Midwestern Vascular Surgical Society
Historical Book

THE MEDICAL COLLEGE OF WISCONSIN

The Historical Book
is dedicated to
John R. Pfeifer, M.D., Historian
Midwestern Vascular
Surgical Society
# 2012 MIDWESTERN VASCULAR SURGICAL SOCIETY

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Univ. of Iowa Health Care
200 Hawkins Dr, 1522 JCP, Surgery
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The Cleveland Clinic Foundation
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Cleveland, OH 44195
Tel: 216-444-3581 / Fax: 216-444-9324

Councillor (2013)
Melina R. Kibbe, MD
Northwestern University,
Div. of Vascular Surgery
676 N Saint Clair Street, Suite 650
Chicago, IL 60611
Tel: 312-695-6107 / Fax: 312-695-4955

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Cramblett Hall
456 W 10th Avenue, Suite 3018
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Tel: 614-293-8536 / Fax: 614-293-8902

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Department of Surgery
University of Nebraska Medical Center
983280 Nebraska Medical Center
Omaha, NE 68198-5182
Tel: (402) 559-9549 / Fax: (402) 559-6749

Jonathan L. Eliasom, MD
University of Michigan, Health System
1500 East Medical Center Drive
SPC 5867, CVC 5463
Ann Arbor, MI 48109-5867
Tel: 734-936-8247 / Fax: 734-647-9867

Chad E. Jacobs, MD
Rush University Medical Center
1725 W. Harrison Street, Suite 1156
Chicago, IL 60612
Tel: 312-942-8272 / Fax: 312-563-4388

Brian D. Lewis, MD
A Div. of Paragon Health, P.C.
Kalamazoo, MI 49048-1510
Tel: 269-492-6500 / Fax: 269-492-6461

Iraklis I. Pipinos, MD
CHAIR

Mark K. Eskandari, MD
Northwestern Medical Faculty Foundation
Northwestern University
Dept. of Surgery
676 N. St. Clair, Suite 650
Chicago, IL 60611
Tel: 312-695-9170

George H. Meier, III, MD
University of Cincinnati College of Medicine
Chief, Division of Vascular Surgery
231 Albert Sabin Way
Cincinnati, OH 45237-0558
Tel: 513-558-2536 / Fax: 513-558-2967

Sachinder S. Hans, MD
28411 Hoover Rd
Warren, MI 48093
Tel: 586-573-8030 / Fax: 586-573-2504

2011-2012

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Jean E. Starr, MD
Tina R. Desai, MD
North Shore University Health System
Old Orchard Vascular Surgery
9977 Woods Drive, Suite 355
Skokie, IL 60077
Tel: 847-663-8050

Mark K. Eskandari, MD
Northwestern Medical Faculty Foundation
Northwestern University
Dept. of Surgery
676 N. St. Clair, Suite 650
Chicago, IL 60611
Tel: 312-695-2714 / Fax: 312-695-4955

George H. Meier, III, MD
University of Cincinnati College of Medicine
Chief, Division of Vascular Surgery
231 Albert Sabin Way
Cincinnati, OH 45237-0558
Tel: 513-558-2536 / Fax: 513-558-2967

Sachinder S. Hans, MD
28411 Hoover Rd
Warren, MI 48093
Tel: 586-573-8030 / Fax: 586-573-2504
2012 NEW HORIZONS IN VASCULAR SURGERY

Girma Tefera, MD (SENIOR CO-CHAIR)
Division of Vascular Surgery
UWSMPH, Department of Surgery
G5/325 CSC
600 Highland Ave
Madison WI 53792
Tel: 608-265-4420
Fax: 608-265-1148

Peter K. Henke, MD (CO-CHAIR)
CVC 5465
1500 East Medical Center Dr.
Ann Arbor, MI 48109
Tel: 734-763-0250
Fax: 734-647-9867

Gustavo S. Oderich, MD
Mayo Clinic
200 First Street SW
Rochester, MN 55905
Tel: 507-284-1575
Fax: 507-266-7156

Kellie R. Brown, MD
9200 West Wisconsin Avenue
Milwaukee, WI 53226
Tel: 414-805-9160
Fax: 414-805-9170

Mitchell R. Weaver, MD
Henry Ford Hospital
K-8, Vascular Surgery
2799 West Grand Boulevard
Detroit, MI 48202
Tel: 313-916-3156
Fax: 313-916-3023

REPRESENTATIVE TO THE SOCIETY FOR VASCULAR SURGERY
Jon S. Matsumura, MD
Division of Vascular Surgery
UWSMPH, Department of Surgery
G5/325 CSC
600 Highland Ave
Madison WI 53792
Tel. Clinic 608-263-8915
Tel. Office 608-265-4420
Fax: 608-265-1148

WEB PAGE EDITOR
Bernadette Aulivola, MD, RVT
Loyola University Medical Center
2160 South First Avenue
EMS Bldg 110, Rm 3216
Maywood, IL 60153
Tel: 708-327-2686
Fax: 708-327-3492

INDUSTRY RELATIONS LIAISONS
Robert G. Molnar, MD (Co-Chair)
Michigan Vascular Center
G-5020 West Bristol Road
Flint, MI 48507
Tel: 810-732-1620
Fax: 810-732-8559

Mel Sharafuddin, MD (Co-Chair)
University of Iowa
College of Medicine, Surgery
200 Hawkins Drive, 1JPP
Iowa City, IA 52242
Tel: 319-356-1616

Archivist/Historical Book
Michael C. Dalsing, MD
Indiana University School of Medicine
Vascular Surgery
1801 North Senate Blvd.
MPC-2, Suite 3500
Indianapolis, IN 46202
Tel: 317-962-0280
Fax: 317-962-0289
Email: mdalsing@iupui.edu

WEB PAGE EDITOR-ELECT
Bernadette Aulivola
Loyola University Medical Center
2160 South First Avenue
EMS Bldg 110, Rm 3216
Maywood, IL 60153
Tel: 708-327-2686
Fax: 708-327-3492
Email: baulivola@lumc.edu
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ANNUAL MEETINGS

30th Annual Meeting
September 7-9, 2006
Hotel Inter-Continental
Cleveland, Ohio

31st Annual Meeting
September 6-8, 2007
Hotel Inter-Continental
Chicago, Illinois

32nd Annual Meeting
September 11-13, 2008
Monona Terrace Convention Center
Madison, Wisconsin

33rd Annual Meeting
September 10-12, 2009
The Westin Hotel
Chicago, IL

34th Annual Meeting
September 9-11, 2010
Indianapolis Marriott Hotel
Indianapolis, IN

35th Annual Meeting
September 15-17, 2011
Westin Michigan Avenue
Chicago, IL

36th Annual Meeting
September 6-8, 2012
The Pfister
Milwaukee, WI

37th Annual Meeting
September 6-8, 2013
Chicago Marriott Downtown
Chicago, IL

PRESIDENTS

OF THE

MIDWESTERN VASCULAR
SURGICAL SOCIETY
Dr. D. Emerick Szilagyi was born in Hungary on June 20, 1910. He had all of his pre-university education and his early university education in Europe. In the month of May, 1931, he migrated to the United States to join his parents in Detroit, Michigan. In September, 1931, he enrolled in the Medical School of the University of Michigan, from which he graduated, with honors, in June, 1935. He chose General Surgery as his field of specialization and entered the surgical training program at the University Hospital in Ann Arbor, Michigan, on July 1, 1935. After four years in this program, (which included two years in Pathology), he transferred to the Surgical Residency Educational Program at the Henry Ford Hospital in Detroit.

He was to complete his residency training program on June 30, 1942. Earlier that year, he passed the first part of the qualifying examination of The American Board of Surgery. He was preparing to enter military service when Dr. Roy D. McClure, Surgeon-in-Chief at Henry Ford Hospital, asked him to assume the position of Director of the Medical Department of the Henry Ford rubber plantations in the Amazonian Forest in Brazil. As this plantation was the only source of natural rubber available to the United States, this position was deemed to be critical to the war effort. This unique assignment included the obligation to administer a medical organization charged with the total health care of 3,000 people, which carried with it the responsibility of practicing medicine and surgery in all of their branches. After having been reclassified from IIIA to IIB (work essential for the war effort), he accepted this position.

Near the end of the second World War, in January of 1945, Dr. Szilagyi returned to the Henry Ford Hospital to begin a career in General Surgery, that ascended from the position of Assistant Surgeon to Chairman of the Department of Surgery. In 1975, after stepping down as Chairman, he was named Senior Consultant in Vascular Surgery.

Dr. Szilagyi developed an interest in surgical research early in his professional life, having published three scientific articles while still as resident. In subsequent years, he published reports on angiographic study of the changes in the venous circulation of the lower extremities after ligation of the common femoral vein, on the safe dosage of insulin administration after total pancreatectomy, and the optimal amount of thyroid tissue to be left in-situ after thyroideectomy for hyperthyroidism.

Dr. Szilagyi’s first experience with vascular surgery was in 1950, when he performed endarterectomy and reconstruction of the occluded femoral artery. In the early 1950’s, Dr. Szilagyi became one of the first surgeons in the world to begin resectional surgery of the abdominal aorta in humans. On
December 24, 1951, he successfully resected an abdominal aortic aneurysm, shortly after the first such operation in the United States, by Dr. Ormond Julian of Chicago.

After the mid-1960s, Dr. Szilagyi’s clinical interest was confined to problems in the field of vascular surgery. He proved by accurate statistical analysis that the removal of an abdominal aortic aneurysm doubles the life expectancy of the patient. He developed a technique of sterilization and storage for human arterial allografts, but after extensive experience, he concluded and reported that human allografts are not suitable for transplantation. With his associates, he developed his own type of an elastic porous Dacron arterial substitute which was used in his clinical practice. After extensive laboratory investigation, he summarized his own observations and combined them with observations of other authors to provide a detailed description of the process of incorporation of porous synthetic arterial prostheses.

He described the histological changes in autogenous vein grafts used in the treatment of occlusive arterial disease of the lower extremities and published the first description of subintimal hyperplasia. His description of a medial tibial approach to the popliteal artery opened up the surgical exploration and therapy of infrapopliteal arterial occlusive disease. His carefully studied series of cases in aortoiliac and femoropopliteal surgery are landmarks in the surgical literature. These studies and many other investigations of postoperative complications were made possible by the availability of data in a computerized follow-up system established in 1956.

During his tenure as Chairman of the Department of Surgery (1965-1975), along with Dr. Richmond Smith, Chairman of the Department of Medicine, he spearheaded the development of the Henry Ford Hospital Satellite System.

He is the author of over 200 articles in the medical literature. He has served as President of the Central Surgical Association, the International Cardiovascular Society, the Society for Vascular Surgery, and the Western Surgical Association. He was the Founding President of the Midwestern Vascular Surgical Society. He has served as senior editor of The Journal of Vascular Surgery (1984-1990) and as Consulting Editor of the Journal (1990-1996).

During the years between 1955 and 1985, Dr. Szilagyi lectured extensively in the United States and throughout the world. He received an Honorary Doctorate in Medicine from the Semmelweis University in Budapest, as well as The Lifetime Achievement Award of the Society for Vascular Surgery, the oldest vascular society in the world. In 2002, the Henry Ford Hospital established the D. Emerick and Eve Szilagyi Endowed Chair in Vascular Surgery, in recognition of a lifetime of achievements.

Dr. Szilagyi terminated his operating room work in 1984. His wife of 30 years, Evelyn Harper, an accomplished artist, was lost to cancer in 1981. In 1989, he married Sally Stritch. He retired from clinical practice in 1997, at the age of 87. Now in his nineties, he lives with Sally in Bloomfield Hills, a suburb of Detroit, and enjoys good general health.

His literary activity has not yet ceased. His last scientific article appeared in 2004, in the Journal of Vascular Surgery. It deals with “the widely disregarded fact” that arterial prostheses placed intraluminally in arterial structures do not become appropriately incorporated; and, therefore, their functional durability is limited.

In September 2005, Dr. Szilagyi addressed the general assembly of the Midwestern Vascular Society at the time of the inauguration of the annual D. Emerick Szilagyi Award for outstanding research performed by a resident in training.
Dr. Bergan is currently practicing vascular surgery in La Jolla, California. A principal Founder of the Midwestern Vascular Surgical Society, he is Professor of Surgery at the University of California, San Diego, and The Uniformed Services University of the Health Sciences in Bethesda, Maryland. Until 1988, Dr. Bergan fulfilled clinical and teaching responsibilities as Magerstadt Professor of Surgery at Northwestern University’s Medical School in Chicago. There, he was Founder and First Chief of the Division of Vascular Surgery.

The Northwestern Vascular Service developed an integrated vascular laboratory, a respected teaching service, a fellowship training program that has contributed many leaders to peripheral vascular surgery, and an annual symposium that produced a number of textbooks on a variety of vascular surgical subjects.

After 1989, Dr. Bergan’s clinical and research efforts turned exclusively to the venous system. His continuing interest in duplex scanning led to early employment of venous reflux testing and the discovery that deep venous reflux could be ameliorated by superficial venous reflux ablation. Angioscopic observations of saphenous vein valve damage and destruction led to research on the causes of this valvular damage. There, observations on inappropriate leukocyte activation have shown that both valvular and vein wall damage are associated with leukocyte activation by venous hypertension, an effect that can be blocked by pharmacologic intervention. Dr. Bergan’s personal contributions to the literature comprise over 600 publications that span the entire spectrum of arterial and venous diseases.

After Dr. Bergan focused on venous disorders, his investigations resulted in over 150 publications on venous subjects, and an additional seven textbooks focusing on venous disorders. An avid sailing enthusiast, Dr. Bergan has had a full career in yacht racing, serving as a senior race judge for the United States Sailing Association and authoring a manual of *Sailing and Yachting First Aid*.

After Dr. Bergan was instrumental in founding the Midwest Vascular Surgical Society, he and others founded the American Venous Forum. He has served as editor for the *Year Book of Vascular Surgery*, has been on the editorial boards of numerous journals, such as *Surgery*, *Journal of Vascular Surgery*, *British Journal of Surgery*, *Annals of Vascular Surgery*, *Vascular Surgery*, and *Phlebology*. He has served as President of the Society for Vascular Surgery, the IV European-American Venous Symposium, Chicago Surgical Society, Association Internationale de Vascular Surgeons, Gulf Coast Vascular Society, and most recently, the Southern California Vascular Surgical Society. He was the first President of the American Venous Forum.
JAMES C. STANLEY, M.D.
THIRD PRESIDENT
(1979 – 1980)

Dr. Stanley is the Handleman Professor of Surgery at the University of Michigan Medical School, where he was the Head of the Vascular Surgery Service from 1976 to 2004. In the past, he has served as both the Director of Medical Student Education and Director of Resident Education in General Surgery. He was the Vascular Fellowship Director from 1982 to 2006. In 2003 he was appointed one of the Directors of the University of Michigan Cardiovascular Center.

Dr. Stanley was an undergraduate at the University of Michigan, and received his Medical Degree from the University of Michigan Medical School in 1964. After an internship at Philadelphia General Hospital, he served as a medical officer at Brooke Army Medical Center. Subsequently, he completed his surgical residency at the University of Michigan Medical Center, under the mentorship of C. Gardner Child, Calvin B. Ernst, and William J. Fry. He was an NIH trainee in Academic Surgery in 1969 and 1970. After completing his Chief Residency in 1972, he joined the University of Michigan faculty as an Instructor in Surgery, rising to the rank of Professor in 1980.

Dr. Stanley has an extensive clinical practice in vascular surgery with a major focus on complex aortic disease, renovascular hypertension, splanchnic aneurysms, and pediatric arterial diseases. He maintains an ongoing interest in biomedical research. He was the Director of the Jobst Vascular Research Laboratories at the University of Michigan from 1989 to 2004. His principal interests are arterial wall biology, genetic modifications of the vessel wall, mesenteric vascular disease, and renovascular hypertension. He received $3,186,000 from NIH as an investigator or co-investigator for laboratory investigations conducted at the University of Michigan from 1974 to 1998. In 1993 he received an NIH Vascular Disease Academic Award, which provided the impetus for a multi-disciplinary vascular medicine program and the establishment of a Cardiovascular Center at his University.

Dr. Stanley was the recipient of the first Conrad Jobst Award for Research in Vascular Surgery in 1972, the University of Michigan Distinguished Service Award in 1976, and the Michigan Medical Center Alumni Society Distinguished Achievement Award in 2000. He became an Honorary Fellow in the Royal College of Surgeons, Edinburgh, in 1992, an Honorary Member of the National Academy of Medicine of Columbia in 1994, and an Honorary Member of the Royal Australasian College of Surgeons, Section of Vascular Surgery, in 1995. He is a member of 30 scientific societies. He served as President of the Society for Vascular Surgery in 1996 to 1997.

He is the author of more than 300 scientific articles and 175 chapters in surgical textbooks. He served as Editor of the Journal of Vascular Surgery from 1991 to 1996. Dr. Stanley has edited ten books, including two on renovascular hypertension, one on biologic and synthetic vascular prostheses, one on clinical ischemic syndromes, one on aortic surgery, one on practice cardiology, and four editions of Current Therapy in Vascular Surgery. He has contributed to numerous medical conferences, both in the United States and abroad.

Dr. Stanley is a world traveler, enjoys classical music, and has enjoyed the life of being an avid lepidopterist, enthusiastic Snipe sailor, novice marathon runner, and a classic music aficionado.
JOHN J. CRANLEY, JR., M.D.
FOURTH PRESIDENT

Dr. Cranley is Director Emeritus of the Department of Surgery at Good Samaritan Hospital in Cincinnati, and Director Emeritus of the John J. Cranley Vascular Laboratory of that hospital. He is also an Emeritus Professor of Surgery at the University of Cincinnati.

He received his A.B. (Honors) from Boston College in 1941 and his Medical Degree from Columbia College of Physicians and Surgeons in 1944. After a surgical internship on the Fifth Surgical Service of Boston City Hospital, he served in the U.S. Navy, as medical officer of the animal research ship at the atom bomb tests in the South Pacific. He was appointed as a Research Fellow at Harvard Medical School and Fellow in Vascular Diseases at Massachusetts General Hospital from 1949 to 1951. He became a Clinical Associate in Surgery at M.G.H. and Director of the Vascular Laboratory from 1951-1952. He then served as the Lucie Rawson Fellow in Vascular Surgery and Assistant Clinical Professor of Surgery at the University of Cincinnati from 1952-1954. He was named Chief of the Section of Vascular Surgery at Good Samaritan Hospital in 1954, and Director of Surgery at that institution in 1961-1985.

He is a member of the American College of Surgeons, the American Association for the Surgery of Trauma, the Central Surgical Association, and the Clinical Vascular Society. He was President of the Midwestern Vascular Surgical Society in 1980. He is an honorary member of the Royal Australasian College of Surgeons and Past President of the Academy of Medicine of Cincinnati. He was the first director of the Kachelmacher Memorial Vascular Clinic in Logan, Ohio. He is the founder of Cranley Surgical Associates. He is now retired from the University of Cincinnati.

Dr. Cranley has published over 150 articles in the surgical literature, four books, and over 60 book chapters and exhibits. The Fogarty embolectomy catheter was developed under his guidance, and he has pioneered in the field of noninvasive vascular testing. He developed the phleborrhoeograph for the functional diagnosis of deep vein thrombosis of the lower extremity. He and Helen, married 50 years in 1992, have eight children. Their son Robert is a vascular surgeon and a member of Cranley Surgical Associates.

After his retirement, he resided in Naples, Florida, until his death in September 2003. Dr. Cranley left a rich heritage in innovation throughout his career. His hobbies included music, golf, and bridge.
Dr. Sumner served as Professor of Surgery and Chief of the Section of Peripheral Vascular Surgery at Southern Illinois University School of Medicine, Springfield, Illinois, from 1975 until his retirement in July 1998. In 1984, he was promoted to Distinguished Professor, an honor bestowed on only one other member of the Medical School faculty. He is now Emeritus Professor of Surgery.

In 1954, Dr. Sumner was graduated Phi Beta Kappa with a B.A. degree from the University of North Carolina. In 1958, he received his Medical Degree from Johns Hopkins University, where he was AOA. After internship, a research fellowship year, and a year as a resident at Johns Hopkins Hospital, he moved to Seattle, where he completed his surgical training in 1966 at the University of Washington. From 1967 through 1970, he served as a Lieutenant Colonel in the United States Army and was awarded the Army Commendation Medal for his work at the Arctic Medical Research Laboratory in Fairbanks, Alaska. Returning to Seattle in 1970, Dr. Sumner was appointed Assistant Professor of Surgery at the University of Washington and was promoted to Associate Professor in 1972.

His major interests include hemodynamics, noninvasive testing, carotid artery surgery, and infrainguinal bypass operations. With Dr. D. E. Strandness, Jr., he wrote *Hemodynamics for Surgeons*. He is a co-editor of *Noninvasive Diagnosis of Vascular Disease* (with Falls Hershey and Robert W. Barnes) and *Lower Limb Ischaemia* (with Kenneth A. Myers and Andrew Nicolaides). Dr. Sumner was an associate editor of the first three editions of Robert B. Rutherford’s text, *Vascular Surgery*, and an assistant editor of the fourth. Contributions to the surgical literature include 160 journal articles, 180 book chapters, and 350 presentations of scientific papers or invited lectures. Dr. Sumner has been visiting professor at more than 30 institutions, including universities in China and South Africa.

Dr. Sumner has served on a number of editorial advisory boards, is a member of more than 15 international, national, or regional scientific societies, and is an honorary member of the Cyprus Vascular Society and the Vascular Society of Southern Africa. He was the Twelfth President of the American Venous Forum (1999–2000). In 1996, he received the Pioneer Award of the Society of Vascular Technology.

Now that he has retired, he has resumed painting in oil and watercolor, hobbies neglected for 30 years.
Dr. Evans is the former Chief of Vascular Surgery and Director of the Noninvasive Peripheral Vascular Laboratory at St. Anthony Medical Center, Columbus, Ohio, having retired in 1991. He continues as Clinical Professor of Surgery at Ohio State University Hospital, Columbus, Ohio.

Dr. Evans received his undergraduate degree from Williams College and his Medical Degree from Ohio State University. Internship and Residency in Surgery were completed at Marquette University. After a two-year assignment at Wilford Hall USAF Hospital, during which he served as Chief of Surgical Research, he joined the faculty of the Marquette School of Medicine. In 1970, he returned to Ohio State as Chief of Vascular Surgery. In 1973, he attained the rank of Professor. From 1972 to 1975, he served as Assistant Medical Director of University Hospital, and in 1976 became Director of Emergency Medical Services. In 1978, Dr. Evans and his vascular team moved to St. Anthony Hospital, where the group, consisting of more than 20 highly skilled professionals, continued their varied and extensive interests in clinical surgery and research.

Dr. Evans has published over 100 articles in the surgical literature as well as numerous chapters in a variety of textbooks. He is currently the Editor of *Vascular Surgery* and became Editor Emeritus in January 2001.

Except for short absences for training, Dr. Evans has been a lifelong resident of southern Ohio, where he continues his ranching interests of raising cattle as well as training quarter horses.
Dr. Baker is currently Professor Emeritus of Surgery. When in practice, he was Chief of the Section of Peripheral Vascular Surgery at Loyola University Medical Center in Maywood, Illinois. In addition, he was Director of the Peripheral Vascular Laboratory and Director of both the Vascular Fellowship as well as the General Surgery Training Programs.

Dr. Baker was born on the South side of Chicago and received his primary and secondary education in the Chicago Public School System. After graduating from Knox College in Galesburg, Illinois, he attended the University of Chicago Medical School. A straight surgical internship was completed at the University of Chicago Hospitals and Clinics before completing an additional year at the University of Iowa. His surgical training was interrupted for two years while in the United States Army. During his second year of service, he served with the 85th Evacuation Hospital in Vietnam. He returned to complete his general surgical residency at the University of Chicago before spending a year with Dr. Wylie as a vascular fellow at the University of California in San Francisco.

Dr. Baker was named Assistant Professor in a new division of Peripheral Vascular Surgery at the University of Iowa in 1970. A busy clinical service and vascular fellowship were soon established. Although his interests blanket the field of vascular surgery, he is perhaps best known for his carefully studied carotid endarterectomy patients. In 1976, Dr. Baker joined the faculty of the Stritch School of Medicine and is currently Professor Emeritus in the Department of Surgery. He was also Medical Director of the Peripheral Vascular Laboratory. He has been Program Director of both General and Vascular Surgery. In addition, he has been President of the Midwestern Surgical Association, the Program Directors of Vascular Surgery, the North American Chapter of the International Society for Cardiovascular Surgery, (currently a part of the Society for Vascular Surgery), the Central Surgical Association, and the Chicago Surgical Society.

Dr. Baker and his family are enjoying retirement both in Chicago and in their second home on the shores of Lake Michigan, where they spend their leisure time playing tennis, golf, bicycling, and spoiling grandchildren.
Donald Silver, M.D.,
Eighth President

Dr. Silver is the W. Alton Jones Distinguished Professor Emeritus of Surgery and past-Chairman (1975-1998) of the Department of Surgery at the University of Missouri-Columbia in Columbia, Missouri. He began the program in Vascular Surgery Residency and continued as its Program Director until 2003. He founded and was Director of the Surgical Thromboembolic Laboratory.

Dr. Silver received his undergraduate and medical degrees from Duke University. Following an internship, he spent two years in the Air Force and returned to Duke University for additional residency training. During the residency years, he worked with Dr. William G. Anlyan on thromboembolic problems encountered by vascular surgeons. In 1964, he was appointed an Assistant Professor of Surgery and Staff Surgeon at Duke University and became Co-Director of the Thromboembolic Laboratory. He became Director of the Surgical Vascular Clinic at Duke in 1966. He became Associate Professor in 1966 and Professor of Surgery in 1972. In 1975, he was appointed Professor and Chairman of the Department of Surgery at the University of Missouri-Columbia. He is currently Chairman of the University Physicians group practice at the University of Missouri-Columbia. He is certified in General and Thoracic Surgery and has received certification and recertification of special qualifications in General Vascular Surgery.

