We aim to be the authoritative resource in the fields of organ and cell transplantation by representing our members and their patients, as we advocate for comprehensive and innovative solutions to their needs.

–ASTS Vision
Editor’s Letter

This is an exciting time for ASTS, and especially for the Communications Committee, as we launch a major overhaul of the website, ASTS.org. You can read about this complex project on page 7 and get a preview of the cool things the new website will do for you and the Society in general. If you have ideas for the new site, I encourage you to send your comments to asts@asts.org so they can be considered as we move forward. We expect to launch the new site next spring right before ATC. We are grateful to Genentech for giving us $30,000 toward the new website!

In this issue you’ll also find a recap of the committee items presented at the fall Council meeting (page 6) and a look at the 6th Annual Surgical Fellows Symposium last month in Hilton Head, South Carolina (page 16). This year’s Fellows Symposium was jam-packed with two days of intense educational sessions.

We also continue to keep you informed about what your peers are doing in our People and Places (page 12) and Across the Field (page 10) features. I urge you to get involved by submitting a photo for the cover, a profile of your program, or an announcement of your new job or your program’s latest honor or milestone to diane.mossholder@asts.org.

Stay connected!

Kenneth D. Chavin, MD, PhD

Chimera Needs You!

Chimera is always looking for ways to feature ASTS members and their work. We particularly need cover images and transplant program profiles. Take advantage of this easy way to share information with your colleagues and gain recognition for your work by sending submissions and questions to diane.mossholder@ASTS.org. Thank you for helping make Chimera an interesting and informative resource for all ASTS members!
President’s Letter

Forward to the Future

“Before anything else, preparation is the key to success.”
— Alexander Graham Bell

“Change is never easy, but is always possible.”
— Barack Obama

Saving, changing, or helping individuals is usually the result of intense preparation, whether evacuating those in the path of a storm, casting a vote, or transplanting a desperately needed organ. Training the next generation of transplant surgeons may also fit into the category of changing lives. ASTS, as part of its core mission, supports transplant surgeons in all phases of our careers, but for me, one of the most rewarding responsibilities is helping launch the next generation of transplant surgeons.

Since the last Chimera, the ASTS has held two important meetings in this critical area of training—the Program Directors (PD) Meeting in Chicago, and the 6th Annual Surgical Fellows Symposium in Hilton Head, South Carolina. At the PD meeting, we gained significant insight into the current status of training transplant fellows in North America, identified areas of strength and weakness, noted programmatic and fellow needs, and began to develop a five-year strategic plan. I am excited by the future possibilities and opportunities for our ASTS training programs. Change is coming to our training paradigm with regard to educational content and support, operative experience, digital resources, work/life balance, increased networking capabilities, and international partnering. Some of these changes will require some significant effort and attention on the part of the training program, but I see this as great opportunity rather than an irritating obstacle. We owe it to our trainees to provide the best possible learning environment, and we must maintain high standards. There will be more to come in the near future as the details of the strategic plan are worked out and approved by the council.

At the Fellows Symposium I had the opportunity to meet nearly all the second year fellows, whether it was in a small group, at dinner, or on a run. The relaxed beach setting was perfect for the fellows to get to know each other and the faculty, making connections that will support them throughout their careers. I was pleased by how quickly the teams gelled over their case studies during lunch and by the thoughtful questions they asked after the talks. That our fellows are bright, talented young men and women goes without saying, but their passion for our field is inspiring, and their thirst for knowledge assures me that the future of transplantation will be in good hands.

You can read more about this event starting on page 16.

For those of us further along in our careers, preparation may be in a different direction, but it is just as important. I urge you to take advantage of the opportunities ASTS offers you to keep learning and connecting. Our Maintenance of Certification (MOC) program (Trans-SAP) will be going live soon, and I hope all of you take advantage of this amazing resource that the CME committee has been working on so diligently.

And of course, there is our Winter Symposium on January 31 – February 3, 2013. This year’s theme is “Success at the Margins,” and sessions will take a look at the frontiers of transplantation, pathways for success in complex situations, and preparation for crisis management. I plan to focus in my Keynote Presentation on how to survive and excel in the research area during this period of time constraint and difficult funding — certainly an area where it is a struggle to achieve success.

This meeting is the highlight of our year — a meeting truly focused on issues important to the ASTS membership.

As we all prepare for winter and the holidays, I wish you and yours the best, and I hope to see you all very soon in Miami!

Kim M. Olthoff, MD
ASTS President

Kim M. Olthoff, MD
The ASTS Career Center at careercenter.ASTS.org enables employers to post, manage, and update their job listings and company profile anytime day or night, with online payment for faster service. It also allows job seekers to apply for posted jobs or upload their resumes for employers to view.

