

## ACS NewsScope

A Weekly News Update from the American College of Surgeons

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September 11, 2009

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### HIGHLIGHTS FOR THE WEEK:

- \* ACS Comments on 2010 Medicare Fee Schedule Proposed Rule
- \* College Comments on OPPS and ASC Proposed Rule
- \* YFA Launches and Will Host Inaugural Meeting on October 12
- \* New Lung Cancer Staging System Will Alter Course of Treatment
- \* ACS Foundation Announces Successful Fiscal Year
- \* Cardiothoracic Surgery to be Focus of Session for Residents/Students
- \* Check Out What's "New on e-FACS.org"
- \* APSA Issues Call for Abstracts for Annual Meeting
- \* ACS Members Invited to Attend International Trauma Conference in UK
- \* Clinical Trials Methods Course Scheduled for November
- \* AORN Offers Chance to Honor Perioperative Professionals With Donations
- \* Next PQRI Conference Call Set for September 17

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### ACS COMMENTS ON 2010 MEDICARE FEE SCHEDULE PROPOSED RULE

On August 31, the American College of Surgeons (ACS) submitted comments to the Centers for Medicare & Medicaid Services (CMS) regarding the proposed rule for the 2010 Medicare physician fee schedule. In its comment letter, the College generally offers support for CMS's proposal to no longer recognize the Current Procedural Terminology codes for consultation services. However, the ACS strongly recommends that, in addition to redistributing the resulting savings to existing evaluation and management (E/M) codes, CMS should make corresponding updates to global procedures to account for increases in the established patient office visit codes. The College also strongly supports the implementation of the Physician Practice Information Survey to update practice expense data. In addition, the ACS supports plans to remove physician-administered drugs from the definition of "physician services" that is used to compute the sustainable growth rate.

Aspects of the proposed rule the College opposes include CMS's plan to create an expert panel that would oversee the American Medical Association's Relative Value Update Committee (RUC). The ACS maintains that the current RUC structure uses a thoughtful and deliberative process to evaluate relative value units, and, therefore, an additional panel is unnecessary. The College also opposes CMS's proposal to change the value of several codes for which the RUC adjusted the valuation to reflect site of service anomalies. In addition, the ACS opposes a proposed recommendation that the RUC adjust the values of certain codes that CMS categorizes as requiring only a "23-hour" stay.

Other issues addressed in the comment letter include the following: changes to the Physician Quality Reporting Initiative and e-prescribing programs; updates to the calculation of malpractice relative value units; provisions pertaining to canalith repositioning and anesthesia "handoffs"; and plans that would affect the Physician Resource Use Measurement and Reporting Program and the implementation of accreditation standards for suppliers furnishing the technical component of advanced diagnostic imaging services. A copy of the comment letter is available at <http://www.facs.org/ahp/views/medicare-pfs-2010.pdf>.

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### COLLEGE COMMENTS ON OPPS AND ASC PROPOSED RULE

On August 31, the American College of Surgeons (ACS) submitted comments to the

Centers for Medicare & Medicaid Services regarding the 2010 Outpatient Prospective Payment System (OPPS) and the 2010 Ambulatory Surgical Center (ASC) Payment System proposed rule. The College supports CMS's proposal to add 28 procedures to the ASC list of covered surgical procedures. The ACS also supports the Ambulatory Surgery Center Association's request to add certain unlisted procedures to the list of ASC procedures that qualify for Medicare coverage. Finally, the College supports CMS's intention to move with caution in expanding quality reporting programs originally designed for the inpatient setting into outpatient settings. A copy of the comment letter is available at <http://www.facs.org/ahp/views/ambulatory-2010-opps-asc.pdf>.

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**YFA LAUNCHES AND WILL HOST INAUGURAL MEETING ON OCTOBER 12**

The Young Fellows Association (YFA) has officially been launched. The YFA is composed of Fellows who are age 45 and younger who would like to be more involved with the College's activities. The new group was created by the Regents in response to the limited number of volunteer positions available for Young Fellows across the College's organizational structure. All Young Fellows are encouraged to visit the new YFA Web site at <http://www.facs.org/memberservices/yfa/> for more information about the new organizational structure and opportunities to volunteer.

Young Fellows are also invited to attend the inaugural meeting of the YFA at McCormick Place Convention Center, West Building, in Chicago, IL, during Clinical Congress on Monday, October 12, beginning at 2:30 pm. The session will begin with the Initiates Program, which will feature Ira Kodner, MD, FACS, who will address the topic of "breaking bad news to patients and families."

For more information, visit <http://www.facs.org/memberservices/yfa/> or contact [youngfellows@facs.org](mailto:youngfellows@facs.org).