Dr. Silver has served as President of the Midwestern Vascular Surgical Society, Treasurer and President of the Central Surgical Association, and Treasurer, Vice President, and President of the Central Surgical Association Foundation. He has been a member of the NIH Surgical Studies Group A. He has been a Governor of the American College of Surgeons. He has served on several editorial boards.

Dr. Silver remains committed to the improvement of undergraduate and graduate education, with special emphasis on the art and science of surgery. He remains active in clinical vascular surgery and in the investigation of basic and clinical problems encountered by vascular surgeons. His major research activities are in the areas of coagulation and fibrinolysis, with special interest in the heparin-induced thrombocytopenia syndrome and ischemia-reperfusion injury.

Dr. Silver’s hobbies include spending time with his family, gardening, and travel.
JAMES S. T. YAO, M.D., Ph.D.
NINTH PRESIDENT

Dr. Yao is Emeritus Professor of Surgery, Feinberg School of Medicine of Northwestern University, formerly Magerstadt Professor of Surgery at Northwestern University Medical School. In the past he has served as Chair, Department of Surgery, and Chief, Division of Vascular Surgery. He is the founder of the Blood Flow Laboratory at Northwestern Memorial Hospital, Chicago, and is an Attending Vascular Surgeon, Northwestern Memorial Hospital.

He is a graduate of the National Taiwan University. After completion of his general surgical residency at the Cook County Hospital in Chicago, Dr. Yao went to St. Mary’s Hospital Medical School in London to further his training in vascular surgery under the aegis of Prof. W. T. Irvine. At the same time, he received a PhD in vascular physiology from the University of London.

His research interests have centered around peripheral vascular problems, including arterial and venous problems, and noninvasive diagnostic techniques. These investigations have formed the basis for the more than 500 contributions to the surgical literature listed in his bibliography. In addition, he is co-editor of more than 50 books on vascular surgery, including two texts on non-invasive vascular diagnosis and one on angiography of vascular disease. He has also served as co-editor of the annual Year Book of Vascular Surgery from 1986-1991.

Dr. Yao has served as president of the Lifeline Foundation, Society for Vascular Surgery, the Midwestern Vascular Surgical Society, the Chicago Surgical Society, and the American Venous Forum; as Recorder of the International Society for Cardiovascular Surgery, North American Chapter; as Associate Editor of Journal of Vascular Surgery and Journal of Endovascular Surgery; as editorial board member of the Annals of Vascular Surgery, British Journal of Surgery, the Journal of Cardiovascular Technology, and Vascular Diagnosis and Therapy; as section editor on VascularWeb; and as co-chief editor of Cardiovascular Surgery. He currently serves on the Board of Directors of American Vascular Association.
Dr. Hertzer was elected President of the Midwestern Vascular Surgical Society after serving as its Secretary for the previous three years. He is a native Hoosier and received his undergraduate (1964) and medical (1967) degrees from Indiana University, where he was elected to Phi Beta Kappa and Alpha Omega Alpha. He trained in general surgery at the Cleveland Clinic from 1967 to 1972 and then entered the U. S. Army Medical Corps for two years of duty at Fort Hood, Texas, before returning to the Clinic for a fellowship in vascular surgery. He was appointed to the Clinic staff in 1976 and was Chairman of the Department of Vascular Surgery from 1989 to 1999.

Dr. Hertzer is the author or co-author of 200 original articles and book chapters. He recently co-chaired a writing committee charged by the American College of Cardiology and the American Heart Association with drafting guidelines for the management of peripheral arterial disease, and he currently is completing a series of manuscripts reporting the early results and late outcome for nearly 5,000 open aortic aneurysm repairs, carotid endarterectomies and lower extremity bypass procedures that he performed at the Cleveland Clinic before his retirement from active practice in January 2005. He was selected as a traveling scholar by the James IV Association in 1984 and presently is a member of the American Surgical Association and an honorary member of the New England Society for Vascular Surgery, the Southern Association for Vascular Surgery, and the vascular section of the Royal Australasian College of Surgeons. He was on the Editorial Board of the *Journal of Vascular Surgery* from 1987 to 2002 and twice was an Associate Editor (1989-1991, 1999-2002). Following a term as its Secretary from 1988 to 1992, Dr. Hertzer was elected President of the Society for Vascular Surgery and took this opportunity to persuade the Health Care Financing Administration to implement a Medicare demonstration project to study provider outcomes for carotid endarterectomy. This project subsequently was conducted in 10 states in an effort to document and improve the results of this important operation. He also has been privileged to receive the Indiana University Distinguished Alumni Award (2000), the Cleveland Clinic Master Clinician Award (2001), and the Cleveland Clinic Distinguished Alumnus Award (2003).

Dr. Hertzer and his wife Maryanne were married in 1965. They have three children – Lisa, an appellate lawyer at the U.S. Attorney’s Office in Washington, D.C.; John, a child and adolescent psychiatrist at the Case-Western Reserve University School of Medicine; and Brooke, a lawyer with the firm of Ballard Spahr in Philadelphia.
In January 2004, Dr. Hollier was named Dean of the Louisiana State University Health Sciences Center School of Medicine in New Orleans.

Most recently, he was President of The Mount Sinai Hospital and, in addition, retained the title of Professor of Surgery and Chairman of the Department of Surgery of the Mount Sinai School of Medicine, which he has held since 1996.

Dr. Hollier was born in Crowley, Louisiana, and received his M.D. from Louisiana State University Medical School. After internship and early training in surgery at LSU and Charity Hospital in New Orleans, he served two years in the Air Force at the Air University, Maxwell Air Force Base, in Montgomery, Alabama. Following completion of his military duty, he returned to LSU for additional training. In 1973-1974, Dr. Hollier served as a fellow in vascular surgery under Dr. Jesse Thompson in Dallas, Texas. He then returned as Chief Resident in Surgery at LSU and Charity Hospital in New Orleans, Louisiana.

After completion of his training, Dr. Hollier joined the full-time faculty at Louisiana State University. In addition to teaching at Charity Hospital and the VA Hospital in New Orleans, he also developed a busy clinical practice and established the Section of Vascular Surgery at LSU and the training program in peripheral vascular surgery.

In 1980, he was recruited to Mayo Clinic, where he founded the Section of Vascular Surgery and served as Chairman of the Section and Director of the Vascular Surgery Training Program. Dr. Hollier also served on the Mayo Institutional Clinical Practice Committee and the Clinical Practice Committee of the Department of Surgery. He was active in basic vascular research and the clinical practice of vascular surgery, establishing Mayo Clinic’s prominence in this field.

In 1987, Dr. Hollier assumed the Chairmanship of the Department of Surgery at the Ochsner Clinic and was elected to the Board of Management at that institution. He was active in expanding the surgical department activities in oncology, vascular surgery, cosmetic surgery, and transplantation. As a member of the Board of Management, he was intimately involved in the administration of the 750 member multi-specialty group practice of the Ochsner Clinic.

In 1993, Dr. Hollier was recruited to become the Chair of Surgery and Executive Director of Clinical Affairs at HCI International Medical Center in Glasgow, Scotland, where he recruited and developed an international multi-specialty group of physicians and surgeons at this new US-based academic medical center focused on the care of international patients. From there, in 1996, he was recruited to Mount Sinai Medical Center in New York as Professor of Surgery and Chairman of the Department of Surgery. In 2001 he was appointed Dean of Clinical Affairs at Mount Sinai School of Medicine and Senior Vice-President of Clinical Affairs at The Mount Sinai Hospital. In 2003 he was named President and Chief Operating Officer of the Mount Sinai Hospital.

Dr. Hollier is the author of more than 300 articles in the medical literature and serves on the editorial boards of 13 surgical journals. He is currently actively engaged in vascular research and maintains an active practice of vascular and endovascular surgery. He frequently serves as lecturer and visiting professor.
JOHN L. GLOVER, M.D.
TWELFTH PRESIDENT

Dr. Glover was Chief of Surgical Services at William Beaumont Hospital in Royal Oak, Michigan, and was the Program Director of the Surgical Residency.

He was born in Nashville, Tennessee, and lived there until graduation from medical school. His undergraduate and medical degrees are from Vanderbilt University. His internship and surgical residency were at Indiana University Medical Center in Indianapolis, Indiana. His residency was interrupted in the third year when he was drafted during the Berlin crisis. He was assigned to the Trauma Investigation Branch of the U. S. Army Chemical Research and Development Laboratories in Edgewood, Maryland. As part of his investigation of trauma, he performed a survey of casualties in guerilla warfare at the Vietnamese military hospital near Saigon, Viet Nam in March and April of 1963. He returned to Indiana and completed the surgical residency in December of 1966. He was certified in both general and thoracic surgery in 1968.

After residency, he stayed on the staff of the Indiana University Medical Center, and remained there until July of 1986, having become a Professor of Surgery in 1975. He was interim chairman of the I. U. Department of Surgery from May of 1982 to March of 1984.

In 1971, he became chief of surgery at Wishard Memorial Hospital, the general hospital for Indianapolis and Marion County. During his tenure, Wishard, which previously had an independent surgical residency, became integrated with the Indiana University Medical Center and surgical residency.

As part of the trauma program at Wishard, and working with a biomedical engineer, William Link, PhD, he developed one of the early programs of autotransfusion in trauma and vascular surgery. Also while at Wishard, he worked with another biomedical engineer, Phil Bendick, PhD, in establishing a noninvasive vascular diagnostic laboratory; they published one of the first studies of restenosis after carotid endarterectomy. In addition, he collaborated with Malcolm Herring, MD, who initiated the studies which produced the first successful endothelial seeding of vascular prostheses. As part of that work, a study on endothelial cell adhesion done by Ken Kesler, MD, one of the residents working with Drs Herring and Bendick, won the Liebig Award given by the North American Chapter of the International Society for Cardiovascular Surgery in 1985.

Dr. Glover came to Beaumont in August of 1986. Working with Phil Bendick, who also came to Beaumont in 1986, he continued studies of clinical applications of noninvasive vascular studies. In addition, he continued research on endothelial linings for vascular grafts, collaborating with Laurace Townsend, PhD. During this time, two Beaumont residents, Robert Fietsam and Graham Long, won the Guthrie award given by the North American Chapter of the International Society for Cardiovascular Surgery in 1985.

Dr. Glover was a Founding Member of the Midwestern Vascular Surgical Society. While at Beaumont he also was president of the Western Surgical Association, the MidWest Surgical Association, and the Michigan Vascular Society. He and Jean live in Birmingham, Michigan. He died on January 4, 2007 of complications from cardiac surgery.
Dr. Jonathan B. Towne was born in Youngstown, Ohio, and obtained his undergraduate degree at the University of Pittsburgh in 1963. He graduated from the University of Rochester Medical School in 1967. His first two years of surgical training were at the University of Michigan, and his General Surgery training was completed at the University of Nebraska.

Following general surgery training, he was Chief of General Surgery at Vandenberg Air Force Base Hospital in California from 1972 to 1974. He then completed a vascular fellowship under the direction of Dr. Jesse Thompson in Dallas, Texas. He has been on the faculty of the Medical College of Wisconsin since July 1975, where he is Professor of Surgery and Chief of the Section of Vascular Surgery.

His academic interests include studies of patients with abnormal clotting factors as a cause for unexplained thrombosis, and factors affecting long-term patency in distal grafts.

Dr. Towne has authored or co-authored numerous publications in peer-reviewed journals as well as textbook chapters.

Dr. Towne is a member, and has served as President of the Midwestern Vascular Surgical Society, Peripheral Vascular Surgical Society, Jesse Thompson Vascular Society, the Wisconsin Surgical Society, the Society for Vascular Surgery, Association of Program Directors in Vascular Surgery, the Milwaukee Surgical Society, the Central Surgical Association, and has been elected to serve as Director of the American Board of Surgery.

Dr. Towne and his wife, Sandra, have three children and four grandchildren.
FRED LITTOOY, M.D.
FOURTEENTH PRESIDENT
(1990 – 1991)

Dr. Littooy is Emeritus Professor of Surgery at Loyola University Medical Center in Maywood, Illinois. Dr. Littooy received his undergraduate degree from the University of Kansas in 1965 and his medical degree from the University of Kansas School of Medicine in 1969. He completed his General Surgical internship and residency at the University of California in San Francisco in 1976. Included in the residency was a two-year research fellowship in the Wound Healing Research Laboratory of Dr. Thomas Hunt and a simultaneous NIH Clinical Fellowship from the American Cancer Society. Following the General Surgical residency, he spent a year as a Vascular Fellow under Dr. Jack Wylie at the University of California, San Francisco Medical Center. He then joined Dr. William Baker, Past-President of the Midwestern Vascular Surgical Society and a Wylie-trained Vascular Fellow, at Loyola University Medical Center in Maywood, Illinois in 1977, and has remained there to the present. He was Chief of the Division of Vascular Surgery at the Hines VA Medical Center for 26 years.

Dr. Littooy has served as a Principal Investigator in seven VA Cooperative Studies and two NIH Cooperative Studies. He was on the planning committees for two VA Cooperative Studies, one on the treatment of small abdominal aortic aneurysms, and one on the utilization of CABG prior to elective vascular surgery. He has carried out several retrospective studies of vascular problems such as acute aortic occlusion, anastomotic pseudoaneurysms, femoro-femoral bypass, ultrasonic follow-up of abdominal aortic aneurysms, long-term follow-up of asymptomatic carotid stenosis, and short stay carotid surgery. He has authored over 100 articles in the surgical literature and 25 chapters in surgical textbooks. He retired from active practice in July 2006.

His hobbies include photography, classical music, jazz, golf, bicycling, wilderness treks, and travel. Travel now includes trips from coast to coast with his wife Karla to visit his children and grandchildren.
Dr. Herring is a practicing vascular surgeon at St. Vincent Hospital in Indianapolis, Indiana. He received his undergraduate degree from Indiana University and his medical degree from the Indiana University School of Medicine. He completed his internship at Baltimore City Hospital and his residency in General Surgery at Thomas Jefferson University Hospital in Philadelphia, Pennsylvania. In 1977, he completed a vascular surgical fellowship at St. Vincent Hospital in Indianapolis, under the direction of the late Dr. Austin L. Gardner.

He served in the U.S. Army Reserve National Guard for six years, and began the practice of vascular surgery at St. Vincent Hospital in 1977, where he continues to work today. His research interests include the endothelial seeding of vascular prostheses, preventing hematogenous arterial graft infections, flow surface analysis, radionuclear cell marking, small artery prostheses, venous prosthetic grafting, and leukocyte-endothelial interactions. His clinical investigations have included endothelial seeding and minimally invasive femoro-popliteal bypass techniques. He has published many articles and book chapters on these and other topics.

Dr. Herring and his wife, Suzy, have three children: Nathan, Aaron, and Matthew. Suzy and they enjoy spending time together riding their tandem bicycle, hiking, skiing, and serving their local United Methodist Church.
RICHARD F. KEMPczINSKI, M.D.

SIXTEENTH PRESIDENT

Dr. Kempczinski was born in Brooklyn, New York, and completed his undergraduate studies at the College of the Holy Cross in Worcester, Massachusetts, graduating with honors in 1962. He entered Harvard Medical School and once again graduated with honors in 1967. Following a surgical internship at University Hospitals in Cleveland, he returned to Boston for his surgical residency at Massachusetts General Hospital, where he first studied vascular surgery under Drs. Robert Linton and R. Clement Darling. His surgical training was interrupted by two years of service in the U.S. Army, including a year in the Republic of Vietnam.

He began his academic career in 1974, at the University of Colorado Medical Center in Denver, as Assistant Professor of Surgery and Chief of Vascular Surgery at the VA Medical Center, where he worked closely with Dr. Robert Rutherford, who became a lifelong friend and mentor. During his stay in Denver, he established the Rocky Mountain Vascular Society. In 1979, he accepted the position of Chief of Vascular Surgery at the University of Cincinnati Medical Center, where he spent the remainder of his career.

His lifelong interest in the Vascular Diagnostic Laboratory began during his residency at Massachusetts General Hospital, where he worked with Drs. R. Clement Darling and Jeffrey Raines in one of the first clinically active laboratories of its kind in the United States. Over the span of his career, he made numerous contributions to the vascular literature in this area, including a widely read monograph, Practical Noninvasive Vascular Diagnosis. He was a founding member of the InterSocietal Commission for the Accreditation of Vascular Diagnostic Laboratories and served as its second President. He was also an honorary member of the Society of Vascular Technology, and in 2002, he was awarded its prestigious Pioneer Award.

His research efforts focused on vascular graft infection, biologic modification of prosthetic vascular grafts, medical management of vascular disease and, most recently, the systemic effects of skeletal muscle ischemia. In addition to more than 150 original articles and book chapters, Dr. Kempczinski has contributed seven books to the vascular literature, including The Ischemic Leg. He was one of the Associate Editor of Rutherford's Vascular Surgery, arguably the standard textbook in vascular surgery. He has also served on the editorial boards of the Journal of Vascular Surgery, Perspectives in Vascular Surgery, Cell Transplantation, and International Angiology.

Following a serious accident in 1994 which left him quadriplegic, he retired as Chief of Vascular Surgery at the University of Cincinnati Medical Center but he continues to hold a position as Professor Emeritus of Vascular Surgery at that institution. Despite his disability, he was instrumental in helping to start The Vascular Societies' home page on the Internet and served as its first Webmaster.

Dr. Kempczinski and his late wife, Ann Marie, have two children, Christopher John and Catherine Ann.
William Rogers Flinn was born in rural Redwood Falls, Minnesota. Delivered by his grandfather, Dr. Tom Flinn, assisted by a cousin, Dr. Jim Flinn, Will’s contact with the medical profession seemed established almost from his first breath. However, the pastoral existence could not hold him and the bright city lights drew him to Chicago, where he spent most of his boyhood. In the Minnesotan tradition of Fitzgerald, he went in search of true wisdom to the Ivy League, where he received his Baccalaureate from Brown University in 1969. Unconvinced, he returned to the Midwest and Chicago, where he received his M.D. from Northwestern University, forging a professional relationship which would last nearly a quarter of a century.

Young Dr. Flinn completed his General Surgery training at Northwestern University Medical Center. He continued on at Northwestern in the Vascular Surgery fellowship under the direction of Dr. John J. Bergan and Dr. James S. T. Yao, both founding members and past-Presidents of the Midwestern Surgical Society. After training he joined the faculty of Northwestern University Medical School, where he rose to the rank of Associate Professor. He also played a pivotal role in the evolution of vascular surgical services at Columbus Hospital in Chicago, where he founded the Center for Vascular Disease in 1989.

Dr. Flinn has published numerous articles in journals and chapters in books, but he is most proud of his participation in the Northwestern Vascular Fellowship Program, where he assisted in the training of over 25 vascular residents from the U.S. as well as eight foreign countries.

Dr. Flinn has three sons and, thus, is required to love all sports, but he likes tennis best because, for the time being, he can still beat all three of them. He has refused to give up being a diehard Cubs fan no matter how much his sons taunt him. He also likes rag-top cars with standard transmissions, classic rock music, and late-August mornings on a screened porch in Lake Geneva.
BRUCE L. GEWERTZ, M.D.
EIGHTEENTH PRESIDENT

Dr. Bruce L. Gewertz is Surgeon-in-Chief, Chair of Surgery and Vice-President for Interventional Services at Cedars-Sinai Health System in Los Angeles. Prior to his current position, he was the Dallas B. Phemister Professor and Chair of the Department of Surgery at the University of Chicago from 1992 until 2006.

Dr. Gewertz was born in Philadelphia, Pennsylvania, and was educated at Pennsylvania State University and Jefferson Medical College in the combined BS-MD five year programs. Following his graduation from medical school in 1972, Dr. Gewertz trained in general and vascular surgery at the University of Michigan. From 1977 to 1981, he served on the faculty at Southwestern Medical School in Dallas, Texas. He moved to the University of Chicago in 1981.

From 1989-1992, Dr. Gewertz served as the first Faculty Dean of Medical Education at the University of Chicago, leading a revision of the undergraduate medical school curriculum funded by the Robert Wood Johnson Foundation. In 1992, he was named Dallas B. Phemister Professor and Chairman, Department of Surgery. His recruitment of outstanding clinicians and surgical scientists to Chicago allowed the department to increase its basic and clinical research funding more than three-fold.

Dr. Gewertz is the author of more than 200 original articles, book chapters and books including The Atlas of Vascular Surgery (Churchill Livingstone, 1993; Elsevier, 2005) and Surgery of the Aorta and Its Branches (W.B. Saunders, 2000). His principal clinical and research interests include cerebrovascular disease (especially intraoperative neurophysiologic monitoring and outcome analysis), aortic aneurismal disease, and mesenteric ischemic syndromes. His basic research into ischemia/reperfusion injury and endothelial cell physiology has been funded by the National Institute of Health and the American Heart Association. Recent work has focused on the cellular mechanisms leading to changes in the microvascular permeability and studies of intracellular signaling by free radicals and cytokines.

Dr. Gewertz has received numerous awards for his basic investigations and teaching. These include the JOBST Award for Vascular Surgery Research, the Coller Award from the Michigan Chapter of the American College of Surgeons, and the Teaching Scholars Award from the American Heart Association. He was selected Outstanding Science Alumnus by Pennsylvania State University in 2003. Dr. Gewertz is Editor Emeritus of the Journal of Surgical Research (Editor from 1990-1998) and has served on the Editorial Board of Annals of Vascular Surgery (1985-2005) and the Journal of Vascular Surgery (1998-2004). A large number of invited and named lectureships throughout the years have addressed a broad range of topics in vascular disease and physiology as well as the challenges facing academic medicine. He is consistently included among Best Doctors in America (Castle-Connolly, 2001-2007), Who’s Who in America (1994-2007) and Who’s Who in the World (2000-2007).

Dr. Gewertz is a member of many national surgical organizations including the American Surgical Association, Society of Clinical Surgery, and the Central Surgical and Western Surgical Associations. Along with officer and executive committee positions in the aforementioned organizations, he has served as President of the Chicago Surgical Society. He is a director of the Vascular Surgery Board of the American Board of Surgery. Dr. Gewertz has participated nationally in the design and evaluation of resident and medical school activities through his leadership positions in the Association for Surgical Education and extensive involvement in the Association of American Medical Colleges (AAMC) including the Advisory Panel on the Mission and Organization of Medical Schools (APMOMS) and the Forum on the Future of Academic Medicine. He chaired the recent AAMC Task Force on Integrating Teaching and Patient Care.

An enthusiastic participant in athletics, Dr. Gewertz enjoys mountain biking, skiing and golf. His other interests include modern fiction and business. In 1993, he served as script consultant and medical advisor for the film The Fugitive and was included in the film in a small part that inexplicably survived the editing process. Most viewers have agreed that recognition of his modest dramatic effort by friends and colleagues was wildly disproportionate to its length. He and his wife Diane most value time at home and on the road with their five children (Jodi, Samantha, Bart, Scott, and Lexi), grandchildren (Ellie and Lucy) and energetic Wheaton terrier.

Bruce L. Gewertz, M.D.
JOHN W. HALLETT, JR., M.D.
NINETEENTH PRESIDENT

Dr. Hallett is Professor of Surgery and Associate Dean for Faculty Affairs at the Mayo Medical School and Mayo Clinic.

Born in Wheeling, West Virginia, he graduated from the United States Air Force Academy with a degree in engineering and biologic sciences. After graduating from Duke Medical School in 1973, he completed his general surgery training at Wilford Hall United States Air Force Medical Center, where one of the first noninvasive vascular laboratories intensified his interest in vascular physiology. In 1979, he completed his vascular surgery fellowship at Harvard and the Massachusetts General Hospital, under the mentorship of R. Clement Darling, who instilled in him a sustained interest in aortic surgery, especially abdominal aortic aneurysms.

From 1980 to 1984, he served as Chief of Vascular Surgery and Director of the Noninvasive Vascular Laboratory at Wilford Hall United States Air Force Medical Center. During that time, he was appointed as a Consultant in Vascular Surgery to the Air Force Surgeon General. He also wrote the first of four editions of *The Handbook of Patient Care in Vascular Diseases*.

In 1984, he was recruited to the Mayo Clinic, where he rose to Professor of Surgery in the Mayo Medical School. From 1990 to 1997, he directed the Vascular Surgery Fellowship Program and worked with the Executive Committee of the Program Directors in Vascular Surgery. He also has served as Chair of the Executive Committee of the Mayo Gonda Vascular Center. For his contributions to education, he was inducted into the Mayo Teaching Hall of Fame in 1993.

His research efforts have focused primarily on population-based studies of vascular diseases, with special emphasis on abdominal aortic aneurysms and renovascular hypertension. At the national level, he worked as President of the Peripheral Vascular Surgery Society from 1989 to 1990, and as a Governor of the American College of Surgeons from 1992 to 1995. He has served on the Editorial Board of the *Journal of Vascular Surgery*, and currently serves on the Advisory Council in Vascular Surgery for the American College of Surgeons.

In 2001, Dr. Hallett left the Mayo Clinic to become Director of the Vascular and Cardiac Wellness Center of Maine, and Clinical Professor of Surgery at Tufts Medical School.

His interests include American art and literature, woodworking, and Harley-Davidson motorcycles.
Howard P. Greisler, M.D., is a graduate of the University of Pennsylvania and the Penn State University Hershey Medical Center. Following his medical doctorate, he received training in surgery with fellowships in Vascular Surgery and Transplantation at the Columbia Presbyterian Medical Center in New York City, under the mentorship of Arthur Voorhees. He is currently both Professor of Surgery and Professor of Cell Biology, Neurobiology, and Anatomy at Loyola University Medical Center in Maywood, Illinois.

Dr. Greisler has received numerous grants, including seven RO1s from the National Institutes of Health, and four Merit Review Awards from the Veterans Administration. He has served as a member of the NIH Surgery and Bioengineering Study Section, Review Panels of the American Heart Association and the Veterans Administration, as well as five editorial boards, and has chaired the Surgery Study Section for the Veterans Administration, chaired the special tissue engineering study section for the NIH, and serves as Chairman of the Trauma, Surgical and Musculoskeletal Disorders Medical Research Advisory Group.

