

PRESIDENTIAL ADDRESS

From the American Venous Forum

In with the old, out with the new: The American Venous Forum leads the way

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American Venous Forum members, distinguished guests, and representatives from industry, welcome to the 25th Silver Anniversary Annual Meeting of the American Venous Forum (AVF) here in Phoenix, Arizona. What an honor it has been to serve as your President over the past year. I am extremely humbled by this opportunity and have often felt that the only reason for my own success is that I have truly stood on the shoulders of giants in the field of venous disease. So many, both here and away, past and present, have had a profound influence on me and have ever so shaped who I am. First and foremost, I could not have made it through this year were it not for all the sacrifices put forth by my lovely wife, Erica. This past year marks 20 years of marriage for us and it has been a wonderful journey. It takes an even more special person to let someone else's career be front and center, yet Erica's own success as Professor of Obstetrics and Gynecology, university division chair, residency program director, accomplished clinician, devoted mother, supportive wife, and dear friend, keeps me in awe each and every day. I would not be here if it were not for you. To our son Bryant, and our daughter Lesley, thanks for all your support and patience — although I think you enjoyed watching me fumble through preparing dinners while trying to coordinate the many AVF conference calls. Both of you mean the world to your mother and I.

A career in medicine, and particularly surgery, is privileged along every stage with the special opportunity of mentorship. It is part of our culture and we thrive on it. I have said to many that my abilities in academic surgery

were molded and summarily solidified by three very accomplished individuals: Doctors John Porter (an AVF Founding Member), Lloyd Taylor, and Greg Moneta (the 14th AVF president). And for all the vascular fellows that trained under these three, all know that their ability to instill an unwavering commitment to always perform at your very best on every level, permeated without exceptions, to the very core of their mentorship. Moreover, this level of intensity was particularly exhibited in the area of patient care, and special attention was always given to those stricken with venous and lymphatic disease. Their influence is carried with me and many other privileged individuals who trained under them, each and every working day.

The AVF is not like other physician societies that I have come to know. It is different. And that difference, though difficult to describe, gets to the heart of many special individuals who have taken me under their wing, given me guidance, motivated me to contribute, and shown me the astonishment found in the mission. Since my tenure as a young surgeon, those individuals have included Tom O'Donnell, David Sumner, Tony Comerota, Greg Moneta, Peter Gloviczki, Frank Padberg, Bo Ecklof, Tom Wakefield, Mike Dalsing, Mark Meissner, Joann Lohr, Joe Caprini, Peter Pappas, and Seshadri Raju. All have put their hand on my shoulder and shared their valuable experience with me. I cannot thank you enough.

This silver anniversary annual meeting could not have come at a more appropriate time for the AVF, for much work has occurred with numerous accomplishments that will, in my opinion, carry this organization through the next 25 years. Yet sometimes grand accomplishments come in the most humble and basic forms. They do not glitter, shine, and perhaps you cannot immediately touch them as a member, but, the accomplishments create the building blocks that will truly move the forum to creating more opportunity — if future members and leaders choose.

In February of last year, the AVF parted on good terms with its previous management company, Administrare, and hired one that was able to provide the next level of services required by our complex organization. Through the leadership of President Raju and many others, Executive Directors, Incorporated (EDI), from Milwaukee was chosen to join our team after an extensive national search and vetting. This joining of forces by a company with over 50 years of

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physician organization management experience, led to a complete, and I would like to emphasize the word “complete” inventory of the who, what, where, and how our organization functions. From top to bottom, the wheels were set in motion to keep the engine running... while at the same time, repairing it in certain places and tuning it up to make it more efficient and nimble. Not an easy task to say the least. For we are not just a simple annual meeting, we are a leader in venous care and management education, with the only professional annual meeting solely dedicated to all areas of venous disease and management. Additionally, the AVF provides three yearly courses; two for trainees and one for physicians in practice. We are committed to outcomes, having built the American Venous Registry, with over 8000 patients entered over three different specific venous care modules, and leveraged that accomplishment to join forces in the recent months with the Society for Vascular Surgery (SVS) Patient Safety Organization (PSO) and the creation of a new Venous Vascular Quality Initiative. We are about informing the lay public about the importance of understanding the risks of acute and chronic venous disease through our successful National Venous Screening Program, having screened and educated over 10,000 individuals with a validated process. We are about research, with our continued opportunities for young and seasoned investigators as well as the recent creation of the jointly sponsored Journal of Vascular Surgery: Venous and Lymphatic Disorders by the AVF and the SVS. We are about guidelines and lead the way in the dissemination of information on how to treat all types of venous disease with the use of sound evidence-based methodology. While you, the membership, make up the parts of the engine called the AVF, it was kept running this past year by a completely new management team in transition.

