Letter from the President

It’s hard to believe we’re approaching the final quarter of 2018. Summer is winding down, interview season is winding up, and a new crop of fellows are just getting their feet wet in their new roles. I have a distinct fond memory of this time in my first year of fellowship, observing all the residents change rotation and realizing for the first time in training, I didn’t have to switch and learn something else. I was finally home in MIGS and the journey toward expertise in what I love began. Thankfully that journey isn’t over, and I count myself lucky to still learn, and grow and be challenged ten years later.

It’s exciting to watch our specialty continue to evolve. We have more training programs than ever, continually at the top of competitiveness of the OB/GYN fellowships. More and more academic programs are building a MIGS service and, perhaps most exciting of all, ABOG has submitted an application for designation of MIGS as a Focused Practice to the American Board of Medical Specialties. If the application is successful, OB/GYN diplomates with three years of clinical practice (inclusive of two years of fellowship) will obtain certification of focused practice through passing a written exam and submission of a case log representing proficiency in minimally invasive benign and complex gynecologic surgeries. Diplomates with MIGS focused practice would maintain their designation with Maintenance of Certification through ABOG, just as the subspecialties do. This designation would be a huge step forward toward recognizing the unique expertise we provide to patients through surgical excellence.

Women’s health stands to gain a great deal as patients, departments, and insurers will be able to more easily identify those who have special talent in minimally invasive GYN surgery. The comment period for MIGS focused practice closed for online submissions on July 26, but if you haven’t already written with your support, please consider doing so by emailing COCERTpublicinput@abms.org prior to September 7.

In other exciting news, please join me in congratulating Dr. Ted Anderson in being selected as our upcoming ACOG President. Aside from his subspecialty, Dr. Anderson is eminently qualified for the position, having demonstrated tremendous local and national leadership over the course of his career. Although he will have many important responsibilities in this role, having a MIGS ambassador at the helm can only help bring positive attention to our corner of the larger specialty. We will miss him greatly on the FMIGS board when he takes over as ACOG President, but he’s agreed to continue supporting FMIGS/us in the future.

The fourth annual FMIGS Surgical Boot Camp was another great success! A giant thank you to Dr. Amanda Yunker for taking over leadership for this year’s course and to all of the faculty who donated their time to help educate this year’s group. I had a great weekend of learning, networking, and catching up with all of you.
Congratulations!

• To Dr. Emad Mikhail on his recent AJOG/SGS 2018 Impact Award!
• To Dr. Nadia Gomez on her APGO Excellence in Teaching Award!

Fellows Corner

Dear Fellows,

Congratulations and welcome to all the incoming first year MIGS Fellows! I hope that you have been getting settled in your new programs, that course work is going well and you are starting to think about research projects. If you are interested in arranging an away rotation during your fellowship, we offer many locations that are happy to host you for a week of observing in the OR and clinic. Arranging away rotations can be done through the AAGL Fellowship website (https://www.aagl.org/observership-login/).

For the second year fellows, this is the start of the season for post fellowship life – it goes by so quickly! For many of you this means looking for jobs. Keep an eye on the Facebook group where we will post job listings as they come in as well as at the end of the newsletter. We have time set aside for two events specifically designed for current fellows during the AAGL Global Congress in November and hope to see you in Las Vegas! The first is a postgraduate course on Sunday, November 11th from 7am - 4:30pm in Room 112-113 titled “FELO-608”. This course will focus on professional development with a workshop on video production – be sure to bring a 3-5 minute surgical clip and a laptop so you can practice video editing! The second is a meeting for FMIGS Fellows, November 13th from 11am - 12pm. This is a chance for you to discuss what is working well, what we need to improve and suggest things that you would like to see happen in the upcoming year.