He is the current President of the International Society for Applied Cardiovascular Biology, an Honorary Fellow of the Royal College of Surgeons of Edinburgh, and has been Chairman of the Lifeline Foundation Research and Education Committee and holds three United States and international patents. He has served on the World Technology Evaluation Center Tissue Engineering panel sponsored by NSF, NIH, DARPA, NIST, NASA, and FDA. He has authored over 250 publications, including four books, and has given over 300 scientific and clinical presentations.

Dr. Greisler divides his time equally between research and clinical activities. His research endeavors are in the area of tissue engineering and angiogenesis, with specific attention to the regulation of growth factor secretion by arterial wall cells, the role of these growth factors in modulating endothelial cell and smooth muscle cell proliferation in vascular injury models, and local delivery strategies of naturally occurring and mutant growth factor proteins and genes to vascular grafts and to cardiovascular tissues. His clinical interests cover the range of diagnostic and therapeutic options for the care of patients with vascular disease.

In addition to his clinical and scientific pursuits, Dr. Greisler has a great interest in outdoor activities, including backpacking, kayaking and scuba diving, as well as music and theater.

Howard P. Greisler, M.D.
William Derrick Turnipseed is Professor of Surgery: Chief, Section of Vascular Surgery, and Director of the Diagnostic Laboratories at the University of Wisconsin in Madison. He founded the Vascular Program at the Veterans Administration Hospital in Madison in 1976 and became Chief of Vascular Services at the University and VA Hospitals in 1983.

Born in Anacortes, Washington, in 1943, the son of a military surgeon, he traveled worldwide as a youth and moved to Orlando, Florida in 1959. He attended Emory University as an undergraduate and stayed on to complete medical school there as well. He went to Ohio State University for surgical residency and was one of the last trainees under Robert M. Zollinger, M.D. While at Ohio State, he was an NIH trainee in Transplant Immunology and the recipient of the prestigious Zollinger-Ellison Award at the end of his postgraduate training in 1974. He completed vascular fellowship training at Ohio State University, under the tutelage of William Evans, M.D., and John Vasco, M.D., in 1975.

His primary research interests include noninvasive diagnostics and the development of vascular imaging techniques. He had one of the first vascular laboratories in the Midwest and has made significant contributions to the clinical development of duplex imaging, digital subtraction, and magnetic resonance angiography. He has completed more than 200 publications and lectures dealing with subjects ranging from hypergastrinemia, transplant immunology and in-situ bypass to overuse athletic injuries, management of popliteal entrapment, and use of noninvasive vascular imaging.

Dr. Turnipseed is Past-President of the Madison Surgical Society, the Zollinger Surgical Society, and current President of the State Chapter of the American College of Surgeons in Wisconsin.

His major interests are athletics, hunting, and fishing. He excels at soccer, swimming, and cross-country skiing. His best times are spent with Sandy, his wife, and their two dogs, Chauncy and Chelsey, and cat Artie.
Dr. Sicard is the 1st recipient of the Eugene M. Bricker Chair and Professorship. Dr. Sicard is Professor and Executive Vice-Chairman of the Department of Surgery and Chief over the Section of Vascular Surgery at Washington University School of Medicine, Barnes-Jewish Hospital in St. Louis, Missouri. In addition, he is Program Director of the Vascular Surgery Fellowship program at Washington University School of Medicine. He received his undergraduate degree from Saint Louis University and his Medical Degree from the University of Puerto Rico School of Medicine, where he graduated Cum Laude in 1972. He completed his internship and general surgical residency at Barnes-Jewish Hospital and was a Renal Transplantation Fellow from 1977 to 1978 at Washington University School of Medicine.

Dr. Sicard joined the faculty of Washington University School of Medicine as an Assistant Professor of Surgery in 1978. He was appointed Chief of the Section of Vascular Surgery Service in 1983, Chief over the Division of General Surgery in 1998 and recently, appointed to the position of Vice Chairman over the Department of General Surgery. He is certified in general and vascular surgery.

Dr. Sicard is a Past-President of the Society for Vascular Surgery, Midwestern Vascular Surgical Society, Missouri Chapter of the American College of Surgeons, the St. Louis Chapter of the National Kidney Foundation, the St. Louis Surgical Society, St. Louis Vascular Society, and Society of Spanish Speaking Vascular Surgeons (CVHH). He is also the Chairman of the Outcomes Committee of the Society for Vascular Surgery. D. Sicard recently received the Barnes-Jewish Hospital Lifetime Physician-Scientist Award. Dr. Sicard was listed as one of the nation’s Top M.D.’s in a special edition of American Health and in America’s Top Doctors. He is a member of numerous medical and academic societies, including, the American College of Surgeons, the American Surgical Association, Central Surgical Association, the International Society for Cardiovascular Surgery and Society for Vascular Surgery, and honorary member of the Ecuadorian Society of Vascular Surgery, the Columbian Surgical Society, the Columbian Society of Angiology and Vascular Surgery, the Mexican Society of Angiology and Vascular Surgery, and the Dominican College of Surgeons.

Dr. Sicard’s basic and clinical research interests are primarily in the field of renal function preservation. His current clinical efforts are focused in the area of endoluminal vascular technology. In the latter, he is the principal investigator of three FDA trials in aortic and iliofemoropopliteal endoluminal vascular stent graft devices.

Dr. Sicard is a member of various editorial advisory boards and has published more than 250 journal articles and over 45 book chapters. He has been an invited moderator, speaker, lecturer, visiting professor and course director nationally and internationally on more than 300 occasions. His hobbies include golf, Spanish history and literature, and missing grandchildren.
Dr. Walter M. (“Mac”) Whitehouse, Jr., was born in Ann Arbor, Michigan. He received his undergraduate education at Ohio Wesleyan University and then attended the University of Michigan Medical School. Following graduation in 1973, he completed residency in general surgery at the University of Michigan. His early interest in vascular surgery was stimulated and supported by the mentorship of Dr. James Stanley and Dr. William Fry during his residency. He continued his training at the University of Chicago, serving as Dr. Christopher Zarin’s first vascular fellow.

Following his fellowship, he returned to Ann Arbor to join the faculty at the University of Michigan, where he is currently a Clinical Professor of Surgery. Establishing a private practice at St. Joseph Mercy Hospital in Ann Arbor in 1985, he provided leadership in the evolution of vascular surgery as a specialty at that institution and was instrumental in establishing the Michigan Heart and Vascular Institute. He is currently Chairman of the Department of Surgery and recently served as Chairman of the Board of Directors of the St. Joseph Mercy Health System.

A well-rounded and busy clinical vascular surgeon, his areas of particular interest include cerebrovascular disease, and visceral and lower extremity arterial occlusive disease. Dr. Whitehouse is the author of approximately 100 articles and book chapters and is a member of many regional and national surgical societies. He has received a number of awards recognizing his teaching excellence.

Dr. Whitehouse and his wife, Rosanne, have two sons, Brian and Shaun. He enjoys sailing, photography, tennis, and golf.
Dr. Patrick J. O’Hara has been a Staff Surgeon in the Department of Vascular Surgery at the Cleveland Clinic Foundation since 1979. He was elected President of the Midwestern Vascular Surgical Society after serving as its Secretary from 1997 to 2000.

Dr. O’Hara was born in Youngstown, Ohio, where he completed his secondary education with honors in 1965. He received his A.B. (magna cum laude) and M.D. (cum laude) degrees simultaneously in 1971 after completing Boston University’s Six-Year Program in Liberal Arts and Medicine. During this period, he was initiated into the Phi Beta Kappa and Alpha Omega Alpha honor societies. While at the Boston University School of Medicine, he also earned the Alumni Award and was enrolled into the Begg Honor Society. After completing a surgical internship and the first year of surgical residency at the Massachusetts General Hospital in Boston in 1973, Dr. O’Hara was inducted as a commissioned officer in the U.S. Public Health Service, performing general and orthopedic surgery while stationed in Norfolk, Virginia. Upon discharge, Dr. O’Hara finished the general surgical residency at the Massachusetts General Hospital in 1978. In 1979, under the direction of the late R. Clement Darling, Jr., M.D., he completed the Clinical and Research Fellowship in Vascular Surgery at the Massachusetts General Hospital and the Harvard Medical School. Dr. O’Hara was subsequently recruited to the Department of Vascular Surgery at the Cleveland Clinic Foundation in 1979 by Edwin G. Beven, M.D., and was later appointed Associate Professor of Surgery at the Ohio State College of Medicine in 1993. He was later appointed Professor of Surgery at the Cleveland Clinic Lerner College of Medicine of Case Western Reserve University in 2004.

Certified in General and Vascular Surgery, Dr. O’Hara’s primary interest is arterial surgery, principally complex aortic and cerebrovascular reconstruction. He has been the author or co-author of numerous publications on a wide variety of vascular surgical topics and has made a surgical motion picture. Dr. O’Hara is a member of many medical and academic societies, including the Society for Vascular Surgery, the International Society for Cardiovascular Surgery, the Peripheral Vascular Surgery Society, the Central Surgical Association, and the American College of Surgeons. He is a former Treasurer, Secretary, and President of the Cleveland Vascular Society and was a member of the Board of Directors of the Society for Vascular Surgery. He is currently a member of the Editorial Board of the Journal of Vascular Surgery and the Vascular Surgery Advisory Council of the American College of Surgeons.

Dr. O’Hara is an instrument-rated private pilot and has logged more than 1,000 hours. He also enjoys skiing, sailing, and woodworking. His greatest joys, however, are his wife, Judy, whom he persuaded to marry him in 1970, and their three adult children, Mike, Kate, and Tim.

Dr. Zelenock was born in Detroit, Michigan, and received his Bachelor of Science from the University of Detroit. He completed medical school, internship, surgical residency, and surgical research fellowship at the University of Michigan. He then joined the faculty of the Department of Surgery at the University of Michigan as an instructor and progressed throughout the ranks to Professor of Surgery, Section of Vascular Surgery, in 1991. He served as Director of Surgical Education at Michigan from 1984 to 1999. Dr. Zelenock served as Chairman of the Department of Surgery and Chief of Surgical Services at William Beaumont Hospital from 1999–2006. He now serves as Professor of Surgery and Chairman, Department of Surgery at the University of Toledo Medical Center. His early interest in vascular surgery was stimulated and supported by Dr. James C. Stanley and he has a long-term research collaboration with Dr. Louis G. D’Alecy.

His research and scholarly interests include the mechanisms of ischemic injury and a variety of clinical issues of importance to vascular surgical practice. He has also been intimately involved in undergraduate and graduate medical education for more than 25 years and, of late, spends increasing amounts of time on social, political, and economic aspects of vascular surgical practice, surgical services, and hospital practice. Dr. Zelenock has contributed 117 peer-reviewed articles and 55 book chapters to the surgical literature. He has authored or edited 13 books, including three editions of Surgery Scientific Principles and Practice, Clinical Ischemic Syndromes: Mechanisms and Consequences of Tissue Injury, Medical Education: A Surgical Perspective and most recently, Mastery of Vascular and Endovascular Surgery. He has also contributed to numerous regional and national conferences and is a member of 20 surgical societies.

Dr. Zelenock enjoys a variety of recreational sports, time at Walloon Lake, University of Michigan football, and spending time with Mary Kate, his five children and four grandchildren. Although he has absolutely no musical talent, he can regularly be seen at a performance of classical music, opera, and good theater.
Dr. B. Timothy Baxter was born in Denver, Colorado and was educated at Colorado State University and the University of Colorado Medical School. Following his graduation from medical school in 1982, he remained in Denver at the University of Colorado for his General Surgery residency. This included a year of research in cardiovascular disease. His interest in peripheral vascular surgery developed through his work with Drs. Robert Rutherford and William Pearce. He did his peripheral vascular fellowship at Northwestern University with James Yao. During his fellowship, he spent a year working in the research laboratory of Dr. Rex Chisholm. Drs. Yao and Chisholm were particularly influential in his decision to pursue basic research after completing his training. He was fortunate to be able to continue to work with Dr. Pearce during his fellowship as they both made the move from Denver to Chicago in 1988. He has served on the faculty of the University of Nebraska Medical Center since joining Dr. Thomas Lynch in 1990.

His principal research interest is related to basic mechanisms underlying arterial remodeling and aneurysm formation. Dr. Baxter is the author of more than 100 original articles and book chapters. He has received numerous awards for his research, including the E. J. Wylie Traveling Fellowship in 1995-96 and the James IV Traveling Fellowship in 2000. These awards allowed him the opportunity to travel to the United Kingdom, Australia, and New Zealand. His basic research has been funded by the Veterans Administration, the National Institutes of Health, and he is an Established Investigator of the American Heart Association. He has been involved in the grant review process for each of the organizations from which he has received funding.

He is a member of many surgical organizations. Since joining the faculty at the University of Nebraska, he has been the Chief of Vascular Surgery and Director of the Surgical ICU at the Omaha VA Hospital, and the Director of Surgical Research. In 2000, he became the Shackelford Professor of Surgery. The following year, he moved his clinical practice from the University to an affiliated teaching hospital, the Methodist Hospital, in order to learn and perform peripheral diagnostic and interventional procedures. He continues to be actively involved in training of surgical residents and runs an NIH-funded basic research laboratory at the University.

Along with the historian of the MWVSS, Jack Pfeifer, Dr. Baxter shares an interest in old automobiles. He also enjoys playing baseball and basketball with his four children, fly fishing with his brothers, and jogging with his wife, Barbara. The Baxters live in Omaha, Nebraska.
JOHN D. CORSON, M.D., Ch.B.,
FRCS (Eng), FRCS (Edin), FACS
TWENTY-SEVENTH PRESIDENT

Dr. Corson is Professor of Surgery at the University Of Iowa College Of Medicine. He served there as Chief of the Vascular Surgery Section and Director of the Vascular Surgery Fellowship program for 16 years.

Dr. Corson did his preclinical medical studies at St. Andrews University and then transferred to Edinburgh University, where he completed his medical degree in 1968, at the age of 21. After completing surgical house jobs at the Edinburgh Royal Infirmary and then teaching anatomy at Glasgow University, he moved south for further postgraduate surgical training in London and Cardiff.

He came to Boston in 1975, on an exchange fellowship, for two years of surgical research prior to completing a surgical residency at Boston University in 1980. He then went to the Massachusetts General Hospital for a Vascular Surgery Fellowship. After six years in Albany, New York, as Chief of Vascular Surgery at the Albany VA Medical Center, he relocated to Iowa City in 1986 to become Chief of the Vascular Surgery Service at the University of Iowa Hospitals and Clinics.

Dr. Corson is a member of 48 professional societies. He received Ad Hominum Fellowship from the Royal College of Surgeons of Edinburgh in 2001; he is also an Honorary Fellow of the Australian and New Zealand Chapter of the International Society for Cardiovascular Surgery. He was President of the Society for Clinical Vascular Surgery from 1996 to 1997, and is currently the Secretary of the International College of Angiology.

Dr. Corson’s primary research focus has been limb salvage procedures. He is the author of more than 200 articles on vascular disease and has contributed 47 chapters to surgical textbooks. He is co-editor of the general surgery textbook entitled, Surgery. He is a well-known speaker both nationally and internationally and has made more than 400 presentations on a wide array of subjects over the past 20 years. He serves on the editorial boards of several surgical journals.

Dr. Corson is an avid reader, golfer, and world traveler. He is married to Dr. Patricia Westmoreland Corson and is the father to two grown sons. He is the proud owner of a Brussels Griffon named Henry.
Peter Gloviczki, M.D., is Professor of Surgery, Mayo Clinic College of Medicine, Chair of the Division of Vascular Surgery and Director of the Gonda Vascular Center at the Mayo Clinic in Rochester, Minnesota.

Dr. Gloviczki earned his medical degree and completed an internship, residency, and fellowship at Semmelweis University in Budapest, Hungary. He also completed residencies at Hospital St. Michel and Hospital St. Joseph, both in Paris, France, and at the Mayo Clinic, where he also obtained various fellowships. Dr. Gloviczki has lived in Rochester, Minnesota since 1981.


Dr. Gloviczki has an extensive clinical practice that includes all areas of vascular surgery, arterial, venous and lymphatic. He has a special interest in aortic, mesenteric and renovascular surgery, aortic endografts, critical limb ischemia, reconstruction of large veins, endoscopic perforator vein surgery, surgery for varicose veins and chronic venous insufficiency and lymphatic microsurgery. He is the author of 281 full-length peer-reviewed original articles and 142 book chapters or reviews. He has given 388 presentations, many at national and international meetings.

Dr. Gloviczki has received numerous awards, including the Howard Kramer Gray Travel Award of the Department of Surgery of Mayo Clinic, the Edwin Jack Wyile Traveling Fellowship Award of the Society for Vascular Surgery, and the Allstair Karmody Essay Award of Society for Clinical Vascular Surgery. He has been listed several years in the The Best Doctors in America by Woodward White, Inc. and in America’s Top Doctors by Castle Connolly Medical, Ltd. Dr. Gloviczki mentored 61 categorical vascular surgery fellows and 23 research fellows. He is a member of all major national vascular societies, and he is Fellow of the American College of Surgeons. He is Fellow of the American College of Surgeons, Canadian Society for Vascular Surgery, Eastern Vascular Society, Italian Society of Phlebology and Lymphology and the Argentinean Society for Phlebology and Lymphology. He received the Merit Medal of the Brazilian Society of Angiology and Vascular Surgery. He was the 6th Carl W. Hughes Distinguished Lecturer of the Society for Military Vascular Surgery. For his contributions to French medicine, he received the Medal of the City of Paris.

Dr. Gloviczki is an accomplished magician, and his magic awards include the First Prize of the Society of American Magicians, the Grand Prize of the Pacific Coast Association of the Magicians Convention, and the Silver Medal at the World Championship of Magic in Paris in 1973. He also received First Place at the Grand Prix of World Magic in Tokyo, Japan in 1978. Dr. Gloviczki is a member of the Academy of Magical Arts of the Magic Castle in Hollywood, California.

Dr. Gloviczki is married to Dr. Monika Gloviczki, and has two children, Peter Jr. and Julia.
Dr. Dalsing is Director of Vascular Surgery at the Indiana University School of Medicine and Program Director of the Vascular Surgery Residency Program, which he initiated in 2000. He is Medical Director of the Indiana University/Clarian Non-invasive Vascular Laboratory, which has been accredited since 1995 under his direction.

Dr. Dalsing grew up with six brothers and sisters in Kieler, Wisconsin; a small community composed mostly of relatives engaged in farming or working at the local factory. He received a B.A. in Biology from St. Mary's College, Winona, Minnesota (1974), M.D. degree from the Medical College of Wisconsin, Milwaukee (1978) and surgical residency from the Indiana University School of Medicine (1983). Vascular Surgical training was completed at Northwestern University in 1984. He is board certified in Vascular Surgery, General Surgery and Surgical Critical Care.

Dr. Dalsing joined the Indiana University faculty as an Assistant Professor in 1984 and became Director of Vascular Surgery in 1987. He is very active in the Clarian Health Care Systems medical staff, flagship of the school’s clinical effort, and will assume leadership as president in 2005.

Dr. Dalsing is a past president of the Indiana Chapter of the ACS and is currently one of its two Governors with election to the Committee on Socioeconomic Issues. He is member of the ACS Fellows Leadership Society. He has been a Director of the American Board of Vascular Surgery since its inception in 2002. He will be president of the American Venous Forum in 2005. He helped found and is the first president of the Indiana Society of Vascular and Endovascular Surgeons, a state society dedicated to vascular surgery. He is a member of numerous prestigious societies including but not limited to the APJVS, AMA, CS, SCVS, SVS, SUS and the Midwestern Vascular Surgical Society.

Designation as the Conrad Jobst Vascular Fellow (1983), obtaining AOA recognition (1988), and being named the E. Dale and Susan E. Habegger Professor (2004) are some of his bestowed honors. He has been privileged to have trained our next generation of surgeons for more than 20 years and specifically vascular surgeons for the last 5 years.

His research and scholarly efforts have included study of end-stage chronic venous disease, collateral blood vessel development, and many areas of clinical vascular surgery. He has contributed 102 peer-reviewed articles, 25 book chapters and numerous abstracts and reviews to the surgical literature. He is on the editorial boards of the JVS, Vascular and Endovascular Surgery, and Vascular. He has presented at numerous regional, national and international conferences on various topics pertinent to vascular surgery.

Dr. Dalsing enjoys the camaraderie of his partners and long time friends. He greatly enjoys time spent with family; his wife, Rosa, and their daughters, Jessica, Rachael and Heather. Rosa is skilled at making each family vacation an adventure, to the delight of all, with events such as a strenuous climb to the top of Yellowstone’s Mount Washburn or a helicopter flight to an Alaskan Glacier for an experience in dog sledding. He enjoys watching professional football, being bested by his daughters while cross country running, traveling and playing most sports for which one can score points.
Dr. Walter John McCarthy III is a Professor of Cardiovascular-Thoracic Surgery, Chief of Vascular Surgery and Director of the Vascular Surgery Fellowship at Rush University in Chicago. Raised in Michigan, he graduated from Albion College and then Wayne State University Medical School where he became intrigued with surgery. In 1978, he moved to Chicago and Northwestern University for a stay that would last twenty years. Completing General Surgery under the tutelage of doctors John J. Bergan and James S. T. Yao, a career in Vascular Surgery seemed obvious. After a Vascular Fellowship at Northwestern, he began practice with Doctors Bergan, Yao, William Flinn, and William Pearce who all played important mentoring roles.

While at Northwestern, Dr. McCarthy was involved in the entire spectrum of Vascular Surgery in a tremendously rich environment. He was Chief of Vascular Surgery at the Lakeside VA from 1985 to 1988. Over four years he earned a Master’s Degree in Epidemiology from Harvard University to support a growing interest in outcomes research.

In 1998 he was recruited by Dr. Hassan Najafi to be the Chief of Vascular Surgery at Rush University where there had never been a purely Vascular Surgeon. Responsibilities included the Vascular Fellowship, establishing a separate vascular, non-invasive laboratory and managing complex cases. He was also Chairman of Vascular Surgery while at Cook County Hospital, which is adjacent to Rush, from 1998 to 2001. While at Rush, along with Eileen French-Sherry, he founded a baccalaureate program to teach vascular ultrasound. This program, within the Rush College of Health Sciences, graduates 10 students per year and has just recruited its 5th class. Dr. McCarthy has published over 160 papers and book chapters but is most proud of his involvement in the training of 13 vascular fellows at Northwestern and nine thus far at Rush University.

Dr. McCarthy and his wife, Mary, have three children, Michael, Christy, and Caroline, who are all of college age. His interests include photography, history, travel and cars of all types, but particularly older English sports cars which he collects and remind him of his vascular patients.
Brian G. Rubin is Professor of Surgery and Radiology at Washington University School of Medicine in Saint Louis, Missouri, and Attending Surgeon at Barnes-Jewish Hospital.

Brian was born in New York City, and subsequently moved to Hastings-on-Hudson in Westchester, NY where he spent most of his childhood. The first of three children born to two parents with Ph.D.'s in the performing arts, Brian’s free time was spent enjoying trips to New York City, exploring the woodlands adjacent to his home, restoring antique automobiles, and working as a carpenter in Vermont. After attending Hackley School, he began his college career at Northwestern University before transferring to Colgate University in Hamilton, NY to attain his baccalaureate degree magna cum laude with Honors in Biology. Initially interested in a career in research, Brian worked in the laboratory of Dr. Marvin Gershengorn at New York University and participated in early work documenting that hormones can act by increasing intracellular free calcium levels by mobilization from intracellular membrane stores.

While attending medical school at the University of Vermont, Brian chose a career in surgery. He received multiple honors and awards including AOA membership, and headed to New Haven for his general surgery residency. At Yale-New Haven Hospital, Brian was exposed to surgeons who would prove influential in choosing vascular surgery as his specialty, including Richard Gusberg, young faculty members Richard Cambria and George "Mickey" Meier, and fellow resident Bauer Sumpio. Yale also proved the meeting ground for Brian and his wife Susan, whom he married at Yale's Dwight Chapel in 1987. Two years later, they and their growing family moved to Saint Louis for a two year fellowship program at Washington University's Barnes Hospital. The initial year was spent investigating basic mechanisms of platelet RGD-binding site receptors and their inhibition. The second year consisted of acting as the sole clinical fellow in a busy training program under the direction of Dr. Gregorio Sicard. After completion of his fellowship, he joined the faculty at Washington University School of Medicine, and continued his research interests in coagulation and vascular wall biology in collaboration with Dr. Paul Eisenberg. For this early work, Brian was the first recipient of the Lifeline Foundation Research Award. Rising to the rank of Professor of Surgery with a joint appointment in the department of Radiology, his passion however remained clinical care. With his recognition of the growing role endovascular therapy was soon to play, Brian embraced the development and advancement of endovascular therapy and was encouraged to rapidly incorporate these novel techniques into routine clinical practice. The addition of colleagues including Drs. Luis Sanchez and Juan Parodi further enhanced Brian's experience in complex endovascular interventions.

Brian is a member of over 20 medical organizations, and has had the privilege to serve in leadership positions in local, regional and national vascular surgical societies. An active participant in leadership positions with the MVSS, he had the opportunity to work with Jon Matsumura to create an adjunctive endovascular course that preceded the annual meeting. A few years later, Brian assumed the role of endovascular course director, and nurtured its expansion and integration into the annual meeting. These responsibilities have overlapped his time as MVSS Councilor (1999-2002) and subsequently as its Treasurer (2003-2006).

