



Leaders in microsurgery
and reconstruction

Reconstructive Microsurgery

THE AMERICAN SOCIETY FOR RECONSTRUCTIVE MICROSURGERY • VOLUME 26.2

Autumn-Winter 2015

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A MESSAGE FROM THE 2016 PROGRAM CHAIR

Upcoming Meeting Program to Be More Hands-On Than Ever!



**Howard N.
Langstein, MD,
FACS**
2016 Scientific
Program Chair

The Scientific Program Committee has been hard at work assembling what promises to be a rich and diverse educational opportunity for our entire membership.

Making just a few changes to the perennially successful format of previous years, we have assembled the panels to deliver vast personal experience gained by masters in our field. The "Masters Series" has been reorganized to focus on a visual "how-to" approach, emphasizing short video segments by recognized experts. There will be comprehensive and engaging breakout sessions on every conceivable subject to appeal to everyone. Learn about achieving the

best outcomes by watching experts discuss complications and what they did to fix them. Find out how to avoid injury to yourself in the "ergonomics of plastic surgery" panel. Become enlightened by attending paper and poster sessions from a crop of outstanding international selections.

New this year is more hands-on training with a pre-symposium one-day microsurgical lab in the nearby Mayo Clinic, and opportunities in the exhibit hall to put a few stitches in under the microscope with the technical giants in our field. At the end of the meeting,

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JANUARY 16-19, 2016
**ASRM 31ST ANNUAL
MEETING**
Westin Kierland
Resort & Spa
Scottsdale, Arizona



PRESIDENT'S MESSAGE

Evaluating Where We Want to Go



Gregory R.D. Evans, MD, FACS
President

It has been an exciting and challenging year for ASRM. We have had much growth but also we have looked at how we conduct business. How is ASRM poised for future growth and viability and how can we continue to offer our members the benefits that they need? What I would like to do in this message is outline some of the challenges as well as the forward strategic planning we have just completed.

So, where is ASRM today? In July of this year, ASRM went through a follow-up to the strategic planning process done several years ago. We evaluated what we have accomplished, where we need to go and what areas we need to stop pursuing. We identified several key areas for ASRM in the upcoming years and I would like to outline these for you below:

1. We have modified the mission statement of ASRM. It now reads:

"Foster excellence and innovation in microsurgery and reconstructive surgery."

2. We developed a "tag line" or brand positioning statement. It will be included on all ASRM printed materials, Web site, annual meeting brochures and other documents as required which states:

ASRM – "Leaders in microsurgery and reconstruction"

3. All values remain the same but the descriptor for Innovation is modified as follows:

Integrity – We expect honesty in our relationships.

Collegiality – We respect each other and value other points of view.

Scholarship – Mentoring and education is the cornerstone of our Society.

Innovation – We help create the future in reconstructive surgery.

4. A robust task force has been developed with representation from YMG, WMG, past presidents, etc. to tackle some existential questions for our Society. Because our Membership Committee is small and under-represents the organization as a whole, this special task force will be seeking to determine, for example, is ASRM at the appropriate size? What is the "sweet" spot in regards to numbers or do we even think that there is a sweet spot? Do we think the numbers will grow beyond a certain point? If they do, what is the impact of a significantly larger membership on the annual meeting and other critical services and programs? Will this make us stronger or could it have a negative impact on meeting and member interactions? How do we recruit other specialties? Should we take another look at creating an international category for membership?

5. Going a step further, the Membership Committee identified specific plans to increase member retention by 50% over the next four years and reduce the dropped members from 138 to 69 or lower.

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RECONSTRUCTIVE MICROSURGERY

Autumn/Winter 2015

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The views expressed in articles, editorials, letters and or publications published by ASRM are those of the authors and do not necessarily reflect the society's point of view.

The mission of the American Society for Reconstructive Microsurgery is to foster excellence and innovation in microsurgery and reconstructive surgery.

PRESIDENT'S MESSAGE *Continued*

- Identify why members drop their membership and prepare to address priority items.
- Telephone members who drop and explain how to rejoin and express member benefits.
- Enhance communication regarding member retention as a priority but outline specific ways to rejoin, why they should, and how to do it.

6. The Membership Committee will also focus on enhancing membership options. These should include but not be limited to:

- A survey of young members identifying their needs
- New apps for young surgeons to discuss complex cases with leading members
- An app for automatic payment of dues
- Engagement with young members during the annual meeting and in committees
- Increased contact with residents through department chairs
- Remember our objective is always to have a culture of value and relevance, and not make our mission member retention!
- Residents on committees and council

7. Fund raising is a critical issue for ASRM. That being said, Larry Colen and David Song, co-chairs of the Future Growth Committee, are looking to enhance fundraising initiatives, with a priority being member participation at 100%. Further, the establishment of a culture of participation will be displayed on the web site and other communication pieces and includes:

- Reasons for participating

- Utilization of the Fund and what they support
- Acknowledgement at the annual meeting and in ASRM newsletters
- Recognize levels of giving at the annual meeting and in ASRM newsletters
- Booth at the annual meeting
- Send out separate mailings with options to give
- Give presentations about ability to give at annual meeting
- A strategy to increase industry participation through a sponsored Fellowship or other areas

they deemed appropriate consistent with ASRM priority

8. The Membership and Scientific Program committees will be charged with identifying new ways to enhance relations with our international colleagues. They include, but not are limited to, the following:

- Inclusion and participation of sister societies at the ASRM annual meeting their role and ways they might engage with our members.

continued on next page



CALL FOR SILENT AUCTION ITEMS

Do you have something to share?

antiques? art? season tickets?



The ASRM is holding a silent auction and is calling on all members to make this event a success and donate items to share!

Tell us what you have!

TAKE ACTION

All proceeds go to the Future Growth Fund, investing in our future.