On a final note, FMIGS graduates from the classes of 2017 and 2018 are eligible to apply for the Fellow Board Representative position on the FMIGS board. It is a great opportunity to work with a wonderful group of people, advocate for the current fellows and be involved with helping to determine the future direction of the fellowship. Deadline to submit your nomination is August 30, 2018. Please reference page 6 of the newsletter for additional information.

All my best,

Noah
Program Director’s Corner

Hi PDs! Now is the time to make sure important dates and times are on your calendar for our annual meeting.

- November 11, FMIGS graduation at 5pm
- November 13, FMIGS - FPRN meeting at 10am. Please plan on attending!
- November 14, Town Hall meeting at 1pm - fellows, faculty, and FMIGS board invited!

Thanks for the tremendous support at our most recent PD teleconference. We will be working on resolving the technical issues but overall, it was a great turnout with relevant discussions. I look forward to bringing you feedback at our annual meeting or sooner. Time for PDs to come together? We are working on it...

Until then, make sure to get your MyTipReports done for your fellows, and document how outstanding they are :).

See you all soon,
Gretchen

Did you know?
A recent survey of FMIGS Grads (N=61):
Question 1:
Regarding laparoscopic hysterectomies, in my fellowship I mostly did(do):
1. Total laparoscopic hysterectomy 95.1% (58/61)
2. Supracervical laparoscopic hysterectomy 3.3% (2/61)
3. Even amount of both 1.6% (1/61)

Question 2:
In fellowship, the most common access technique was
1. Multiport 95.1% (58/61)
2. Single site 4.9% (3/61)

Question 3:
Check which statement is most true:
1. I modify my incision(s) based on expected difficulty of case 80.3% (49/61)
2. I essentially make same incisions no matter what 19.7% (12/61)

Question 4:
Check which statement is most true:
1. I do not care if I have 3D capability 95.1% (58/61)
2. I prefer to have 3D available 4.9% (3/61)

Young Alumni Network

The FMIGS Young Alumni Network continues to thrive! I am pleased to report on our upcoming activities.

We are preparing for our 2nd FMIGS Mentor/Mentee match, which will occur in October following the FMIGS Class of 2021 match. FMIGS 2014-2018 graduates-watch your e-mails for an invitation to become mentors to the newly matched and current fellows.

At the 2018 AAGL Global Congress, a panel discussion is scheduled during FELO-608, November 11, 2018. The discussion will feature successful MIGS surgeons in academic, private, and research focused practice. We will also have an informal YAN Happy Hour for all YAN members to network and catch up.

Stay tuned for the date, time, and location. Hope to see you all there!

Megan

Megan Wasson, DO
Chair, FMIGS YAN Committee
The FMIGS/SGS subgroup of the Fellows' Pelvic Research Network (FPRN)® continues to grow! We want to welcome our newest fellows who have joined the 2018-2019 FMIGS-SGS Steering Committee (SCM); Dr. Chetna Arora, Dr. Jessica Shields, and Dr. Cynthia Arvizo.

Please visit the FMIGS-SGS FPRN website to learn more about the FPRN and consider joining one of the ongoing studies! Fellows that participate in studies serve as coauthor. [http://www.sgsonline.org/fprn](http://www.sgsonline.org/fprn)

There are currently five ongoing FPRN studies with two well underway with patient enrollment. Dr. Carolyn Piszczek is leading a study evaluating the use of social media in women with pelvic pain and Dr. Jessica Sisto is assessing sexual function and satisfaction after hysterectomy in women who have sex with women.

Dr. Nisse Clark is investigating outcomes of Essure removal for the treatment of device-attributed symptoms and Dr. Cynthia Arvizo is evaluating treatment outcomes after uterine artery embolization for management of uterine arteriovenous malformation. Dr. Patricia Mattingly is examining the impact of FMIGS training on myomectomy route and outcomes. Fellows that participate in the myomectomy study have the opportunity to serve as a lead investigator and first author for an ancillary study that utilizes the data bank.