Recognized as one of “America's Top Surgeons,” Brian has participated in over 25 clinical trials including serving as principal investigator on several trials of endovascular devices. He is a member of over 20 different medical societies, and has written over 75 journal articles and 25 book chapters and has had the opportunity to train 32 fellows in vascular surgery. Brian and Susan have three children, Rachel, Brian Jr. and Julia. His hobbies include spending time in Vermont or the Cayman Islands with family and friends, skiing, scuba diving, reading, and cycling.
GARY R. SEABROOK, M.D.
THIRTY-SECOND PRESIDENT
(2008 – 2008)

Gary Robert Seabrook is Professor of Surgery & Radiology and Chief of the Division of Vascular Surgery at the Medical College of Wisconsin in Milwaukee. He was born in Traverse City, Michigan and obtained his undergraduate degree from the University of Michigan. During his senior year of Medical School training at Wayne State University in Detroit, his career interests changed from Family Practice to Surgery through the inspiration of two devoted medical educators, Drs. Charles Lucas and Anna Ledgerwood. He completed his Residency in General Surgery, followed by the Fellowship in Vascular Surgery at the Medical College of Wisconsin, where his training was mentored by Drs. Jonathan Towne and Dennis Bandyk.

Following his Fellowship, Dr. Seabrook joined the Faculty at the Medical College of Wisconsin where he has continued to practice and serve as Medical Director of the Vascular Laboratories at Froedtert Hospital and the Zablocki Veterans Affairs Medical Center. He is the Program Director of the Vascular Surgery Fellowship at the Medical College of Wisconsin, and is the Senior Medical Director of Surgical Services for Froedtert Hospital.

Academic and clinical interests include endovascular treatment of vascular disease, carotid artery disease, surgical infections related to diabetes, outcomes affecting quality of life, the operating room environment, and issues related to health policy and reimbursement. He is a member of the Society for Vascular Surgery Health Policy Committee, and is the Vascular Surgery Advisor to the American Medical Association /Specialty Society Relative Value System Update Committee.

Dr. Seabrook is a member of the Editorial Board for Annals of Vascular Surgery and Vascular and Endovascular Surgery, and has authored or co-authored over 100 manuscripts in peer-reviewed literature. He is a member of Alpha Omega Alpha and twice has been selected as “Teacher of the Year” by the residents of the Medical College of Wisconsin Department of Surgery. He is the Past-President of the Milwaukee Academy of Surgery, has served on the Membership Committee of the Central Surgical Association, and is the Wisconsin Governor for the American College of Surgeons.

Dr. Seabrook, his wife Nancy, and son William, live in Elm Grove, Wisconsin. He enjoys gardening, bicycling, photography, and collecting antique maps.
Jon S. Matsumura is a Professor of Surgery and Chief of the Division of Vascular Surgery at the University of Wisconsin School of Medicine and Public Health in Madison, Wisconsin. He was born and raised in California and moved to the Midwest when he attended college at Northwestern University. He stayed at Northwestern for 27 years through his undergraduate and medical school training, residency and fellowship training, and then on staff under the mentorship of James S.T. Yao, MD, PhD, and William H. Pearce, M.D. Dr. Matsumura's academic interests are centered on development and testing of novel devices and techniques for treatment of vascular diseases. He is the national principle investigator for several multi-institutional clinical trials evaluating less invasive treatments for abdominal aortic aneurysm, thoracic aortic pathology, and carotid stenosis. He is well known for his extensive training programs that allow vascular surgeons to learn new endovascular techniques for treating patients in their own practices.

Dr. Matsumura has had the privilege of numerous leadership positions in regional and national academic vascular societies. He has been a member of the editorial board of several journals and has co-authored 67 peer reviewed publications, 33 chapters, and 9 books. He is a member of Alpha Omega Alpha and has been selected three years for Department of Surgery "Excellence in Teaching" award. He has recently moved to Madison to become the leader of the new Division of Vascular Surgery at the University of Wisconsin. He will be expanding the clinical research enterprise, continuing educational efforts for physicians in practice, and build on the long tradition of clinical excellence in Madison. He plans to use emerging digital communications to extend the educational reach to an international audience. Dr. Matsumura also enjoys spending time with his wife Amy, his son Blake, and his daughter Claire. They enjoy outdoor activities with family and friends including skiing, fishing, and traveling.
Daniel Joseph Reddy is a Professor of Surgery at Wayne State University School of Medicine in Detroit, Michigan. He was born in Jackson, Michigan but has lived in and around Detroit for most of his life having graduated from Detroit Jesuit High School before graduating from Georgetown University as an Ignatian Scholar. In DC, his area of interest in the Georgetown College of Arts shifted from Philosophy to Biology following laboratory experiments in the LDH isoenzyme responses to sepsis. After undergraduate studies he returned home and matriculated at The University of Michigan Medical School in Ann Arbor, Michigan. At Michigan he was inspired to pursue a career in Surgery while rotating as a third year medical student with Drs. Richard Dow, Carl Benner and G. Patrick Clagett at the Wayne County Hospital. It was there and then that he developed a lifelong interest in operative surgery and the surgical care of the injured patient. Before graduating from the University of Michigan, Dr. Reddy completed a American Association of Medical Colleges travelling fellowship at the University of Belgrade in Yugoslavia and co-authored a paper on Health Care Utilization as it is influenced by benefit coverage.

Surgery residency training followed at Wayne under the influences of Drs. Walt, Lucas and Ledgerwood. It was, however, experiences as a research resident, including study of the development of experimental intimal hyperplasia followed by fellowship training in the emerging field of Vascular Surgery under Dr. Ramon Bergeur that set his professional course for the next 35 years. Dr. Reddy joined the renowned Vascular Surgery senior staff at The Henry Ford Hospital and continued there in the three-fold mission of patient care, education and research for thirty years. He rose to the position of Division Head in Vascular Surgery, served many years as Program Director in the ACGME Fellowship in Vascular Surgery, was elected and reelected to the Board of Governors of the Henry Ford Medical Group and was awarded the Inaugural D. Emerick and Eve Szilagyi Chair in Vascular Surgery. Dr. Reddy has served as President of the Michigan Chapter of the American College of Surgeons and the Michigan Vascular Society and was a study surgeon for the NIH ACAS and CREST trials. Dr. Reddy has authored or co-authored numerous papers pertaining to the full range of topics in Vascular Surgery with particular emphasis on complex aortic and carotid operations. His 2011 MVSS Presidential Address entitled “Experiments in Unreality” traced false passages and their consequences in human endeavors from antiquity to the present time and illustrated some contemporary errors linking then to past errors. Highlighted were the negative aspects of the electronic medical record and the threats inherent in the heavy hand of centralized government control of Medicine. In recent years he returned to Wayne State University and serves as Vascular Surgeon for the Detroit Veterans Affairs Hospital and enjoys the daily direct clinical contact with residents, medical students and patients. Dr. Reddy’s wife, Diane Marie, is a gastroenterologist and both of their children are US Army Officers. Caitlin Marie is in the Dental Corps and Daniel Martin, a 2011 West Point Graduate, is in the Infantry.
Timothy Frank Kresowik, M.D. is a Professor of Surgery in the division of Vascular Surgery and vascular fellowship program director at the University of Iowa in Iowa City. He lived from birth through high school in Detroit, Michigan. He received an appointment as a Midshipman to the U.S. Naval Academy in Annapolis, Maryland which he attended from 1972-74. His interest in medicine first developed while at the Naval Academy and he returned to his home state to complete his undergraduate degree, medical school degree, surgical residency and vascular fellowship all at the University of Michigan in Ann Arbor. In 1988 he was appointed as an Assistant Professor of Surgery at the University of Iowa College of Medicine where he has been a faculty member for his entire academic career. He had the privilege of having four prior Presidents of the MVSS among his mentors (James Stanley, Walter (Mac) Whitehouse, Gerald Zelenock) during his training at the University of Michigan and John Corson as division head at the University of Iowa.

In addition to a continual clinical practice in vascular surgery he developed a clinical and academic interest in performance measurement and quality improvement. In 1993, he became a part-time medical consultant and principal clinical coordinator for the Iowa Foundation for Medical Care which was the Medicare peer review organization for Iowa, Illinois and Nebraska. He has served and had leadership roles on a number of national committees addressing hospital and physician quality measurement and improvement. In 1998, Dr. Kresowik began working with the American Medical Association as a consultant to the Physician Consortium for Performance Improvement and served as a facilitator/consultant for over 40 workgroups spanning the entire range of medicine from prenatal care to geriatrics. He has published extensively in the general areas of performance measurement and improvement with a particular interest in cerebrovascular disease and intervention.

Dr. Kresowik and his wife Becky have 6 adult children Tim, Dan, Melissa, Paul, Mark and Emily and are currently especially enjoying three grandchildren Jack, Alex and Aliana. In addition to his family Dr. Kresowik’s passions include running, golf and travel.
M. ASHRAF MANSOUR, M.D.
THIRTY-SIXTH PRESIDENT
(2012-2013)

Dr. Mansour is Professor of Surgery, Michigan State University College of Human Medicine, and Academic Chair of the Spectrum Health Medical Group. He is also the Interim Chair of the Department of Surgery West at MSU Grand Rapids, and the Program Director for the Vascular Surgery Fellowship and Residency. He served on the Board of Directors of the Spectrum Health Medical Group, the largest multispecialty group in West Michigan.

He was born in Cairo, Egypt. He was educated by French Jesuits at the College de la Sainte Famille and graduated from Cairo University School of Medicine. After internship, he came to Michigan to work as a research associate in Hematology at MSU and William Beaumont Hospital in Royal Oak. He started his general surgery residency training in 1984 at the University of Colorado where he remained on the faculty as an Instructor of Surgery. He was an attending surgeon at the University of Colorado Health Sciences Center, Denver General Hospital and the Denver Veterans Administration Medical Center. Then he served in the United States Army assigned to Ft. Benning, Georgia. After his tour of duty as a Major in the Medical Corps, he completed his vascular surgery fellowship training at Southern Illinois University under Dr. David Sumner, the chief of Vascular Surgery at SIU.

After completing his vascular fellowship, Dr. Mansour was named Assistant Professor of Surgery at Loyola University Stritch School of Medicine in Maywood, Illinois. In addition to being a busy clinician and starting the endovascular program, he directed the General Surgery training program at Loyola and collaborated in basic and clinical research in the Peripheral Vascular Surgery Division, headed by Dr. William Baker. He rose to the rank of Associate Professor of Surgery at Loyola. Dr. Mansour was recruited to Grand Rapids, Michigan to join a busy clinical practice and start a Vascular Surgery training program. The fellowship was started in 2003 and in 2011; an integrated vascular residency took its first trainee. He was named Professor of Surgery at MSU and Chief of Cardiovascular Surgery at Spectrum Health Butterworth. He is currently a member of the Board of Directors of the Vascular Disease Foundation. He served on the ICAVL Board of Directors and the Executive Councils of several professional societies including the Midwest Surgical, Michigan Vascular, Society for Clinical Vascular Surgery and Western Surgical. He co-edited the Vascular Diagnosis textbook. He has contributed over 110 original articles in peer-reviewed journals and book chapters. He received many honors and awards including election to Alpha Omega Alpha, teacher of the year and several first place papers and posters.

Dr. Mansour enjoys the company of his partners, friends and trainees. He looks forward to time spent with his family and loved ones. He loves to travel, ski, golf, tennis and participate in outdoor activities.
MIDWESTERN VASCULAR SURGICAL SOCIETY

NAMES AND ADDRESSES OF PRESIDENTS

(33) Jon S. Matsumura, M.D.
Division of Vascular Surgery
UWSMPH, Department of Surgery
GS/325 CSC
600 Highland Ave.
Madison, WI 53792

(34) Daniel J. Reddy, M.D.
Wayne State University
John D. Dingell VA Medical Center
4646 John R. Street
Detroit, MI 48201

(35) Timothy F. Kresowik, M.D.
Univ. of Iowa Health Care
200 Hawkins Dr, 1522 JCP, Surgery
Iowa City, IA 52242

(36) M. Ashraf Mansour, M.D.
Spectrum Health Medical Group
Program Director, Vascular Surgery
4069 Lake Drive SE, Suite 312
Grand Rapids, MI 49546-8816

MIDWESTERN VASCULAR SURGICAL SOCIETY

HISTORICAL LIST OF OFFICERS

PRESIDENTS
D. Emerick Szilagyi 1977-1978
John J. Bergan 1978-1979
James S. Stanley 1979-1980
David S. Sumner 1981-1982
William E. Evans 1982-1983
Donald Silver 1984-1985
James S. Tao 1985-1986
Norman R. Hertz 1986-1987
Larry H. Hollier 1987-1988
John Glover 1988-1989
Fred N. Littooy 1990-1991
Malcolm B. Herring 1991-1992
Bruce L. Gewertz 1993-1994
John W. Hallert, Jr. 1995-1996
Howard P. Greisler 1996-1997
William D. Turnipseed 1997-1998
Gregorio Sicard 1998-1999
Gerald B. Zelenock 2001-2002
B. Timothy Baxter 2002-2003
John D. Corson 2003-2004
Peter Gloviczki 2004-2005
Michael C. Dalsing 2005-2006
Walter J. McCarthy, III 2006-2007
Brian G. Rubin 2007-2008
Gary R. Seabrook 2008-2009
Jon S. Matsumura 2009-2010
Daniel J. Reddy 2010-2011
Timothy F. Kresowik 2011-2012

SECRETARIES
John R. Pfeifer 1977-1982
Norman R. Hertz 1982-1985
Christopher Zarins 1994-1997
Walter J. McCarthy 2000-2002
Jon S. Matsumura 2003-2005
Patricia R. Church, Jr., M.D. 2006-2008
Patrick J. Geraghty 2011-

TREASURERS
James C. Stanley 1977-1978
Victor Bernhard 1978-1982
Larry H. Hollier 1982-1985
Fred Littooy 1985-1988
Howard P. Greisler 1991-1994
Gerald B. Zelenock 1997-2000
Peter Gloviczki 2000-2003
Brian G. Rubin 2003-2006
Daniel Reddy 2006-2009
Donald L. Jacobs 2009-2012

COUNCILORS
David S. Sumner 1977-1978
William H. Baker 1977-1979
Frederick G. Winegarner 1977-1980
John Smith 1979-1982
John Glover 1980-1983
James S. Tao 1981-1985
Charles J. Hafner 1982-1985
William D. Turnipseed 1983-1986
D. Preston Flanigan 1984-1987
Malcolm B. Herring 1985-1988
William Sharp 1986-1989
Christopher Zarins 1987-1990
Steven M. Dosick 1990-1993
Marion McNamara 1991-1994
Bhagwan Satiani 1993-1996
Richard J. Fowl 1994-1997
Michael C. Dalsing 1995-1998
Julie Freischlag 1996-1999
Gary R. Seabrook 2001-2004
Sandra C. Carr 2002-2005
Denise Farnell 2004-2007
Roy K. Greenberg 2005-2008
Thomas C. Bower 2006-2009
M. Ashraf Mansour 2007-2010
Krishna M. Jain 2008-2011
Sean P. Lyden 2009-2012
M. Ashraf Mansour 2011-2013
Jean E. Starr 2011-2014
MIDWESTERN VASCULAR SURGICAL SOCIETY

HISTORY

1976

In June of 1976, John J. Bergan, M.D., (Professor of Surgery at Northwestern University in Chicago), first conceived the idea of a Midwestern Vascular Surgical Society. At the same time, unaware of Dr. Bergan's interests, D. Emerick Szilagyi, M.D., (recently retired as Surgeon-in-Chief at Henry Ford Hospital in Detroit), had discussed with John R. Pfeifer, M.D., (Chief of Surgery, Providence Hospital in Southfield, Michigan), the possibility of a Michigan Vascular Society. Upon learning of Dr. Bergan's efforts, Dr. Szilagyi and Dr. Pfeifer agreed upon the concept of a single Midwestern Vascular Society, thus merging their efforts with Dr. Bergan. A preliminary committee was organized by Dr. Bergan and met at the Conrad Hilton Hotel in Chicago on October 12, 1976.

At this first meeting, it was agreed that a founding member group should be contacted and that, by definition, these founding members should be members of either the Society for Vascular Surgery or the International Cardiovascular Society. The founding members, in turn, would recommend other vascular surgeons for later membership. It was further agreed that the meetings of the Society should be held throughout the Midwest to give all surgeons an opportunity to visit various institutions. There was to be no emphasis on regulatory activity (i.e. peer review) by the Society. The geographic boundaries were established and by-laws and membership committees organized. Dr. John Bergan was elected President Pro-Tem, and Dr. John Pfeifer, Secretary Pro-Tem.

The second meeting of the organizing committee was held at the Drake Hotel in Chicago on December 1, 1976. A tentative founding member list was agreed upon. Annual dues of fifty dollars were set. The Constitution and By-Laws were approved. Incorporation as a nonprofit, tax-exempt corporation was approved. A nominating committee was identified to recommend the first slate of officers. The annual meeting was set up for the third week of September, as September does not conflict with meetings of major national groups.

1977

The Founding Meeting was held on March 2, 1977, at the Statler Hilton in Buffalo, New York. Seventy-four surgeons had been invited to become founding members and 67 agreed to be in this initial group. Twenty-six were in attendance. Members favored a practical discussion group format to the meetings, with emphasis on technique and practical aspects of vascular surgery. The first slate of officers was unanimously elected:

- **PRESIDENT**: D. Emerick Szilagyi, M.D.
- **PRESIDENT-ELECT**: John J. Bergan, M.D.
- **SECRETARY**: John R. Pfeifer, M.D.
- **TREASURER**: James C. Stanley, M.D.
- **COUNCILLORS**: William H. Baker, M.D., David S. Sumner, M.D., Frederick Winegarner, M.D.

The First Annual Meeting of the Midwestern Vascular Surgical Society was held at the Drake Hotel, Chicago, Illinois, September 22 and 23, 1977. In excess of 200 surgeons attended and the meeting was viewed to be a success. It was determined that a basic science lecture should be part of the annual meeting format.

1978

The Second Annual Meeting was held at the Plaza Hotel in Detroit, Michigan, September 22 and 23, 1978. In excess of 250 surgeons attended.

1979

The Third Annual Meeting was held at the Drake Hotel, Chicago, Illinois, September 28 and 29, 1979. Two hundred fifty surgeons and guests were in attendance. Selected papers presented at this meeting were published in Surgery.

In 1978, the ISCVS/SVS Joint Council established a Council of Regional Vascular Societies which was to include the President and Secretary of each Regional Vascular Society. Dr. Bergan, Past-President of the Midwestern Vascular Surgical Society, and Dr. Pfeifer, Secretary, were asked to prepare the agenda for the Third Annual Meeting of the Council of Regional Vascular Societies, held in conjunction with the ISCVS/SVS. Annual Meeting in Chicago in June, 1980. At this council meeting, more permanent liaison to the regional council was requested from each regional society. Dr. James C. Stanley was named as liaison from the Midwestern Vascular Surgical Society.

1980

The Fourth Annual Meeting of the Society was held at the Netherlands Plaza Hotel in Cincinnati, Ohio, September 26 and 27, 1980. With the new members accepted to membership at this meeting, there were 137 members in the Society. The Fourth Annual Meeting was attended by approximately 200 surgeons.

1981

The Fifth Annual Meeting was again held at the Drake Hotel, with 250 surgeons in attendance. Membership in the Society had now risen to 160 members.

At the suggestion of the former Society President, Dr. James C. Stanley, the CHARLES C. GUTHRIE Award was established by the membership of the Society. The CHARLES C. GUTHRIE Award for outstanding research in vascular surgery will be presented each year to the resident or fellow with the outstanding research presentation in vascular surgery (clinical or basic science). This work should have been done during the resident's training years. The award carries with it an annual prize to the recipient of $1,000.

The first CHARLES C. GUTHRIE Award was presented at the Fifth Annual Meeting to Linda Graham of the University of Michigan.
At the Sixth Annual Meeting, held in Milwaukee, Wisconsin, in September, 1982, there were 210 physicians, including 110 members in attendance.

As of the Seventh Annual Meeting in 1983, the membership in the Society included 171 members, which included 14 members admitted in 1982. Twenty-eight applications for membership were received and 19 were accepted for membership at the 1983 meeting. In attendance were 141 registered members and guests. Fifty-two abstracts were considered for presentation at the meeting and 19 were selected. The Society approved an amendment to the By-Laws (Article V, Section 3) as follows:

"Senior members who have retired from active practice are exempt from dues by petition."

In 1984, the Society began publication of selected papers from the annual meeting in the new Journal of Vascular Surgery. It is of interest to note that the senior editor of the Journal of Vascular Surgery, Dr. Emerick Szilagyi, was Founding President of the Midwestern Vascular Surgical Society.

By the time of the 1985 annual meeting, the Society had outgrown the Drake Hotel and moved to the newer and larger Hyatt Regency Hotel on Wacker Drive for the meetings, which are held on alternate years in Chicago. At that meeting, the Society membership numbered 211 members. Of the 12 states within the Midwestern geographic boundaries, South Dakota was the only state not represented. The By-Laws were amended to include,

"Members who have retired from active practice are exempt from the attendance requirement in Article IV, Section 3."

The Society maintained an active role in the shaping of national policy in vascular training. Society President Donald Silver requested that the American Board of Surgery reconsider the emphasis on both case volume and scientific publications required of members who attempted to qualify for the Certificate of Competence in General Vascular Surgery. Society representatives also requested a more prominent voice for the Council of Regional Vascular Societies, which reports to the Joint Council of the ISCVS/SVS.

In September 1986, the Tenth Annual Meeting was held in Indianapolis, Indiana. Sixteen new members were accepted, bringing the total membership to 240. We mourned the passing, in his 93rd year, of Geza De'Fakats, one of the great pioneers of vascular surgery. The move to regional vascular societies in the United States and Canada was almost complete, with almost all vascular surgeons in the entire continent belonging to a regional society. At the National Meeting of Regional Vascular Societies (sponsored by the Joint Council of SVS/ISCVS) it was decided to divide the United States into four regions, with a fifth region to include the Canadian societies. The Regional Vascular Societies were given a seat on the Joint Council to permit input into the two major societies. Dr. Norman Hertzer of the Society was the first representative of the Regional Vascular Societies on the SVS/ISCVS Council.

At the Eleventh Annual Meeting in September 1987, in Chicago, 17 new members were accepted. It was reported to the Society that the initial Certificate of Special Qualifications in Vascular Surgery will be phased out by June 30, 1989. This will also signify the end of the grandfather period for those who did not have fellowship training or who had training in unapproved fellowships. A new Certificate of Added Qualifications would be instituted, which would require Board Certification by the American Board of Surgery, completion of an approved fellowship, and performance of 50 major vascular reconstructions per year.

In 1987, the Council agreed to certify new vascular procedures and studies and attest to their validity. Thus, the Society has become a resource to third-party payers who might request this service. The Council also agreed to establish a Distinguished Service Award to be given to members of the Society who have made unusual contributions to the growth and development of the Society. Guidelines for membership in the Society (based on a survey of Society membership) were clarified and include completion of more than 50 major reconstructions, fellowship training, and 50% or more of practice in vascular surgery. Operative experience submitted for review should be from candidates' current place of practice. However, these are guidelines and occasional deviations from the standards may be justified.

In 1988, a major area of concern to the Society was vascular interventional therapy, as practiced by cardiologists and radiologists, and its impact on vascular surgery. A national committee was to report on this issue at the Executive Council of the ISCVS and the American College of Surgeons. The possibility of creating an "inactive membership" status for members living outside the geographic area of the Society was considered and rejected. Thus, to maintain active membership, members inside and outside the geographic area should attend at least one meeting every three years.

At the annual meeting of members, after considerable discussion, the members of the Society voted to publish discussion of papers, along with the paper itself, in the Journal of Vascular Surgery. At the June 2, 1990 council meeting, Dr. Emerick Szilagyi, editor of the Journal of Vascular Surgery, reported that 68% of the manuscripts from the 1989 annual meeting had been accepted for publication in the Journal. This represented the highest acceptance rate for a major regional vascular society and was significantly higher than the 40% acceptance rate for individually submitted manuscripts.

By June of 1990, the membership of the Society had grown to 285 members, 17 of whom lived outside the geographic area of the Society. At the June, 1990 Executive Council Meeting, the Council recommended that the annual meeting be managed by the Professional Relations and Research Institute, Inc. Jesse
Thompson of Dallas, Texas was elected to honorary membership in the Society, in recognition of his outstanding contribution to the field of vascular surgery.

Given the growing complexity and size of the meeting, the Council decided to engage the services of Mr. William Maloney's firm, Professional Relations & Research Institute, Inc., to assist with the Annual Scientific Meeting. To help defray the cost for this additional expense, the registration fee for members was raised to $50, and for non-members $75, beginning with the 1991 scientific meeting.

In addition, the Council approved the presentation of a Presidential Chair to the outgoing Past-President of the Society at the completion of his term on the Council. The Society's logo would appear on the chair, which is to be manufactured by the Hitchcock Chair Company and would be delivered to the President's home. The Council also voted to retroactively present a chair to the previous Presidents of the Society in recognition of their outstanding contributions in helping to establish the Society and solidify its reputation as the finest of the regional vascular societies.

1991

In June of 1991, acting on a recommendation by Dr. James Yao, the Council of the Society approved the preparation of a convention report of the annual meeting of the Society, by Excerpta Medica.

At the 1991 meeting at the Drake Hotel in Chicago, membership had risen to 291 members. Fifty-seven abstracts were submitted at the meeting, of which 23 were accepted. (Seventeen were subsequently published in the Journal of Vascular Surgery.) This acceptance rate (74%) was the highest of any regional vascular society. One hundred sixty-nine members and 56 guests attended, making a total of 225 in attendance at the meeting. The Secretary reported that of the papers presented at the 1990 meeting, 62% were accepted for publication.

The Treasurer recommended an audit of the books every third year and an ad hoc committee was appointed to explore appropriate spending of funds currently in the treasury. Dr. Jonathan Towne presented the Emerick Szilagyi Gavel, which is made of wood from Dr. Szilagyi's old desk and crafted by Dr. Mark Adams, a member of the Society.

Through the auspices of Dr. Yao's Ad Hoc Committee on Public Education, arrangements were made with Excerpta Medica to cover the Annual Scientific Meeting and publish a summary in the Convention Reporter. This report would be edited by the Society's Recorder, Dr. O. William Brown, and would then be subsequently circulated to internists, cardiologists, and family physicians in our region.

