

Career Resources

Chair of surgery

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Abstract. There are several essential qualities required for success as a chair of surgery. These include determination and resilience, thoughtful planning, superb organization skills, a balance of hard (accounting, management and finance) and soft skills (interpersonal including faculty development), and careful execution is absolutely essential as is a commitment to maintaining momentum.

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Chair (sometimes also called head) of surgery at a college of medicine is one of many leadership roles to which a surgeon may aspire. The chair of surgery is generally responsible for all academic, clinical, and research activities of the department. It is this commitment to the tripartite mission of the college of medicine that distinguishes this position from the position of chief of surgery at a hospital. The chair manages the faculty and support staff and is responsible for departmental finances. In many institutions, the chair of surgery is also the chief of surgery at the major teaching hospital, but this is not always the case. **Table 1** summarizes the traditional model. Few colleges of medicine adhere in all respects to all aspects of this model, but the basic concepts are transferable.

It is important to understand the differences and how your own interests and abilities might best fit. If your main interest is clinical care, chief of surgery might be the right job for you, rather than chair. If you are intensely focused on your own subspecialty, then division chief may be the perfect spot. If, by contrast, you have broad interests that cross specialty and departmental boundaries and include all 3 aspects of the mission, coupled with a desire to shape the future of surgery, you may be a potential department chair (**Table 1**).

Although the educational mission is central to all colleges of medicine, the relative emphasis on the clinical and research missions may vary. At most colleges, all 3 are emphasized; in a few community-based colleges, the major missions are clinical and educational. These differences are very important in determining whether goals are aligned with the institution. Thus, a clinician-researcher who would be an excellent match for a research university position might be a poor match for a community-based college of medicine. Carefully analyzing these differences and your personal preference is essential to future success and job satisfaction.

If the department is “surgery”, then potential chairs may be drawn from all specialties encompassed within that department. General (including surgical oncology, gastrointestinal, and trauma), cardiothoracic, vascular, and transplant surgeons tend to predominate with other specialties (orthopedic and ophthalmology may vary). A minimum requirement is an impeccable reputation for clinical excellence. Board certification and fellowship in the American College of Surgeons (or an equivalent for international medical graduates) are also considered basic requirements. Obviously, to lead a subspecialty department you must be a member of that subspecialty.

A surgeon becomes a desirable candidate for chair at about the midcareer level. Typically, a promotion to associate professor will have occurred, and tenure will have

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Table 1 Comparison of jobs of Chair of Surgery, Chief of Surgery, and Division (service) chief

Chair of surgery	Chief of surgery	Division (service) chief
Reports to dean of college of medicine	Reports to hospital director	Reports to chair or chief of surgery
Responsible for clinical activities of faculty within the department <ul style="list-style-type: none"> ▪ Quality of care ▪ Spectrum of services offered ▪ 24/7 coverage of services ▪ May be responsible for practice plan 	Responsible for operating rooms, ambulatory surgery facility, in-patient facilities, SICU, clinics	Responsible for clinical activities of faculty within that division
Broad focus that crosses subspecialty lines	Broad focus that includes surgical specialties to varying degrees	Narrow focus
Institutional (college, hospital) perspective as well as departmental	Institutional (hospital, college) perspective as well as surgery	Departmental focus as well as division but must be aligned with institutional focus
Responsible for research activities within department	Research-related activities usually more limited than Chair; may be involved in institutional quality initiatives	May be responsible for research activities within division
May oversee activities at several hospitals of varying degrees of affiliation	Oversees activities at one hospital	May oversee activities at several hospitals of varying degrees of affiliation
Responsible for compliance with accrediting agencies (ACGME)	Responsible for compliance with accrediting agencies (JACHO, OSHA)	Responsible for promoting standards of specialty organizations that may include specialty accreditation
Responsible for educational programs (medical students, residents, fellows, allied health professionals, research fellows) to varying degrees depending on educational mission of the institution	Concerned with education primarily in terms of avoiding conflicts with patient care	Responsible for educational activities within division which also must be aligned with the educational mission of the department and institution

ACGME=Accreditation Council for Graduate Medical Education; JACHO=The Joint Commission for Healthcare Organizations; OSHA=Occupational Safety and Health Administration.

been granted (most candidates for the chair position with be on the tenure track). Membership in key surgical organizations and invitation to participate in national committees serve as objective indicators of visibility as a rising star. Other desirable attributes include strong interpersonal skills, organization skills and administrative experience and/or training (see later).

Surgical organizations

Participation in national organizations allows the aspiring chair not only to attain visibility but also tremendously widens opportunities to identify mentors. Fellowship in the American College of Surgeons is an essential step for any surgeon. The premier organization in the United States is the American Surgical Association. Most academic Chairs are members of the American Surgical Association, either at the time of their appointment or shortly thereafter.

However, there is much beyond that. There are several categories of surgical organizations, and most academic surgeons belong to several in each category. Table 2 lists some representative organizations as examples of each type.

Your primary mentor should help you determine a realistic timeline to attain membership in various organizations and assist in identifying people who can sponsor you. Membership in more selective societies requires sponsorship by current member(s) as well as a solid body of work in your field of expertise. It is very helpful to have support from people outside your institution that are familiar with your work. These same people are also valuable during the promotion process and may help when you start looking at chair positions. These networks are essential to all aspiring chairs.

Once you are a member, it is important to expand your visibility within the organization. There are several ways to do this. First of all, attend and participate in annual meetings. Stand up and ask questions or discuss papers. When you do this, state your name and institution clearly. It is considered poor form if the session moderator has to ask you to identify yourself. Phrase your question succinctly. Prepare by looking at the abstract booklet or preliminary program before you go. Do not prolong a session by asking deliberately obscure questions, giving a minipaper of your own, or reiterating points made by others. Simply, contribute in a brief and positive manner.

Volunteer for committee assignments, or ask a friend to nominate you for committees. If competition is keen, look

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