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**NEW LUNG CANCER STAGING SYSTEM WILL ALTER COURSE OF TREATMENT**

One in six lung cancer patients will receive a different staging category based on the seventh edition of the tumor, node, and metastases (TNM) staging system, according to an article in the September issue of *Surgery News*, the official newspaper of the American College of Surgeons. The TNM system, based on data compiled from 46 centers in 19 countries, "represents the first real change [in staging] for the last 20 years... [and a] radical departure from the past," said Peter Goldstraw, MB, FRCS, chair of the staging project of the International Association for the Study of Lung Cancer.

By analyzing survival on the basis of tumor size and disease proliferation as gleaned from large databases, the new staging system is expected to assess an individual patient's prognosis more accurately and to better categorize patients enrolled in clinical trials, Dr. Goldstraw stated at the World Conference on Lung Cancer.

For more information about the highlights of the changes in staging criteria, read the September issue of *Surgery News* at <http://www.facs.org/surgerynews/>. In addition, don't miss descriptions of a new procedure for complex anorectal fistulae and cost analyses for obesity and post-colectomy ileus, along with other articles on clinical topics available exclusively in the Online Only edition of *Surgery News* at <http://www.facs.org/surgerynews/>.

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**ACS FOUNDATION ANNOUNCES SUCCESSFUL FISCAL YEAR**

The Board of Directors of the American College of Surgeons (ACS) Foundation has reported that during the 2008-2009 fiscal year, the ACS Foundation had great success, with a total of \$2,043,508 being contributed to support the outstanding

work of the College. Through the generosity of contributors, the foundation has been able to expand the significant accomplishments of the College and provide even greater benefits to members and surgical patients throughout the world.

The gifts have been used to meet the growing need for opportunities providing the latest in education and research to benefit surgeons and their patients. Scholarships, faculty fellowships, named lectures, resident paper competitions, and Operation Giving Back are only a few of the many programs supported by donors to the ACS Foundation.

Each and every gift is important, and the College is extremely grateful to the many donors who have shared an investment to advance its mission.

A copy of the ACS Foundation's annual report will be distributed by mail in the fall. For more information, visit <http://www.facs.org/acsfoundation/>.

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**CARDIOTHORACIC SURGERY TO BE FOCUS OF SESSION FOR RESIDENTS/STUDENTS**

The Special Interest Session, Cardiothoracic Surgery in the Future: Technology Overview for Residents and Medical Students, will be offered Monday, October 12, from 5:30-9:00 pm during the Clinical Congress in Chicago, IL. The registration fee for the session, which will be held at McCormick Place South, is \$25 and will include a buffet dinner beginning at 5:30 pm.

This course is jointly sponsored by the American College of Surgeons, the Society of Thoracic Surgeons, and the American Association of Thoracic Surgeons. It is intended to introduce surgery residents and medical students to minimally invasive procedures that are currently available to cardiothoracic surgeons and provide additional information about upcoming new technologies and plans for a six-year integrated cardiothoracic surgery training program.

The primary focus of the session will be hands-on experience with specific cardiothoracic surgical procedures. Participants will have the opportunity to perform these surgical procedures using animal tissue. The program will be taught by cardiothoracic surgeons who are leaders in their respective fields of minimally invasive cardiac and general thoracic surgery. The course directors are Daniel L. Miller, MD, FACS, Emory University Healthcare, and James I. Fann, MD, FACS, Stanford University Medical Center.

For more information, visit <http://www.facs.org/clincon2009/special/ct.html>.

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**CHECK OUT WHAT'S "NEW ON E-FACS.ORG"**

The "New on e-FACS.org" page at <http://efacs.org/new> keeps you up-to-date on the latest additions to the College's members-only Web portal. Here are just a few of the many new items added to the ACS Web Portal for September:

- Social Networking for Surgeons
- Image of the Month, "Laparoscopic inguinal hernias: Transabdominal preperitoneal repair (TAPP)"
- "Cricothyroidotomy: Indications and pitfalls"
- "Pediatric surgeons: Subspecialists increasing faster than generalists" (plus commentary)
- Hot Topic, "More mastectomies: Is this what patients really want?"
- "Quiz: Nobel Prize winners who were trained as surgeons"
- Rural Surgeons' Toolbox

Because many items of interest are automatically added to e-FACS.org on a daily basis via news feeds, it is impossible to list all of the latest items in the

portal. The "New on e-FACS.org" page is a great place to start, however, and it is updated the first week of each month. Check it out, and be sure to bookmark <http://efacs.org/new> as a favorite in your web browser for easy and regular viewing.

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**APSA ISSUES CALL FOR ABSTRACTS FOR ANNUAL MEETING**

The American Pediatric Surgical Association (APSA) invites members of the American College of Surgeons to contribute abstract submissions for its 41st annual meeting, to be held May 16-19, 2010, in Orlando, FL.

The APSA's annual meeting provides an opportunity to present to over 700 fellow pediatric surgeons from around the nation and internationally. The submission deadline is October 1, 2009, 5 pm Central time.