Employers have the opportunity to post job openings on not only the ASTS Career Center, but also selected sites through the National Healthcare Career Network (NHCN), an integrated network of nearly 300 associations formed to connect healthcare employers with highly qualified candidates in numerous specialties. Now employers can choose to have their openings seen by even more potential qualified applicants without repeating the posting process—the NHCN will choose the most relevant sites on its network for openings based on the keywords in the job description.
The ASTS Fall Council Meeting and ASTS Foundation Board of Directors meetings were held October 25, 2012, at the Omni Hilton Head Hotel in Hilton Head, South Carolina. The following are select committee news and reports from the meeting.

Business Practice Services Committee
Dr. William Chapman reported that the 2013 Transplant Surgeon Compensation and Benefits Survey is ready to launch and will be fielded in late 2012, with results available in early 2013. Dr. Chapman also requested and obtained approval for the fourth annual Leadership Development Program to be held September 22–25, 2013. Dr. David Axelrod presented the concept for and draft of an Advanced Leadership Development Program “Level 2,” designed for graduates of the original program, MBAs, and senior-level hospital administrators. The Council approved moving forward with the Level 2 program.

CME Committee
Dr. Michael Ishitani gave an update on the new Trans-SAP Maintenance of Certification Self-Assessment Program. Currently, 27 modules are available, and beta testing was scheduled to be complete in November. The goal is to have 15 more modules ready for beta testing by the Winter Symposium and another group of 15 ready by summer, which will continue to increase the number of CME hours available to ASTS members. The AJT Images in Transplantation is taking off and receiving good image submissions.

Communications Committee
Dr. Kenneth Chavin reported on the website redevelopment project that the ASTS Council authorized at its summer meeting. Work on the new membership database that will power the site is underway, and a vendor has been identified for the site design and architecture. A new platform for the Academic Universe will also be part of this project. See page 7 for details about the new site.

Fellowship Training Committee
Dr. Douglas Farmer presented two new Accreditation Applications and three Reaccreditation Applications for approval. There were also five accredited programs that applied for the addition of a hepatobiliary (HB) track or hepatopancreatobiliary (HPB) track. There was an extensive discussion of what information is necessary to accredit an HB/HPB fellowship program, and the Council agreed to approve the addition of the HB tracks pending additional information the committee determines is necessary from the programs.

Dr. Farmer also reported on the Fellowship Program Directors’ meeting in Chicago on October 8, which drew representatives from 66 (out of 74) programs. It was followed the next day by a strategic meeting, at which a strategic plan for the future of fellowship training was developed. As fellowship training issues become more complex, ASTS needs to adapt to remain relevant and credible, and this planning session helped identify initial steps forward by outlining the current status of fellow training, assessing current issues, problem-solving, anticipating future needs, and developing a strategic plan for a new paradigm. The Council accepted the strategic plan in concept, and details should be available after the Council meeting in January.

Grants Review Committee
The ASTS Foundation Board of Directors invited Dr. Ginny Bumgardner to discuss how to fund grants in the face of declining support from traditional partners. It was agreed to develop a brochure featuring how past grants benefited the careers of the recipients to support a campaign to raise money for future grants. A Surgical Innovation Grant was also discussed, which might draw funding from non-industry companies. Adapting ASTS grants to support career pathways in today’s environment is a priority, and the Board of Directors charged the Grants Review Committee to develop a plan for new topics for grants for 2014 and beyond.

Standards and Quality Committee
Dr. Ryutaro Hirose reported that the committee has participated in initial discussions with the American College of Surgeons about the possibility of developing a transplant-specific NSQIP module. A NSQIP module would give the opportunity to expand to new measures while leveraging current SRTR data. Dr. Hirose requested and obtained approval for a visit to ACS in Chicago to discuss the potential project in more detail, including laying out specific measures desired and cost projections.

Mark Your Calendar!
World Transplant Congress
San Francisco, California
July 26–31, 2014
Coming Soon to a Screen Near You

Starting next spring, ASTS.org will have even more to offer! You’ll notice a fresh new look that will adapt itself to whatever screen you are using, whether computer monitor, tablet, or smartphone. A new set of menus will help you easily find what you’re looking for, and all the business you do on the site will become easier, such as dues renewal, purchases from the store, event registration, and finding contact information for your fellow members. And we are excited that the new system will include personalized, privately accessed portals for committees to more easily share their work and communicate with each other.

The new site will also benefit the Society as a whole by requiring less staff time and programmer support to make changes or expand the site, allowing easy purchase of downloadable documents, and maintaining member access to tools and resources while allowing us to charge non-members for access.