Dr. Kempczinski announced that through an agreement with the Journal of Vascular Surgery, the abstracts of this year's annual meeting had been published in the September issue of the Journal, thus allowing for broader dissemination of the Society's program and greater recognition for the Society by the vascular community.

1992

At the 1992 meeting in Cleveland, Ohio, the Society had grown to 297 members, with 246 active members, 50 senior members, and one honorary member. Two hundred seventeen physicians attended the Cleveland meeting, of whom 139 were members of the Society. Fifty-seven scientific abstracts were submitted and 22 papers were presented at the meeting, of which 19 were accepted for publication in the Journal of Vascular Surgery. Eighteen physicians were accepted into membership in the Society.

Four manuscripts were submitted for consideration for the Guthrie Award. The Council of the Society expressed concern over the small number of papers submitted for the Guthrie Award. The selection committee for the award was expanded to include the President, Past-President, President-Elect, as well as Dr. Allan Callow and Dr. James Stanley.

By the time of the 1992 meeting, Society assets had risen to in excess of $150,000. This was over the amount recommended by the IRS (which suggests that Society funds should be approximately three years' operating revenue of $100,000). Amounts in excess of this figure could jeopardize our tax-exempt status. An ad hoc committee, chaired by Dr. Howard Greisler, including Dr. Linda Graham and Dr. Calvin Ernst, recommended that the Society undertake the cost of meeting expenses previously covered by commercial sponsors and increase the number of invited guest speakers for the program.

The Council of the Society recommended that the Society actively seek to increase membership in the Society by inviting interventional radiologists, vascular internists, and cardiologists. Such memberships are in compliance with the Constitution and By-Laws of the Society. The membership agreed with this recommendation, with the understanding that, in order to preserve the character of MSVV, the total memberships in the Midwestern Vascular Surgical Society by nonvascular surgeons should not exceed 20% of the active membership.

It was also agreed to include prominent interventionalists at future programs as invited guests and panel members as well as to encourage them to submit abstracts to the Society.

1993

By the time of the 1993 meeting in Chicago, the Society had grown to 308 members. Sixteen new members were added at the 1993 meeting, bringing the total membership to 324 members. Of these, 49 were senior members and one was an honorary member. Sixty-one abstracts were submitted for presentation and 22 were accepted. The publication rate of 82% indicates the high quality of presentations. Dr. Jack Pfeifer was named Archivist of the Society and was charged with the responsibility of assembling a history of the Society in a hard-bound volume for the 25th Anniversary Meeting in 2001.

The matter of members of the Society living outside the boundaries of the Midwest was addressed. It was decided that such members would have no requirement for meeting attendance. Also, if requested in writing, they would be exempt from paying dues. Senior members were also exempted from paying dues.

By the time of the 1993 meeting, the Treasurer's report indicated the Society continues to be financially strong, with $156,981.67 in total funds. Quorum requirements were changed from 25 to 75 members.
Councilors to the Society were renamed as follows:

<table>
<thead>
<tr>
<th>First-Year Councilor</th>
<th>Councilor-at-Large</th>
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<tbody>
<tr>
<td>Second-Year Councilor</td>
<td>Recorder of the Society</td>
</tr>
<tr>
<td>Third-Year Councilor</td>
<td>Chairman, Membership Committee</td>
</tr>
</tbody>
</table>

**1994**

The Eighteenth Annual Meeting of the Society was held on September 24 and 25, 1994, in Cincinnati, Ohio. As of that meeting, there were 320 members, with 261 active, 58 senior, and one honorary member. Sixteen new members were accepted into the Society at this meeting. Thirty-four industrial exhibitors were present. One hundred eighty-two members and guests were registered.

Sixty-four abstracts were submitted for review and 24 were accepted for publication. No Guthrie Award was given for 1994. The Council recommended that the standards for this award should be maintained at a high level. The award will continue to be limited to residents and fellows.

As of 1994, the Midwestern Vascular Surgical Society was one of the only regional vascular societies that support the Lifeline Foundation with an annual grant of $5,000.

A suggestion that membership of the Society be expanded to include Canadian surgeons in contiguous provinces was not approved by the members of the Society. However, Society members are free to sponsor Canadian guests and papers to the meeting.

**1995**

At the 1995 meeting (Drake Hotel, Chicago), membership had grown to 300 members with 244 active members and 55 senior members. Two hundred thirty-six physicians, 69 spouses, and 135 exhibitors were in attendance, making a total of 440. Sixty-nine abstracts were submitted for presentation and 23 were selected.

At this meeting, some concern was expressed over declining exhibitor participation (1995 Chicago - 32, 1994 Cincinnati - 34, 1993 Chicago - 37, 1991 Chicago - 55), perhaps a reflection of corporate mergers and changing economic times.

The Executive Council expressed the need for educational grants from industrial supporters of the Society. Such grants will be necessary in the future to defer escalating overhead costs that face the Society. The membership unanimously voted to raise membership fees from $50 to $100 per year.

Sixteen new members, elected in 1994, were presented before the Society for receipt of their membership certificates. Fifteen names were approved for election to membership in 1996 by Dr. Jeff Rubin, the Membership Committee chair. New guidelines were presented for the membership application. In the future, graduates from certified vascular fellowship programs will not be required to submit case summaries as part of the membership application.

At the 1995 annual business meeting, the members of the Society voted unanimously to hold the annual meeting in the year 2000 in a resort area outside of the geographical area of the Midwest.

The Society again voted to contribute $5,000 to the Life Line Foundation.

**1996**

The 1996 meeting was held in St. Louis, Missouri, with Gregorio A. Sicard, M.D., as Chairman of Local Arrangements. Membership was now 358 members, with 277 active members, 39 senior members, 41 senior retired members, and one honorary member. There were 204 registrants and 33 industrial exhibitors. Fifty-six abstracts were submitted, and 22 abstracts, including the Guthrie paper, were accepted. As of this meeting, for those papers accepted for publication in the Journal of Vascular Surgery, only primary discussants' remarks were to be published. Twelve abstracts were reviewed for the Guthrie Award. Beginning in 1997, the members of the Society voted to present the winner of the Guthrie Award with both a plaque and a certificate. Also, as of 1997, to avoid conflict of interest, reviewers of abstracts for the Guthrie Award were both from outside the Midwest Regional Society area as well as from within the region.

For the first time, a new member breakfast meeting was scheduled for new members, all resident presenters and vascular fellows. This was hosted by the Executive Committee and Past Presidents of the Society.

Because the annual meeting has been operating at a deficit, the membership agreed that registration costs be regulated on an annual basis to cover all meeting costs and, thus, avoid a deficit.

Thirteen candidates for membership in the Society were unanimously approved.

**1997**

On September 12 and 13, 1997, the 21st Annual Meeting was held at the Drake Hotel in Chicago. One hundred and four members were pre-registered, with 11 guest physicians, seven residents, and 46 spouses, for a total of 168 pre-registrants. There were 110 exhibit personnel pre-registered as well. There were 34 industrial exhibits.

Fifty-three abstracts were submitted for the scientific program, and 12 for the Guthrie Award. Twenty-three papers were selected, and one for the Guthrie Award.

At the 1997 meeting, the Council voted to stop the annual audit of Society funds in order to eliminate the expense of the audit. This decision was made because the majority of Society funds were going through PR/RI (Public Relations & Research Institute, Inc.), the Society’s management firm. Thus, the funds were already audited annually. The Council established a new internal audit committee comprised of the three elected councilors to carry out an annual review of the books.

The Council also voted to continue its contribution to the Life Line Foundation.
1998

As of 1998, CME credit was handled by the National Vascular Societies, who were now able to sponsor regional CME activities.

According to Article IV, No. 3, of the Society By-Laws:

“3. Any active member who is absent from three consecutive annual assembly meetings without adequate explanation of this absence made in writing to the Secretary shall be dropped from membership in the Society by vote of the Council. Membership may be reinstated by a vote of the Council.”

The Council expressed concern about member attendance at the annual meetings. According to the By-Laws, a member who has missed three consecutive meetings must submit a letter of explanation. The member can be reinstated by a vote of the Council.

The 13 new members of the Society elected to membership in 1996 received their certificates at the Past-Presidents’ Breakfast.

In 1997, 13 physicians made application for membership in the Society and nine were approved.

On September 25 and 26, 1998, the 22nd Annual Meeting was held in Dearborn, Michigan. There was a total attendance of 297, including 144 physicians, 112 members, 22 guests, and 10 residents. Additional registrants included 28 spouses and 98 exhibit personnel. All 35 exhibit booths were taken.

Sixty-three abstracts were submitted, and 23 were chosen for presentation. For the Guthrie Award, 13 submissions were made and one selected.

The Society continued the Past Presidents Breakfast for nine new members elected in 1997.

1999

At the September 1999 meeting of the Society in Chicago, Illinois, seven new members were admitted to the Society. New council members were elected as follows:

President-Elect - Patrick J. O’Hara (Ohio)
Councilor - Brian G. Rubin (St. Louis)
Secretary - John D. Corson (Iowa)

2000

As of June 8, 2000, the membership committee reported the current membership statistics:

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active</td>
<td>275</td>
</tr>
<tr>
<td>Honorary</td>
<td>001</td>
</tr>
<tr>
<td>Senior</td>
<td>102</td>
</tr>
<tr>
<td>Total</td>
<td>378</td>
</tr>
</tbody>
</table>

New members elected:

- 1977 - 009
- 1998 - 011
- 1999 - 007
- 2000 - 011 applicants

At the Council Meeting of June 10, 2000, held at the Royal York Hotel in Toronto, Canada, the council voiced continued concern about the impact of endovascular surgical procedures on the field of Vascular Surgery. The number of endovascular procedures performed by radiologists and cardiologists is steadily increasing. The council recommended that all vascular surgeons become trained and competent in endovascular procedures. The goal of the council was formally stated; i.e., that no vascular fellow should graduate from a vascular training program without an appropriate number of endovascular procedures. It was noted that as of the June 10, 2000 meeting, six of the 20 national vascular fellowship programs that train outside fellows in endovascular procedures came from the Midwestern Vascular Surgical Society.

For the year 2000, the most significant event was the first meeting of the Society outside of the Midwest. The meeting was scheduled for Scottsdale, Arizona, to celebrate the millennium. The format was established to be different from previous years. This will be a three-day meeting with a scientific assembly each morning with afternoons free.

At that meeting, the 24th Annual Meeting of the Society, Dr. Roy Greenberg from the Cleveland Clinic was invited to deliver the Honored Guest Lecture, on “Biomechanical Issues Associated with the Design and Development of Endovascular Aortic Grafts.”

Sixty-three abstracts were received for the Scottsdale meeting. Four abstracts were received for the Guthrie Award. The Council agreed that an abstract could be submitted for the Surgical Forum (ACS) and still be eligible for presentation at the Midwestern Vascular Surgical Society. In addition, poster presentations presented at the joint vascular meetings, but not published, would also be eligible for presentation at the Midwest meetings.

It was agreed that all 25 Presidents of the Society would be personally invited to the 24th Annual Meeting in Scottsdale, Arizona, in November, 2000. Their registration fee would be paid by the Society.
Dr. Pfeifer and Dr. Hallett reported on the status of the 25th Anniversary Book on the history of the Midwestern Vascular Surgical Society. This book will be a two-volume, leather-bound set. One book will be a biography of Charles Guthrie, and the other book will be the history of the Society. The W. L. Gore Company agreed to fund the entire project of 1,000 two-volume sets at a cost of over $30,000. The Society expressed its gratitude to the W. L. Gore Company for their continued support of our activities.

This printing of 1,000 sets will enable the Society to present a set to each member of the Society, as well as to present a set to each new member of the Society as they are admitted to membership. This presentation to new members will be possible for many years to come.

By the time of the 24th Annual Meeting in Scottsdale (November 2000), membership attendance in the Society was 378 (active-275, honorary-1, senior-102). There were now 20 vascular fellowship programs, with 23 fellows, in the Midwestern region. The Arizona meeting was deemed a success, but with membership slightly decreased from previous years.

2001

The September 2001 25th Anniversary Meeting in Chicago was clouded by the devastating terrorist attack on the World Trade Center in New York, Washington D.C., and Pennsylvania on September 11, 2001. It was determined that the meeting should go forward as scheduled. The meeting was held at the Fairmont Hotel in Chicago on September 21 and 22, 2001. Because of the tragic events ten days before, there were many group cancellations for other groups at the Fairmont, scheduled at the same time as the Midwestern Vascular Surgical Society. However, our meeting went on as scheduled, in an otherwise near-empty hotel. The Society was well represented. The total membership was now 382 (160 members, 20 guest physicians, 10 residents/fellows, 49 sponsors, and 3 allied health professionals).

At the opening of the first scientific session, just 10 days after the terrorist attack on the United States, the members and attendees stood for a minute of silence in remembrance of the victims of “9-11,” the second day in this nation’s history that will “live in infamy.”

Forty-one abstracts were received for the meeting with three for the Guthrie Award. Twenty-five papers were presented. The Honored Guest Lecture was presented by Louis G. D’Alecy, M.D., Ph.D., Co-Director of Surgical Research at William Beaumont Hospital in Royal Oak, Michigan, on the subject, “Improved ischemic outcomes at no cost and minimal risk.”

The Joint Vascular Surgical Societies established a Vascular Society Row to be featured in the exhibit area at each annual Joint Vascular Societies meeting. This is the responsibility of the Society archivists and historians.

A formal President’s dinner was held on September 20, 2001. Twenty Past-Presidents were in attendance. (All 25 Presidents were alive and well at the time of the 25th Anniversary of the Society.)

The entire group listened to a television broadcast by President Bush on the terrorist attacks. Dr. D. Emerick Szilagyi, the Founding President, now in his nineties, gave a brief presentation on the subject of endovascular grafting, with his conclusion that “arterial stent prostheses placed intraluminally in arterial structures do not become appropriately incorporated; and, therefore, their functional durability is limited.”

By the time of this meeting, a proposal had been developed for a separate board in Vascular Surgery (the American Board of Vascular Surgery). Dr. James Stanley, our Third President, was named by our Society as a Director on the proposed new board, and Dr. Gregorio A. Sicard, our 22nd President, was named an advisor to the board.

As many vascular surgeons were undecided about whether we should become a new independent Board of Vascular Surgery or remain under the existing American Board of Surgery, much discussion in the future is contemplated.

2002

By September 2002, an Endovascular Course was held in conjunction with the 26th Annual Meeting of the Society, chaired by Dr. Jon S. Matsumura of Northwestern University. The meeting was held in Madison, Wisconsin. There were 57 attendees at the Endovascular Course and the program was highly successful. A typed syllabus was given by course participants. At a meeting of the Council, consideration was given to sending a copy of future proceedings to all members of the Society. The course will be held on an annual basis.
As of the 2002 meeting, there were 251 active members, 27 active members outside the region, 59 senior members, and 69 senior members who were inactive and retired. Total membership was 408. Abstract submission in 2002 included 68 abstracts for the general assembly and 12 abstracts for the Guthrie Award.

President Timothy Baxter proposed that the structure of the Society Council be changed to include 12 state councilors, one for each state in the Midwestern Vascular Surgical Society area, to assist with recruiting new members. This may also be accomplished by forming a state councilor committee, thus there would not be a need to change the By-Laws.

The Council approved a Basic Science Session during the annual meeting. This would be a parallel session held at the same time as the Endovascular Session. The recommended Honored Guest lecture for 2003 was Donald D. Heistad, M.D., Editor of Atherosclerosis, Thrombosis, and Vascular Biology.

2003

At the combined meeting of the Society for Vascular Surgery and the American Association of Vascular Surgery in June of 2003, the concept of merging to a single vascular society was overwhelmingly approved by the membership. The new society was to be named The Society for Vascular Surgery. All members of both societies would become members. Future membership would be based on AAVS guidelines. This was a historic decision for the two national vascular societies.

The amended Constitution and By-Laws were approved at the annual member meeting in 2003 and are available in the 2004 annual historical book.

2004

At the annual meeting in Omaha, Nebraska, it was recommended that Fellows in Vascular Surgery be given automatic candidate memberships.

Prior to 2004, the endovascular course was not completely integrated into the annual Society meeting. At the 2004 meeting, the endovascular meeting was fully integrated into the Society meeting. (Forty-seven physicians attended this course in 2004.) Dr. Matsumura was honored for his great service in establishing this program.

A new screening program had previously been established by the American Vascular Association to create public awareness in vascular disease. The Lifeline Foundation has now merged with the American Vascular Association. At this annual meeting of the Midwestern Vascular Surgical Society, screening was conducted on volunteers, including ankle-brachial indices, carotid duplex scans, and duplex scans for aortic aneurysm.

The pressure was now on to establish an American Board of Vascular Surgery. The Society for Vascular Surgery reported that 70% of all vascular surgeons as well as over 70% of Vascular Program Directors are in favor of an American Board of Vascular Surgery. At the Midwestern Vascular Surgical Society council meeting, it was proposed that the Society support the development of a primary Certificate in Vascular Surgery. This vote was unanimous.

The concept of having State representatives was endorsed by the Executive Council. Representatives would have a term of three years and would be appointed by the President of the Society. One-third would be replaced every year to allow for continuity. The primary function would be lobbying efforts and for the use of the political action committee.

As of the September 9, 2004 meeting in Omaha, Nebraska, there were: 272 Active members, 26 Active members outside the region, 1 Honorary member, 54 Senior members, and 74 Senior members outside the region for a total membership of 427.

2005

At the annual meeting in Chicago, Illinois, there were now three membership categories: Active Members, Associate Members, and Candidate Members. Associate Members shall consist of allied health care professionals who have a major interest in peripheral vascular surgery and/or endovascular intervention. This group will include Vascular Nurses, RVTs, and Physician Assistants. Members are required to live within the geographic boundaries of the Society and must be proposed for membership by a member of the Society and endorsed by two other members.

Dr. Emerick Szilagyi, now in his nineties, one of the great founders of the discipline of Vascular Surgery, was driven to the annual meeting in September 2005 at the Intercontinental Hotel in Chicago. He attended to present the first annual Szilagyi Award at the annual meeting of the Society. The award is presented to the resident trainee who gives the best paper in clinical research.

Dr. Robert Hobson was approved for honorary membership in the Society.

As of the September 21, 2005 meeting in Chicago, Illinois, there were: 280 Active members, 29 Active members outside the region, 3 Honorary members, 31 Senior members, 75 Senior members outside the region, and 21 Associate members for a total membership of 439.
Since Chicago has historical had better attendance than other locations for the annual meeting, the members was polled to determine if they would like to meet every other or every third year in Chicago. The majority approved returning to Chicago every other year.

The society continues to grow with 283 Active Members, 47 Active members outside the region and exempt from dues, 13 Associate Members; 2 Honorary Members (2 honorary members passed away); 23Senior Members and 107 Senior Members that are either retired, inactive or living outside the region for a total of 551 members. The society will dearly miss Dr. William J. Fry from Ann Arbor and Dr. John R. Pfeifer from Livonia who have passed away during this last year.

2010

The annual meeting was conducted on September 10, 2010 in Indianapolis and called to order by Dr. Jon Matsumura.

The society is financially healthy with the success of the New Horizons course at the annual meeting, the TEVAR course and the change in dues instituted last year.

The TEVAR or thoracic endovascular course has been a great success for the society and will continue next year with three dates having been set.

Online membership dues and renewal was possible for the first time this year with mixed results since it was a change but will be continued as all societies are moving in this direction.

A need to support the SVS PAC by SVS members was presented by Dr. Carlo Dall’Olmo. This is our only societal specific method of impacting national political policies and debates.

The society members again increased to 580 members but the largest increase was in the senior members group. Since the associate membership has the largest potential for group an effort to attract such members resulted in suggesting that the New Horizon’s Course include a focused component for these members and a lunch meeting. Funds were set aside and registration fee waved for new Associate members to attend the meeting and for leaders to speak at the meeting.

Three members have passed away and will be dearly missed by the society: Dr. Emerick Szilagyi from Bloomfield Hills, Dr. Thomas E. Topper from Evansville and Dr. Vallee L. Willman from St. Louis.

2011

The annual meeting was conducted on September 1, 2011 in Chicago and called to order by Dr. Daniel J. Reddy.

Members have been concerned with a non-ABMS board called the American Board of Phlebology which is advertising the expertise of their members. The Society's Executive Committee is preparing to write a letter to the American Board of Surgery expressing concerns with the American Board of Phlebology and its statements and postures which may be misleading patients as to the certification of its members.
Dr. Raghu Motaganahalli presented a proposal to conduct a Vascular Specific Mock Oral examination at next year’s meeting. This would allow the integrated vascular surgery residents as well as fellows the opportunity to experience such an examination prior to the real event. There was a budget, program and method proposed which was accepted.

Some discussion of the SVS Vascular Quality Initiative under the umbrella of the SVS Patient Safety Organization was discussed as a potential way to improve patient outcomes.

The Society is 527 members strong with 293 Active members. There was a moment of silence for two members who have passed away this last year: Dr. John H. Hagerman from Toledo and Dr. Burl Dillard from St. Louis.

THE JOHN R. PFEIFER BEST VENOUS PAPER AWARD

The John R. Pfeifer Best Venous Paper Award is presented in honor of John R. Pfeifer, MD, Past Secretary and Historian of the Midwestern Vascular Surgical Society. The award is presented for the best research in venous disease.

2012 JOHN R. PFEIFER BEST VENOUS PAPER AWARD

Clinical Evaluation of Suspected DVT Guides the Decision to Prophylactically Anticoagulate But Does Not Impact the Decision to Perform After Hours Duplex Venous Scanning or Increase Its Yield

Michael R. Go, MD
Dennis Kiser
Patrick Wald
Mounir J. Haurani, MD
Mark Moseley, MD
Bhagwan Satiani, MD

From: Department of Surgery, the Ohio State University, Columbus, OH

Previous Recipients of the John R. Pfeifer Best Venous Paper Award

2011 Judith C. Lin, MD
Henry Ford Hospital, Detroit, MI
Vein Mapping Prior To Endovenous Catheter Ablation of Great Saphenous Vein Predicts Risk of Endovenous Heat-induced Thrombus

2010 David Vogel, MD
Jobst Vascular Center and Toledo Hospital, Toledo, OH
Common Femoral Endovenectomy with Iliocaval Endoluminal Recanalization Improves Symptoms and Quality of Life in Patients with Postthrombotic Iliofemoral Obstruction

2009 Nina Grewel, MD
Jobst Vascular Center and Toledo Hospital, Toledo, OH
Successful Thrombolysis of Iliofemoral Deep Venous Thrombosis Reduces Postthrombotic Morbidity
CHARLES C. GUTHRIE AWARD

The Charles C. Guthrie Award for Outstanding Research in Vascular Surgery is presented to the resident or fellow with the most outstanding Basic Research paper in vascular surgery. This work has been done during the resident’s training years.

2012 CHARLES C. GUTHRIE AWARD
Response of Neointimal Hyperplasia and the Adventitial Sca1+ Stem Cell to Nitric Oxide

Nathaniel C. Koo, MD
George E. Havelka, MD
Janet Martinez
Megan Flynn
Melina R. Kibbe, MD

From: Northwestern University, Chicago, IL

PREVIOUS RECIPIENTS OF THE CHARLES C. GUTHRIE AWARD

1981 UNIVERSITY OF MICHIGAN MEDICAL SCHOOL
LINDA M. GRAHAM, M.D.
Expanded polytetrafluoroethylene vascular prostheses seeded with enzymatically derived, and cultured, canine endothelial cells.

1982 LOYOLA UNIVERSITY MEDICAL CENTER
RICHARD A. JORGENSEN, M.D.,
Quantitative correlation between shear force and histologic injury produced by balloon embolectomy catheters.

1984 UNIVERSITY OF CINCINNATI
JOHN E. ROSENMAN, M.D.
Kinetics of endothelial cell seeding.

1985 MEDICAL COLLEGE OF WISCONSIN
DAVID D. SCHMIDT, M.D.
ARCH J. PEQUET, M.D.
Bacterial adherence to vascular prostheses: a determinant of graft infectivity.

1987 UNIVERSITY OF CHICAGO
PHILLIP J. COZZI, M.D.
Aortic wall metabolism in relation to susceptibility and resistance to experimental atherosclerosis.

1988 UNIVERSITY OF CINCINNATI MEDICAL CENTER
ROBERT B. PATTERSON, M.D.
The limitations of impedance plethysmography in the diagnosis of acute deep venous thrombosis.

1989 INDIANA UNIVERSITY MEDICAL CENTER
TODD S. WEINSTEIN, M.D.
Improved endothelial cell retention and graft patency in leukopenic dogs: a study on prostheses endothelialized in tissue culture.

1990 WILLIAM BEAUMONT HOSPITAL - ROYAL OAK, MI
ROBERT FIETSAM, M.D.
TIMOTHY RANVAL, M.D.
Hemodynamic effects of primary closure versus patch angioplasty of the carotid artery.
Effects of immunosuppression on endothelial healing of small diameter eptfe grafts.

1992  VA MEDICAL CENTER, CASE WESTERN RESERVE UNIVERSITY, CLEVELAND CLINIC
DAVID A. MARGOLIN, M.D.
BRAM R. KAUFMAN, M.D.
PAUL L. FOX, Ph.D.
LINDA M. GRAHAM, M.D.
Increased pdgf production and intimal thickness during healing of dacron graft in a canine model.

1993  NORTHWESTERN UNIVERSITY MEDICAL SCHOOL, CHICAGO, IL
RICHARD R. KEEN, M.D.
KEVIN D. NOLAN, M.D.
MARIA CIPOLLONE, B.S.
ELIZABETH SCOTT, M.D.
VERA P. SHIVELY, M.S.
JAMES S. T. YAO, M.D., Ph.D.
WILLIAM H. PEARCE, M.D.
Interleukin 1b induces differential gene expression in aortic smooth muscle cells which promotes aneurysm formation.