For more information on the APSA annual meeting and to access the abstract submission program and instructions, visit <http://www.eapsa.org/>.

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**ACS MEMBERS INVITED TO ATTEND INTERNATIONAL TRAUMA CONFERENCE IN UK**

Members of the American College of Surgeons are invited to attend the International Trauma Conference 2009 from October 30 to November 2 in Manchester, United Kingdom (UK). The conference faculty consists of a number of world experts in trauma and critical care, including Kenneth David Boffard, MB, BCh, FACS; Eric R. Frykberg, MD, FACS; Ronald I. Gross, MD, FACS; John B. Holcomb, MD, FACS; and David B. Hoyt, MD, FACS.

The ethos of the event is to bring together world experts to discuss pre-hospital care, trauma care, and medical disaster response with the intention of improving the treatment delivered to patients all around the world. In order to achieve this aim, it is important that medical professionals from countries like the US, which is the leader in trauma care, attend the conference.

The first day of this international meeting will consist of a pre-hospital care conference and medical disaster response conference. The remaining days will focus on trauma. Throughout the conference, there will be numerous interactive sessions to provide conference attendees with the opportunity for first-hand experience and more in-depth detail on various aspects on trauma care, including:

- \* Pre-hospital care equipment and devices
- \* Demonstrations on the latest haemorrhage control products
- \* Presentations on current hospital products for trauma patient care
- \* Clinical simulation and training
- \* Information on a diverse range of relevant trauma products
- \* Scientific sessions
- \* Case-based discussions
- \* Hot topic debates
- \* Meet the experts

For more information, visit <http://www.traumaconference.org/>.

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**CLINICAL TRIALS METHODS COURSE SCHEDULED FOR NOVEMBER**

The American College of Surgeons' (ACS) Surgical Research Committee will sponsor the ninth Clinical Trials Methods Course November 13-17, 2009, at ACS headquarters in Chicago. New this year are course didactics (including two added basic statistics lectures) that will be based on four successfully conducted clinical trials published in the literature. The four clinical trials will be distributed

ahead of time to all participants.

This course is recommended for surgeons who plan to engage in clinical research at a leadership level. It includes concepts and development of skills in the design, implementation, and analysis of randomized clinical trials; observational studies; the use of large administrative databases; meta-analysis; funding mechanisms and budget development; outcomes (medical, patient-centered, and cost); and dissemination of results. Participants will work in small groups mentored by a surgeon and a biostatistician to develop a protocol.

Reserve your spot early because the course is limited to 50 participants, and it is only offered every other year. Preference is given to members of the College. The course fee is \$2,495.

Visit <http://www.facs.org/cqi/src/clintrial.html> for additional information about the course, a preliminary course schedule, online registration, and a list of faculty members. Questions? Call 312-202-5319, or e-mail [mfitzgerald@facs.org](mailto:mfitzgerald@facs.org).

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**AORN OFFERS CHANCE TO HONOR PERIOPERATIVE PROFESSIONALS WITH DONATIONS**

Members of the American College of Surgeons are invited to honor the perioperative professional on their surgical team during Perioperative Nurse Week. November 8-14 is a week set aside to recognize and honor perioperative nurses for their important role and commitment to safe patient care. Surgeons can take advantage of the opportunity to honor their perioperative colleagues by making a donation to the Association of periOperative Registered Nurses (AORN) Foundation in their colleague's name. An acknowledgement note of the donor's contribution will be sent to each colleague honored.

The philanthropic arm of AORN, the AORN Foundation advances surgical patient safety by supporting nurses through education and research.

Honorary gifts can be made at <http://www.aorn.org/aornfoundation/>, or by calling 800-755-2676, ext 230.

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**NEXT PQRI CONFERENCE CALL SET FOR SEPTEMBER 17**

The Centers for Medicare & Medicaid Services' (CMS) Provider Communications Group will host a national provider conference call on the 2009 Physician Quality Reporting Initiative (PQRI). This toll-free call will take place from 2:30 pm to 4:30 pm, Eastern time, on Thursday, September 17. The topics on the agenda for this teleconference include:

- Status of the 2007 re-run and 2008 PQRI incentive payments and feedback reports
- How to access the 2007 re-run and 2008 PQRI feedback reports
- Resources available to assist eligible professionals
- The PQRI and e-prescribing alternative report request process

Educational products on the PQRI are available at <http://www.cms.hhs.gov/PQRI>, and information items on the e-prescribing program are accessible at <http://www.cms.hhs.gov/ERxIncentive>. CMS encourages teleconference participants to download the resources before the call.

To register for the teleconference, go to <http://www2.eventsvc.com/palmettogba/091709>. Registration will close at 2:30 pm, Eastern time, on September 16 or when available space has been filled. Individuals who are unable to participate will have access to a transcript of the call, which will be available at least one week after the call at <http://www.cms.hhs.gov/pqri>.

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