchmark of 40% annually. The AATS and AATS Foundation committee rosters are available on aats.org for review.

As part of the Association's restructuring, a search committee is currently in the process of interviewing candidates for the Chief Executive Officer position. The committee will identify a successful candidate in the coming months for presentation to the Board. Following the successful search, membership will be notified.

Finally, on behalf of the Board I would like to express our heartfelt thanks and appreciation to the AATS staff who have been so instrumental to the success of our organization this past year. They have embraced the changes that have taken place and have worked hard to ensure that the AATS will continue to remain the preeminent cardiothoracic surgical organization in the world. ∇



AATS International Membership continued

stage. We have had to deliver our routine cardiothoracic care while wearing restrictive and extraordinary personal protective equipment. We are learning international best practices and are mentoring each other in them. Our usual patients are presenting in the advanced stages of their diseases and waiting times for treatment are increasing on all five continents. Yet, while huge uncertainties remain, the path to a better future is finally becoming clearer.

The five established and highly respected core values of the AATS are all 'hidden in plain sight' in the preceding paragraphs — 'leadership',' education', 'research and innovation', 'mentoring', and most importantly, 'excellence in patient care' have been at the core of the cardiothoracic response to the pandemic. However, there are other crucial aspects of the healthcare response to COVID-19 from which we must learn. First is the incredible diversity of all individuals involved, in terms of gender, background, culture, and tradition. Equally striking is the global nature of the response. We should recognise and embrace this international expertise which applies as much in cardiothoracic surgery as in any healthcare discipline.

I have had the privilege of serving as the first International Chair of the Membership Committee of the AATS for the last year. Applications for membership are at record levels. Candidates demonstrate their contributions, indicate what membership of the AATS will mean to them, their teams and their patients, and how they might participate in and serve our Association. The number of women and underrepresented minorities in the membership and leadership continues to grow. There is increasing diversity in age and experience of our new members with emerging leaders joining in the earlier stages of their careers, while long established surgeons and scientists are joining to share and teach us from their past accomplishments. Sponsors of new membership candidates are better guided in providing evidence for the five core values expected in applications. Once successful, a candidate becomes a member of a unique organization with a proud tradition that is arguably at the international forefront of any other in cardiothoracic surgery.

Existing international members are absolute equals in terms of excellence to those from North America. In my discussions regarding this

New Member Spotlight continued



Iki Adachi, MD Texas Children's Hospital, Houston, TX USA

What inspired you to pursue a career in academic cardiothoracic surgery?

"When I was a medical student, I happened to have an opportunity to observe the first heart transplant of the country in Japan."



Lauren Kane, MD University of Central Florida, Houston, TX USA

Describe a significant case/patient interaction that impacted your career:

"It was impactful to realize, through many of my female children and teenagers, that me being a woman congenital cardiac surgeon and "their" surgeon meant the world to them. That by me going into an area of surgery that I am passionate about, but isn't common for women to go into, I would have an impact beyond the surgeries I do on many young women's lives. I would also be a role model, an inspiration and this impacted my career in a positive way."



Roberto Lorusso, MD

Maastricht University Medical Centre, Maastricht, Netherlands

What are the most pressing issues within cardiothoracic surgery that you are most interested in monitoring?

"Making research stronger among cardio-thoracic surgeons, more impacting the scientific initiatives and contributions to cardiovascular medicine".

•

Update Your Profile

Check that the information in your aats.org profile is current to ensure you are receiving AATS information that is most important to you. By updating your contact information and sharing your areas of interest, you will be able to optimize your use of AATS Online and receive relevant AATS news. While you are in your profile, you can upload a recent photo, view your AATS activity, and more. To access your profile, log in using the "Sign In" or "My Account" link at the top of aats.org. \blacktriangledown

equivalence, it is the international members to whom I speak who are most adamant that the highest possible standards must apply to all successful candidates, regardless of their origin. However, if we are to become a more global organization, existing members should recognise that there are international differences in the delivery of excellence in our Association's core values.