All studies are recruiting fellows to serve as a participating site and coauthor. If you’re not a FMIGS fellow but you’re interested in serving as participating site and coauthor, you may be eligible. Please check out our website where you can find more information on our studies along with the contact information for the principle investigators.

The next opportunity to submit a proposal will be this fall for consideration at the 2018 AAGL Global Congress. Mark your calendar now and submit your research proposal by September 22nd to be considered for review at the 2018 AAGL Global Congress in Las Vegas, November 11-14 2018.

We want to thank all of you for making this new chapter a success! The FPRN would not be possible without the mentorship from our senior advisory board and the support and funding provided by SGS and AAGL.

Chair: Leigh Rosen MD
Secretary: Chetna Arora MD
Treasurer: Jessica K Shields DO
Webmaster: Cynthia Arvizo MD

Attendees of the 2017 SGS Meeting and participants in the Fellows Scholars Program
Near the end of my fellowship, I encountered my first transgender patient requesting hysterectomy as part of gender reassignment. It was not until some months later that I realized the leap of faith that he had taken by presenting to our gynecology practice at the University of Rochester. Unfortunately, transgender people have found the healthcare system to be anything but caring. Many have been judged, harassed, and diagnosed with mental illness because of who they are. This patient presented to our practice with the hope that we would treat him with respect and provide quality surgical care that all people deserve. He underwent an uncomplicated total laparoscopic hysterectomy with bilateral salpingoophorectomy.

Several months later, another transgender man presented with the same request. A few months later, another did so. And then another – specifically requesting to see me. I inquired about how these patients were being referred and learned that I was highlighted on social media as a trans-friendly provider offering minimally invasive hysterectomy. Word has continued to spread, and I have had a steady stream of transgender men and gender nonconforming people presenting for hysterectomy. Initially I was in awe. In my perspective, I considered myself as simply a surgeon providing a necessary service. However, the positive impact on the community was powerful. I realized quickly that not all gynecologic surgeons are willing to provide this service.

Since 2014, New York State has required insurers to cover gender-reassignment surgery. This requirement has been incredibly helpful for those transgender patients who truly feel dysphoric to have organs that do not correspond to their identified gender. Insurers are able to dictate their own eligibility requirements but most follow WPATH (World Professional Association for Transgender Health) guidelines. With some experience under our belt, our practice has been able to help patients navigate insurance requirements such as obtaining letters of support from mental health providers. We have been able to develop a network of trans-friendly health professionals, allowing us to refer to each other as needed, knowing that our patients will continue to be treated with respect.

I am honored to serve on the newly formed Transgender Advisory Council to the Medical Executive Committee at the University of Rochester Medical Center. We have established a multidisciplinary group called THRIVE (Transgender Healthcare, Respecting Individuals, Valuing Everyone) with a goal of identifying those areas in which our institution succeeds and those in which we struggle to provide optimal care to transgender people. Our group includes surgeons, endocrinologists (both adult and peds), psychologists, speech pathologists, nursing, and administrators. It has been an incredible journey for me, becoming a leader and advocating for gender non-conforming patients both within and outside of my practice. I feel lucky that MIGS training has taken me down this road, and I have had the pleasure of working with some of the most amazing, kind and caring patients. I encourage all of you to do the same.

Dr. Benjamin is an Associate Professor of Women’s Health at the University of Rochester in New York, and co-director of the MIGS Fellowship.
FMIGS 2019 Board Nominations
Now Open!

FMIGS Board Nominations Are Open for:
Secretary-Treasurer,
2 Directors-at-Large, and
1 Fellow Board Representative

If you wish to recommend someone as a candidate, or if you wish to be considered as a candidate for one of these positions, click the links below to submit your nominations no later than August 30, 2018. All nominees will be required to provide a current CV, a Vision Statement (not to exceed 500 words) that includes their goals and why they believe they are ideal for this position.