Several committees are already at work on content and processes for the new site. If you have suggestions, please email them to asts@asts.org. We’d love to hear from you!
ASTS Leadership Development Program Celebrates Third Successful Year

Another year of beautiful weather, interactive learning, and networking greeted the latest cohort of attendees in the third annual ASTS Leadership Development Program (LDP). Participants raved about the outstanding and engaging Kellogg professors and the dedicated transplant leaders from ASTS who make this one-of-a-kind course possible. ASTS is proud to report that for the third year in a row, LDP registration was filled in a very short time and that excitement is already building for next year’s program in September 2013.

ASTS welcomed new speakers from within our own ranks—Dr. John Roberts, OPTN/UNOS president, and Dr. Alan Reed—and welcomed back popular guest speakers Thomas Hamilton from CMS and Rob Webb from United Health Group.

Each year the LDP planning committee strives to build on the constructive feedback from previous cohorts to continuously improve the attendee experience. This year, they introduced a two-part session on “Creating and Developing Your Center’s Strategy” featuring one of Kellogg’s top economics professors, Dr. Leemore Dafny, who specializes in health care, and a two-part session on accounting and finance featuring Dr. Thomas Lys, a five-time recipient of Kellogg’s Outstanding Professor of the Year Award. The unique combination of the Kellogg School of Management’s dynamic and distinguished faculty along with dedicated and experienced ASTS transplant surgeon

What Attendees Said:

Excellent!
Really the most productive meeting with the largest impact on the business practice of transplantation.

Opened my mind to many aspects of transplant center business I had not considered.

I gained practical ideas to put into practice immediately.

Outstanding review of CMS perspective on regulations with case studies.

Loved the interactive sessions!

Great exercise in group dynamics — managing teams.

Excellent and engaging speakers!

Outstanding enthusiasm. Interesting and thought-provoking exercises.

Excellent presentation! Tremendous amount of information presented in an interesting and exciting manner.

2012 ASTS Leadership Development Program
Northwestern University Kellogg School of Management

ASTS President Kim Olthoff addresses attendees.

David Axelrod opens the program with Transplant Economics.
leaders and guest speakers makes the ASTS LDP the best opportunity to advance your transplant center business leadership skills.

As the economic and regulatory challenges continue to increase for all centers, the value of and demand for the education offered in the ASTS LDP continues to grow. ASTS looks forward to welcoming a new group of transplant leaders to the 4th annual Leadership Development Program in Chicago, September 22 – 25, 2013.

In addition, we are also proud to report that in April 2013, ASTS will be holding the first-ever follow-up to the LDP, the Advanced Leadership Development Program (ALDP), scheduled for April 28 – 30, 2013, also at the Kellogg School of Management. Topics include: Leadership and Decision Making in a Period of Rapid Change, Crisis Management from the Front Lines, Leading and Innovating within a Complex Organization, and Building Strategic Alliances. The ALDP will also include a year-long distance learning component and a half-day wrap-up session at the 2014 WTC in San Francisco. Stay tuned for further details on the ASTS website, or contact Laurie Kulikosky at laurie.kulikosky@asts.org for more information.

To be placed on the interest list for the 4th annual LDP September 22 – 25, 2013, or the new Advanced LDP debuting April 28 – 30, 2013, please contact Laurie Kulikosky at laurie.kulikosky@asts.org.
Crozer-Keystone Regional Kidney Transplant Center
In January, the new UNOS-approved Crozer-Keystone Regional Kidney Transplant Center opened at Crozer-Chester Medical Center in Upland, Pennsylvania, after recruiting a team of transplant professionals who have cared for more than 1,000 transplant patients since 1995 with outstanding patient and graft survival rates at one year and beyond. In September, the team performed kidney transplants on their first two patients at the Transplant Center.

As of this writing, “Both patients are doing well,” said John A. Daller, MD, PhD, FACS, Chief, Division of Transplant Surgery and Director of the Transplant Program. “One of our patients had been on a list for five years, and both had significant co-morbidities. We are very pleased with their progress to date.”

Crozer-Keystone Regional Kidney Transplant Center is located in suburban Delaware County in southeastern Pennsylvania, adjacent to Interstates 95 and 476. For the first time, patients suffering from chronic renal disease have a convenient, high-quality alternative to traveling a distance from home, for example, to a medical center in Philadelphia.

For some patients in this community, the barriers to kidney transplant are greater than distance alone. “Public transportation is very difficult for these very ill patients, and medical transportation benefits may not cover transportation outside of Delaware County,” explained Dr. Daller. “For these and other reasons, some of our patients have avoided seeking a transplant evaluation, even though their primary care physician and nephrologist urged them to do so; instead, they may have hoped to continue indefinitely on dialysis at a local center. We can now offer them an alternative within our community.”

Dr. Daller, who has launched or revamped kidney and organ transplant programs at several major hospitals, observed, “The Crozer Kidney Transplant team has had the rare opportunity to build a program that provides a personal experience of care to our patients and their families and a rewarding collegial environment for the health-care professionals involved in their treatment.”