Broadly speaking, I think we should consider international applicants in three categories depending on their country of origin.

First, there are countries with equivalent resources to those of North America. However, structures for patient care, research, and responsibility may be very different. Let us actively seek outstanding surgeons and scientists who may excel and lead in a very narrow field, robotic surgery for example, which is the entire focus all their professional efforts. Overwhelmingly their contribution may be in research and

Continued on page 6

AATS International Membership continued

innovation but indirectly they would be fulfilling all five core values of the AATS.

Secondly, there are countries with limited resources. Here we should recognise that variations between different hospitals and regions are significantly more marked than those in the developed world. Some outstanding units, frequently modelled on those in North America, have equivalent structures and funding and the excellence of their surgeons should be judged accordingly. However, let us also identify the surgeons who have established an effective service, providing safe cardiac and thoracic care with limited resources, to an underprovided region or community. This is also the excellence the AATS seeks, albeit with a difference.

Thirdly, there are developing countries. Here too cardiothoracic programs are emerging. It is often surgeons with local origins in these countries, but who have successful careers elsewhere, that return as volunteers to operate in, support or raise funds for these programs. Frequently these programs provide care for children, the most vulnerable and the most deprived communities. What they invariably have in common, however, are local surgeons and leaders providing their own drive and involvement. When we reflect on the pioneers of our specialty in the developed world over the last 100 years, we should remember that those who will one day be considered the pioneers of cardiothoracic surgery in the developing world are working there today. Theirs too is excellence with a difference which we should embrace.

It is humbling to read the applications of the successful candidates for membership of the AATS. There is a burgeoning diversity in regards to who these candidates are but a remarkable uniformity in terms of their dedication and professionalism. In the future, we should also actively seek to sponsor and recruit international colleagues as the excellence they demonstrate may have differences but is equal in value. Countries may be rich or poor economically but in all of them there are surgeons and scientists rich in the core values of the AATS. ightharpoonup



The Best of In-Person and Virtual Education



AATS/ASCVTS Postgraduate Course



June 4, 2021

Program Directors Emile A. Bacha, Christopher A. Caldarone, Joanna Chikwe, Yolonda L. Colson, Hiroshi Date, David R. Jones, Shaf Keshavjee, Chris S. Malaisrie, Shunji Sano, Song Wan



Clinical Trials Methods Course

September 30-October 2, 2021 JB Duke Hotel Durham, NC, USA

Program Directors David H. Harpole, Jr., Marco A. Zenati



Surgical Treatment for Arrhythmias and Rhythm Disorders

October 15-16, 2021

Westin Boston Waterfront

Boston, MA, USA

Program Directors Ralph J. Damiano, Jr., A. Marc Gillinov



International Thoracic Surgical Oncology Summit

October 29-30, 2021 Sheraton New York Times Square

New York, NY, USA

Program Director David R. Jones



Mechanical Support for the Heart and Lung Symposium

November 12-13, 2021

JW Marriott L.A. LIVE Los Angeles, CA, USA

Program Directors Shaf Keshavjee, Mark S. Slaughter



102nd Annual Meeting

May 14-17, 2022 Hynes Convention Center Boston, MA, USA

President Shaf Keshavjee

aats.org





101st Annual Meeting Featuring Aortic Symposium and Mitral Conclave: A Virtual Learning Experience

Last year, Dr. Marc R. Moon encouraged the Association and everyone involved in the specialty, "Let's be spontaneous and creative — it's our nature, and it's the nature of our field."

AATS has certainly led the way with creative virtual events in 2020 and 2021.

The virtual 101st Annual Meeting April 30-May 2, 2021 provided more than 3,000 worldwide attendees with live access to the most exciting research, science, and education in the field of cardiothoracic surgery from world renowned expert speakers.

