OPERATIVE NOTES

American Academy of Pediatrics - Section on Surgery Newsletter

Pediatrics, the AAP Journal Celebrates 75 Years



The year 2023 marks the 75th anniversary for the Section on Surgery as well as the AAP journal, Pediatrics. The journal publishes policies, technical papers, clinical practice guidelines, as well as other pediatric surgical related papers. To celebrate, editors asked all sections to submit their top three journal articles. The Section on Surgery had many outstanding options from the publication history of Pediatrics and this will be published shortly - look out for which were selected. Noteworthy from the first edition of the journal in 1948 on pages 44 to 51 is an article from Drs Gross and Bill, "Concealed Diverticulum of the Male Urethra as a cause of obstruction".



Join the Section on Surgery this fall to talk and learn about *Day to Day Advocacy*

he AAP section on surgery annual meeting in October in Washington, DC is a fitting location to highlight the advocacy work of its members during the first of 3 planned multidisciplinary Symposia, "Day to Day Advocacy". Speakers for this session will highlight contemporary issues affecting the care of children and the role of pediatric specialists in impacting changes. Speakers for this session will include Dr. Ala Stanford and her efforts to identify and eliminate racial disparities notable during the COVID pandemic, **Dr. Kris Jatana** to highlight his legislative work and marketing changes on the dangers of button batteries for children, **Dr. Peter Masiakos** and his coordinated labor with local and state government officials on injury prevention and gun violence, and Mark Delmonte, JD and current CEO/ Executive Vice President of the AAP, previously VP of Advocacy for the AAP who will encourage members on the value of these and other important advocacy efforts

Your Chance to JOIN and Make CHANGE!

he AAP Section on Surgery relies on members to engage in the work that will allow us to heal all children. If you have ideas and want to join these efforts, we are looking for you now to join a committee. We are adding on to all committees and below you will see some of the project that they are currently working on to give you an idea of what is and can be done:

Advocacy (Chair: Dr. Bindi Naik-Mathuria): there are four subcommittees that focuses the work on firearm violence, food insecurity, patient autonomy, and climate/sustainability.

Communication (Chair: Dr. Robin Petroze): Informs members of important information that they may need to care for children. Use of social media tools such as Twitter would be a major asset.

Delivery of Surgical Care (Chair: Dr. Barrie Rich): Analyzes how children receive surgical care and how this may be improved. Multiple projects ongoing and always looking for new ones. A great way of starting your AAP journey.

Education (Chair: Dr. Adam Alder): Creates different methods to educate pediatric surgeons, pediatricians, and parents/families. They put on sessions in person and via webinar including the Fall Fellows' Conference that are right before the fall meeting which are can't miss events.

Industry (Chair: Dr. Duncan Phillips): Educates SOSu members on how we should work with industry in the creation of new devices and how we can introduce them into practice.

Membership (Chair: Dr. Ash Gosain): Works on increasing membership for the section and to maximizing the value for members.

Nomination: (Chair: Dr. Kenneth Gow): Works to identify the next member to join the Executive Committee and become the Chair of the Section on Surgery in his/her 6th year.

Program (Chair: Dr. Jennifer Aldrink): Focuses on creating and running the fall NCE H program for the Section on Surgery. This includes grading abstracts submitted in the spring and presentations in the fall.

Publications (Chair: Dr. Colin Martin): Focuses on reviewing manuscripts beings submitted for the annual Journal of Pediatric Surgery devoted to the fall meeting.

Trainees/Early Career (Chairs: Drs. Regan Williams and Reto Baertschiger): Focused on all things that new pediatric surgeons need to know such as mentorship, interviews, job negotiations, and dealing with complications.

If you are interested in any of these committees, please contact: **sosu@aap.org**.

The Match & William Hardy Hendren III

t this time of the year, many pediatric surgeons are busy with interviewing students and residents as they all take their next step in training. Almost everyone reading this has at one point been involved in The Match wherein applicants and programs place a list and an algorithm selects a match. Few of us think much about how that system was invented. And fewer still know that a medical student who would become one of the most famous pediatric surgeons was a key figure in this story.