1995  LOYOLA UNIVERSITY MEDICAL CENTER, MAYWOOD, IL
PETER H. LIN, M.D.
DEWEI REN, M.D.
MARK K. HIRKO, M.D.
STEVE KANG, M.D.
HOWARD P. GREISLER, M.D.
Inhibition of vascular smooth muscle cell but not endothelial cell growth by basic fibroblast growth factor-saporin mitotoxin in a co-culture model.

1996  UNIVERSITY OF MICHIGAN MEDICAL CENTER, ANN ARBOR, MI
L. JOSEPH DOWNING, M.D.
Anti-p selectin antibody decreases inflammation and thrombus formation in deep venous thrombosis.

1997  HENRY FORD HOSPITAL, DETROIT, MI
IRAKLIS I. PIPINOS, M.D.
TIMOTHY J. NYPAVER, M.D.
SAYED K. MOHSIN, M.D.
OSCAR A. CARRETERO, M.D.
WILLIAM H. BEIERWALTES, Ph.D.
Depressor response to sustained losartan treatment in chronic renovascular hypertension predicts success of surgical repair.

1998  LOYOLA UNIVERSITY MEDICAL CENTER, MAYWOOD, IL
PAULA K. SHIREMAN, M.D.
BRIAN HAMPTON, Ph.D.
WILSON H. BURGESS, Ph.D.
HOWARD P. GREISLER, M.D.
Modulation of cell growth kinetics by local cytokine delivery from fibrin glue suspensions.

1999  HENRY FORD HOSPITAL, DETROIT, MI
LYNN H. SHIN, M.D.
TIMOTHY J. NYPAVER, M.D.
OSCAR A. CARETERO, M.D.
WILLIAM H. BEIERWALTES, Ph.D.
PETER S. DOVGAN, M.D.
Role of neuropeptide-y in the development of 2k, 1c renovascular hypertension.

2000  UNIVERSITY OF CHICAGO, SECTION OF VASCULAR SURGERY, CHICAGO, IL
SHARI L. MEYERSON, M.D.
CHRISTOPHER L. SKELLY, M.D.
UNSAR SHAKUR, B.A.
JAMES E. VOSICKY
SEYMOUR GLAGOV, M.D.
LEWIS B. SCHWARTZ, M.D.
The effects of extremely low shear stress on cellular proliferation and neointimal thickening in the failing bypass graft.
2001  LOYOLA UNIVERSITY MEDICAL CENTER, MAYWOOD, IL  
SUNG KWON, M.D.  
LIAN XUE, M.D.  
APOSTOLOS K. TASSIOPOULOS, M.D.  
HOWARD P. GREISLER, M.D.  
Chemoataxis of endothelial cells and vascular smooth muscle cells using an under-fibrin glue assay.

2002  HENRY FORD HOSPITAL, DETROIT, MI  
HECTOR M. DOURRON, M.D.  
GARY M. JACOBSON, M.D.  
DANIEL J. REDDY, M.D.  
PATRICK J. PAGANO, M.D.  
Adventitial gene transfer of NAD(ph) oxidase inhibitor suppresses balloon injury-induced neointimal proliferation in the rat carotid artery.

2003  WASHINGTON UNIVERSITY, SCHOOL OF MEDICINE, ST. LOUIS, MO  
TAREK S. ABSI, M.D.  
Alterations in gene expression associated with the transition from normal to aneurysmal aorta: study of type iii thoracoabdominal aortic aneurysms.

2004  LOYOLA UNIVERSITY MEDICAL CENTER, MAYWOOD, IL  
LUIS R. LEON, JR., M.D.  
To What Extent Has EVAR Influenced AAA Management in the State of Illinois?

2005  UNIVERSITY OF MICHIGAN, ANN ARBOR, MI  
JOHN E. RECTENWALD, M.D.  
Inflammatory Mediators of Neointimal Hyperplasia in Pulmonary Embolism

2006  UNIVERSITY OF CHICAGO, CHICAGO, IL  
AMITO CHANDIWAL, MD  
Balloon Injury With Low Shear Stress Augments Neointimal Thickening in Carotid Arteries

2007  UNIVERSITY OF CHICAGO, CHICAGO, IL  
WAEL E. SHAALAN, MD  
Novel Endovascular Arteriovenous Access Inhibits Experimental In-Vivo Turbulence-Induced Veno Wall Vibration and Venous Intimal Hyperplasia

2008  TEMPLE UNIVERSITY HOSPITAL, PHILADELPHIA, PA  
JOHN C. WANG, MD  
Effect of Positional Changes across Joints on In Vivo Graft Blood Flow Using Implanted Sensors

2009  CLEVELAND CLINIC, CLEVELAND, OH  
MOHSEN BANNAZADEH, MD.  
Identification of the Ideal Bioabsorbable Material and Solute for a Bioabsorbable Self Expanding Stent

2010  UNIVERSITY OF MICHIGAN, ANN ARBOR, MI  
PAUL D. DIMUSTO, MD  
Increased JNK in Males Compared with Females in a Rodent Model of Abdominal Aortic Aneurysm

2011  UNIVERSITY OF WISCONSIN, MADISON, WI  
PASITHORN AMY SUWANABOL, MD  
A Novel Mechanism for TGF-beta/Smad3 in the Development of Intimal Hyperplasia
MIDWESTERN VASCULAR SURGICAL SOCIETY

The D. Emerick Szilagyi Award
Established 2005

The D. Emerick Szilagyi Award is presented to a resident or fellow with the most outstanding Clinical research presentation at the annual meeting. This work has been done during the resident's training years.

2012 D. E M E R I C K S z I L A G Y I A W A R D
FOR CLINICAL RESEARCH

Effectiveness of Isolated Pectoralis Minor Tenotomy (PMT) in Selected Patients with Neurogenic Thoracic Outlet Syndrome (NTOS)

Chandu Vemuri, MD
Anna M. Wittenberg
Francis J. Caputo, MD
Valerie B. Emery, RN
Robert W. Thompson, MD

From: Department of Surgery, Washington University in Saint Louis, MO

PREVIOUS RECIPIENTS OF THE D. EMERICK SZILAGYI AWARD

2004 UNIVERSITY OF MICHIGAN, ANN ARBOR, MI
JOHN E. RECTENWALD, M.D.
Inflammatory Medication of Neointimal Hyperplasia after Pulmonary Embolism: The Case for Low Molecular Weight Heparin

2005 NORTHWESTERN UNIVERSITY, FEINBERG SCHOOL OF MEDICINE
BRIAN G. PETERSON, M.D.
Utility of Subclavian Artery Transposition in Association with Endoluminal Repair of Acute and Chronic Thoracic Aortic Pathology
(The Midwestern Vascular Surgical Society expresses its sincere apology to Dr. Peterson for being omitted from the 2006 Program Book)

2006 HENRY FORD HOSPITAL, DETROIT, MI
STAVROS K. KAKKOS, MD

2007 UNIVERSITY OF MICHIGAN, ANN ARBOR, MI
DAWN M. BARNES, MD
Renal Malperfusion Following Aortic Dissection: Incidence and Endovascular Intervention.

2008 WASHINGTON UNIVERSITY, SAINT LOUIS, MO
BRADLEY G. THOMAS, MD
Endovascular Graft Migration: Aortic Cuffs are not Always the Answer.

2009 WASHINGTON UNIVERSITY, SAINT LOUIS, MO
JEFFREY JIM, MD
EVAR for Large Aortic Necks: A Prospective 5 Year Comparison

2010 HENRY FORD HOSPITAL, DETROIT, MI
SHAHAB TOURSAVADKOHL, MD
Lower Extremity Microembolism in Open vs. Endovascular Abdominal Aortic Aneurysm (AAA) Repair

2011 INDIANA UNIVERSITY SCHOOL OF MEDICINE, INDIANAPOLIS, IN
ANDREA L. JESTER
Autologous Bone Marrow Mononuclear Cell Therapy Produces Durable Benefits in Limb Salvage at Five Years Post-Treatment
MIDWESTERN VASCULAR SURGICAL SOCIETY

WEB PAGE

MVSS Web Page History
September, 1998
Joseph Schneider, M.D.

Brief History of the MVSS Web Page
The Vascular Surgery World Wide Web project was first proposed by Dr. Richard Kempczinski and approved by the Joint Council of the SVS and NA-ISCVS in 1996. While significant milestones have been reached, there have been a few glitches. The original page designers appeared to everyone to be unresponsive to our needs. This contractor was discharged during summer, 1997, and another contractor was hired. The new contractor seemed to get the transition pretty well during the last half of 1997, but there has been little progress since the first of this year. The webmaster had planned a “Case of the Month” feature, a calendar, a job listing, and many other things. Finally, the second contractor is now “getting out of the business,” and while they will reportedly carry the project for up to six more months, a new support company must be found and nothing new is likely to happen until a new contractor is found. The Journal of Vascular Surgery portion of the project will likely be taken over completely by Mosby.

Current Status
A home page exists (http://www.vascorg.org/) with links to all affiliated societies, including the MVSS and other regional societies, the Canadian Vascular Society, PVSS, SCVS, and the American Venous Forum. There are also links for Journal of Vascular Surgery, Lifeline Foundation, Research Forum, and the Association of Program Directors. An earlier plan (fall, 1997) had envisioned that page editors would be trained and licensed to manipulate their own societies’ files, such as rosters, programs, histories, et cetera. It has become apparent that very few members -- in fact, very few current page editors -- are prepared to do this. Furthermore, while there is significant web page maintenance work at the SVS/NA-ISCVS Joint Council level of the project, for the purposes of a regional society such as the MVSS, the largest projected maintenance involves the program for the annual meeting with much lesser amounts of work required for roster maintenance, executive committee roster, society history, et cetera. Thus, it may be unnecessary and inefficient for societies to invest in training, license, and travel costs to train each page editor, especially since page editors will likely change periodically as the project matures.

What’s Next?
It is my understanding that a separate contractor with a well-developed methodology to allow on-line submission of abstracts has already been retained for the joint June meeting. This company reportedly handles web-based electronic receipt of the abstracts and printing for distribution to the Program Committee. The abstracts would be submitted in digital format, making it a relatively simple task to typeset the program and also to post it on the web. My discussion with PR/RI, the organization in Manchester, Massachusetts, that provides administrative support for SVS, NA-ISCVS, MVSS, and most of the other affiliated societies, suggests that electronic submission may not be an appropriate choice for regional society meetings due to cost (about $15,000 for the joint June meeting), but we could certainly investigate this. Electronic submission has many potential benefits and might actually person-hours at PR/RI and cut significantly into typesetting costs, and I suggested this might result in a net savings even for regional meetings.

The PR/RI representative suggested she could contact the company, perhaps exploring some arrangement to allow us and other affiliated societies to “hitch a ride” with the Joint Council. I believe we should discuss this further with PR/RI, perhaps directly with the independent contractor, and watch carefully the results of implementing this for the June, 1999 joint meeting.

On-line registration is possible using the web interface, but raises significant difficulties in the area of credit card security. PR/RI has been asked by the Joint Council of the SVS/NA-ISCVS to outsource registration for the June meeting and electronic registration capabilities will depend upon the outsource company. Given the size of the MVSS meeting, I personally doubt that electronic registration will make sense in the near future.

Web Page Maintenance at the Regional and Affiliated Society Level
PR/RI now has a designated Web Site Administrator. I spoke with her, thinking I would get the typesetter’s MVSS Annual Program Booklet file from her or some else at PR/RI and convert it to html (the standard format for web pages) myself, but the PR/RI Web Site Administrator volunteered to do it. She completed the project in about 4.5 hours of work time and our program was posted within 48 hours of my conversation with her. Her work on the MVSS web page over the last few months includes updating the executive roster, the preliminary program, and the final program abstracts, resulting in charges that are not excessive, in my judgment, and are comparable to the yearly license fee, not even considering training for the page editor.

Impressions and Recommendations
It is my understanding that PR/RI is proceeding in the direction of recruiting a full-time person for web page management for internally managed societies, including the Joint Council. Recent work on our program may have been done as an experiment to see how long it would actually take. Given the existence of a site administrator at PR/RI, the project’s move to electronic abstract submission for the joint June meeting, and the remarkably smooth first try at posting our meeting program, I have recommended that we discuss page maintenance at PR/RI with PR/RI. I think this would be a much more efficient and reliable approach than to consider training all the web page editors. I believe we need to discuss the budget impact of these decisions with PR/RI, but the time required to post this year’s program and the charges for this year suggest this would not result in a major budget impact for the MVSS.

I believe we are fundamentally different from organizations that are trying to sell a product. They advertise and sell their products and services using the web and budget millions of dollars for web pages in some cases. We may get some public relations exposure and may actually provide information to patients and other physicians searching the web for information on vascular disease and vascular surgery, but I think the most potential value is to our members. The use of electronic submission would streamline the abstract submission process. Posting of information about future meetings, including hotel information, is fairly easily done for many organizations like ours. On-line registration could be accomplished if the security issues could be settled, but may not be worth the effort. However, we may have a tough time selling the idea that this brings value to our society and members without a real budget and if we can’t, at a minimum, get the abstract submission and program generation electronic.

I also believe we ought to urge that members begin to receive communications by e-mail. I recognize
that some of our members would object to use of electronic mail, but the requirement for e-mail by
payers is inevitable and surgeons will have to have electronic mail if they want to stay in practice. They
might as well start with us, their friends. I would suggest that we discuss some way to influence our
members to get connected if they are not already, and that we move aggressively toward electronic
communications. Finally, I would respectfully suggest, if these ideas can be embraced by the Executive
of this Society, that we ask our representatives to carry the same message to the Joint Council.

MVSS Web Page History
June 9, 2000

There have been only two events of import affecting the Web Page since the last report of September,
1999. The first is that the Case of the Month has been implemented. I have tried this once and found it
to be nicely done. The opinions and comments of the responders are accumulated so that viewers can
see the consensus or lack thereof among prior responders. The hope is that this becomes the central
iclearing house for interesting cases with imaging and, when appropriate, pathology or photographs.
The second event of import was the resignation of Alan Brady, the PRRI web person. Thus, the project
is suspended until he is replaced.

The link to the Mosby and Journal of Vascular Surgery gets one to the ifront end,l but I have yet to get
to the full text of the journal because of apparent password problems. I tend to log on when I get home
at night and no one answers the phone at the Mosby help line at that time so I have not personally
solved this problem yet. The member roster was improved some time ago and is quite functional, even
allowing some inquiries by non-Society members.

We do need to serve our members, and at least at the regional society level, this is fairly straightforward.
The annual meeting material must be updated individually once yearly. Since most of the other material
posted changes rarely, if at all, the roster comes from the master joint database for the most part and
Executive Committee rosters are easily updated individually.

I continue to view the project as a disappointment, a view that I know is shared by Dick Kempczinski.
One has only to look at the SCIIVR or American College of Cardiology pages to see how far behind
we are. While SCIIVR's page contains a lot of blatant advertising, it is functional and user friendly for
non-physicians. The material on the Vascular Society page that is available to and appropriate for non-
vascular surgeons (including patients) remains somewhat limited. I have spoken with many people
who have decided to strike out on their own with their own web pages, believing that iWe must be in
the market.i These people share my frustration since the power of this medium is being grossly
underutilized. There was never any response to the letter that we sent to the Joint Council relating our
frustrations with the web page. I can only think that the situation will never improve until an interested
party who recognizes the potential of the web is the President of the SVS or NA-ISCVS and he or she
or their designee can devote a fair amount of time to administering the page.

The summary report of the MVSS portion of the project so far requested by Dr. Pfeifer for inclusion in
the 25th Anniversary Book will be completed within a few weeks.

Respectfully submitted by Joe Schneider

that some of our members would object to use of electronic mail, but the requirement for e-mail by
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the 25th Anniversary Book will be completed within a few weeks.

Respectfully submitted by Joe Schneider
Multiple previous reports to the MVSS Executive regarding the World Wide Web presence of the MVSS at VascularWeb were included in the Twenty-fifth Anniversary volumes in 2001. There have been twice-yearly reports to the Executive Committee since those volumes were published. The following is the text of those reports.

Joseph R. Schneider
September, 2001

VascularWeb was discussed at the Executive Committee of the Midwestern Vascular Surgical Society on Thursday, September 20, 2001. In addition to this Executive Committee meeting, I participated in a conference call on September 27, 2001, which involved Alyssa Awe of PRRI, Mary Greene of MedBiquitous, one of the MedBiquitous developers, and Lynette Dangerfield, Dr. William Pearce’s assistant. I was asked several questions at the MVSS Executive meeting about the specifics of the Midwestern participation in the VascularWeb. One was the question of when the site would go “up”.

The site is scheduled to be the next site to go up and, while I personally was anticipating it would be live before this meeting, my clinical activities and academic activities were such that I really did not have a chance to pursue this over the few weeks before the meeting. I had subsequently checked on this and learned that there were some administrative issues with the participation agreement which reportedly had been signed in advance by Dr. O’Hara several weeks ago but which apparently had not been received in the appropriate spots. I have subsequently had multiple exchanges of electronic mail with Dr. O’Hara and Dr. Zelenock and I believe that this problem will be solved shortly.

There were also questions at the Executive Committee about the propriety of a link to a specific site that then asks for donations for research (Tilson’s aneurysm site was cited) or, alternatively, may have some commercial content. I believe that the consensus of opinion in the Executive Committee was that first order hyperlinks from Midwest Vascular or other VascularWeb components should not include requests for money for individual investigators nor should they be for commercial enterprises. I have transmitted that information to Dr. Pearce and, again, during the conference call today to the participants in that conference call.

There were many questions about the management of the MVSS meeting and, specifically, management of abstracts. The MedBiquitous tools at this time allow electronic submission of abstracts and also allow electronic scoring and management of the program in that way. There have been some concerns about the flexibility of the tool as it has been used by CTS.net and, so, the tool is being made more robust and more flexible and, in fact, the WYSIWYG editor that is available in the MedBiquitous package will be available for creation of abstracts.

Hopefully, this will allow people to create normal text and tables. My recollection is that placing figures would be somewhat difficult because it would have involved providing a different operating system access (UNIX) for users. As noted above, the new package is currently in testing and will be going live within the next two weeks and, in fact, we will have a “real time” test with the American Society of the Head and Neck. For those of you who would like to have a look at this site, the URL is www.headandneckcancer.org. I feel quite certain that this tool will be useful for the national meeting abstract deadline which, of course, will be this winter and, obviously, it should be ready for us to use in May of 2002. With respect to electronic registration, this is something that MedBiquitous has on their agenda for later this year and early next year and, hopefully, this will be available for us by the next meeting.

The conference call today involved a review of the basic template for Midwest Vascular. We looked at the current template for the American Association for Vascular Surgery and Society for Vascular Surgery. The basic menus that were available for those pages appear to be appropriate for us except for “Clinical Guidelines” for which I think we ought to defer to the national site. Consequently, I would recommend that this menu item be hidden on the MVSS page. The “Other Website” link will simply be back to a single uniform link at the level of the National Society pages. We talked about the Committee link and there will be both private and public parts of that link.

We may ask committee members to provide a brief description of the work of that committee but, perhaps more importantly, the work of the committee can be handled through the private portion of the site which would involve links to the roster of the membership of the committee, the ability to send e-mails back and forth and to make documents available that may be of interest to specific committees. I see this as something that we should learn how to do as a different way to manage our society and the work of our society instead of continuing to send letters or even standard e-mails in a “seat of the pants” fashion. I had told the participants in the conference call that I would ask Dr. Zelenock if he felt that public education should be a menu or whether this should simply be deferred back to the national site. I discussed the issue of first order links having requests for money or commercial content and Mary Greene raised the same issue with the VSEP link that is essentially the only content on the CME page. Lynette Dangerfield is going to bring this issue to Bill Pearce’s attention. I think it is something that the Executive Editor will want to discuss with the Assistant Executive Editors and other participants in the VascularWeb.

The MVSS site will be ready for content within the next two weeks and so we have assembled a fair amount of content including the history of the society, the bylaws, roster and other sources of information. There is a question about whether we should buy the URL mvss.org from a company that presently owns it and Mary Greene will check into the cost of this. The alternative would be to use another URL name such as mvss.vascsurg.org which is what had to be done with the AAVS.

I hope to provide further reports once the site has gone live. I would expect to provide a written report to the Executive Committee members prior to the next meeting of the Executive Committee which I anticipate would not be before June of 2002.

June 8, 2002

I have appended my written report from September 2001 reflecting the discussion at the fall Executive Committee meeting and follow-up of the issues discussed. The following is a brief update of events since late September 2001.

The Midwestern Vascular Surgical Society spoke of VascularWeb, www.mvss.org went live on November 21, 2001. We were the first regional society to go up. I think it is fair and accurate to say that it went up without a hitch. We were fortunate to be able to purchase the URL with the mvss name. The home page is the following:
This has the same format as the SVS and AA VS pages. I think it has a very professional appearance and is easy to navigate. The links to the annual meeting including electronic submission of abstracts appear quite straightforward to me.

With respect to the content and pages that some MVSS Executives considered too commercial, these are not visible from the MVSS page. While there are frankly commercial sites that can be accessed from the VascularWeb Home Page, there now appear to be multiple links on the Product Forum page and all are now second order links from the Home Page. The VSEP remains the only CME choice, but it is also made as a second order link.

Electronic abstract submission was available for the first time this year. We look forward to Terri Rojas’ report of this year’s abstract submission process, which allowed either electronic or paper submission. I personally had trouble submitting our abstract using Netscape Communicator 4.7 and informed Mary Greene of this. I had no trouble when I switched to Internet Explorer. I would respectfully suggest (pending Terri’s report) that abstract/Program management will be greatly facilitated by allowing only electronic submission and would recommend electronic only for 2003. I have not inquired about the details of posting the abstracts and the rest of the program for the September meeting, but I was assured in the past by Mary Greene that this would be easily accomplished. I believe our program has been posted on the web prior to the meeting for the last two years when PRRI was managing abstracts and generation of the program.

As detailed in a recent mailing to the MVSS membership, only about 35% of members have an e-mail address known to Boston Based. Furthermore, a test e-mail message broadcast to all of those MVSS members showed that about 20% of the e-mail addresses were invalid. The fraction of SVS members with e-mail addresses in the PRRI database is slightly greater with a similar rate of invalid addresses. My perspective is that we and nearly all other professional societies will move to all electronic communication within a few years. I would respectfully suggest that we discuss a plan and its implementation with a target of all electronic communication within two years or less.

All MVSS members also received passwords for access to the first level of restricted material on VascularWeb including access to restricted portions of the membership roster. I have not requested user statistics or surveyed the members about ease of use, but I have found this quite useful and easy. I have no new information about electronic registration.

Committee communication tools appear fully functional (please see notes from the September, 2000 report). These tools could significantly facilitate the work of a high activity committee. However, in view of the less frequent information and document traffic for regional society committees, the use of these tools may not be considered practical, but can be made available if Committees wish to use them.

Content is always an issue for web pages. Our basic information doesn’t change, but it is helpful to have some new material on the Home Page fairly often. This is difficult for all of us, but I would be delighted to arrange posting of any material that members of the Executive supply. Please keep all documents less than 300 words for these web documents.

The Editorial Board of VascularWeb is tentatively scheduled to meet on Monday at 2:00 p.m. I believe I am allowed to say that K. Wayne Johnston will be introduced as the new Executive Editor at that meeting.

September 12, 2002

There have been few changes in VascularWeb since the last report of June 2002. Bill Pearce will step down and K. Wayne Johnston will assume Executive Editorship of VascularWeb at the end of this year. Some changes made after the June meeting of the Editorial Board seem to have displaced some of the MVSS fundamentals such as society history and photos of the Executive and past Presidents from the page. I have made a few e-mail inquiries about this, but have yet to resolve the apparent problems.

MVSS received an invoice for $1700 for on-line abstract submission for this year’s meeting. I believe the invoice came from the Joint Council. This was inconsistent with my understanding of what would be provided to VascularWeb member societies. We had believed that this would be provided without charge. We protested and I asked Mary Greene why we had been charged. Her response was that the contract with Cormed provided on-line abstract management for two meetings per year. This year’s allotment was filled with the June joint meeting and subsequent Western Vascular Society meeting. It was decided in consultation with President Zelenock and Secretary Corson, that no further response would be made until the MVSS Executive Committee had approved a response.

Despite our prior impression, I would guess that examination of the contract with Cormed would indicate that Mary Greene is correct, i.e., abstract management is not a free service for VascularWeb members. It seems to us that if regional societies are to be charged that all should be charged equally.
and the “first in” should not be provided service at no charge, as the Western seems to have been this year. At a minimum, charges should be (and should have been) estimated and we should have been informed prior to use of the service. I cannot imagine that we would not continue to use on-line submission, as discussed at the June meeting, we hope to require on-line submission for next year’s meeting. Terri Rojas and I will respond as directed by the Executive Committee.

**May 15, 2003**

The last few months have seen the apparent demise of Cormed, our prior web page designer and maintenance company. The demise of Cormed required a rapid response, ably handled by Terri Rojas, who recruited an alternative vendor for the electronic abstract admissions. The abstract management fees were about $1,700, essentially the same as we were charged by Cormed last year, as you recall, a surprise at that time. I am sure that the process of abstract submission will be discussed in depth at the meeting but my perspective as a submitter, was that it was extremely easy and the only problem was the limitation of 250 words.

K. Wayne Johnston is taking over the Vascular Web Project. I have recently received correspondence from Dr. Johnston informing us that he does not anticipate a meeting of the assistant editors/section editors of this year’s June vascular meeting. I will keep the MVSS updated and would hope to have a progress report by the time of the September 2003 meeting.

I have not yet discussed posting of the September Program with Terri, but I would not think it difficult to post this as we did in the past. The Program could presumably be posted as soon as the Program markup is completed.

**September 17, 2003**

As we discussed in June, Cormed is bankrupt. It is my understanding after discussing this with Wayne Johnston that VascularWeb is currently being hosted by PRRI. Obviously, this is a situation that might change as the SVS and AAVS merge and establish their own administrative structure. I doubt we will continue to use any of the other administrative services that have been provided by PRRI in the past as we transition to one society with in-house management and I would doubt that the new SVS would maintain a relationship with PRRI that would be no more than hosting our web presence.