A published author on kidney disease and kidney transplant, Dr. Daller has contributed to the development of new surgical techniques and medications used in the field. Dr. Daller earned his medical degree from the State University of New York Health Science Center and completed his residency at the University of Arizona College of Medicine. He completed his clinical fellowship in Transplantation at the University of Pittsburgh Medical Center. Dr. Daller is board certified in Surgical Critical Care, as well as General Surgery, and he is a fellow of the American College of Surgeons and a member of ASTS.

The Next Step in Tertiary Care at Crozer
The core competencies of Crozer-Chester Medical Center, a 424-bed tertiary-care teaching hospital, support the Transplant Center. These include established programs in diabetes, cardiac care, pulmonary care and bariatrics. The medical center is home to the Crozer Regional Trauma Center, which is the only one of its kind in Delaware County, as well as an inpatient Shock Trauma Unit. Crozer also offers the internationally recognized Nathan Speare Regional Burn Treatment Center. Crozer-Keystone Health System’s active medical residency programs (including Family Medicine and Internal Medicine), also support the tertiary care model.

“At Crozer, we have the core competencies that have enabled us to perform hepatobiliary surgery, including major liver resections and pancreatic surgeries,” says Cosme Manzarbeitia, MD, Transplant Surgeon. “The Kidney Transplant Center is the next step in the evolution of our tertiary-care programs.”

The first Fellow in Multi-Organ Transplant at Mount Sinai Hospital, New York City, Dr. Manzarbeitia has also developed and led organ transplant programs at other hospitals in the United States. Dr. Manzarbeitia earned his medical degree from the Universidad Autonoma de Madrid. He completed his residency in General Surgery at North General Hospital, New York City, and is board certified in General Surgery.

Crozer-Keystone Health System’s well-established evidence-based medicine program—with a current focus on standards-
based care for surgical care, AMI, heart failure, pneumonia and stroke—is part of the foundation for the transplant program. Physicians on the Kidney Transplant team have played key roles in clinical studies and the development of best practices.

Crozer-Keystone’s robust electronic health records (EHR) system also supports the multidisciplinary practice of organ transplantation. In July 2011, Crozer-Keystone was recognized as one of the first health care systems in the nation to meet EHR “Meaningful Use” goals for quality, safety and efficiency.

**An Integrated, Multidisciplinary Team**

As in other major transplant programs, the Crozer team has taken an integrated, multidisciplinary approach to address the collateral health issues common among kidney transplant candidates and patients. The team comprises more than a dozen experienced physicians, surgeons, nurse managers, case workers, pharmacists and other transplant professionals providing integrated care.

“In addition to the convenience of Crozer’s location and clinicians in every key discipline, we can offer our patients same-day, on-site testing when necessary,” said Kevin Sperling, MD, Medical Director and Transplant Nephrologist. “These are important opportunities and advantages that many of our patients simply have not had in the past.”

Dr. Sperling earned his medical degree from the University of Pittsburgh School of Medicine. He completed a residency at Northwestern University Feinberg School of Medicine and a fellowship in Nephrology at the University of Pittsburgh School of Medicine. He is board certified in Internal Medicine and Nephrology.

Roy Marcus, MD, Transplant Nephrologist, another key member of the Crozer Kidney Transplant team, is board certified in Nephrology and Internal Medicine. Dr. Marcus earned his medical degree from the Temple University School of Medicine. He completed a residency at the University of Michigan Medical Center and a fellowship in Nephrology and Hypertension at the University of Michigan Medical Center.

Two board-certified urologists are also key members of the integrated transplant team. George Dakwar, MD, earned his medical degree from UMDNJ New Jersey Medical School. He completed a residency in urology at UMDNJ New Jersey Medical School and then a fellowship in urologic oncology at NYU Medical Center.

Ilya Volkson, MD, earned his medical degree from Albany Medical College. He completed residencies in general surgery and urology at UMDNJ New Jersey Medical School, and completed a fellowship in Endourology, Laparoscopy, and Robotic Surgery at Hackensack University Medical Center.

**Outreach, Communication, and Support**

From evaluation through pretransplant, transplant, recovery, and life management, the Crozer Kidney Transplant team is committed to patient outreach, communication, and support. Crozer-Keystone also offers a Living Donor Advocate, an independent specialist to help potential living donors understand kidney donation.

“In addition to the team’s clinical expertise, we have designed our program to provide an exceptional level of support and communication for our patients along the path from initial evaluation to transplantation and postoperative care,” Dr. Sperling said. “Our social worker and transplant coordinator perform the critically important roles of patient outreach and navigation to ensure that our patients continue to progress. Without their initiative and follow-ups, some of our patients might miss critical steps in the process.”

The health system’s five community hospitals and the Crozer-Keystone Network of physicians also play important roles in caring for kidney transplant patients and other patients living with chronic renal disease in Delaware County.