With any merger comes change, and with EDI joining the AVF, there has been no exception. It was obvious, early on, through many meetings, discussions, debates, and a fresh set of professional eyes, that our organization needed, well, some “organization.” Our bylaws for both the Forum and Foundation were outdated and conflicted despite regular updates and changes. Policies and procedures were entangled in our bylaws, and there was no reference to give guidance to our new administrators or the physician leadership on keeping the details straight and most importantly with continuity. Furthermore, committee structure and membership in the past was somewhat random and ascension at times haphazard. If we are to truly engage our younger members in the AVF, we must provide a robust committee structure that stays on point from year to year with the appropriate turnover. This year, in my opinion, has been one in which we have truly begun to capitalize on our council chair system and empower those individuals to help effectively lead the organization. Other past challenges have been assisting and keeping accountable all of our many members that represent the interests of the AVF. These include such important representatives as Dr Karen Ozsvath for the Alliance of Wound Care

Stakeholders; Dr Cynthia Shortell for the American Board of Phlebology; Dr Michael Vasquez for the Health Policy Committee of the SVS; and Drs Mark Meissner and Lowell Kabnick for the Intersociety Accreditation Commission on the development of Vein Center Accreditation. And despite these organizational opportunities that I have outlined, the glue that has made the AVF so incredibly held together and successful has been the overwhelming commitment, passion, and tireless work of all you in the audience. Well, ladies and gentleman, members and guests, we should see, by the end of this 25th Silver Anniversary meeting, completely new bylaws for our Forum and Foundation that will enable us to more effectively manage the many moving parts of our mission. An extensive new policy and procedures manual has been created that lays the groundwork for operations at every level, be it AVF representatives to other organizations, council and committee structure, member benefits, financial management, and governance process. These building blocks are absolutely essential to our mission and will, in the end, aptly reward the very passion that has made this organization so great. It will create the opportunities that we have so imagined. It will truly allow us to create a strategic plan that will result in action that gives tangible lasting results. It will allow our younger members to expand the mission, which will ultimately improve even more lives stricken with all forms of venous disease. I would like take this opportunity to publicly thank the members of our new administrative team: managing partner at EDI, Tara Withington; our executive director, Colleen Pederson, meeting and membership manager, Mia Beans; American Venous Registry manager, Uchenna Onyechom; and our administrative assistant, Kirsten Joranlien. Please stand and be recognized. We thank you.

It would be easy to recite the facts and figures of the burden of venous disease that so strikes at the very heart of health for literally millions of people around the world. But that exercise detaches us. And although the numbers and the statistics are important, they can potentially give us apathy. Rather, in this venue, stories are what matter when we want to find true inspiration. With their permission, I want to share two brief patient stories with you; similar to patients that all of you see each and every day.

In January of 2010, the routine ring of my pager directed me to the number of the emergency room. My eyes rolled a bit as I was not on call that day. The emergency medicine physician informed me that Mitch Rogers, a veteran nurse who was our Director of Operations at the hospital’s cardiovascular institute, was there and had suffered a massive saddle pulmonary embolism. Fortunately, when I arrived, he was hemodynamically stable with minimal right heart strain while being administered pain medication, 100% oxygen, and anticoagulation. When I looked at the computed tomography scan, there seemed to be only one reason in my mind that this man was still alive. Mitch was not only a well-respected leader within the hospital organization, he was a 42-year-old accomplished athlete whose main hobby was body-building.

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