The three-day program featured more than 100 sessions on the latest innovations across the specialties: adult cardiac (featuring Aortic Symposium and Mitral Conclave), thoracic, congenital, perioperative care, and multi-specialty. In addition, 2019 Nobel Laureate William G. Kaelin, Jr. gave the David J. Sugarbaker Memorial Lecture, *The von Hippel-Lindau Hereditary Cancer Syndrome: Insights into Oxygen Sensing and Cancer.* And in the Legacy Lecture, Dr. W. Randolph Chitwood, Jr. reflected on *The Spirit and Legacy of Innovation*.

AATS President Dr. Marc R. Moon delivered the 101st Presidential Address, "Is this an Adventure", live from Washington University in St. Louis, providing uniquely personal and humbling insight. Also included in the Presidential Plenary was A Conversation with Condoleezza Rice, 66th US Secretary of State, where Drs. Moon and Yolonda L. Colson and Secretary Rice candidly discussed Building a Career, Opportunity, and Mentorship.

In addition to presentations and lectures, the Annual Meeting is a time to reflect on the achievements of leaders in our field. The Scientific Achievement Award, established by the Association in 1994, serves as the highest recognition the Association can bestow. This Award was presented to Dr. O. H. Frazier,

Continued on page 8





Important Dates

July 1, 2021

Application Deadline: Spring Awards Cycle

July 2021

Abstract Submission Deadline: Mechanical Support for the Heart and Lung Symposium

July 2021

Abstract Submission Deadline: Surgical Treatment for Arrhythmias and Rhythm Disorders

July 2021

Abstract Submission Deadline: International Thoracic Surgical Oncology Summit

September 2021

Abstract Submission Deadline: 102nd Annual Meeting

Follow Us

The AATS is active on several social media channels. Follow us on:



@AATSHQ @AATSJournals



Facebook @AATS1917



LinkedIn

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AATS would like to thank the following industry partners for their support of the 101st Annual Meeting.

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Abiomed

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AstraZeneca

Terumo Cardiovascular and Aortic

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Acute Innovations

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AtriCure

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CTSNet

DePuy Synthes

Edwards Lifesciences

Elsevier

Ethicon

European Society of Thoracic Surgeons (ESTS)

Getinge

Gore & Associates

Heart Valve Society (HVS)

HemoSonics, LLC

Intuitive Surgical

JEILMEDICAL Corporation

Kapp Surgical Instrument Inc.

KARL STORZ Endoscorpy-America, Inc.

KLS Martin Group

Latin American Association of Cardiac and

Endovascular Surgery (LACES)

LifeNet Health

Medela LLC

Medistim

Medtronic

Novocure, Inc.

Olympus America, Inc.

Scanlan International Inc.

Terumo Aortic

Terumo Cardiovascular

The International Society for Minimally

Invasive Cardiothoracic Surgery (ISMICS)

The Society of Thoracic Surgeons (STS)

USB Medical

Women in Thoracic Surgery

101st Annual Meeting continued

15th AATS Scientific Achievement Awardee. His work has involved more than 1,000 heart transplants and the implantation of more than 1,000 cardiac-assist devices. He is without a doubt a true cardiovascular pioneer who has had an incredible impact on the lives of many patients and their families.

And finally, the Lifetime Achievement Award, established in 2003, which recognizes individuals for their significant contributions to cardiothoracic surgery in the areas of patient care, teaching, research, or community service. This year, the Association honored Dr. Hartzell V. Schaff, 93rd President of the AATS. A member of the AATS since 1987, he has served on the Abstract Committee, AATS Board, Leadership Academy, AATS Foundation Board, and the AATS Online Committee. He currently serves as an Associate Editor for adult cardiac disease for the *Journal of Thoracic and Cardiovascular Surgery*.

More than 1,000 talks and abstract presentations from the 101st Annual Meeting are now available on-demand through August 2, 2021 at **annualmeeting.aats.org**. Please remember to visit the on-demand content provided by our industry partners. Hear from industry experts in the field as they present the latest in technology, and visit the Symposia, MasterClass, and Technology Theater areas within the meeting platform.