ASRM Calendar



JANUARY 16–19, 2016 **ASRM 31ST ANNUAL MEETING**

Westin Kierland Resort and Spa
Scottsdale, Arizona



JANUARY 14–17, 2017 **ASRM 32ND ANNUAL MEETING**

Hilton Waikoloa Village
Waikoloa, Hawaii



JANUARY 13–16, 2018 **ASRM 33RD ANNUAL MEETING**

El Conquistador Resort
Las Croabas, Puerto Rico

PRESIDENT'S MESSAGE *Continued*

- International paper competition – best paper.
- Opening meeting rooms to use by any international committees.
- Introductions of key international leaders at opening ceremonies.
- Industry sponsored international reception.
- Have input into the Membership Growth Task Force regarding international membership, fees and growth potential.

9. The annual meeting continues its superb direction, but like all items at ASRM, certain matters should be reviewed in the coming months. They include:

- Changing the composition of the program committee and when appointments are made (referred to the Task Force on Governance) to include prior program chairs. A thorough review of the comments from the previous program should be conducted. Consider ways to up the 'entertainment' value—make learning more interactive, fun. Look at including the next year's Program Chair in discussion. Make this a more long-term direction committee.
- Enhancing the interaction of meeting participants with presenters; using technology, social media, new apps and other means appropriate.
- Panels engaging young and senior members on key issues.
- Reviewing the current Annual Meeting structure regarding panels, symposia, instructional courses, distribution of new data and information.

- Other structural changes that enhance member value at the annual meeting.
- Engaging outgoing members with incoming members of the program committee by conducting a debriefing immediately following each annual meeting.

10. That the annual meeting continue to be in a warm climate, but that special attention be given to maintaining a sense of collegiality, unity and sense of togetherness at the site.

11. That the ASRM expand its delivery of public education material on its Web site.

12. A new Task Force on Governance has been created. This will be an important component within ASRM over the next six months. It was stated that there is a need for enhanced communication with committees regarding charges, expectations and tenure. Enhancing member engagement through requesting service on committees was seen as an important step to increasing member participation. In addition, informing members of ways to participate within ASRM committees, task forces, meetings and web site should be increased. We need an online way to apply for committees with an "intake of info" form. A charge of each committee with membership criteria needs to be clearly listed. We should strongly consider populating committees with these motivated people.

In a later presentation regarding Governance, it was agreed that an extensive review of the ASRM committees, council and other organizational components be done with an objective to enhance ASRM capabilities in the future.

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FROM THE EDITOR

Expand Your Skills and Your Circle



Joseph Disa, MD
Editor

Another summer has come and gone. Fall is upon us, and winter is just a short while away. In 2016 the ASRM Annual Meeting is in sunny Scottsdale, Arizona. Part of the terrific program arranged by Howard Langstein and Greg Evans is a change in the "Masters Series." This year the Saturday afternoon program is entitled, "Achieving Excellence in Reconstructive Microsurgery." The afternoon will feature the expert microsurgeons showing us how they do it. The program will heavily rely on video presentations. The speakers will describe their techniques in a step-by-step manor with an emphasis on how they do it. The goal is for the attendees to gain an enhanced understanding of the procedures, learn

nuances to improve reliability, and improve efficiency. The program will highlights standard and alternative flaps for breast reconstruction, head and neck reconstruction broken down by region, and extremity reconstruction.

The ASRM Annual Meeting is always an excellent opportunity for education, networking, and socializing with our colleagues in an environment that draws attendees into the meeting rooms and outside into the environment. Scottsdale in January is typically cool in the morning and warm and sunny in the afternoon. Ample opportunities for outdoor activities are present at the resort and in the surrounding area. For those of us traveling from colder climates, the location of the annual meeting is always a treat. This year should prove to be no different. I look forward to seeing everyone there. **RM**

**2016 MEETING
SCOTTSDALE** *Continued
from page 1*

there will be a special session on lymphatic surgery in conjunction with the American Society of Lymphatic Surgery, which promises to showcase the newest advances in this growing aspect of our specialty. We are also honored this year to hold a separate session on the Antero-Lateral Thigh Free Flap after the main session, run by the World Society of Reconstructive Microsurgery.

As you can see, there is something for everyone in this program, and with this breathtaking desert location, there is no reason to miss the meeting this year. Please join us in Phoenix in January for an extraordinary experience.

RM



Congratulations on that case you just finished. That amazing save you just did that only you and the scrub nurse know about. It's time to show the reconstructive world! Submit your one-of-a-kind, never-been-seen, did-they-just-do-that case to the **BEST CASE/BEST SAVE COMPETITION** at the ASRM Annual Meeting, January 16-19, 2016 in Scottsdale.

Please visit www.microsurg.org for more details.

Submissions due December 1, 2015.

YOUNG MICROSURGEONS GROUP

Research Your Career Plan



Minh-Doan T. Nguyen, MD, PhD
Young Microsurgeons
Group Chair

The Young Microsurgeons Group Committee is looking forward to our annual meeting in Scottsdale. In the past several months, we have been working on new programs for the meeting. In the spirit of innovation and collaboration, the YMG Forum will focus on working with industry. We will be addressing the advantages and disadvantages of doing research with industry support. In addition, we will also discuss academic and industry collaboration in new product development. Joining us will be a member of industry to bring their perspective to the discussion. The YMG Panel will be an update on an age old problem: abdominal wall defects. Our panelists will be revisiting

this topic to bring you the latest techniques and strategies to handle a clinical problem that we all encounter in practice.

This year, we will also be introducing a new session on career development for YMG members. Over breakfast, we will be discussing topics that are especially salient to the early career microsurgeon, such as understanding the promotion process, developing a research career and incorporating microsurgery into a private practice. We are excited about this session since it will be an opportunity for YMG members to get and give advice on navigating early career decisions.

Finally, we have a new campaign to spotlight YMG membership... come find us at the meeting to learn what we have in store! I am excited about this year's meeting and hope to see many of us young microsurgeons there. **RM**

Planned topics of discussion, such as understanding the promotion process, developing a research career and incorporating microsurgery into a private practice, are especially salient to an early career microsurgeon.

PRESIDENT'S MESSAGE *Continued*

Over the next several months we will keep the membership appraised as to our progress.