It is time for you to voice your opinion about your future elected officers. Nominations Close August 30, 2018 12:00 AM (Pacific Time)

Secretary-Treasurer
The Secretary-Treasurer shall serve starting with Secretary-Treasurer; second, as Vice President; third, as President; and fourth, as Immediate Past President. The term of office shall commence on January 1, 2019.

Eligibility
Those eligible for election are individuals who have participated in a leadership role (i.e., previous member of the AAGL, FMIGS or Foundation Board, JMIG or SurgeryU Editorial Board and current or former Director or Associate Director of an FMIGS program).

Ineligibility
Anyone who has previously served as a FMIGS Officer (i.e. Secretary-Treasurer, Vice President, President or Immediate Past President) is not eligible to be nominated again.

Directors-at-Large
All elected Directors-at-Large shall serve for a total of two (2) years. The term of office shall commence on January 1, 2019.

Eligibility
Eligible nominees for Directors-at-Large are individuals who have an interest in MIGS, are not currently serving on the Board, have not had more than one prior term of service as Director-at-Large, and have never served as an Officer of the FMIGS Board.

Ineligibility
Directors-at-Large may serve a total of two terms, but not consecutively. Prior Officers of the FMIGS Board are not eligible to serve as Directors-at-Large.

Fellow Board Representative
The Fellow Board Representative shall serve for a total of two (2) years. The term of office shall commence on January 1, 2019.

Eligibility
Eligible nominees for Fellow Board Representative must be FMIGS graduates who have finished their training in 2017 or 2018, are not currently serving on the Board, and have never served as an Officer of the FMIGS Board.

Ineligibility
Nominees who have not graduated from a FMIGS program are not eligible to participate.
A Communication from the Board to the Programs

August 21, 2018

MIGS Job Openings

Harbor-UCLA Medical Center (HUMC)

The Department of Obstetrics and Gynecology at Harbor-UCLA Medical Center (HUMC) is currently seeking a full time generalist faculty member. Ideal candidates are board certified or eligible physicians with commitments to resident education. This position may be ideal for individuals with fellowship training in minimally invasive gynecological surgery interested in an academic career. Harbor-UCLA is a county teaching hospital working with underserved patients in Los Angeles County. Academic affiliation is through the David Geffen School of Medicine at UCLA.

Members of the Gyn Division supervise and teach residents in the operating room, various outpatient clinics, the gynecology teaching service, and provide in-hospital gynecologic consultation. Additionally, they have an active role in medical student education. Current Gyn Division faculty includes one specialist in minimally invasive gynecologic surgery, 3 urogynecologists, one full time gyn/oncologist, as well as several generalists. This position will require obstetrical in-house call coverage. Additional obstetrical coverage and family planning interests are a plus.

Requirements include: M.D./D.O. degree required; successful completion of accredited residency training program required; current licensure to practice medicine from the Medical Board of California; current registration with DEA (Drug Enforcement Administration); board certification or eligibility by the American Board of Obstetrics and Gynecology.

HUMC is a level one trauma center located in Southern Los Angeles with 16 state-of-the-art operating rooms opened in 2014, including one X1 and one S1 DaVinci robots. The Ob/Gyn residency program trains 5 residents per year and is home to an accredited Urogynecology Fellowship. Additional information regarding the Department of Obstetrics and Gynecology can be found at: www.harbor-ucla.org

Interested candidates should send a cover letter expressing their academic interests and a copy of their curriculum vitae to: jbrotherton@dhs.lacounty.gov

Washington University School of Medicine, St Louis

Washington University School of Medicine in St Louis, one of the finest medical schools in the country is seeking a board eligible/certified AAGL fellowship trained surgeon to work full time in the Division of Minimally Invasive Gynecologic Surgery. The OB/GYN department is nationally recognized with extensive clinical and research opportunities.

The Division of Minimally Invasive Gynecologic Surgery currently performs 500 plus major laparoscopic procedures per year. In 2018, brand new state of the art operating rooms opened in coordination with new academic and clinic office space. Surgeries are performed at Barnes-Jewish Hospital, a major academic hospital as well as another community hospital in St Louis.