The Association looks forward to another exciting year, providing the very best of in-person and virtual education. Stay tuned for details on the 102nd Annual Meeting taking place May 14-17, 2022, in Boston, MA. ▼





Learn more at www.aats.org or contact gateway@aats.org



Nominate A Candidate

Is there someone you think would be a great addition to the AATS?

Nominate them today! Nominations are now open until September 2021.

Information about the process and requirements can be found on the AATS homepage under "Membership".

If you have any questions, please contact our Membership Specialist, Cole Garrison at cgarrison@aats.org.

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The AATS Education Committee is pleased to offer monthly educational webinars, with expert lectures and live Q&A, for the cardiothoracic specialty. The webinars support the Association's education core value and offer CME credits

The AATS Global Grand Rounds Webinar series provides attendees the opportunity to learn from and engage with surgical experts and leaders from across the globe. Participants will have the unique experience to learn surgical techniques from experts, have a virtual seat in roundtable discussions, and participate in practice changing debates that address key aspects of our specialty.

Coming up:

June webinar is slated for Wednesday, June 30:

Minimally Invasive Esophagectomy, featuring live Q&A with James Luketich, MD

Visit aats.org for updates and to register. ▼

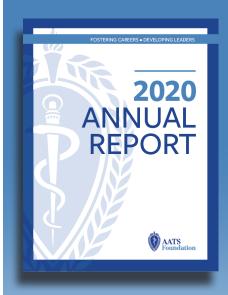








2020 Annual Report



The 2020 AATS Foundation
Annual Report is now available to
view on aatsfoundation.org

AATS Foundation Hosts Virtual Cardiovascular Valve Symposium

The AATS Foundation recently hosted the first virtual Cardiovascular Valve Symposium which was broadcast live to cardiothoracic surgeons and their heart teams in China. The program, led by Drs. David H. Adams, Marc R. Moon, and Song Wan, focused on Non-Thrombogenic Solutions to Valve Disease and included presentations from internationally renowned experts in the field. More than 500 participants attended, enhancing their surgical skills and knowledge, and providing the opportunity for academic exchange. Additional symposia will be held virtually in India and Thailand in the coming months. ightharpoonup



AATS Foundation Awardee Testimonial

Giving to the AATS Foundation yields life-changing experiences for thoracic and cardiovascular surgeons around the world. In 2020, Dr. Cristiano Spadaccio trained with AATS mentors in both Beijing and Brussels and recently presented an abstract he co-authored at the 101st Annual Meeting during the Aortic Valve Repair Techniques Session. Your support can impact careers in limitless ways. ightharpoonup

"Working everyday side by side with giants of aortic surgery and being a part of their team was an invaluable experience that not only expanded my surgical skillset, but also opened the way to new exciting possibilities for my professional development and career progression. Many thanks to the AATS Foundation for this fantastic opportunity!"

- DR. CRISTIANO SPADACCIO, AORTIC TRAINING FELLOWSHIP AND LEARN FROM THE MASTERS AWARD RECIPIENT







WAYS TO GIVE

- > Direct Gifts
- > Stock
- > Planned Gifts
- > Donated Honoraria
- > Tribute/Memorial Gifts
- > Start a Program

Honoring Our Mentors Program:

Create and fund a program in honor of your mentor.

Surgical Investigator Program:

Create and fund a named award to support an investigator.

For questions or to support the critical work of the AATS Foundation, contact Katie Federico, Director of Development, at kfederico@aats.org or 978-252-2200 Ext. 544.