Howard Langstein and the Program Committee have put a great deal of time into the Scottsdale program. We are excited to offer a new microsurgery practical course put on by Mayo clinic. We also are providing opportunities for residents to sit with the Masters under the microscope in our exhibit area. Please watch the emails for sign up. We have a robust social program and will also be hosting a special WSRM and

Lymphedema session Tuesday afternoon. The old Master Series this year has been retooled for a more practical video exchange to help our trainees understand the critical elements of flap elevation and use. Overall it appears to be an exciting educational venue.

Finally, we are all saddened by the loss of William Zamboni. Bill was a phenomenal educator who as a former president of this organization, gave much to the formulation of what the society does today and was

responsible for starting ASRM. His contributions will certainly be missed and although we cannot replace his efforts, we do plan on some opportunities to further honor Bill for his contribution.

It has been an exciting and challenging year. We hope that we can take what we have learned and continue to expand and grow the society. I look forward to our annual meeting in January. **RM**

Microsurgery Match 2016



**Babak Mehrara,
MD**

Microsurgery
Fellowship
Committee Chair

The Microsurgery Fellowship Match was established in 2010. Its goal is to coordinate fellowship appointments, thus relieving the pressure of uncoordinated appointments and forced early choices. The participating programs will not make any appointments until the match has been completed. To obtain information please visit www.sfmatch.org.



Sponsorship

The American Society of Reconstructive Microsurgery (ASRM) sponsors the matching process and is responsible for enforcement of the applicable rules. The Microsurgery Fellowship Match is hosted and administered by SF Match. Neither the SF Match office nor the ASRM sponsor or approve any of the participating programs. The function of the SF Match is strictly limited to processing of the match. Listing or not listing of any program in the directory does not imply any form of approval, disapproval or endorsement.

About the Match

The match takes place in July and will be used to process all applicants who want to start their fellowship training in July of the following year. Applicants are responsible for ensuring they meet all prerequisites for eligibility prior to registering for the match. All match participants must agree and abide by the SF Match rules and policies as well as any additional rules stated by the ASRM.

2016 MICROSURGERY FELLOWSHIP MATCH TIMELINE FOR 2017 POSITIONS

Monday, January 4, 2016

- Applicant registration begins.
- Please note that although registration is open up until the rank list deadline, applicants are encouraged to register as early as possible to allow time for application and interviews.

Friday, March 4, 2016 – CAS Target Date

- This is the Target Date for applicants to complete the requirements for application distribution. This is NOT a deadline. Some programs accept applications at any time; others may set a deadline. It is the applicant's responsibility to contact training pro-grams for individual deadline dates.

Thursday, July 7, 2016, 12:00 PM PST – Match Deadline

- ALL rank lists must be submitted by 12:00 PM (noon) PST. After the deadline, rank list choices will be locked and no changes can be made.

Thursday, July 14, 2016

- Match results are made available to Match Results programs and applicants. Log in to your SF Match account to view match results.

Friday, July 15, 2016

- Any vacancies which remain after the match will be announced on the Immediate Vacancies page. The list is subject to change and we do our best to only post and process requests to forward applications to active vacancies. Contact programs directly or use the provided form on this page to have your completed CAS file sent. Programs are responsible for contacting the SF Match to remove a vacancy once filled.

July 2017

- Microsurgery fellowship training begins.

Program Registration

New program registration for the Microsurgery Fellowship Match is open year round. There is a \$325 registration fee which includes

the membership fee for the current match cycle. For more information and to register, visit www.sfmatch.org. **RM**

2016 ASRM ANNUAL MEETING PROGRAM PREVIEW



30th Annual Meeting of the American Society for Reconstructive Microsurgery

January 16-19, 2016
Westin Kierland Resort & Spa, Scottsdale, AZ

MEETING HIGHLIGHTS

Saturday January 16, 2016

MORNING

Carpal Tunnel Syndrome (ABPS MOC-PS®-approved)

Chair: David T. Netscher, MD. Instructors: Amy M. Moore, MD; Ivica Ducic, MD; Nash Naam, MD

AAHS/ASPN/ASRM Joint Programming Instructional Course Topics

- **Decision Making in Lymphatic Surgery**
Co-Chairs: David Chang, MD; Babak Mehrara, MD. Panelists: Joseph Dayan, MD; Ming Huei Cheng, MD; Mark Smith, MD
- **Complications of Mangled Extremities**
Chair: Michael W. Neumeister, MD. Instructors: Michael Sauerbier, MD; Milan Stevanovic, MD; Kimberly McVeigh, OT, CHT
- **Use of Peripheral Nerve Transfers in Tetraplegia, Transverse Myelitis and Other Central Nervous Syndrome Diseases**
Chair: Ida K. Fox, MD. Instructors: Allan J. Belzberg, MD; Catherine Curtin, MD; Gerald Wolfe, MD; Christine Novak, PT, PhD
- **Sensory Innervated Flaps**
Chair: Paul Cederna, MD. Panelists: Aldona Spiegel, MD; Peirong Yu, MD; Michel Saint-Cyr, MD; JP Hong, MD
- **Complications in Nerve Reconstruction**
Chair: Thomas H.H. Tung, MD. Instructors: Jonathan M. Winograd, MD; Linda Dvali, MD; Mary Drake, OTR/L, CHT

AAHS/ASPN/ASRM Combined Panel: "MIND THE GAP"

Moderator: Allen T. Bishop, MD. Panelists: Paul S. Cederna, MD William C. Pederson, MD; John V. Ingari, MD

SATURDAY, JANUARY 16

Joint Presidential Keynote Lecture

Rick Searfoss, USAF Col. (Ret) CSP



As one of less than a hundred people ever who have actually ever commanded a human space mission, Colonel Rick Searfoss speaks on leadership, teamwork, and personal performance with authority born of in-depth personal experience. He has piloted two Space Shuttle missions and commanded a third, with over 939 hours in space and 5400 hours flying time in 61 different types of aircraft.

His first space flight in 1993 set the record for the longest duration Space Shuttle mission. In 1996, he piloted Atlantis to the Russian space station Mir. With the STS-90 "Neurolab" mission on Columbia in 1998, Rick commanded the most complex scientific research space mission ever flown, with unparalleled mission success. Rick has over twenty-five years of experience as a leader in some of the most demanding team endeavors possible—human space flight, test flying, and tactical military aviation. Unsurpassed credibility and experience coupled with out-of-this-world speaking skills!