As Dr. Daller considered the question, “Will it be challenging for us to sustain our vision for a personal experience of care to patients and their families as we grow?” he said, “Certainly—that is always a challenge—but we are passionate about sustaining our vision and our unique identity.”

The Crozer Kidney Transplant team includes several other clinical and administrative members, with support from their Crozer-Keystone colleagues.

Sara Keiser, MA, CRNP, Transplant Coordinator, brings clinical experience in Emergency and Surgical Trauma-ICU to the team, including experience in the care of liver transplant patients. Alison Harris, LMSW, Transplant Program Social Worker, brings trauma social work experience to the team. Sandra L. Kusker, MS, RD, LDN, a Clinical Nutritionist with Crozer-Keystone, brings clinical experience with renal dialysis patients to the team. Lucinda Scheuren, PharmD, and Richard Pacitti,
Liver Transplant from the Patient’s Perspective

Liver Transplant: My Story by Bernice Berger Miller is a patient's account of her diagnosis of liver disease and how it led to the liver transplant waiting list, as well as her surgery and recovery. It is written for other potential liver transplant patients in a conversational style and explains in simple terms subjects like the hepatitis C virus, MELD scores, and how the liver transplant waiting list operates. While not sugarcoating the experience, Ms. Miller assures readers that “the miracle of transplantation transforms what had been a death sentence into a gift of life.”

Ms. Miller speaks highly of her transplant team, which included ASTS members Andreas G. Tzakis, MD, and David M. Levi, MD. If you recommend this book to your liver transplant candidates, be aware that she had an atypical cytomegalovirus attack on her spinal cord following her transplant, which led to neuropathy and required intensive therapy. She takes care to state that this is a rare occurrence and that her transplant was a success that had many benefits, as well as reporting she was able to stop immunosuppressive therapy five years after her transplant due to Dr. Tzakis’ research.

The book is available on Amazon.com in paperback and Kindle editions.

People and Places

This feature contains news about ASTS members and their programs. If you would like to be featured or know of someone who has recently changed positions, please submit the information to diane.mossholder@asts.org.

Kenneth A. Andreoni, MD, has joined the Pancreas Transplant program at Shands at the University of Florida.

Johnny C. Hong, MD, FACS, has accepted the Chief position at the University of Wisconsin in Milwaukee. He was formerly with UCLA.

Andreas G. Tzakis, MD, formerly at the University of Miami, has moved to Cleveland Clinic in Florida to help establish a transplant program there.

Shawn Pelletier, MD, has moved to the University of Virginia as the Surgical Director of Liver Transplantation from the University of Michigan.

David B. Leeser, MD, has moved to the University of Maryland from New York Presbyterian Hospital-Weill Cornell Medical Center.

Shimul A. Shah, MD, MHCM, has moved to the University of Cincinnati from the University of Massachusetts.

David M. Levi, MD, has moved to the Carolinas Medical Center from the University of Miami.

David H. Sachs, MD, and A. Benedict Cosimi, MD, at Harvard Medical School have received this year’s Thomas E. Starzl Prize in Surgery and Immunology, awarded by the University of Pittsburgh School of Medicine’s Department of Surgery and the Thomas E. Starzl Transplantation Institute at the University of Pittsburgh Medical Center.

Jeffrey B. Halldorson, MD, has moved from the University of Washington to the University of California at San Diego.

Michael G. Ison, MD, MS, has been elected councilor-at-large for the American Society of Transplantation.

Northwestern Medicine® transplant surgeons and physicians have completed their 100th successful kidney paired donation transplant. Over the last four years, Northwestern’s living donor kidney transplant program has grown to become one of the largest in the country, performing 636 living donor kidney transplants. In 2011, surgeons performed 154 living donor kidney transplants.

Jewish Hospital says it has performed its 200th lung transplant at its Louisville center. The hospital’s Center for Advanced Heart Failure and Transplantation completed the milestone, two decades after the hospital’s first lung transplant in 1991.

In June, the heart transplant program at the University of California–Los Angeles performed its 2,000th heart transplant.
OPTN/UNOS Board of Directors Meeting and Nominees for Election


Among its actions, the Board approved a slate of nominees for election to open positions for the 2013 – 2014 Board term. The slate will be posted to the OPTN and UNOS websites and published in UNOS’ magazine, Update. Voting materials, including an election ballot and brief biographical sketches of nominees, will be sent to voting representatives of OPTN/UNOS member institutions in early 2013.

December 14 Deadline for Public Comment Items

Public comment will be accepted through December 14 on six policy or bylaw proposals. Among the proposals is a set of substantial proposed amendments to deceased donor kidney allocation policy. To learn more about the proposals and offer comments, please access the OPTN web site at http://optn.transplant.hrsa.gov/policiesAndBylaws/publicComment.