Since residency programs were formally introduced in the 1920s, the hiring process was characterized by intense competition among hospitals for an inadequate supply of interns. Hospitals benefited from filling their positions as early as possible, and applicants benefited from delaying acceptance of positions. In 1945, medical schools decided not to release any transcripts or permit any letter of recommendation to be written until a particular date. Thus, they managed to move the date of the residency selection back to the 4th year of medical school. To compete however, programs began to issue offers with a time limit for reply. It decreased from 10 days in 1945 to less than 12 hours in 1950. It got so bad that many were offered positions on the phone and students had to agree at that very call or the offer was rescinded.

With the existing system becoming increasingly tense and inefficient for both students and program directors, an alternative was needed. In 1950, **Dr. Francis**Joseph Mullin from University of Chicago suggested a 'clearing house' approach that saw ranked preference lists submitted by both students and hospitals to help make 'the Match'. A similar system had been experimented with in Philadelphia, in the 1930s. Mullin's approach was agreed to by the Association of American Medical Colleges (AAMC) in October 1950 with a trial run taking place the next year. Mullin teamed up with Stanford academic John Marshall Stalnaker to create the algorithm at the heart of the new centralized match system. While their work represented a step forward, it was flawed. It penalized students who took a chance on their first choice, creating an 'unstable' match that incentivized potential residents and



Dr. Francis
Joseph Mullin

their first choice, creating an 'unstable' match that incentivized potential residents and hospitals to make deals outside the system. Despite this obvious problem, the National Interassociation Committee on Internships (NICI) pushed forward with the **Mullin-Stanlnaker's algorithm**, and saw it accepted by medical schools and residency programs across the US.



Wiliam Hardy Hendren III

However, it was **William Hardy Hendren III**, a final year student at Harvard Medical School that would play a pivotal role in preventing this algorithm from moving forward. Born in 1926, he was the son of a film advertising executive who grew up in New Orleans and Kansas City during the Depression. After training as an aircraft carrier pilot during WWII, the war ended before he saw combat – he then went to Harvard. In October 1951, Hendren attended a lecture in which **Dr. George Packer Berry**, the school's dean explained to students how the Mullin-Stalnaker algorithm would work. As the serving AAMC president, Berry had all his chips on the Mullin-Stalnaker table. Hendren, listening to this, challenged the

algorithm and in a 2006 Oral History interview with the AAP, Hendren said, "So I put up my hand, and I went down to the blackboard, and said that I think the mechanics of this are flawed. I started drawing boxes with the choice A, B, C and so forth. He kept interrupting me saying that I just don't understand. Finally, I said, Dr. Berry, I don't mean to be rude, but you've had 45 minutes to talk without interruption, I need five minutes to talk without interruption. I can't present this idea if you keep interrupting me. He didn't like that at all. When I was finished, he told me again that I just didn't understand. I said, well, excuse me, Sir. Let me ask for a show of hands [in] our class. Is there anybody in the room who does not agree with what I just said? [and] they all did." Though Berry stormed out of the lecture hall, "he said that they had spent \$100,000 of money from the [AAMC] in working out the details... and he didn't give a damn if any of us got an internship".



Dr. George Packer Berry

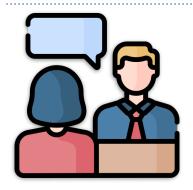
A historic, frantic next few weeks followed. Hendren proceeded to lead a student movement to overthrow the planned Mullin-Stalnaker approach, with medical students developing their own algorithm, "**The Boston Pool Plan**". This was an algorithm that saw student tentatively matching to hospitals 'until or unless' they matched at one of their higher picks. Initially the NICI refused to budge saying it would be impossible to program a computer to understand the new alternative. After Hendren showed it could be done on a Massachusetts General Hospital accounting computer, and medical students across the country voted 'en masse' not to use the Mullin-Stalnaker approach, 'The Boston Pool Plan" was implemented the following year.