AATS Foundation Surgical Robotics Fellows Participate in Advanced Lobectomy Courses at Intuitive Surgical Training Facilities in Atlanta and Houston

The AATS Foundation is pleased to report that five, 1-day Advanced Lobectomy courses were held at Intuitive Training facilities in Atlanta, GA and Houston, TX in April 2021. The courses were led by esteemed faculty who specialize in robotic surgery including Drs. Bernard J. Park, Manu S. Sancheti, and David C. Rice. Fellows who are accepted to the Foundation's Thoracic Surgical Robotics Fellowship are eligible to participate after meeting specific requirements as a part of the program. The Foundation is very proud of the hard work of this year's cohort and congratulates them on their dedication to growing their expertise in minimally invasive surgical techniques. \blacksquare



AATS Foundation Congratulates the Following Awardees

2020 Research Scholar

Uma Sachdeva

Massachusetts General Hospital The Role of IL-6 Signaling in Metabolic in Esophageal Adenocarcinoma

2020 Surgical Investigators

Stephanie H. Chang

NYU Langone Health

Digital Spatial Profiling to Elucidate Stage I Lung Adenocarcinoma Recurrence

Amy G. Fiedler

University of Wisconsin

Novel Ex-vivo Assessment of Machine Perfused DCD Hearts via Proteomics and Speckle Echocardiography

Christoph Haller

University of Toronto

The Effect of Pluripotent Stem Cells on Ventricular Function in Right Ventricular

Pressure-Overload

Taufiek Rajab

Medical University of South Carolina
Partial Heart Transplantation: A New Approach
to Deliver Growing Heart Valve Implants

Kei Suzuki

Boston University School of Medicine Race-specific Molecular Changes in Nasal Epithelium to Assess Lung Cancer Risk

Paul C. Tang

University of Michigan

Optimization of Donor Heart Preservation Through Mineralocorticoid Receptor Inhibition

Chi-Fu Jeffrey Yang

Massachusetts General Hospital

Using Wearable Technology to Detect Postoperative Complications Following Thoracic Surgery

To learn more about the various AATS Foundation programs, visit **aatsfoundation.org.** ▼



Fostering Careers • Developing Leaders

ACCEPTING APPLICATIONS THIS SPRING

The AATS Foundation has numerous dynamic educational and research opportunities that are available to surgeons worldwide. The following programs are accepting applications April 1 - July 1, unless otherwise specified.

ADULT CARDIAC

- > Advanced Valve Disease Educational Fellowship Sponsored by Medtronic
- > Denton A. Cooley Fellowship
- > Honoring Our Cleveland Clinic Mentors Program
- > Sir Magdi Yacoub International Mentored Career Development Award NEW PROGRAM

CONGENITAL

- > Aldo R. Castaneda Fellowship
- > Marc R. de Leval Fellowship

THORACIC

- > AATS Foundation Equity Award
 NEW PROGRAM Sponsored by AstraZeneca
- > Emerging Thoracic Surgical Oncologist Fellowship NEW PROGRAM Sponsored by AstraZeneca
- > F. Griffith Pearson Fellowship
- > Jack A. Roth Fellowship in Thoracic Surgical Oncology

MULTI-SPECIALTY

- > AATS Foundation Gardner Lectureship
- > Evarts A. Graham Memorial Traveling Fellowship
- > Medical Student Diversity Scholarship NEW PROGRAM

RESEARCH

- > AATS Foundation/WTS Mid-Career Investigator Award NEW PROGRAM Sponsored by Medtronic
- > Surgical Investigator Program NEW PROGRAM Sponsored by AstraZeneca

AATS FOUNDATION PROGRAMS: ENSURING THE FUTURE OF CARDIOTHORACIC SURGERY



"I feel blessed to have successfully completed my most valuable fellowship at such a tough and testing time, against all odds. This fellowship greatly boosted my confidence and will go a long way in widening my practice...this experience has helped broaden my perspective, not just in the field of cardiothoracic surgery, but in healthcare as a whole."

- Dr. Ganesh Ammannaya, Advanced Valve Disease Educational Fellowship Recipient

Your gift matters. Thanks to the support of generous donors throughout the years, more than \$7M of funding has been provided to research awardees, resulting in \$108M of subsequent funding.