New Member Website; Registration for UNOS e-Newsletter

UNOS recently launched an improved member website, Transplant Pro. It organizes news about policy changes, patient safety issues, and educational events with topic-specific tags that should help transplant professionals locate key information more quickly and logically.

Along with this improved site, UNOS is using a new, more efficient distribution method for the e-newsletter sent each month to transplant professionals. The e-newsletter highlights new information posted to Transplant Pro. To ensure they continue receiving the e-newsletter, transplant professionals must re-subscribe by visiting http://communication.unos.org/enews/ and completing and submitting a short registration form.

Webinars on CMS/OPTN Requirements, Patient Safety Topics

UNOS recently hosted a free webinar describing an informational “crosswalk” to review and compare transplant program requirements established in OPTN bylaws and policies as well as CMS conditions of participation. This webinar is archived for additional reference. UNOS also is sponsoring a series of four webinars on topics involving patient safety. The first was held October 24; others are scheduled for December 11, February 12, and March 12. The cost of each webinar is $75, and CEPTCs are offered to all attendees. The webinars will also be archived for future viewing. To access the archived webinars or register for future sessions, please visit http://unos.peachnewmedia.com.

Kidney Paired Donation Pilot Program Update

As of September 2012, 125 kidney transplant programs have signed agreements to participate in the OPTN’s national kidney paired donation (KPD) pilot program.

UNOS continues to improve automated data entry applications for participating programs to enter potential donors and candidates directly and view the eligibility status of donors and candidates. UNOS recently implemented a donor pre-select tool that allows centers to preview potential matched donors and indicate whether they would possibly accept or refuse the donor if their candidate matched in a KPD Match Run. It allows the system to screen out offers based on specific characteristics the center knows it would not accept. This function allows better efficiency in matching and has decreased match declines based on potentially unacceptable antigens.

Phase 3 of the automated solution, which provides transplant centers with the ability to run standard and customized reports on their donors and candidates, was released in September 2012. This function allows centers to review current and historical data that may help determine which donors and candidates to enter into the matching system.

At its November meeting, the Board of Directors was scheduled to vote on the KPD and bridge donor policy proposals that went out for public comment in Spring 2012. The proposals are intended to allow open, non-directed donor chains using bridge donors, which should increase the total number of matches identified and resulting transplants.

For more information about the paired donation pilot program, visit the Kidney Paired Donation section of the Transplant Pro website: http://transplantpro.org/resources/professional-resources/.
The National Living Donor Assistance Center (NLDAC) continues to fulfill its mission to reduce financial disincentives for eligible living organ donors. The program helped more than 800 living donors last year with their travel costs to the transplant center. This HRSA grant paid $1.5 million in donor travel expenses in 2012, and $1.8 million has been budgeted for 2013. To date, more than 1,500 living donors have completed their donor surgery with NLDAC. Call the NLDAC staff for more information on how to participate and to order our updated brochures for your new patient packets.

Order your free NLDAC brochures today!
Since inception of the program, ASTS has awarded more than 200 individuals over $8 million in funding research.

Visit the ASTS website at www.ASTS.org/awards to learn more about ASTS grants, eligibility, and submission criteria.

Application Submission Deadline:
January 4, 2013

Award Notifications
March 2013
Nearly 60 transplant surgery fellows and 27 faculty members gathered in Hilton Head, South Carolina, on October 26 for two days of education and networking. As Hurricane Sandy made its way up the East Coast, the skies went from sunny to grey, and the high winds moved a few outdoor events indoors, but the weather didn’t deter the fellows and faculty from their intensive two-day educational journey.

Educating the next generation of transplant surgeons and accrediting fellowship training programs is an important part of ASTS’ efforts to foster career-long education for its members. The symposium was developed to ensure that all fellows receive basic education on important topics regardless of which program they complete.

Educational sessions included the popular Audience Response System (ARS), which enabled fellows to test their knowledge of the subject and compare it to their peers’ by participating in polls on diverse topics such as surgical techniques, histocompatibility, the history of the field of transplantation, and the job market for transplant surgeons.

**Education Highlights**

Douglas G. Farmer, MD, chair of the ASTS Fellowship Training Committee, opened the symposium Friday morning by welcoming everyone and thanking the planning committee for their tremendous efforts in developing an exciting program. Program Planning Committee Chair Timothy M. Schmitt, MD, then thanked the event’s sponsors, Pfizer and Astellas, and went over the educational objectives of the meeting.
Thomas G. Peters, MD, ASTS Historian, kicked off the program with a fascinating overview of the field of transplantation and the evolution of the ASTS from its inception through today. He included videos of pioneers in the field and ASTS past presidents Drs. Thomas E. Starzl, James Cerilli, and Clyde F. Barker.