I have had two recent conversations and some e-mail exchanges with K. Wayne Johnston regarding VascularWeb. He has recovered from his tenure as Editor of Journal of Vascular Surgery, but he is presently busy as an associate editor of the 6th Edition of Rutherford. Chapter drafts were due on Monday of this week and final versions are due before the end of the year. I suspect this will be taking much of his time. However, he has selected a content management application that we will be able/expected to use to manage VascularWeb. Terri has managed this content admirably already and the tools continue to improve in terms of ease of use. There is no plan to include abstract management or electronic registration as part of the VascularWeb package, but these functions have been available from other vendors at costs to be discussed at this meeting, but they do not appear to me to be exorbitant. The real challenge will be to get people to identify content, change it frequently and keep VascularWeb fresh. I am hopeful that Wayne is the man to invigorate VascularWeb.

Terri posted the preliminary program for this year’s meeting on our web page. We could post the final program with abstracts for future meetings.

Terri has received a number of replies from her survey of users of this year’s electronic abstract submission process. I have discussed those results with her only briefly, but the consensus seems to be that 250 words is too restrictive.

Terri Rojas reported earlier during this meeting on this year’s experience with electronic registration. I have asked for and received clarification regarding electronic registration and with the permission of the Executive Committee, I have amended this report accordingly. Approximately 50 of a total of about 245 registrations including industry exhibitors used paper registration, implying that about 80% used the web. However, as we have been discussing for years, we still have a majority of members without e-mail or without e-mail addresses known to us. I would respectfully suggest that sooner or later we will make the decision that all correspondence will be electronic and I would urge sooner. It is had to believe that any member doesn’t have a computer by now. Cable or DSL access is cheap and e-mail can be free. We can’t be 21st century surgeons with 19th century communications.

**June 2, 2004**

There have been many changes in VascularWeb since the last report of September, 2003 and many more are in store. The “Editorial Board” of VascularWeb no longer exists and those of us receiving correspondence and invitations to VascularWeb meetings would appear to be an ad hoc group at present, but I am quite certain this will be formalized soon. Nearly all of the following comes from the proceedings of a meeting held from 9-10 AM on June 2, 2004 and attended by individuals invited by K. Wayne Johnston. Several MVSS participants including Pat O’Hara, Terri Rojas, Ken Ouriel, Jon Matsumura, Gary Seabrook, and Joe Schneider attended the meeting. Terri has been an integral supportive participant in the changes being made by Wayne Johnston.

The site has been moved after failure of CorMed (see last September’s report), but still has the basic look of the site as designed by CorMed. K. Wayne Johnston’s perspective is that the new vendor is much more supportive than our prior vendor was. The project budget has been nearly $300,000 for each of the last 3 years and Wayne’s perspective is that given this investment, the SVS Council will likely begin to put pressure on us and more carefully scrutinize our productivity. A significant portion of last year’s expenditure was for purchase of a content management program, which appears to be straightforward enough for non-technical people to easily manipulate content. There were about 800 visits to the site each day just after moving to the new host and this has increased to about 1400 per day at present. There is general agreement that the home page is too “busy” and a major effort will be made to simplify this and in particular make it easy for patients to see where they need to go to get information.

The member roster, which had become outdated (non-current data for many regional and SVS members) disappeared for several months and has recently reappeared, but the problem of multiple outdated databases remains. This will be resolved within the month, as all the appropriate databases will be merged. Links to the various journals have been improved and there is now said to be a “single sign on”, i.e., subscribers to print versions can reportedly sign on once and have access to all journals to which they subscribe after initial activation. I have not tested this. These functions may be less important to those with access to good medical libraries (like the Galter Library at Northwestern), since they may have full text access to multiple journals even if they do not have print subscriptions. However, these links are likely to be useful to members without on-line access to a good medical library. The link icon is still present for Cardiovascular Surgery, although that journal is now defunct.
Patient oriented material has been a problem, but this appears to have been substantially enhanced. In addition to short explanatory articles, there are now context appropriate links to the National Library of Medicine and to the NIH with a list of active studies. This is to be further emphasized as the site goes through a major revision over the next several months. A contract has been signed with Reuters to provide selected health related articles and negotiations are underway with North Point Domain, another content supplier with material written at 9th grade level for patients. Dr. Pat O’Hara has been and will continue to be involved in this part of the project in particular.

The APDVS page is now active. There is a curriculum with supporting material and it is clear from the usage statistics that program directors and trainees are using the site.

The site now uses Google as its search engine because it’s free. This does not cause transfer out of VascularWeb, but viewers see Google and not our logo. Wayne is researching alternatives that would be inexpensive, but would allow us to present our logo and not Google’s.

There has been some discussion about Web submission forms that would be straightforward form completion and allow submission by anyone. My concern expressed to Wayne was that unrestricted submission would open a spigot that would be difficult to close and have respectively suggested that some editorial oversight will be necessary for submissions from those without an identified role in VascularWeb or a member society.

The Government Relations link is quite robust thanks to Bob Zwolak and the members of his committee including Gary Seabrook of MVSS. I think all will agree that this Committee may be the best return on investment ever in the history of these societies.

Other sections were specifically mentioned as areas for improvement. The Research Section is a challenge. The Industry page is also a priority, hoping to get companies to provide pertinent product names, courses they sponsor with dates and contact information, clinical trial updates, and possibly some editorial oversight will be necessary for submissions from those without an identified role in VascularWeb or a member society.

Wayne’s request earlier today was that each entity (including the MVSS) identify an individual (“a doctor”) and, hopefully, the appropriate administrative assistant with responsibility for VascularWeb activities. In the case of the MVSS, I would respectfully assume the “doctor” would be me until such time as the Executive chooses to replace me, and the administrative support person would presumably be Terri Rojas or her designate at Boston Based. Wayne has expressed his view that there has not been enough activity/contribution from some members of VascularWeb and I am quite sure I am on that list. However, I am encouraged by the leadership I see now. There is a structure for content that I have seen for the first time today, but which appeared to lend itself to the “nuts and bolts” of the member societies. The culture will change and it is clear that the web will be the primary source of information in the near future. It is also clear that the web will be a critical resource to make the activities of societies like the MVSS more efficient and let them provide more value to their members.

September 9, 2004

Members of the MVSS Executive may recall my last report submitted on June 2, 2004, coincidentally the day of the first real operations meeting of the VascularWeb principles and the MVSS Executive Committee in Anaheim. Many changes were well underway or at least anticipated at the time of the last meeting. This report will be a brief update based on observations and conversations with K. Wayne Johnston. I will include societies such as the Canadian, Peripheral Vascular Surgical Society, and APDVS as well as the regions under the umbrella of “affiliate” for the sake of simplicity in the remainder of this report.

I believe the first order of business is to acknowledge Terri Rojas’ irreplaceable role in the recent evolution of VascularWeb. My prior reports over the past several years have often pointed out the fundamental differences between the role of the web for the “parent” societies and the affiliates. The affiliates need boilerplate functions such as periodic communication, abstract management, meeting registration and management, etc., whereas the “parent” societies need to be the central clearinghouse for patient and professional education, industry relations, political action, etc. Terri has been one of three individuals used by Wayne to test whether the current content management program is feasible for use by non-technical users, particularly at the affiliate society level. Review of the current MVSS web page is ample evidence that this can work provided the “non-technical” person has the motivation and skills of someone like Terri. The page is very navigable and not too busy. The annual meeting program appears very professional. Automation of abstract submission and registration appear completely successful on the web. I would also invite you all to view the VascularWeb home page and note that the MVSS Annual Meeting is prominently featured right below Patient Information and American Vascular Association. Wayne has more in store for Terri, but we are all in her debt.

I am not aware of any significant problems associated with moving our host from CorMed to the current host.

The member roster is generally quite functional at the VascularWeb home page as well as the affiliate page levels, although a few bugs remain. The roster accessed from the VascularWeb home page is actually the SVS roster and may exclude affiliate members who happen not to be SVS members. The current database flagging is such that if a member has asked that their e-mail and/or phone number or other information not be “published” in any of the SVS or affiliate rosters, it will not be “published” at any level of VascularWeb. Some members might conceivably wish their information to be published at some level(s) and not others. However, there is an apparent major technical hurdle that prevents “a la carte” selection of confidentiality for SVS as well as each affiliate and Wayne believes the current approach is the most reasonable for confidentiality and I agree. There is another bug that involves failure to detect deceased or no longer active status and this will be fixed.

Patient oriented material has been substantially enhanced with material from North Point, and other material selected by Pat O’Hara and Wayne. The Patient Information link at the top right of the screen and the APV link just below it are probably the most prominent and likely to catch the eye parts of the home page. The What’s New section (see the middle “column” of the home page) is a combination of Reuters articles and material from other sources. These appear to be generating significant traffic with an average of about 200 legitimate visits over their average two week posting life span. The present contract with Reuters is 10 articles per month, probably not enough and Wayne plans to increase this number as well as assure archiving these articles for a year.
The “snippets” concept (small articles from Veith meeting, Northwestern Symposium, Journal of Vascular Surgery) is still on the table and will likely happen. Tony Sidawy is a prime force in this effort.

One remaining area of concern is the amount of overlap. Many similar functions may be performed by several of our entities and the web may be the vehicle to help people understand that we don’t need to have parallel universes, that we can delegate and reduce duplication of effort.

Wayne will be in Chicago on September 13 to discuss major changes in the page. The home page remains too “busy” and needs simplification. Things are moving at an appropriate pace and I would be happy to provide an interim report before the next MVSS Executive meeting in Chicago if the Executive directs me to provide such a report.

June 14, 2005

I was unable to attend the fall 2004 MVSS meeting, but members of the MVSS Executive may recall my last report submitted at the fall 2004 meeting as well as the report submitted at the June meeting. This year’s meeting of the VascularWeb committee (we’re not sure what to call ourselves) will be Thursday, June 16 from 6:30 Am until 8:15 AM. I will be able to supplement the current report with material from the by the time of the MVSS meeting in September.

Terri can speak for herself, but it is clear from my conversations with Wayne Johnston that he continues to lean heavily on Terri because she has mastered the process of dealing with the web. Max Rossin at PRRI is the tech person, but Terri reportedly rarely needs any help.

You may recall that the page was to be completely redesigned. Testing and implementation were completed in November and December 2004. Most, if not all of you will have received the December 2004 announcement. Links tend to “break” when pages are reconfigured and VascularWeb was unfortunately not immune to this problem. Several problems occurred, two of which I detected early in the experience. One was that the member roster became unusable because of formatting, a problem fixed I think before the December E-mail announcement. Another had to do with the link to Journal of Vascular Surgery, a problem fixed by early 2005. The page is now quite functional. I navigate it fairly often and I have not found any breaks recently.

The Submit to VascularWeb function was implemented, but is used little except for the job posting function. Potential VascularWeb submitters probably tell themselves “There are plenty of good journals of there” and are more likely to send their submission to the journals.

We continue to post material supplied under contract from Reuters and Northpoint. Traffic has been quite good and specific data will be available before the September meeting. Reuters has been very popular for both doctors and patients. One possibility under consideration is to provide a subscription service to automatically send articles to subscribers. Reuters seems to have everything. We may not use all of their material but they cover the waterfront.

Our search function is no longer Google. Our new search engine is freeware (Robot.com). It is similar to Google in some ways (you can do a lot better if you read the instructions, but you can muddle along without much instruction) without the commercial baggage. Google now has a product without baggage for a fee ($1500, cheap). VascularWeb may go back to Google because a thriving large company like Google is more likely to keep their product fresh.

The Government Relations is very robust and is likely to remain so now with a full time person now in Washington office.

The Industry Relations part of VascularWeb seems sort of stalled. SVS seems to be struggling with how we deal with this. We have only to look at the agenda for this meeting to see how much more interdependent we and the device companies are. Watch our board!

The snippets concept (bits from the Northwestern December meeting, Veith, etc.) was tried, but there were few hits, and it seemed not worth the effort.

With respect to clinical submissions, these have all been written by a professional medical writing company. I understand that Pat O’Hara has gone through all of this material, but I believe Wayne told me he believes they need to be reviewed again. I think we will likely hear much about this at the Thursday meeting, but this is a very cheap undertaking with a potentially great public interest return. The AVA strong supporter of this project.

Repair of the member roster required addition of a few fields, such as a unique (never to be used again) identifier to link all the affiliate databases. Additional fields were added for other purposes, for example, to flag whether people are alive or dead. Some fields were reportedly added for legal purposes, since information had to be somewhat protected. This task was more work than expected-, but the roster has now been “fixed” for SVS and all affiliates except PVSS.

As we have discussed before, the affiliate functions have generally been boilerplate (meeting management, membership, etc.) and the VascularWeb was the SVS. However, SVS basically disappeared with the redesign with the emphasis on business, government relations, public education, etc., and there has been no focus on clinical affairs in the last year. The focus of the next iteration this fall (starting in September) will move back toward clinical affairs. For example, VascularWeb will likely see posting of articles from the new Vascular Specialists newsletter (Elsevier), a tabloid to go to cardiologists, primary doctors, etc. This new communication organ is planned to have a circulation of about 10,000 every two months. You will all be able to get a copy of a sort of mockup version distributed at this meeting. Articles from this new organ will be used for clinical content in VascularWeb. Yes, the level of the material lower than we expect for vascular surgeons, but it is likely that these review articles will be useful for us and may simply point to the original material for those of interested in more depth. The company is same as does the ACS tabloid. The company has been in business for many years, was recently acquired by Elsevier, and is experienced (30 clients). Material is from many sources, but includes material from other meetings. Material is written by professional medical writers, the focus is summaries, the quality excellent, although non-peer reviewed. Paraphrasing Wayne, we have much to learn from other specialties and much to tell other specialties about what we are doing.

I look forward to updating this material for the September meeting and to seeing all of you in Chicago.

Respectfully submitted by Joseph R. Schneider
June 4, 2008

There is a lot of news about VascularWeb since the last meeting of the MVSS.

You may recall that there was a strong concern that VascularWeb was being administered without any significant input from the members and that it had become quite cumbersome. There was also a concern that the previously universal and user friendly roster had become exclusive and less useful. The SVS said that they viewed this as a benefit to help them sell SVS membership, a view I thought was short sighted. I got the sense that I might be viewed as a provocateur and actually went to the SVS office in Chicago to meet Rebecca Maron to reassure her that I was not trying to ambush anyone, but that the membership was concerned that VascularWeb was not serving well. I spoke with President Johnston and he viewed this as a perfect topic for the Advisory Assembly of Vascular Societies.

The Advisory Assembly of Vascular Societies met on October 8, 2007 at the ACS meeting in New Orleans. The meeting was attended by a number of individuals including Brian Rubin, Micky Meier (Chair of SVS Communications Committee), and me, although I was late due to concurrent SVS Program Committee meeting and missed much of the discussion. Nevertheless, it was clear that our previously stated views were represented and following extensive discussion at the meeting, an Ad Hoc Advisory Committee was assembled at the request of President Johnston. This committee was charged to review the VascularWeb and make preliminary recommendations to the SVS Communications Committee and to the SVS Executive at the June Meeting with final report due at the October meeting of the SVS. Committee members were:

- Pat O’Hara (Chair)
- George Andros
- Bernadette Aulivola
- Ellen Dillavou
- Brajesh Lal
- Joe Schneider
- Jill Goodwin (SVS staff)
- Laura Shatkus (SVS staff)

We have had 4 conference calls since January. Chairman O’Hara assigned a specific part of VascularWeb to each committee member. I happened to be assigned the Press tab. I believe I represented our concerns including the unified roster issue and I believe this will ultimately be addressed.

Dr. O’Hara generated preliminary drafts and Executive summaries to be submitted to the SVS Board today. The following is a draft of the Executive summary and should not be distributed outside of the MVSS Executive.

There will be time for further comment before the final report is submitted to the SVS Board in October. I will welcome any comments from the members and would ask only that comments be submitted early to allow me to discuss them with Chairman O’Hara.

June 10, 2009

As you may recall from my report at the September 2008 meeting, the ad hoc VascularWeb advisory committee presented a final report (appended below) to the SVS Board in the fall of 2008. Interested members may review the specific recommendations in the report. Among the recommendations was the establishment of a standing committee to oversee and make recommendations regarding VascularWeb and other Internet based activities of the SVS. That recommendation was accepted. The committee members include Pat O’Hara (Chair), Bernadette Aulivola, Tim Hodges, Brajesh Lal, Tim Liem, Stephen Motew, Leila Mureebe, and me. We report to the Communications Committee Chair, presently Mickey Meier. We have had periodic conference calls beginning of February 25, 2009. We have constructed and recommended a corporate sponsor policy specifically addressing the limitation of commercial logos and links to industry web pages. VascularWeb will migrate (yet again) to a new platform after the Vascular Annual Meeting. I presented results of survey of VascularWeb users at the September meeting of the MVSS Executive. Users were generally quite happy with VascularWeb except for navigation and this is a top priority in redesign. There will be a “hands on” meeting of available committee members and interested parties from 10 AM to 4 PM at the O’Hare Hilton on July 1, 2009.

A meeting of the full committee was held here in Denver at 2:00 PM and I will update the MVSS committee members and interested parties from 10 AM to 4 PM at the O’Hare Hilton on July 1, 2009. A meeting of the full committee was held here in Denver at 2:00 PM and I will update the MVSS accordingly.

Respectfully submitted,
Joseph R. Schneider on behalf of Bernadette Aulivola and myself

Society for Vascular Surgery
Informational Report to Board of Directors
Date: September 22, 2008
From: Patrick J, O’Hara, MD, Chair
RE: VascularWeb Advisory Group Final Report

VascularWeb Advisory Group Members
Patrick J O’Hara, MD, Cleveland, OH, Chair
George Andros, MD, Van Nuys, CA
Bernadette Aulivola, MD, Maywood, IL
Ellen D Dillavou, MD, Pittsburgh, PA
Brajesh K Lal, MD, Newark, NJ
Dr. Joseph R Schneider, MD, PhD, Winfield, IL
Jill Goodwin, SVS, Chicago, IL
Dan Goldberg, SVS, Chicago, IL

Overview
The VascularWeb Advisory Group (VAG), which reports to the SVS Communications Committee, was assigned the responsibility to review the SVS website and provide recommendations regarding its improvement and maintenance, including recommendations regarding the need for ongoing physician oversight for the website and how this oversight function should be structured within the SVS. Currently the SVS Publications Committee has financial responsibility for the VascularWeb, whereas the SVS Communications Committee is responsible for its content. The day to day operations of the VascularWeb are the responsibility of the SVS VascularWeb staff and programmers.

To assess the VascularWeb, the members of the VAG have reviewed each of its sections and have designed and conducted a web-based survey of a sample of professional VascularWeb users as well as a sample of patient users. In addition, an independent review of the VascularWeb was performed by Jason Hoyt of...
New Witness Media, Inc. (NWM), a user experience consulting agency retained by the SVS since 2002. Through a series of conference calls, the VAG members have identified the issues outlined below. The strategies to address these issues have been reviewed and prioritized, and the final recommendations are submitted to the SVS Board at its meeting in October 2008 at the ACS Meeting in San Francisco.

General Comments
The VAG recognizes that the VascularWeb already has excellent content and has received many compliments. As the website has evolved, however, its wealth of content, while good for experienced users, is intimidating for others. While the Vascular Web does not need to be redone, it might be optimized by measures to re-organize and improve the attractiveness of its content. To this end, the VAG members agreed upon the following Mission Statement:

To make VascularWeb the premiere vascular disease website reflecting a vital, unique and growing vascular specialty by providing content and links that are timely, interesting, informative and easy-to-use, thereby expanding its audience to reach out to other specialties and the public so that SVS members, trainees and students will want to make it their primary vascular resource.

Technical Issues Identified by VAG Members
- The abundance of content is good for experienced users but intimidating for the inexperienced.
- On the home page, determine the major audiences and place the least sophisticated first to simplify navigation for it. Make the Patients and Families section first opening into a kinder, gentler graphic that uses the current information and layout.
- Allow the home page drop down boxes to expand to full screen when clicked upon to clarify where the web page visitor is currently located. This effectively translates to multiple home pages, one adapted for each audience. Optimize the home page real estate “above the fold” by minimizing unused “white space”. Contact information at top already exists at footer and most people know to look there. If absolutely necessary to repeat at top, move it to right side of page.
- Use information architecture principles placing the most important information in the upper left hand corner with decreasing importance from left to right and top to bottom.
- Use seach engine optimization (SEO) techniques (to attract “spiders”). Redundancy is good from user perspective but not good from SEO perspective, so need to seek balance. Consider adding “Vascular Disease, PAD and Vascular Health” to home page to enhance search engine optimization.
- Use cross browser testing using different browsers (IE, Firefox etc) and different operating systems. For example, on the MAC, using Firefox, the links on the home page footer do not actually link but this works fine on the PC. Also the web page appearance is different in different browsers.
- Address consistency of navigation issues by grouping like things together and consistently refer to similar things the same way, so elderly and inexperienced users don’t need to keep relearning the navigation system. Avoid penalties, such as “dead ends” for clicking on a link. Make “bread-crumbs” and section headers more obvious.
- Acquire the rights to the URL “VascularWeb.com” in addition to “VascularWeb.org”, if feasible, to simplify access to the SVS VascularWeb site for the inexperienced user. This would also raise the profile of the website among search engines. The VAG realizes, however, that this may not be cost-effective or even possible.

Summary of VAG Survey Results (Appendix A)
A survey of 9 questions for patient users and 14 questions for professional users (see appendix A for details) was posted on the VascularWeb from 8/28/08 through 9/9/08. During this interval there were 122 responses to the patient’s survey and 111 to the professional’s survey.

Professional Users responses:
- 92% are vascular surgeons, 81% SVS members
- Ages evenly distributed by decade from 30 to over 60
- Majority (69%) use website weekly to monthly
- Primary reason is annual meeting and education information for majority (79%) followed by practice resources and education materials (35%)
- 91% could find the information they were looking for, and 80% of these thought it was easy, whereas 20% found it difficult
- 81% thought the design was good; 19% poor
- 79% thought navigation was intuitive; 21% difficult
- 67% also use WebMD or online journals as other web-based resources
- 33% use VascularWeb for patient education
- 80% do not use professional networking sites (e.g. Facebook, Linkedin)

Patient User responses:
- Majority (69%) over 50
- Majority (60%) are women
- 76% found site easy to use, whereas 24% found it difficult
- 91% were satisfied with information provided, whereas 9% were not
- 96% found information understandable, whereas 4% did not
- 63% use Google or another search engine followed by 52% use WebMD for online medical information resource
- 75% learned about the VascularWeb from an online search

Summary of NWM Consultant’s Report (Appendix B)
Interviews with SVS members, residents and non-SVS member professionals were conducted at the 2008 SVS annual meeting by Jason Hoyt of New Witness Media, Inc. (NWM), a user experience consulting agency retained by the SVS since 2002 (see Appendix B for details). Navigation and “findability” of content was the major concern for VascularWeb professional users. Each VascularWeb audience should have its own navigation scheme.

The priority for addressing these issues is:
1. Improvements to the navigation and information architecture should be the first initiative.
2. An updated design can then be initiated.
3. Web 2.0 features can be introduced as a last priority (see Appendix B for details).

Preliminary Cost Estimates (Appendix C)
Rough estimates for the costs of these features are as follows (see Appendix C for details):
- Improved Navigation $2000 – 4000
- Improved Search $2000 – 4000
- Increase Search Engine Optimization (SEO) $1,000 - 3000

Final Recommendations
1. Need for Ongoing Oversight: A mechanism for oversight responsibilities, including quality control, and funding is necessary. The webmaster does not have to be a physician, but it is recognized that physician advisory input is needed. Consequently, there should be a standing VascularWeb Advisory subcommittee available for consultation by the SVS VascularWeb staff to adjudicate issues that will likely arise from time to time. One possible configuration of this group, which would report to the SVS Communications Committee, could consist of the
SVS Director of Communications and 3 SVS members; one from the SVS Communications committee, one from the SVS Publications committee and one at-large SVS member, each rotating on a staggered 3-year term.

2. Website technical improvements
   a. First priority: Simplify the Homepage and Navigation System
   b. Second priority: Improve the website internal search capabilities
   c. Third priority: Increase search engine optimization (SEO)
   d. Fourth priority: Consider selected Web 2.0 features

3. Address long-term funding issues
   a. Maintain fiscal integrity: It is recognized that income from an activity ideally should come from that activity. Currently the only income generated from the website is from the job resume/recruiting section. Additional sources, such as grant procurement or possibly advertising revenue, should be considered.
   b. Organizational changes: Consider consolidating the financial oversight and responsibility for the website (currently in the Publications Committee) with the operational SVS administrative body (currently the Communications Committee) rather than continuation of the existing division of responsibility.

Summary
The VascularWeb is an excellent, content-rich resource for information regarding vascular disease and its management as well as an effective means to disseminate information and to promote vascular surgery to vascular specialists, fellows, residents, students and the general public. This feature is good for experienced users but may be intimidating for the inexperienced or elderly. Improvements in search engine optimization, information architecture as well as consistency in navigation for the site, particularly its homepage, could considerably enhance its ease of use and overall effectiveness. A standing VascularWeb Advisory subcommittee consisting of interested SVS members and administrative staff should be available for consultation by the SVS VascularWeb staff for issues that will likely arise from time to time, and to provide oversight regarding quality control and the overall accuracy of the information. The long-term fiscal integrity of the VascularWeb would be enhanced by the development of additional funding sources as well as consolidation of the financial responsibilities for the website to the operational SVS administrative body, currently the Communications Committee.

DISTINGUISHED SERVICE AWARD
of the
MIDWESTERN VASCULAR SURGICAL SOCIETY
Established 1987

The Distinguished Service Award was established by the Society to recognize unusual and meritorious service to the growth and development of the Midwestern Vascular Surgical Society by a member of the Society.

RECIPIENT OF THE DISTINGUISHED SERVICE AWARD
1987
JOHN R. PFEIFER, M.D.
ANN ARBOR, MICHIGAN
MIDWESTERN VASCULAR SURGICAL SOCIETY

CONSTITUTION

ARTICLE I - NAME
The name of this organization shall be the Midwestern Vascular Surgical Society.