Joint Presidential Keynote Lecture: Rick Searfoss, USAF Col. (Ret) CSP

AFTERNOON

"Achieving Excellence in Microsurgery" Series

Reconstructive microsurgery has revolutionized the treatment of complex defects all over the body. Excellent functional and aesthetic outcomes are the goal of every reconstruction and achieving this end result is now possible with the advent of new techniques as well as the perfection of established ones. This symposium will demonstrate the latest in techniques and will provide the attendees with insight as well as tips and tricks on how to achieve excellence in reconstructive microsurgery.

- **Lunch for Achieving Excellence programming**
Joseph Disa, MD
- **PAP and LTP Flaps for Breast Reconstruction**
Robert Allen, MD
- **Microsurgery with Loupes** *Joseph Serletti, MD, FACS*

continued on next page

2016 PROGRAM PREVIEW (continued)

- **Midface Reconstruction** *Matthew Hanasono, MD*
- **Delayed Mandible Recon with CAD/CAM**
Evan Matros, MD
- **DIEP Flap Breast Reconstruction** *Liza Wu, MD*
- **Hypopharynx Reconstruction with ALT Flap**
Peirong Yu, MD
- **Medial Femoral Condyle Flap** *L. Scott Levin, MD, FACS*
- **Abdominal Wall Reconstruction**
- **Foot Reconstruction** *Lawrence Colen, MD*
- **Diagonal Upper Gracilis Flap** *Joseph Dayan, MD*
- **Mandible Reconstruction with Immediate Dental Implants** *Jamie Levine, MD*
- **Upper Extremity/Hand Reconstruction**
James Higgins, MD
- **Extended Latissimus Flap** *Michel Saint-Cyr, MD*
- **SGAP Flap for Breast Reconstruction** *Bernie Chang, MD*
- **Facial Reanimation** *Shai Rozen, MD*
- **Tongue/FOM Reconstruction** *Roman Skoracki, MD*

ASRM Golf Tournament

EVENING

ASRM Young Microsurgeon & New Member Reception

All young microsurgeons and new members of the ASRM are invited to attend a reception to network and meet fellow members.

ASPN/ASRM Welcome Reception

Sunday, January 17, 2016

MORNING

ASPN/ASRM Panel: "What I Know Now That I Wish I Knew Then"

Moderator: William Kuzon, MD. Panelists: Robert Russell, MD; Robert Walton, MD; Lawrence Colen, MD; Gregory R. D. Evans, MD, FACS; Nash Naam, MD

President's Invited Panel: Occupational Hazards of Microsurgery

Moderator: Gregory R. D. Evans, MD, FACS. Panelists: David, Chang, MD; Gerald Maguire, MD; Mary Leonide Sipski, MD, PhD; William C. Pederson, MD

SUNDAY, JANUARY 17

President's Invited Panel

Gregory R. D. Evans, MD, FACS

**"OCCUPATIONAL HAZARDS OF MICROSURGERY"**

Dr. Evans and his highly experienced panel of microsurgeons David Chang, MD, Gerald Maguire, MD, Mary Leonide Sipski, MD, PhD and William C. Pederson, MD, will explore occupational issues related to physicians performing microsurgery.

YMG Forum: Working with Industry

Moderator: Minh Doan Nguyen, MD. Panelists: Howard Levinson, MD; Edward Chang, MD; Valerie Lemaine, MD; Brooke McCloskey (Acelity)

AFTERNOON

WMG Lunch Series: Negotiating from a Chief's Perspective

(Separate registration required limited space availability)

Speakers: Susan Mackinnon, MD; David Song, MD

Learn how to optimize negotiating compensation and protecting research time and resources in an era of value based compensation.

Break Out Panels

- **Functional Reconstruction with Vascularized Bone and Multi-Component (Chimeric) Flaps after Tumor and Trauma**

Moderator: Guenter Germann, MD. Panelists: Michael Sauerbier, MD; Guenter Germann, MD; Allen Bishop, MD

- **Free Functional Muscle Transfer Face, Upper Extremity**

Moderator: Milan Stevanovic, MD. Panelists: Ronald Zuker, MD; Michael Klebuc, MD; Milan Stevanovic, MD; Yuan Kun Tu, MD

- **Orthoplastic Approach to Extremity Trauma**

Moderator: Randy Sherman, MD. Panelists: Andy Sems, MD; James Higgins, MD; Steve Kovach, MD

- **Scalp Reconstruction**

Moderator: Lawrence Gottlieb, MD. Panelists: Matthew Hanasono, MD; Eduardo Rodriguez, MD; Gui Christiano, MD

continued on next page

2016 PROGRAM PREVIEW (continued)

- **Innovation in Microsurgery and Reconstruction**

Moderator: Patrick Garvey, MD. Panelists: Justin Sacks, MD; Jesse Selber, MD; Patrick Garvey, MD

Poster and Exhibitor Reception

Best Case/Best Save

Moderator: Michael Zenn, MD

Monday, January 18, 2016

MORNING

Break Out Panels

- **Facial Palsy – Different Generations**

Moderator: Shai Rosen, MD. Panelists: Fausto Viterbo, MD; David C.C. Chuang, MD; Christopher Coombs, MD

- **IMSS Panel Microsurgical Training and Evaluation**

Moderator: Jesse Selber, MD. Panelists: Yelena Ankelina, MD; Simon Myers, MD; Ali Ghanem, MD

- **Reconstruction of the Nipple Spared Mastectomy Defect**

Moderator: Julie Park, MD. Panelists: Amy Colwell, MD; Ed Buchel, MD

YMG Breakfast Session: Career Development

- **Lessons Learned From Composite Tissue Allotransplantation**

Moderator: Eduardo Rodriguez, MD. Panelists: Bohdan Pomahac, MD; Samir Mardini, MD; Maria Siemionow, MD

- **Wound Healing Centers – Do I Need One and How Do I Make It Work?**

Moderator: Chris Attinger, MD. Panelists: Raymond Dunn, MD; Ernest Chiu, MD; Geoffrey Gurtner, MD