The morning continued with presentations ranging from DBD and DCD multi-organ procurement to a review of regulatory oversight of programs. Robert S. Higgins, MD, MSHA, encouraged all the fellows to learn about CMS, UNOS, and OPTN regulations in order to make themselves successful and well-rounded transplant surgeons.

The liver session began with Ronald W. Busuttil, MD, PhD, giving a talk on “The Complex Liver Transplant Procedure,” which included several surgical videos and discussion of a relatively rare combined heart/liver transplant. David C. Mulligan, MD, Charles M. Miller, MD, and Elizabeth A. Pomfret, MD, PhD, presented additional liver topics including transplant management, malignancy, and split/partial donors. Douglas G. Farmer, MD, rounded out the session with a presentation on small bowel transplantation, which provided an overview of indications, techniques, and outcomes.

The afternoon continued with a talk about high-risk donors, including what constitutes a high-risk donor and when they should be accepted. This topic produced thought-provoking scenarios for the fellows to evaluate and give their answers in the ARS poll. “Perfect is the enemy of good,” Timothy L. Pruett, MD, reminded them.
Dr. Langnas’ presentation on conflict resolution included wisdom from a Muppet.

Alan N. Langnas, DO, talked about “Conflict Resolution and the Healthcare Workplace,” memorably including a video of Robin Williams and a two-headed Muppet to illustrate conflict. He reminded them that although the concepts presented were elementary, as surgeons, they will be looked to for leadership and should always be cognizant of their attitudes and respectful to their team members.

The day concluded with the liver case discussion panel, and the fellows were put on the spot to present their assessment of a case to the panel of experts. Planning Committee Chair Timothy M. Schmitt, MD, presented the cases and chose fellows at random to provide their insight. It allowed the selected fellows to showcase their teams’ assessments as well as learn from the experiences of the panelists.

Saturday morning began with a look into the basics of transplant immunobiology and immunosuppression by Allan D. Kirk, MD, PhD, and was followed by the pancreas session. Randall S. Sung, MD, began with his talk focused on donor and recipient selection, and was followed by Raja Kandaswamy, MD, FACS, discussing the “technical pearls” of pancreas transplantation.

After the morning break, Kim M. Olthoff, MD, gave the fellows career advice in the ASTS President’s Message, reminding them of all the ways the Society can help them advance their careers as attending surgeons and how they can get further involved. She also advised them not to spread themselves too thin with commitments but to focus on the ones they care about most. She encouraged them to attend the 13th Annual State of the Art Winter Symposium in January, reminding them that registration for ASTS trainees is complimentary.

One of the most eagerly anticipated sessions was “Transplant Job Market: Negotiating Your First Job,” by David F. Mercer, MD,
PhD, FRCSC. He advised that the number of transplant surgeon jobs has been fairly static since 2005 and the total number of transplants has not changed in recent years, so most jobs come from attrition, new programs, or expansion of a program.

Other non-surgical topics included the administrative side of transplant business, including reimbursement issues, and the role of the transplant team outside the operating room in the success of the transplant center.

The kidney session finished out the afternoon, which included a lively discussion on Extended Criteria Donor Selection from Peter G. Stock, MD, PhD. The audience, both fellows and faculty, were called on to discuss why they would or would not accept a kidney for a patient.

The kidney and pancreas case discussions finished out the symposium as Amy R. Evenson, MD, and Randall S. Sung, MD, selected fellows to present their assessments to the audience and panelists. During the case presentations, a fellow from each team was called to answer questions about what their team would do in a particular case. These lively sessions provoked several debates among panelists and with the audience.

**Networking**

A welcome reception the night before the symposium, as well as the mentor networking dinner and the symposium closing dinner, introduced the fellows and faculty and encouraged their personal interactions. Part of the value of the meeting was to enable the fellows to interact with their colleagues as well as their mentors to help extend their professional networks, which will play a significant role in their future careers.

All fellows were assigned to a team when they arrived, and during the lunches, each team met to discuss case studies for presentation later in the afternoon. This gave them the opportunity to not only learn from their peers but also ask their mentors about their experiences.

As fellows prepared to return home, many took the time to express their gratitude for this valuable event and how it enhanced their fellowship training experience. We look forward to seeing all the ASTS fellows next year!
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2012 ASTS STATE OF THE ART WINTER SYMPOSIUM

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“The size of the meeting makes interaction with other participants much easier.”

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Organ procurement organizations (OPOs) and Donate Life America affiliates (DLAs) enroll in the campaign and work with hospital associations and hospitals to provide support and ideas for organizing donor registry enrollment events. OPOs and DLAs are encouraged to set donor registration goals for participating hospitals in their service areas and report results on a quarterly basis by submitting the Campaign Results form to HRSA. The goal is to register 300,000 new donors nationally by the end of May 2013 and cultivate a hospital culture that incorporates educating and registering potential donors as part of their standard mission.

