

Newsletter—Fall 2023

From the Recording Secretary: The Council of State Neurosurgical Societies Fall 2023 Meeting Recap

Dr. Clemens Schirmer, MD, PhD, MBA

Dear CSNS Members,

I am excited to present a summary of the productive Fall 2023 Meeting held in Washington, DC. The event provided a collaborative platform for lively discussions, and we have made significant strides toward enhancing our society and profession.

Highlights of the meeting included a comprehensive Plenary Session I/Reference Committee Hearings. The session opened with a warm welcome delivered through Dr. Ratliff's chair report, swiftly followed by Officer Reports from Drs. Tumialán, Phelps, Mazzola, Schirmer, and historian Dr. Benzil. Dr. Tumialan then efficiently moved a record number of resolutions through the testimony process, allowing the reference committee ample opportunity for deliberation.

Several invited special Reports were given, and various crucial topics were addressed, such as the effect of insurance status on post-thrombectomy care outcomes, the cost-effectiveness of MMA embolization in treating chronic SDH, and understanding neurosurgery resident knowledge and perceptions regarding social determinants of neurosurgical care and outcomes.

After the plenary session on Saturday, the following Resolution were voted upon and adopted/amended:

Inclusion of Radiation Safety Training for New Neurosurgery Interns: A standardized module will be developed to educate about radiation safety principles in neurosurgery.

Unions in Neurosurgery: An extensive survey and a white paper will assess the prospect and impact of unionization at the attending level.

David Jimenez CSNS Resident Socioeconomic Fellowship: A CSNS Resident Fellowship has been named in memory of Dr. David Jimenez.

Improving Communication on CSNS Resolutions: Enhancements will be made to facilitate easy and appropriate routing of correspondence regarding any resolution.

Support for the NERVES Society: A collaborated effort with AANS and CNS to broadcast and uphold the value of the NERVES Society.

Best Practices for Peri-Partum Neurosurgeons: A comprehensive survey and resultant best practices resource will be created and published.

Posting Resolution Ideas on CSNS Web-



Resolution Voting at the 2023 Fall CSNS Resolution Debate

site: Members and resident fellows can now post-resolution ideas on the CSNS website, encouraging collaboration and reducing duplication

Collective Bargaining Efforts and Effects on Neurosurgical Residency Training: A Survey on the potential effects of collective bargaining efforts on resident education quality, well-being, and productivity.

Understanding and Re-Evaluating the Urgency to Board Certification: Partnering with the ABNS to study the circumstances under which

applying for deferred board certification has occurred.

Assessing the Value of Mid-Level Providers: Survey to assess the impact of APPs on neurosurgical care, productivity, and team dynamics.

The Hoover Resolution: Evaluation and addressing physical threats to neurosurgeon safety & mortality.

Expanding the CSNS Diversity Task Force: Creating an ad hoc committee to evaluate the relationship between diversity and patient safety.

Assessment of Impact on Patient Safety from Delays and Denials in Prior Authorization for Surgical Procedures: A white paper will be released publicizing find-

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September was "Women in Medicine Month": a shout out to our female neurosurgeons! Catherine Mazzola, MD, FAANS

Each September, the American Medical Association (AMA) honors physicians who have offered their time, wisdom and support to advance women with careers in medicine and surgery. The AMA creates and supplies educational content, leadership resources and opportunities to celebrate women in medicine. The AMA recognizes that gender inequity in medicine is a complex issue that requires a multilayered approach. The advancement of gender equity in neurosurgery requires us as a specialty to look critically at the issues and barriers that affect women in medicine, surgery and specifically, neurosurgery.

The Women in Neurosurgery Society (WINS) highlights some of the most famous women in neurosurgery; brave pioneers into a traditionally male dominated field. Many of these women have shared their inspiring stories; check out the rich history that is well documented on the WINS website: https://neurosurgerywins.org WINS aims to promote professional growth and development for female neurosurgeons, while striving to establish a platform that facilitates meaningful exchanges and global interaction. They have been committed to advancing an environment that both affirms and supports women's personal values and individual differences. Their continued dedication to female neurosurgeons is focused on developing and promoting the highest standards of competence and ethical behavior among all neurosurgeons.

WINS supports female neurosurgeons who are just starting their career path as well. They offer scholarships for residents and relationship opportunities for young female neurosurgeons to request a mentor. https://neurosurgerywins.org/residents. I strongly recommend that all younger female neurosurgeons reach out to WINS and select a mentor that will help support and guide you through your neurosurgical journey.

The AMA encourages all of us to use our social media channels to educate patients and the public about the wonderful opportunities that exist for women, and the mechanisms of support available to these amazing women. ³ It is easy to jump to this link and share posts that assist women and show your support. Sending flowers to your favorite female neurosurgeon is also certain to bring a smile to someone's face! https://www.ama-assn.org/member-groups-sections/women-physicians/women-medicine-month-social-media-kit

While it is in September that we celebrate women physicians, we realize the contributions and dedication of the women neurosurgeons who we work with every day. Thank you to the women who have mentored me! Thank you to my friends and colleagues! Welcome to the young female neurosurgeons who are just starting on this wonderful and yet challenging journey!

https://neurosurgerywins.org

https://neurosurgerywins.org/residents

https://www.ama-assn.org/member-groups-sections/women-physicians/women-medicine-month-social-media-kit



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ings and supporting collaborative efforts in influencing the conduct of payers.