- **Panel: Achieving Safety and Quality in Reconstructive Microsurgery**

Moderator: David Song, MD. Panelists: Christopher Panucci, MD; Karen Evans, MD; Valerie Lemaine, MD

Presidential Address: Gregory R. D. Evans, MD, FACS

Presidential Ceremony

AFTERNOON

YMG Panel: Critical Update On Complex Abdominal Wall

- **Reconstruction – What Really Works?**

Moderator: Jesse Selber, MD. Panelists: Dan Baumann, MD; Steven Kovach, MD; Raymond Dunn, MD; Albert Losken, MD



MONDAY, JANUARY 18

ASRM Godina Lecture

JP (Joon Pio) Hong, MD, PhD

"Marko Godina was distinguished by his tireless energy, his impeccable logic, his boundless optimism, and his constant good humor and courtesy"

— G. Lister

"Marko Godina's enthusiasm for reconstruction is not only found in his enormous experience with microsurgical flaps but I was told he had a magical influence and transference of his"

— JP Hong

Dr. Joon Pio Hong was selected as the Godina Traveling Fellow in 2015 and will finish his travels in Scottsdale, Arizona to share with us his remarkable experiences as he traveled the globe.

- **Panel: An Algorithmic Approach to the Aesthetics of Autologous Breast Reconstruction"**

Moderator: Julie Park, MD. Panelists: Joan Lipa, MD; David Greenspun, MD; Liza Wu, MD; Julie Park, MD

- **ASRT Panel: "Lessons Learned from VCA Experiences to Date"**

Moderator: W. P. Andrew Lee, MD. Panelists: Christina Kaufmann, PhD; Jaimie Shores, MD; Bohdan Pomahac, MD; Gerald Brandacher, MD

Godina Lecture: JP (Joon Pio) Hong, MD, PhD

EVENING

Women's Microsurgery Group Reception

All woman microsurgeons and their families are welcome to join the Women's Microsurgery Group for cocktails and family-friendly fare. There is no charge to ASRM attendees for this event, however, please select this option when registering to ensure proper accommodations are made.

Godina Alumni Reception

Dining, Denim and Dancing at Westin's Marshall's Outpost

Put on your western attire and join us for an evening of downhome dining and entertainment as we celebrate

continued on next page

2016 PROGRAM PREVIEW (continued)

ASRM's success at this lively celebration. There'll be plenty of room to kick up your heels to the sounds of Mogollon, one of Scottsdale's most popular western bands, or just sit back and enjoy the show. (One ticket included with registration)

Tuesday, January 19, 2016

MORNING

Panels

• **Controversies and Challenges in Lower Extremity Reconstruction**

Moderator: Steven Moran, MD. Panelists: JP Hong, MD; Michel Saint Cyr, MD; Steven Moran, MD; Milomir Ninkovic, MD; Jamie Levine, MD

• **Pediatric Microsurgery**

Moderator: Eric Santamaria, MD. Panelists: E. J. Caterson, MD; Ronald Zuker, MD; Patrick Kelly, MD

• **Microsurgery as a Team Sport: Designing a Team for Efficiency**

Moderator: Bernie Lee, MD. Panelists: Gedge Rosson, MD; Joseph Serletti, MD; David Song, MD; Michael Neumeister, MD; Ed Buchel, MD

• **Reconstruction of the Mandible**

Moderator: Giorgio DeSantis, MD. Panelists: Peter Cordiero, MD; Roman Skoracki, MD; Thomas Loree, MD; Brandon Wilhelmi, MD

• **Beyond the Diep – TUG/PAP/SIEPA**

Moderator: Bob Allen, MD. Panelists: Aldona Spiegel, MD; Liza Wu, MD; Michel Saint Cyr, MD; Joseph Dayan, MD

Buncke Lecture – Prof. Alain Gilbert, MD

Panel: "A Cut Above: How to Fix a Procedure Gone Awry"

Moderator: Paul Cederna, MD. Panelists: Steve Kronowitz, MD; Julian Pribaz, MD; Jamie Levine, MD; Joseph Serletti, MD; Albert Losken, MD

Lymphatic Surgery Update
(coordinated with the American Society for Lymphatic Surgery)



Panel: Lymphatic Surgery: Which Operation for Whom?

Moderator: Suhail Kanchwala, MD. Panelists: Håkan Brorson, MD; Mark Smith, MD; Peter Neligan, MD; Ming-Huei Cheng, MD

Panel: Complications in Lymphatic Surgery & What I Do Differently Now

Moderator: Jaume Masía, MD. Panelists: Isao Koshima, MD; Joseph Dayan, MD; David Chang, MD; Holger Engel, MD



TUESDAY, JANUARY 19

Buncke Lecture

Supported by the California Pacific Medical Center

Alain Gilbert, MD

Professor Gilbert is one of the most renowned pioneers in the field of microsurgery. His contributions are enormous and groundbreaking, especially in the fields of replantation, free flaps, and long bony defect reconstruction. Professor Gilbert, during his entire career, has dedicated himself to excellence in education of young medical students, residents, and fellows. He tirelessly worked to provide the best teaching courses for brachial plexus palsy. His students today are the leading microsurgers, especially in brachial plexus reconstruction.

World Society for Reconstructive Microsurgery Symposium: ALT (Antero-lateral) Thigh Flap Session



- **ALT Flap: History, Anatomy, and Recent Five Years of Article Reviews** *Frank Fang, MD*
- **Anatomic Atlas Presentation for ALT Flap Dissection** *Zeng Tao Wang, MD*
- **Experience of ALT Flap at CGMH** *CK Tsao, MD*
- **Experience of ALT Flap in USA** *Samir Mardini, MD*
- **Experience of ALT Flap in Mexico and South America** *Eric Santamaria, MD*
- **Experience of ALT flap in Korea** *JT Kim, MD*
- **Experience of ALT flap in Japan** *Isao Koshima, MD*

Q & A *David C.C. Chuang, MD*

Please visit www.microsurg.org for more detailed programming and additional meeting information.