ARTICLE II – OBJECTIVES
The objectives of this Society shall be: (1) The advancement of the art and science of vascular disease and (2) the maintenance of high standards for open surgery, endovascular interventions, and medical therapy of vascular disease.

ARTICLE III – MEMBERSHIP
1. Membership of this Society shall be limited to physicians of good professional standing, who have a major interest and an active practice in vascular surgery and/or endovascular intervention, and who are certified by the American Board of Surgery in Vascular Surgery. In select cases, equivalent training may be substituted for formal certification.

2. There shall be five types of Society Affiliations: Candidate, Associate, Active Members, Senior Members, and Honorary Members.

3. The Candidate group shall consist of individuals who are in a Surgery residency training program or are currently in or have completed a Vascular Surgery residency or fellowship training program. Individuals who have completed an approved Vascular Surgery residency or fellowship may remain in the Candidate group as long as they are board eligible, but not yet certified. Individuals in the Candidate Group shall have no voting privileges, are not eligible for election as officers and are not subject to assessment for dues.

4. Active members shall consist of original charter members and all members subsequently elected until they become eligible for senior membership. The number of active members shall not be limited.

5. Senior members shall consist of active members who have reached the age of 60 years. Senior members shall have all of the responsibilities and privileges of active members, excepting those regarding attendance at meetings.

6. Honorary members shall consist of individuals who have made outstanding contributions to the discipline of vascular surgery. They shall have no voting privileges, are not eligible for election as officers, and are not subject to assessment for dues.

7. The Associate Group shall consist of allied health care professionals who have a major interest in vascular surgery and/or endovascular interventions. This group may include vascular nurses, nurse practitioners, registered vascular technologists and physician assistants. Individuals in the Associate Group shall have no voting privileges and are not eligible for election as officers.

ARTICLE IV – MEETING
An annual assembly of the Society shall be held in accordance with the By-Laws.

ARTICLE V – OFFICERS, COUNCIL
1. Officers of this Society shall consist of a President, a President-Elect, a Secretary, and a Treasurer, all to be elected as provided in the By-Laws.

2. There shall be a Council of the Society consisting of the President, President-Elect, Secretary, Treasurer, Immediate Past President, and three Counselors at-large

ARTICLE VI – ALTERATIONS, REPEAL
The Society may alter or repeal any article of this constitution by a three-fourths affirmative vote of the members present at the annual assembly, provided a copy of the proposed change has been delivered to each voting member in advance of the assembly meeting.

MVSS BY-LAWS

ARTICLE I – ELECTION OF MEMBERS
1. Physicians fulfilling constitutional membership requirements who practice in the states of Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota or Wisconsin may be eligible for active membership.

2. Application forms for candidate membership shall be available to Vascular Surgery Program Directors and shall be provided by the Secretary. Completed application forms signed by the proposed Candidate and the proposed Candidate’s Vascular Surgery Fellowship or General Surgery Program Director shall be submitted to the Secretary. Completed applications shall be reviewed by the Membership Committee, which has the right to accept or reject any application for inclusion in the Society. Once approved by the Membership Committee, applicants will be members of the Candidate Group so that they may be invited to the Annual Meeting. A member of the Candidate Group achieving certification in Vascular Surgery will be asked to become an Active Member. The consideration for Active Membership shall be submitted to the Membership Committee and the Council.

3. Application forms for active membership or membership in the Associate Group shall be provided by the Secretary. Completed application forms signed by the applicant, one sponsor and one endorser shall be submitted to the Secretary. Sponsors and endorsers shall be active members of the Society. Completed applications shall be reviewed by the Membership Committee, which has the right to accept or reject any application for membership in the Society. An applicant may then become a member of the Society or the Associate Group after approval of the Membership Committee and the Council. Names of applicants recommended for membership by the Council shall be submitted to the membership at the annual assembly.
4. Candidates for honorary membership shall be proposed in writing to the Council through the Secretary. Candidates approved by the Council will be elected honorary members in accord with the same procedure regarding active membership.

5. Members in good standing who subsequently take up practice in geographic areas other than the aforementioned states shall continue to be regarded as members of the Society.

6. In unique circumstances, non-physician scientists from the aforementioned geographic area may be eligible for active membership.

ARTICLE II – OFFICERS, COUNSELORS

1. The President and President-Elect of the Society shall be elected to terms of one year each. The Secretary and Treasurer shall be elected to a three-year term. The incoming and outgoing secretaries shall share duties for a period of six months.

2. The President shall preside at council meetings and the annual assembly. The President shall appoint members to all standing and ad hoc committees, and shall serve as an ex-officio member of such. Successors to vacated offices of the Society shall be appointed by the President until the position is filled at the next annual assembly. The President shall have the power to appoint a representative to any organization that the president and council believe may be beneficial to the society. The President shall prepare an address for the annual assembly of the Society.

3. The President-Elect, in the absence or incapacity of the President, shall perform the duties of the President’s office. In the absence of the President-Elect and the President, the Chair shall be assumed by a President Pro-Tem, elected by such members of the Council as are present.

4. The Secretary shall keep minutes of the meetings of the Society and the Council, receive and care for all records belonging to the Society, and conduct correspondence of the Society. This office will issue to all members a written report of the preceding year’s transactions to be read to the Council and membership at the annual assembly.

5. The Treasurer shall receive all monies and funds belonging to the Society, pay all bills, render bills for dues and assessments and report to the Council and membership at the annual assembly meeting. The Treasurer will prepare an annual report for audit.

6. Councilors at large shall be elected for three-year terms, with election of one counselor occurring annually so as to provide overlapping terms. The duties will be assigned by the President.

ARTICLE III – COMMITTEES

1. Standing committees of the Society shall consist of the membership committee, the nominating committee (composed of the President, President-Elect, and the immediate Past-President), an auditing committee (composed of the Councilors), and a program committee.

2. Other committees may be designated by the President with advice of the Council.

3. All committees shall be chaired by a member appointed by the President with the advice of the Council.

ARTICLE IV – MEETINGS

1. An annual assembly of the Society shall be held at the time and place to be determined by the Council.

2. During the annual assembly, there shall be an executive session of the membership. The business of the Society shall be conducted at this time. The report of the nominating committee shall be presented to the membership during the executive session. Nominations may be made from the floor. Officers of the Society and Councilors at-large shall be elected by majority vote of the active and senior membership during the executive session.

3. Any active member who is absent from three consecutive annual assembly meetings without adequate explanation of this absence made in writing to the Secretary shall be dropped from the membership in the Society by vote of the Council. Membership may be reinstated by a vote of the Council.

4. Members who have retired from active practice or have taken up practice in geographical areas other than those included in the Society boundaries are exempt from the attendance requirement in Article IV, Section 3.

5. Any member of the Society may invite one or more guests to attend the annual assembly.

ARTICLE V – FEES, DUES

1. Initiation fees, dues, and assessments shall be levied by the Council and approved by the membership at the annual assembly.

2. Any member whose dues remain unpaid for a period of one year shall be dropped from membership, provided that notification of such a lapse be given at least three months prior to its effective date. The member may be reinstated following payment of the dues in arrears on approval of the Council.

3. Senior members who have retired from active practice and members who have taken up practice in geographical areas other than those included in the Society boundaries are exempt from dues by petition

ARTICLE VI – RESIGNATIONS, EXPULSIONS

1. Resignations of members otherwise in good standing shall be accepted by majority vote of the Council.
2. Charges of unprofessional or unethical conduct against any member of the Society must be presented in writing and submitted to the Council. The Council’s concurrence or disallowance of the charges shall be presented to the membership at the annual assembly executive session. A three/fourths affirmative vote of the members present shall be required for expulsion.

ARTICLE VII – QUORUM

1. For the transaction of business, the members present at any annual assembly shall constitute a quorum.

ARTICLE VIII – ALTERATIONS, REPEAL

The Council may by ¾ majority vote, pass resolutions, which clarify the above stated articles as long as the intent of said articles, is not substantially altered. By-Laws may be altered or repealed at the annual assembly by a two/thirds affirmative vote of the members present.

ARTICLE IX – PROCEDURE

Proceedings of the Society shall be conducted under Roberts' Rules of Order.

Amended

Annual Meeting

September 2012

MIDWESTERN VASCULAR SURGICAL SOCIETY

Registration Statistics

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MIDWESTERN VASCULAR SURGICAL SOCIETY

Registration Statistics

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NEW MEMBERS ELECTED IN 2012

ACTIVE
ANDRES FAJARDO, MD, INDIANAPOLIS, IN
JAMES B. GOSSET, MD, MILWAUKEE, WI
JOSEPH P. HART, MD, RVT, FACS, CINCINNATI, OH
MOUNIR J. HAURANI, MD, COLUMBUS, OH
JEFFREY JIM, MD, MS, ST. LOUIS, MO
ROBERT J. MARCH, MD, FACS, CHICAGO, IL
PATRICK M. MURPHY, MD, INDIANAPOLIS, IN
RACHAEL NICHOLSON, MD, IOWA CITY, IO
JEFFREY J. NIENABER, MD, ROCHESTER, MN
JEFFREY T. PREM, MD, FACS, CANTON, OH
DAWN M. SALVATORE, MD, FACS, FISHES, IN
STEPHEN J. SANOFSKY, MD, CANTON, OH
TODD R. VOGEL, MD, MPH, FACS, COLUMBIA, MO
JAMES S. WAGNER, MD, BEMIDJI, MN

ASSOCIATE
Khairunisa M. Lalani, APN, Skokie, IL

CANDIDATE MEMBERS
Parth B. Amin, MD, Iowa City, IA
Sherry L. Cavanagh, MD, Chicago, IL
Chad Laurich, MD, Sioux Falls, SD
Maria E. Litzendorf, MD, Columbus, OH
Alberto J. Lopez, MD, Cleveland, OH
Adonis Lysandrou, MD, Iowa City, IA
Michael J. Malinowski, MD, Maywood, IL
Jeff Mathew, MD, Grosse Pointe Farms, MI
Sara Mijal, MD, Iowa City, IA
Nicolas J. Mouawad, MD, Columbus, OH
Payem Salchi, MD, Chicago, IL
Raphael Sun, MD, Iowa City, IA
GEOGRAPHIC BOUNDARIES

At the first meeting of the Organizing Committee in Chicago, Illinois, on October 12, 1976, it was agreed that the geographic boundaries of the Midwestern Vascular Surgical Society should be from the Rocky Mountains on the west to the Appalachians on the east, from the Canadian border to the north, to the Mason-Dixon line on the south. These boundaries would, therefore, include the following states:

ILLINOIS
INDIANA
IOWA
KANSAS
MICHIGAN
MINNESOTA
MISSOURI
NEBRASKA
NORTH DAKOTA
OHIO
SOUTH DAKOTA
WISCONSIN

ILLINOIS
Abbott Park
Schwartz, Lewis B.

Arlington Heights
Painter, Thomas A.

Belleville
Lee, Robert D.H.
Moosa, Hans H.
Prieb, Kosit

Bloomington
Sawyer, William

Burr Ridge
Antani, Kirit L.

Canton
Gibbs, Jack

Chicago
Bassouny, Hisham S.
Blackburn, Donna
Blecha, Matthew J.
Clark, Elizabeth T.
Collicott, Paul E.
Durham, Joseph R.
Easton, Kara
Epstein, Deborah
Eskandari, Mark K.
Eton, Darwin
Foss, Leslie
French-Sherry, Eileen
Goldin, Marshall D.
Herm-Barabasz, Rita M.
Jacobs, Chad E.
Keen, Richard R.
Kibbe, Melina R.
McCarthy, Walter J.
McGowan, Katherine
Milner, Ross
Morasch, Mark D.

Najafi, Hassan
Najjar, Samer F.
Orozco, Jennifer M.
Pearce, William H.
Rodriguez, Heron E.
Serry, Cyrus
Yao, James S. T.

Chicago Heights
Subram, Aswath N.

Decatur
Trachtenberg, Jeffrey D.

Dixon
Strom, John A.

Downers Grove
Wright, J. Gordon

Evanston
Elhadary, Hamdy
Halstuk, Kevin S.

Gurnee
Ryan, Timothy J.

Hazel Crest
Adiga, K Ramesh

Hinsdale
Schuler, James J.
Walsh, James J.

Long Grove
Haid, Sidney P.

Maywood
Greisler, Howard P.

Moline
Abdullah, Afzal H.
Klosak, John J.

Mount Vernon
Verta, Michael J.

Northfield
Golan, John F.

Oak Lawn
Ellenby, Martin I.
Goldstein, Irene
Govostis, Dean M.

Oak Park
Baker, William H.
Graziano, Joseph L.
Piano, Giancarlo
Pooley, Thomas A.

Olympia Fields
Habeb, Mortuza
Pauwaa, Mulji

Park Ridge
White, John V.

Peoria
Chiou, Andy C.
DeBord, James R.
Williams, James B.
Wyffels, Patrick

Rockford
Edgcomb, Leslie P.

Skokie
Desai, Tina R.
Gupta, Navash
Polin, Stanton G.
Schindler, Nancy

Springfield
Barkmeier, Lynne D.
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Weiss, Victor J.
Yamanouchi, Dai

Manitowoc
Jordan, Milan
Volkert, Michael

Marshfield
Kuehner, Marvin E.

Milwaukee
Brown, Kellie R.
Clay, Cristine A.
Edwards, Janis

George, Mary B.
Goodman, J. Jay
Henry, Lyle
Johnson, Courtney K.
Kappes, Steven
Karp, Donna
Lanza, Debra
Lerner, Benjamin
Mendeloff, Gale
Pasch, Allan R.
Pindiur, Patrick
Robischon, Stephen
Rossi, Peter J.
Seabrook, Gary R.
Woods, James H.

Minoqua
Seidel, Barry J.

New Berlin
Vincent, Dennis G.

Rhinelander
Bodensteiner, Joseph

Wausau
Costa, D. Jamie
Mattingly, Sally S.

West Bend
Stewart, Gary W.

Weston
Lee, ChongChin

OUTSIDE MIDWEST AREA

AUSTRALIA
St. Leonards NSW
Mohabat, Walid

CANADA
ONTARIO
Toronto
Kalman, Peter G.

GERMANY
Munich
Wirthlin, Leroy S.

GREECE
Athens
Iliopoulos, John I.

ALABAMA
Birmingham
Lamberth, Wade C.

ARKANSAS
Little Rock
Barnes, Robert W.

ARIZONA
Phoenix
Fowl, Richard J.
Pitlik, Howard C.

Scottsdale
Kazmier, Francis
Sherrin, Frederick W.

Tucson
Kline, Ronald A.
Littooy, Fred N.

CALIFORNIA
Berkeley
Smith, John W.

La Jolla
Bergan, John J.

Los Angeles
Gewertz, Bruce L.

CALIFORNIA
Rancho Santa Fe
DeLaria, Giacomo A.

Stanford
Zarins, Christopher K.

COLORADO
Carbondale
Towne, Jonathan B.

CONNECTICUT
Farmington
Dahn, Michael

DELAWARE
Lewes
Katz, Mayer M.

KENTUCKY
Covington
Baldridge, E Douglas

Edgewood
Dick, Barry Lee
Martin, Kevin D.
Simoni, Eugene J.

LEXINGTON
Schwarcz, Thomas H.

Louisville
Edwards, John D.
Ketterhagen, James P.

LOUISIANA
Baton Rouge
Christiansen, Thorvald W.

Mandeville
Juleff, Randall S.

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MIDWESTERN VASCULAR SURGICAL SOCIETY

CRITERIA FOR MEMBERSHIP

Established 1977

There are no rigid requirements for membership. The criteria will be flexible and will be individualized. Some general guidelines have emerged from early meetings of the Council and the Society.

• Attendance at meetings is encouraged by all surgeons interested in vascular surgery.
• Membership is limited to those interested in peripheral vascular surgery, rather than thoracic or cardiac surgery.
• Founding Members of the Society were all members of the Society for Vascular Surgery or the International Cardiovascular Society.
• For new members, there is a Proposal for Membership Form rather than an application form. This, a member must request a form for a candidate rather than the candidate requesting the form independently.
• The Society is established for surgeons whose practice is either limited to vascular surgery or who do a significant proportion of vascular surgery.
• Young surgeons recently in practice should have completed a one-year vascular fellowship to qualify for membership.
• All surgeons who are considered for membership should have the proper background of training and experience in the treatment of vascular disease. For older surgeons who have not had the opportunity to take a special vascular fellowship, evaluation of operative reports and discharge summaries will be used as an additional criterion for membership.
• Cardiac surgeons who do a significant volume of peripheral vascular work will also be eligible for membership.
• General surgeons who do a significant volume of vascular work are eligible for membership.
• September, 1987. Guidelines for membership in the Society will include more than 50 major vascular reconstructions, fellowship training, and 50% or more of practice in vascular surgery.
• September, 1992. Interventional radiologists, vascular internists, and cardiologists shall be eligible for membership.

The total membership in the Society by nonvascular surgeons should not exceed 20% of the active membership.
“... We realize that those who are members will use their membership as credentials; and, therefore, those who are accepted as members of the Midwestern Vascular Surgical Society should have the proper background of training and experience to qualify them for membership in this Society.”

This general philosophy was re-affirmed by the Society membership at the First Annual Executive Session in Chicago, Illinois, September 23, 1977.

The logo of the Society incorporates a likeness of Professor Charles Claude Guthrie, M.D., Ph.D., a noted pioneer in Vascular Surgery in the Midwest. Professor Guthrie worked with Alexis Carrel at the University of Chicago before going to Washington University in St. Louis. He ultimately accepted the Chair of Physiology and Pharmacology at the University of Pittsburgh and held that position for over forty years.
Biography of Charles Claude Guthrie

In 1912, Charles Claude Guthrie, Sr., published his major study, Blood Vessel Surgery and Its Applications. It would be almost half a century before his significant contributions to the field of Vascular Surgery would be adequately recognized. In that same year, Alexis Carrel, who had worked with Guthrie in the latter’s University of Chicago laboratory, received the Nobel Prize in Medicine for work that would not have been successful without Guthrie’s contributions -- as it was again to be evaluated only some 50 years later.

Guthrie’s interest in blood vessel surgery dates back to his days as a medical student at the University of Missouri. In 1898-99, while studying physiology with Dr. John Waldo Connaway, he cut and resutured, end-to-end, arteries on the cadaver of a dog that had been used for other experiments. While studying surgery with Dr. Andrew Walker McCallister, he accompanied the surgeon on an accident call and he was humanely concerned that the injured man had to lose his leg by amputation because its circulation could not be restored by suturing the blood vessels.

Although there is no indication in his papers of any actual experimentation under way on blood vessels during his stay at Western Reserve University, he had undoubtedly planned to return to a subject of continued interest when he asked Dr. George Neil Stewart’s permission to establish his own personal laboratory on the top floor of the new Hull Physiological Laboratory at the University of Chicago. It was there that he began the work on transplantation of ovaries in chickens that would lead to controversial debate. It is also there that he and Carrel continued work on vascular anastomosis that each had begun independently before their first meeting.
Charles Claude Guthrie was born near Wentzville, St. Charles County, Missouri, on May 13, 1880. His forebears came from Scotland in 1700. He was brought up in the fertile Missouri River bottom farmlands settled by his ancestors, and the versatility of his inquiring mind became apparent at an early age. His study of insects brought publication of notes in Science. He made his first gun himself and was an expert wing shot. And his early interest in farm problems manifested itself later in published studies on the preservation of meats and many other foodstuffs, as well as pioneer studies on Texas fever in cattle.

Woodlawn Institute, a boarding school near O’Fallon (a few miles west of St. Louis) granted the A.B. degree to Claude Guthrie in the year 1906. In Columbia, Missouri, where his parents had established a second home in order to facilitate their children’s education, he received the M.D. degree from the University of Missouri in 1902.

During his medical school years, Claude Guthrie began work on Texas fever with Dr. Connaway. After a year of graduate work at Western Reserve University, he became a demonstrator in physiology under Dr. Stewart. From there, in 1903, he went with Stewart to the University of Chicago as an instructor in physiology. He was awarded the Ph.D. degree from the University of Chicago in 1907.

While Dr. Guthrie was doing research at the University of Chicago on blood vessel surgery and replantation of the limb, Dr. Alexis Carrel, who had recently arrived in this country from France via Canada, came to the laboratories of Stewart and Guthrie, looking for a place to work. It was decided that he would work with Guthrie, and in a brief 15-month period in 1905 and 1906, some 29 articles were published by the two men on work done conjointly. These articles detail how these two young men virtually laid the foundations of modern vascular surgery and transplantation, simultaneously establishing the basis for which Carrel was awarded the first “American” Nobel Prize in Medicine in 1912. (He still retained his French citizenship).

In 1906, Guthrie accepted the Chair of Physiology and Pharmacology at Washington University in St. Louis, and Carrel went to the Rockefeller Institute on a research scholarship.

At Washington, Guthrie published a series of articles (with Stewart and Pike) on resuscitation, representing research they had begun several years earlier at Western Reserve University and the University of Chicago. Those studies detailed the effect of resuscitation on the central nervous system, glands, and muscles. He continued work begun in 1904 on ovary transplantation, which led him to the still controversial genetic-somatic issue of foster-parent influence on offspring.

In 1909, Dr. Guthrie moved to the Chair of Physiology and Pharmacology at the University of Pittsburgh, where he continued to be actively productive for 40 years, particularly in the study of shock, physiology of the heart, and the nature of the red blood cell. He published numerous articles on laking, vascular shock, teaching of physiology, and many aspects of vascular research. His manuscripts and laboratory notes from this period establish Guthrie as a most careful, thorough, and painstaking man of science who recorded notably meticulous observations on experimental procedures. His experiments would still prove useful to avoid duplicative efforts by researchers in resuscitation. The gigantic strides he made in those fields are documented in an unpublished monograph to which he dedicated as much of his professional energies as his administrative responsibilities would allow during his last years at Pittsburgh.
Dr. Guthrie had a particular passion in life for the instruction of medical students. He was especially eager to instill a quantitative viewpoint of biology, and this was his goal as he designed experiments and designed, engineered, and produced physiologic equipment far better than any which was then on the market. Details of his most important contributions in this field are included in a pamphlet, "Practical Contributions to Physiology and Pharmacology," 1915.

Dr. Guthrie was also a pioneer in the current concept of a medical center. As early as 1928, he laid down a basic plan for a new physical plant at Pittsburgh which would facilitate integration of the clinical sciences with the basic sciences. Many features of Dr. Guthrie's original plan still serve usefully and well in the present-day medical center at the University of Pittsburgh, a plan Guthrie had envisioned for centralizing medical instruction for other new institutions as well.

In 1904, Charles Claude Guthrie and Maude Glidden Walker were married. She predeceased him in 1952. One son, Charles Claude Guthrie, Jr., was born April 16, 1907, and having retired as advertising manager of the New York Times, currently resides in Hillsborough, New Hampshire.

In addition to well over 100 publications in professional journals, Dr. Guthrie wrote Blood Vessel Surgery and its Application, published by Edward Arnold in London, 1912, Longmans, Green & Co., New York. This work was largely reprinted in The Contributions of Dr. C. C. Guthrie to Vascular Surgery, by Samuel P. Harbison and Bernard Fisher in 1959, University of Pittsburgh Press, publishers.

In 1960, Dr. Guthrie was cited by the American Association of Plastic Surgeons for his contributions, and he was awarded their first medal at that time. It was accepted by his son Charles.

In 1962, Dr. Guthrie was awarded the honorary Doctor of Science degree by his alma mater, the University of Missouri. He had retired and moved to Columbia, Missouri, in 1950, where he lived quietly with his sister and long-time laboratory assistant and collaborator, Fannie Virginia Guthrie, in their family's Columbia home, from which they made pleasant pilgrimages to the ancestral farm near Wentzville. He died on June 16, 1963, in Columbia, Missouri.

Pictures and Biographies
Courtesy of Dr. Hugh E. Stephenson, Jr.,
University of Missouri School of Medicine
IN MEMORIAM

GEZA DETAKATS
December 9, 1892 - October 4, 1983

JULIUS CONN, JR.
August 15, 1932 - March 4, 1986

JOSEPH C. AVELLONE
May 30, 1925 - February 12, 1987

STEVEN C. KLECKNER
July 17, 1953 - August 10, 1991

JOHN VASKO
March 17, 1931 - June 29, 1992

AUSTIN L. GARDNER
May 21, 1926 - February 15, 1993

WILLIAM S. DYE
1995

RICHARD RODGERS
July 1996

GHASSAN HAURANI
TWA Flight 800 - July 1996

J. ROBERT NAVARRE, SR.
1999

RICHARD E. FRY
May 2000

DAVID C. REYES, M.D.
2001

JEFFERSON F. RAY, III
2002

RAYMOND KRAUSE
2002

KAZI MOBIN-UDDIN
2002

JOHN H. OLWIN
2002

*JOHN J. CRANLEY
September 2003

CREIGHTON A. HARDIN, M.D.
April 18, 2003

FALLS B. HERSHEY, M.D.
June 24, 2004

RICHARD L. VARCO, M.D.
May 3, 2004

MARK B. ADAMS
May 2007

WILLIAM J. FRY, MD
2007

*JOHN L. GLOVER, M.D.
2007

JAMES F. GORMAN, MD
December 2007

ROBERT W. HOBSON, MD
January 2008

STEVEN M. DOSICK, MD
January 2008

KARL A. LOFGREN, MD
January 2008

JESSE E. THOMPSON, MD
February 2008

OTTO H. TRIPPEL, MD

JOHN R. PFEIFER, MD
June 6, 2009

RONALD L. MENG, MD
January 15, 2006

BERYL M. DILLARD, MD
2007

VALLEE L. WILLMAN, MD
February 8, 2009

*D. EMERICK SZILAGYI, MD
November 1, 2009

THOMAS E. TOPPER, MD
2008

JAMES E. CONLEY, MD
2011

JOHN H. HAGEMAN, MD
March 2011

(* Former Society President)