Assessment of Social Media Utilization of Neurosurgical Practitioners: A white paper will be generated to inform neurosurgeons regarding legal and ethical concerns related to patient information on social media.

Current State of Ambulatory Spine Centers: Circulation of a survey of neurosurgery training programs.

The following resolutions were considered and ultimately rejected by the body:

National MSSIC Initiative

A Call to Study the Neurosurgical Residency Application Arms Race

A Call for a New Position Statement from Organized Neurosurgery on Gun Violence

A Call to Relocate Certain Neurosurgical Meetings and Courses

Assessment of Regulatory Obstacles for Neurosurgical Training Programs

Neurosurgery's Commitment to Climate Change Mitigation

Observerships for Medical Students without a Home Program

The resolutions and discussions from this meeting reflect our commitment to advancing neurosurgery, prioritizing patient care, and enhancing our members' professional and educational environment. We look forward to continuing this progress and are eager to implement the adopted resolutions in the coming year.

Thank you for your continued support and active participation in making this meeting a success. Your contributions are invaluable in driving the future of neurosurgery.

Warm regards,

Clemens M. Schirmer, MD, PhD, MBA

Recording Secretary,

Council of State Neurosurgical Societies

My CSNS Experience

Jora Dhaliwal, MD

I wasn't certain about what to expect when I entered the Marriott Marquis for the fall CSNS meeting. However, I soon ran into some faces I recognized as my resident co-fellows for the year. Some, I hadn't seen since applying for residency, while others I met for the first time. We bonded over our shared experiences of training at American academic medical centers, and I was fascinated by the particulars of my colleagues' residencies in areas far from my own in the Midwest. Sure, we all learned how to perform lumbar laminectomies, but the local patient demographics, regional geography, and political climate were all remarkably different.

During the meeting, I had the privilege of attending the medicolegal committee, and I saw familiar people from the academic neurosurgical world. However, I also encountered others I had not met before, and I soon came to learn about these neurosurgeons from a wide variety of practices. One notable example was my faculty mentor, Dr. Perez Cruet, who had extensive experience in an academic as well as a private practice setting. Input from these surgeons with different philosophies and experiences made the committee meeting dynamic and helped us shape a strong consensus as a result.

I greatly enjoyed the debates in the committee meetings, but I eagerly anticipated the plenary session where the entire CSNS body would provide testimony on various resolutions. Prior to attending the meeting, I was keen on hearing the lively debate in this session, but I wasn't sure how I was going to be involved. However, in my committee, senior members encouraged me to actively participate during this session. Following preliminary remarks on a particular resolution, I approached the microphone and presented testimony on the merit of unionization in neurosurgery from the medicolegal committee's perspective. The entire assembly listened attentively, and as I took my seat, I reflected on the significance of engagement and debate regarding vital socioeconomic issues from a neurosurgical standpoint. These discussions were not bound by training or experience; rather, their strength lay in diversity.

The entire experience left me feeling invigorated, and I was thrilled to realize that this was only the beginning.



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Corporate Medicine

Mark Pacult, MD

I pause. I discover that I am locked out of my hospital's electronic health record (EHR). I try a random assortment of numbers and symbols, the likes of which have not been seen since my cat walked across my keyboard last week. After entering another password, submitting my last four dental x-rays, answering a robo-call, and visiting the local embassy, I am able to log in to my email account. I learn that the problem lies in my failure to complete my health system's annual series of mandatory modules. I get to work, and soon realize I'll be done by the spring of 2025.

For the next few hours, I delve into the burning intellectual questions of our time ("Regulatory Refresher: Clinical Ancillary Personnel") and ponder the geopolitical implications of gravity ("Fall Prevention and Management – Clinical"). I need to finish my patient's medication reconciliation to ensure that they receive their nightly dose of artificial tears, and yet am pathetically on my fourth attempt at passing the quiz for "Team Building and Expectations." Perhaps I can give them some of my own real tears.

I finish the modules just in time to have a conversation on end-of-life with a patient's family via the Automated Remote Communication Technology Assistant ™, aka, the iPad on wheels with the broken Bluetooth speaker. As it turns out, the number of real human Spanish interpreters at my hospital was recently reduced, bringing coverage down to Mondays through Thursdays. They were hurting the bottom line. I always knew that discussing comfort care is better eye to iPad to eye.

"Be it resolved," I start to write when I get home that night. "That modules on corporate team building shall henceforth be banned." I crumple the paper up and start anew, realizing I am missing an essential element of a successful resolution. "Be it resolved," I write, "that a survey be distributed to study the deleterious effects of corporate modules." That's more like it.

My research focuses on the ways in which corporatization, technology, and regulation influence the delivery of healthcare, for better or for worse. Whether these studies are told with data, or studies, or through narratives that illustrate the absurdities and ironies of the changes in healthcare, they all deserve to be told, shared, and debated.

This is the spirit I took away from my first CSNS meeting, a conglomeration of individuals who believe that socioeconomic issues within medicine deserve as much attention as scientific ones. Over the next year, I hope to get involved in projects that show how care delivery can sometimes have as much impact on outcomes as clinical decisions. If I can finish my modules in time, that is.

See you in Chicago
Spring CSNS Meeting May 2-3, 2024!