2016 ASRM ANNUAL MEETING



* * * * *

NON-MEMBER
PHYSICIAN
REGISTRANT

If you are a non-member of ASRM and wish to join the ASRM please click here to complete an application and once welcomed into the organization a portion of your registration fee will go towards your first year dues.

* * * * *

Registration Is Now Open!

Registration includes:

- Admission to instructional courses, general session and panels unless separate registration is noted
 - Access to presented abstracts
 - Breakfast, lunch and refreshment breaks served (see agenda)
 - One (1) ticket to each networking event*
 - Access to Exhibit Hall
 - 2016 Mobile Application
- *Complimentary tickets provided based on the meeting registration type (does not include golf tournament, cooking at Sur La Table, optional tours or activities).

Meeting registrants will also receive these additional benefits:

- Discounted hotel rates
- Opportunity to participate in group tours and golf tournament
- Opportunity to earn credits for AMA PRA Category 1 Credits™

ADDITIONAL COURSES AND
EVENTS:

Some courses and events listed are made available for an additional fee and separate registration is required. Please see program descriptions and registration to identify these opportunities. Additional networking event tickets are available for purchase.

DISCOUNTS:

AAHS, ASPN, and ASRM are offering reduced registration rates on all combination meeting registration. You must register for at least two meetings to take advantage of the reduced rates. Discounted military rates are also available on a case basis. **RM**

ASRM Day at the Links

Saturday, January 16 | Shotgun Start: 12:30pm

Just a few steps away from our meeting is the Westin Kierland's 27 holes of championship golf. Vibrant greens are flanked with foreboding desert bunkers and shimmering water hazards.

This year's format is a Shamble: each member of your foursome hits a tee shot, and all players proceed to hit their own balls from the team's best drive.

Advance purchase tickets are \$275. On-site tickets are \$300, based on availability. Fee Includes: Greens fees, shared cart, cart lunch, prizes, gratuities, and tax.

SOCIETY BRIEFS



ASRM/PSF Combined Pilot Research Grant

The Plastic Surgery Foundation (PSF) and the American Society for Reconstructive Microsurgery (ASRM) recognize the importance of fostering the development of surgeon scientists and innovative research in reconstructive microsurgery. PSF and ASRM are committed to increasing the amount of research funding dedicated to funding pilot research studies that set the stage for applications to larger funding agencies. For this purpose, the

PSF and ASRM are pleased to offer the following grant opportunity:

ASRM/PSF COMBINED PILOT RESEARCH GRANT

Purpose: To promote advancement and innovation in reconstructive microsurgery research.

Amount: Up to \$10,000 United States dollars

For an applicant to be eligible, they must be an Active or Candidate member of ASPS or a member of ASRM. We encourage as many submissions as possible from our ASRM members. It is required that all applications go through **proposalCENTRAL** which can be found at <http://www.microsurg.org/grants/research>. For more information, please visit this link. **RM**

Mayo Clinic's Microvascular Surgery Skills Training Course

Friday, January 15, 2016 / 8:00am - 5:00pm

Location: Mayo Clinic Scottsdale (transportation provided)

Separate Registration Fee: \$600

[CLICK HERE TO REGISTER](#)

Mayo Clinic's Microvascular Surgery Skills Training Course is a one day program focused on skill development in the use of microvascular surgical techniques. The course allows each attendee to receive extensive, individualized training. The instruction incorporates demonstrations, and microvascular skills practice.

Available credit: 8.00 AMA PRA Category 1 Credit™

Join Us!

WSRM Post-Congress Symposium "ALT (antero-lateral) Thigh Flap" Symposium

Tuesday, January 19, 2016

1pm-5pm

Westin Kierland Hotel
Scottsdale, Arizona

Registration Fee:

\$100 USD

Purpose: The purpose of this symposium is to create a more detailed discussion on the ALT (antero-lateral) Thigh Flap addressing terminology, surgical techniques, reliability and clinical applications.

[Click here to register](#)

ASRM
2016
ANNUAL
MEETING

January 16-19, 2016
Westin Kierland Hotel
Scottsdale, Arizona



WOMEN'S MICROSURGERY GROUP

An Amazing Evolution



**Julie E. Park, MD,
FACS**

Women's Microsurgery
Group Chair

It's been an honor to serve as the chair of the Women's Microsurgery Group (WMG) for the past few years. The WMG started as an ad-hoc committee with the support of then newly elected ASRM president Michael Neumeister at the end of the annual meeting in Las Vegas in 2012. It has since evolved from a conversation among like-minded women on a cold beach in Naples, Florida, at the 2013 Annual Meeting to the full committee that it is today with the generous support of past ASRM presidents Joseph Serletti and Allen Bishop. The WMG now provides two travel fellowships, runs a mentorship program, offers panel topic suggestions to the program committee, and has members on both the nominating and Buncke committees.

Thanks to the support of current ASRM president Greg Evans, the WMG is happy to announce the launch of a new lunch series at the annual meeting. On Sunday, January 17th, from 12:15–1:00pm, Drs. Susan Mackinnon and David Song will give tips and pearls on "Negotiating from a Chief's Perspective." They will reveal what a chief prioritizes so that you can be more successful when negotiating compensation and how to protect research time and resources in an era of RVU's and intensified pressures on clinical productivity. This lunch is free and open to both women and men attending the meeting. However, it does require

preregistration so that we can assure proper availability for seating and food. You can sign up for this lunch when registering for the annual meeting.

The WMG reception will be held on Monday, January 18th, at 6pm. As always, this is open to all women microsurgeons, fellows, residents, and medical students, as well as their families and partners. Stop by to mingle, have a drink and some appetizers before heading over to the ASRM celebration of 'Dining, Denim, and Dancing.'

The WMG now provides two travel fellowships, runs a mentorship program, offers panel topic suggestions to the program committee, and has a member on both the nominating and Buncke committees.