Preferred candidates must have a strong commitment to teach medical students, residents and fellows. The candidate should be able to provide care to patients with complex surgical pathology and be a resource for department and community gynecologic surgeons. Strong interpersonal skills and interest in surgical research is also essential.

For consideration in this position please send a cover letter of inquiry and curriculum vitae to Scott Biest, M.D. c/o Kim Profeta at profetak@wustl.edu

Review of applications will begin immediately and will continue until the position is filled.

The applicant should apply on line as well at the below link.

https://facultyopportunities.wustl.edu
The Ohio State University Wexner Medical Center
Gynecologic Surgeon

The General Division of Obstetrics and Gynecology seeks an outstanding gynecologic surgeon for a full-time position. Ideal candidates are board certified or eligible physicians with fellowship training in minimally invasive surgery or equivalent experience who are interested in an academic career. The General Division has five outpatient Ob/Gyn faculty practice sites and provides surgical services at two hospital facilities, Ohio State University Hospital East and OSU Wexner Medical Center University Hospital. This position would include outpatient services at two practice sites: Carepoint East and the Center for Women's Health.

Members of the General Division supervise resident continuity clinics, the gynecology teaching service, and provide in hospital gynecologic consultation. Additionally, they have an active role in medical student education. Current faculty includes two specialists in minimally invasive surgery. Other faculty expertise includes family planning, vulvar disease, menopause, pediatric and adolescent gynecology, and breastfeeding.

Requirements include: M.D./D.O. degree required; successful completion of accredited residency training program required; current licensure or interim permit to practice medicine from the State of Ohio Medical Board required; current registration with DEA (Drug Enforcement Administration); board certification or eligibility by the American Board of Obstetrics and Gynecology.

The Wexner Medical Center at Ohio State University is a state of the art tertiary care center with a level III NICU. The Ohio State University College of Medicine graduates approximately 200 medical students per year. The Ob/Gyn residency program is integrated with the Mount Carmel Medical System and trains 11 residents per year. The metropolitan area is a growing community that houses the State Capital. Additional information regarding the Department of Obstetrics and Gynecology can be found at: https://medicine.osu.edu/orgs/obgyn/Pages/index.aspx and about the medical center at: https://wexnermedical.osu.edu/careers/physicians-and-faculty

Interested candidates should send a cover letter expressing their academic interests and a copy of their curriculum vitae to:

Tiffany Bauman
Faculty & Physician Recruitment
The Ohio State University Wexner Medical Center
tiffany.bauman@osumc.edu

The Ohio State University is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability status, or protected veteran status.
Minneapolis-based Oakdale Obstetrics & Gynecology

Minneapolis-based Oakdale Obstetrics & Gynecology is seeking a fulltime ObGyn physician, preferably Fellowship trained. As the largest independent ObGyn practice in the Twin Cities, this progressive practice offers a complete continuum of women’s health services. You’ll work alongside 11 board-certified ObGyn physicians, 8 nurse midwives, 5 nurse practitioners, an ObGyn physical therapist, and a registered dietician. Our practice:

- Includes four state-of-the-art clinics; our flagship is located in Maple Grove. Other clinic locations include Blaine, Crystal, and Plymouth.
- Is affiliated with Maple Grove Hospital, North Memorial Health Hospital, and two ambulatory surgery centers in Maple Grove and Blaine, respectively.
- Is located in and near communities recognized for outstanding school systems, entertainment, recreation, culture, sports, and more.
- You’ll enjoy a very autonomous but collaborative lifestyle practice supported by highly trained staff who enjoy their work. Staff and physician retention exceed industry norms. We offer competitive salary and benefits, and reimbursed continuing medical education.

Contact: Craig Carlson, clinic administrator, 763-587-7000, or email craig.carlson@oakdaleobgyn.com