The success of the AATS Foundation depends on you. Make your tax-deductible gift at **aatsfoundation.org**.



NEW PROGRAMS

> AATS Foundation Equity Award - Sponsored by AstraZeneca

Provides funding to early to mid-career women and faculty underrepresented in medicine to develop the foundations for successful careers in academic cardiothoracic surgery. This award supports activities critical for academic success such as grant writing, pilot research studies, formal research or leadership training, the pursuit of advanced degrees, educational curriculum development, community outreach or other professional development opportunities.

> AATS Foundation/WTS Mid-Career Investigator Award - Sponsored by Medtronic

This program is a collaboration between AATS Foundation and Women in Thoracic Surgery (WTS) and is intended for mid-career women cardiothoracic surgeon-scientists to support clinical, translational, or basic science research initiatives in the amount of \$50,000 per year for up to two years.

> Emerging Thoracic Surgical Oncologist Fellowship - Sponsored by AstraZeneca

Fosters multidisciplinary knowledge and innovation to improve lung cancer treatment through the education of the next generation by supporting young thoracic surgeons to spend time at a premier AATS host institution, in addition to providing a travel grant to attend the AATS Annual Meeting and International Thoracic Surgical Oncology Summit.

> Medical Student Diversity Scholarship

This award provides funding for up to two years for medical students who plan a career in cardiothoracic surgery. Scholarship recipients will also receive a stipend to attend the AATS Annual Meeting each year of support.



> Sir Magdi Yacoub International Mentored Career Development Award

Provides grants to international cardiac surgeons to support clinical observational training, translational research, and the opportunity to have a visiting cardiac surgeon-mentor provide training, education, or research support at the applicant's home institution.

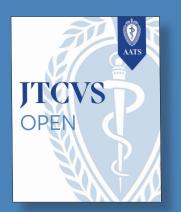
> Surgical Investigator Program - Sponsored by AstraZeneca

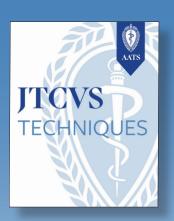
New this year, the AATS Foundation will be offering a Surgical Investigator award specifically to support lung cancer initiatives. This grant will provide funding in the amount of \$100,000 per year (for up to two years) to support research proposals focused on the treatment of lung cancer, either in terms of basic science advances, surgical outcomes or the development of quality initiatives.



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AATS Journals and Manuscript Transfers

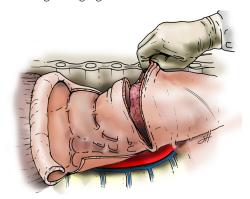
Seminar

In 2014, JTCVS initiated a program to transfer papers to Seminars in Thoracic and Cardiovascular Surgery. These papers were extensively reviewed by the editors of JTCVS and Seminars as well as the Statistical Editors of the Journal. The transferred papers were revised to the quality standard of the Journal and were accompanied by commentaries from experts in the field. The editors believed that the Seminars papers had important information but did not have sufficient impact for JTCVS. From 2014 to 2020, we have transferred nearly 500 papers to Seminars and they have been very well received by our readers. In 2020, Seminars papers had nearly 130,000 downloads and sufficient citations to be awarded an Impact Factor of 2.1 by Clarivate.

JTCVS Techniques

In 2020, we launched *JTCVS Techniques* (Techniques) and transferred 165 papers to this new open access journal. We employed the same process for transfer that we have employed for Seminars. Each paper was extensively reviewed by the JTCVS editorial team and modified to meet our standards for the quality of the presentation. The papers also were accompanied by commentaries by experts in the field. We are pleased that the papers generated 230,000 downloads suggesting that they are widely read and appreciated. The major source for the visits to the papers published in Techniques is either the Recent Articles in AATS Journal pages published each month in JTCVS Table of Contents or the AATS Journal Alerts distributed monthly. The success of Techniques enabled us to apply for indexing in PubMed Central. If approved, then all papers published in the journal will be indexed by PubMed Central from the first paper published. In addition, our publisher has suggested that the success of Techniques justified an application to Clarivate's Web of Science to obtain an Impact Factor.