Last year the WMG began a mentorship program for female medical students, residents, or fellows attending the annual meeting. The mentees met informally with their mentors throughout the meeting for advice and networking. It was a great success and will be offered again this year. Interested applicants should submit their

CV and a list of at least 3 questions they would like to discuss with their mentors so appropriate matches might be made. Mentees will also be responsible for submitting formal feedback on their experiences so we can continue to enhance the program. Applicants should email their questions and CV to Nichole White at NicholeWhite@ismie.com. The deadline for accepting applicants is December 18, 2015, at 5pm Central Time. There will be 10 positions available, which will be awarded first come, first served. Any female microsurgeon interested in becoming a mentor should contact WMG committee member Valerie Lemaine at Lemaine.Valerie@mayo.edu.

ViOptix has continued to support the WMG and the ASRM by offering two travel fellowships. These are open to any female medical student or resident who is interested in pursuing microsurgery. It covers the cost of travel, 4 hotel nights, and registration. The fellowship is intended to promote participation by women who would not otherwise have an opportunity to attend the annual meeting. Anyone already presenting a paper or poster there would not be eligible. To apply for the 2017 meeting, the application can be found online on the ASRM Web site microsurg.org.

continued on next page

WMG *Continued*

In last spring's newsletter, we heard from one of last year's ViOptix Travel Fellows, Siba Haykal, MD, PhD, who is currently a PGY 5 at the Division of Plastic and Reconstructive Surgery at

The University of Toronto. Now, I will end with the reflections from our second fellow, Irene Pien, MD, who was an MS 4 at Duke University at the time of her fellowship and is now a PGY 1 in the integrated Plastic Surgery Residency Program at UCLA. **RM**



Irene Pien, MD

Reflections from a ViOptix Travel Fellowship Winner

I am fortunate to have attended a number of national plastic surgery meetings as a medical student. These experiences not only enhance my undergraduate medical education by broadening my exposure to my field of interest, but also help to foster relationships with my peers and established leaders of the field. I am incredibly grateful to the Women's Microsurgery Group (WMG) and ViOptix for allowing me the opportunity to attend the 2015 American Society of Reconstructive Microsurgery (ASRM) meeting.

As a prospective plastic surgery resident, microsurgery skills education is a topic that weighs heavily on my mind. One breakout session during the conference was hosted by prominent faculty from a number of institutions presenting the methodology for teaching this skill. The well-known "10,000 hours" rule for developing expertise was the lens through which I evaluated these talks. As residency training becomes more and more condensed with the integrated model and work hour restrictions, while the scope of practice continues to broaden, there's no question that acquiring the plastic surgery skillset must be increasingly delivered more efficiently. There's certainly no substitution for time; as a classical pianist, I'm not convinced that I could play any Mendelssohn with only half the practice. However, it does seem that piano teaching theory may have parallels to microsurgery training. For music, it's not only technique that matters—ear training, rhythm, and notation/sight reading are all separate areas in which specific teaching strategies may be maximized. Perhaps for microsurgery

training, similar areas could (and are starting to) be identified as targets.

The paper and research sessions throughout the weekend introduced me to a number of topics that I was hearing about for the first time. During my clinical rotations, I remember scrubbing in on my first facial reanimation case; reading about the history of the procedure and its many iterations the night before, I felt that plastic surgeons were truly pushing the boundaries of what is considered possible. I felt that same excitement again at the conference, listening to a presentation about minimally invasive corneal re-innervation, about using an internal mammary lymph node flap during breast reconstruction, about a drug-eluting flap, and many more. My own passion for research grew initially at the bench which flourished into a more translational and clinical bent during medical school. Often during the conference, I wish I could have been in two or three places at once. Choosing between breakout panels or competing research sessions was incredibly difficult – a dilemma that my WMG mentor assured me was a good thing.

The Buncke lecture was an inspirational way to round out the weekend. With only one of the four named lectureships being given by a female microsurgeon, it was an invaluable opportunity to hear how Dr. Terzis was able to contribute so much to this field. Throughout her presentation, she was quick to give credit to her mentors, and much of what I took away from her talk centered on the importance of creating these strong relationships. I'm fortunate to have tremendous mentorship at my home institution, and I cannot credit my mentors in

continued on next page

WMG *Continued*

plastic surgery enough for introducing me to this specialty.

Unfortunately, female graduates of plastic surgery residency programs are less likely to report strong mentor relationships during residency (DeLong MR, et al. Factors Influencing Fellowship Selection, Career Trajectory, and Academic Productivity among Plastic Surgery. *Plastic and Reconstructive Surgery* 133(3): 730-736 (2014)), highlighting the importance of encouraging these relationships even early in training. The traditionally male-dominated profession must undergo changes in culture, and more and more women join its ranks. The creation of the WMG and the multiple opportunities this scholarship afforded me and future recipients (WMG reception, one-on-one meetings with my WMG mentor), is a step in the right direction to nurture the growth of young, female surgeons who might not otherwise consider a career in microsurgery an attainable one. I received advice on choosing a residency program, how to identify projects and mentors early on, managing the work/life balance—all topics that are relevant regardless of gender, but couched in the experiences of women at different stages of their careers in a field historically represented by men. This meeting was invaluable for me personally, and I sincerely thank ViOptix for their support for this important scholarship. In the future, I hope to continue to be able to attend ASRM conferences as both a contributor and advocate for women in microsurgery.

Irene Pien, MD
Formerly MS 4, Duke University
Currently, PGY 1 UCLA, Plastic Surgery



ASRM Merchandise

**Support the Future Growth Fund
by purchasing ASRM logo items**

**ASRM Navy or Light Blue Tie, ASRM
Charm and ASRM Cufflinks**

To purchase merchandise, please visit our website at
<http://www.microsurg.org/join/asrm-merchandise/>

Laugh, Eat and Learn Together at Sur La Table!

The ASRM has reserved a spot for you at the table! Guests will create a delicious, multi-course meal led and instructed by chefs and trained culinary professionals. Once the food is ready, everyone sits down to eat and enjoy. Attendees to this event will receive a 10% Sur La Table merchandise discount coupon. Space is limited so please sign up today!