Taking place in March 1952, the first ever Match Day saw more than 10,000 residency slots made available to around 6000 American medical graduates. Seen as a huge success, it was later tested and validated by Dale Gale and Lloyd Shapley, two prominent game theory economists who would later win the Nobel Prize in Economics. The NICI recommended the creation of an organization to administer and oversee the running of the Match. The organization knows as the National Intern Matching Program (NIMP) was established in 1952.

Despite his role in the first Match Day, and the fact they'd later become good friends, Hendren says his Harvard dean initially took most of the credit for the first successful Match Day. "Dean Berry began to get congratulatory telephone calls and telegrams from all over the country from other deans extolling how well the plan had worked, how their classes were all matched within three or four runs on the machine, and everyone was amazed at how well it had run. He also had praise heaped upon him for 'letting his students carry the ball while he himself remained in the background.' He never apologized to me!"

So when you think about the current match, remember that it was William Hardy Hendren III, past AAP Section on Surgery Chair and APSA president who was instrumental in making it the success that it was and now at 70 years in much the same form as it started, continues to match students and residents including in pediatric surgery take their next steps in their careers. If you wish to read more on the amazing life of Hardy Hendren III, please check out this link: https://downloads.aap.org/AAP/Gartner%20Pediatric%20History/Hendren.pdf

Seize the "Interview" Day! Part 1: The Interviewee February 8, 2023 - 5:30-6:30 PM Central



he AAP Section on Surgery Trainees and Early Career Physicians Committee offer a free webinar for all members which focuses on the how to improve your overall performance for interviews as an interviewee. While we all must do interviews for applying for training positions and for employment, there are few educational offerings that aim to improve those skills. Also, online interviews have added additional nuances to this process. Sign up now to hear great advice on how to make your interview go smoothly and highlight your amazing abilities so you can get the offer you want!

Learning Objectives:

To introduce and discuss the best approach (and things to avoid) in online or in-person interviews for:

i) Residency, ii) Fellowship, iii) Early Career Positions, iv) Leadership Opportunities

Moderator: Katy Flynn-O'Brien, MD, FAAP and Katherine Gonzalez, MD, FAAP

Presenters:



Cynthia Downard, MD, FAAP
Program Director North Children's
Hospital
Louisville, KY
Chair, Section on Surgery



Hira Ahmad, MDPediatric Surgery Senior Fellow
University of Washington



Aimee K Gardner, PhDSurgWise CoFounder

To register: CLICK HERE

SOSu Famous Figure: C Everett Koop (1916-2013)



Everett Koop graduated from Dartmouth in 1937, completed his MD degree in 1941 at Cornell, and did his surgical training at the University of Philadelphia. He spent time with Ladd and Gross learning pediatric surgery and returned to CHOP in 1946 where he would assume the role as Surgeon-in-Chief just two years later at the age of 32. His contributions as a pediatric surgeon are long and include the development of the nation's first NICU for infants with surgical conditions, surgical repair of esophageal atresia, and VP shunts. Towards the end of his surgical career, he collaborated with theologian Francis Schaeffer which led to his 1982 to 1989 role as Surgeon General during the Reagan administration where he was America's doctor and tackled smoking, HIV-AIDS, and fought for infant rights.

Koop was a founding member and served as the **3rd AAP SOSu Chair** (1958-'59), **Ladd Medalist** (1976), founding member and **2nd APSA President** (1971).

The William E. Ladd Medal and Arnold M. Salzberg Mentorship Awards

William E. Ladd Medal

This is the highest award of the American Academy of Pediatrics Section on Surgery and recognizes a lifetime of achievement in the field. If you have suggestions for a worthy recipient this year, please send a note and reason to sosu@aap.org.

Arnold M. Salzberg Mentorship Award

Letters of support from the mentees are submitted to the Section Manager and reviewed by the Executive Committee, with the Executive Committee having the final determination in the award. The honor is bestowed at the Section on Surgery each year. Please fill out the **Nomination Form** with letter by **February 13, 2023**.