Our editors believe that Techniques is the ideal venue to showcase new surgical approaches to thoracic and cardiovascular diseases. In 2021, the JTCVS Feature and Associate Editors have planned a series of outstanding invited papers describing important new techniques. In addition, we will begin to publish a series of Video Atlas Articles, each of which provide a series of short videos detailing the steps of important operative procedures. Please watch for the new contributions in Techniques in 2021, including the highlighted articles below.





Recent Video Atlas Articles in JTCVS Techniques

Extended pleurectomy and decortication: Video atlas of operative steps R. Taylor Ripley, Nihanth Palivela

Commentary: Extended pleurectomy decortication: STEP 1, standardized techniques: STEP 2, standardized documentation
Harvey I. Pass

Robotic right upper lobectomy: Twelve steps

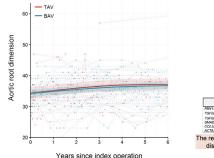
Prabu Sasankan

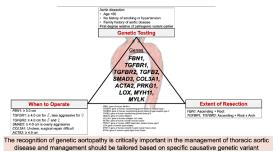
Commentary: To flip or not to flip – approaching the minimally invasive lobectomy Ramiro Fernandez, Usman Ahmad



JTCVS Open

Last year, *JTCVS Open* (Open) launched as an open access companion to JTCVS. More than 125 papers were published last year, including 31 Original Manuscripts and AATS Meeting Papers transferred from JTCVS. These full-length papers require longer to be modified by the authors to meet the JTCVS standards, which is why progress for this journal has been slower than Techniques. Nonetheless, the quality of these papers is excellent. In 2021, Open has shown excellent progress and we are working with our publisher to prepare an application for PubMed Central. Like Techniques, the JTCVS Feature and Associate Editors have planned a series of important invited papers which will provide valuable new information for our readers. Watch Open in 2021 for these new innovative presentations.





Recent Invited Expert Opinions in JTCVS Open

Is prophylactic root replacement needed to prevent future root aneurysm in bicuspid aortic valve patients?

Yota Suzuki, Gal Levy, Abe DeAnda Jr.

Commentary: Somewhere between the root or no root argument: selective sinus replacement T. Brett Reece, Andrew L. Mesher, Muhammad Aftab

The impact of genetic factors and testing on operative indications and extent of surgery for aortopathy

Elizabeth L. Norton, Bo Yang

Commentary: Just ask, if you are ready for the answer

Martin Czerny



Transfers

The program to transfer submissions from JTCVS to other AATS Journals has created many more opportunities for authors to publish important surgical information with the AATS. Authors benefit from rigorous peer review by the JTCVS Editorial Board and can reach the extensive JTCVS readership through our crosspromotional activities, such as the AATS Journal Alerts. Previously, we were able to offer less than 100 submissions to JTCVS an opportunity to transfer their paper to Seminars for publication. With the addition of Techniques and Open, we offered an additional 250 submissions to JTCVS an opportunity to publish their paper with the AATS. More than two-thirds of authors revise their submissions and return their papers after receiving a "Revise for Transfer" decision. The rate of revisions returned is equal across Seminars, Techniques and Open. We are encouraged by the authors' response to the transfer program and expect successful developments for Techniques and Open similar to the success we have seen with Seminars.

Find What to Read

Because of the extensive outstanding content now available from the AATS Journals, we initiated a new series of papers to curate the 10 best papers in all our journals (and high impact papers from other journals) for important topics in each subspecialty. Our Feature and Associate Editors will publish mini-reviews this year of the best papers on most topics (including Aorta, Lung cancer, Fontan). Please look for these exciting reviews to learn what to read. ightharpoonup



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