Date: **Monday, Jan. 18, 2016**

Time:
12:00–3:00pm

Price per
Guest: **\$95**

Sur la table

THE ART & SOUL OF COOKING

COMMITTEE REPORT: MICROSURGICAL PEARLS

Post DIEP Pain Control with Transversus Abdominis Plane (TAP) Block



Damon Cooney, MD

Education Committee
Co-Chair



Joseph Dayan, MD

Education Committee
Co-Chair

Adequate pain control is critical for improving patient recovery and outcomes. While abdominal-based free flap reconstruction has many benefits, concerns regarding pain at the donor site and prolonged recovery are non-starter for some patients. Common post-operative protocols have traditionally focused on narcotics and PCA use. These are very effective, but can also cause nausea, constipation, and for some, a sluggish recovery. Modern trends in anesthesia and enhanced recovery protocols have turned to non-opioid adjuncts to reduce these side effects.

Regional blocks using local anesthetic have significant advantages including lack of constipation, nausea, and altered mental status. While there are a number of options, the transversus abdominis plane (TAP) block has been gaining popularity for use in the DIEP or TRAM donor site. This volume block targets sensory nerves traveling between

the internal oblique and transversus abdominis muscle that supply the anterior abdominal wall from umbilicus to pubis. These blocks can be performed quickly by an anesthesiologist before or after surgery. Because the anatomy is already exposed in the surgical field, these blocks are more commonly performed by the plastic surgeon prior to abdominal closure, minimizing any interruption in surgical flow. This can be performed under direct visualization, blind, or with ultrasound guidance.



Fig 1. Correct placement of ultrasound probe for intraoperative technique

The transversus abdominis plane block anesthetizes the anterior abdominal wall by delivering local anesthetic into the plane between the transversus abdominis and internal oblique muscles between the peak of the iliac

crest and the inferior border of the costal margin. This provides anesthesia of the abdominal wall from the umbilicus to the pubis.

PROCEDURE

Intraoperative TAP blocks can be performed rapidly traditionally using 0.25% ropivacaine solution, although the authors use Exparel (liposomal bupivacain), which provides several days of analgesia. We prefer using a 20 or 24 gauge Tuohy needle which has a curved blunt tip and allows the surgeon to better feel the bounce of the needle on the transversus abdominis fascia. A blind technique involves introducing the needle through the external oblique until resistance by the internal oblique fascia is encountered. The needle is advanced until the next layer of resistance is met which is the transversus abdominis fascia. 30 ml of preferred agent is injected at this level between the transversus abdominis and internal oblique muscles. Alternatively, a small direct incision in the external and internal oblique muscles can be made until the TAP plane is encountered, and the solution can be introduced with direct visualization.

continued on next page

MICROSURGICAL PEARLS *Continued*

Ultrasound guidance is recommended particularly when first starting to confirm the plane and avoid bowel injury. Using a sterile sleeve the ultrasound probe is placed directly on the external oblique muscle fashion at the superior lateral extent of the donor-site dissection. The layers of the abdominal fascia are noted on the ultrasound including the external oblique fashion and musculature, the internal oblique fascia and muscle, the underlying transversalis muscle, and finally the inter-abdominal contents and bowel. Using direct ultrasound visualization a 24 gauge blunt tipped needle is advanced through the first two layers. A small amount of anesthetic is infiltrated in the fluid visualized on ultrasound to confirm the correct plane. Once this is confirmed a typical dose of 30 ml of 0.25% ropivacaine or Exparel is injected. For longer-term analgesia, a percutaneous catheter can be inserted. One of the authors dilutes a 20 ml vial of 1.3% Exparel with 180 ml of saline, injects 40 ml per side, and supplements this with direct injection into the lower abdominal incision and epigastric plication. There are a wide variety of approaches which have yet to be evaluated and compared.

As with any procedure there are risks of complications including potential injury to intra-abdominal organs such as bowel, or spleen. Transient nerve palsy of the femoral nerve has also been reported but are self-limited.

Overall, TAP blocks have been shown to decrease narcotic use and increase postoperative comfort and patient satisfaction. Whether administered preoperatively by the regional anesthesia team, intraoperative early

by the reconstructive surgeon this technique has a low complication rate and is relatively quick and easy to perform. It can be a useful adjunct which may reduce narcotic requirements and improve the patient's post-op experience and recovery.

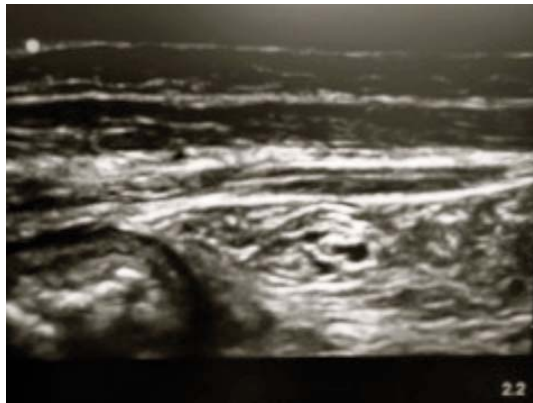
RM

Fig 2. Note triple layer of abdominal wall with alternating fascia and muscle and underlining bowel



Fig 3. Needle advanced using direct ultrasound visualization

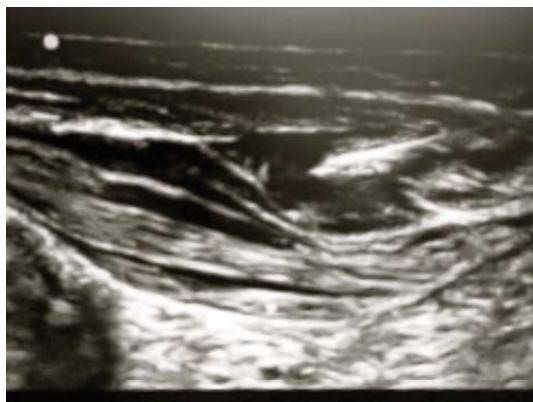


Fig 4. Visualization of small volume of hypo-echoic fluid confirms proper needle placement prior to instilling local.

PEARLS:

- Intraop U/S is useful to confirm proper plane
- Correct plane is between internal oblique and transversus abdominis
- Use blunt tip needle to avoid injury to viscera
- Does not block the abdomen above the umbilicus

Thanks to ASRM member Gedge Rosson for assistance with clinical images.