The Hospital Campaign was launched June 29, 2011, as a special effort of the national Workplace Partnership for Life (WPFL). The campaign focuses on hospitals and state and regional hospital associations, enlisting them in the important effort to register new organ, eye, and tissue donors and encouraging them to coordinate donor awareness and registry enrollment activities with their staff, patients, and community members.

Organ procurement organizations (OPOs) and Donate Life America affiliates (DLAs) enroll in the campaign and work with hospital associations and hospitals to provide support and ideas for organizing donor registry enrollment events. OPOs and DLAs are encouraged to set donor registration goals for participating hospitals in their service areas and report results on a quarterly basis by submitting the Campaign Results form to HRSA. The goal is to register 300,000 new donors nationally by the end of May 2013 and cultivate a hospital culture that incorporates educating and registering potential donors as part of their standard mission.

The Challenge Scorecard includes a list of outreach, education, and donor registry activities with points assigned to each. Hospitals can record the number of times they complete each activity, and the form will automatically total their points toward bronze, silver, and gold recognition in the Hospital Campaign. Hospitals must return their completed forms to their WPFL Hospital Campaign contact at their OPO or DLA affiliate by May 15, 2013. OPOs and DLAs will report the results to HRSA, and hospitals will be recognized in a variety of ways beginning in June 2013.

Start now and make the last seven months of this campaign your best! For those that haven’t enrolled, it’s not too late. Fill out and submit an Enrollment Form or contact your OPO/DLA affiliate.

The scorecard can be downloaded at http://organdonor.gov/howhelp/hospitalcampaign.html. Send questions about the challenge to wpfl@akoyaonline.com.

2013 Call for Council Nominations

Now that the U.S. elections are over, the American Society of Transplant Surgeons (ASTS) is turning its attention to its own election process. Last year marked a milestone for ASTS as it conducted its first-ever competitive elections. This year, the nominating committee is once again soliciting nominations for the president-elect and councilor-at-large positions and will put forward a ballot to enable voting members in early 2013. The call for nominations was a huge success last year, and we hope you will continue to participate in our democratic process!

Nominating is easy—all you need is the nominee’s name, institution, email, and a brief description of his/her qualifications, as well as the reason for your nomination! Nominations will be accepted until December 13, 2012. All nominees will be asked to complete a biography form, indicate his/her intent to serve if elected, and submit no more than two letters of support.

The nominating committee will review all submissions and put forward a ballot that contains six candidates for the three councilor-at-large positions and one candidate for the president-elect position. During its deliberations, the committee will consider the relevance, importance, and value of voices from a broad constituency. Past contributions to the Society will also play an important role in the committee’s decision-making.

Councilor-at-large nominees will be announced at the 13th Annual State of the Art Winter Symposium, January 31 – February 3, 2013. Additionally, biographical information on all nominees will be posted on the ASTS website, and eligible voting members will receive a unique link to vote via an online system. The results of the election will be announced at the annual business meeting, held during the ATC, in May 2013.

As ASTS continues to grow and evolve, it is critical to identify, recruit, and cultivate strong leadership that will serve the Society as it works to achieve its mission. We encourage you to submit your nominations, and the committee looks forward to your input.
The American Society of Transplant Surgeons would like to thank the following companies for their generous contributions of ASTS and its activities.

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- Pfizer
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*Levels are reflective of support provided to the Society in 2011.*
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Calendar

The ASTS is pleased to coordinate with other professional organizations to maintain a relevant events calendar. If your organization would like to list an event on this calendar, please contact Diane Mossholder at 703-414-7870 or diane.mossholder@ASTS.org.

Upcoming ASTS Events
www.ASTS.org/meetings

2013 Annual State of the Art Winter Symposium
Miami, Florida
January 31 – February 3, 2013

Advanced Leadership Development Program
Evanston, Illinois
April 28 – 30, 2013

13th American Transplant Congress
Seattle, Washington
May 18 – 21, 2013

Leadership Development Program
Evanston, Illinois
September 22 – 25, 2013

World Transplant Congress
San Francisco, California
July 26 – 31, 2014

March 2013
March 13-16, 2013
13th Annual Rachmiel Levine Diabetes and Obesity Symposium: Advances in Diabetes Research
The Langham Huntington
Pasadena, CA
Contact: Karen Ramos
Phone: 800-679-4673
www.levinesymposium.com
Email: levinesymposium@coh.org

March 22-23, 2013
Antibody Mediated Rejection in Liver Transplantation
Adolphus Hotel
Dallas, TX
www.camenaegroup.com/AMR.htm

April 2013
April 2 - 6, 2013
NKF 2013 Spring Clinical Meetings
Walt Disney World Swan and Dolphin
Orlando, FL
www.nkfclinicalmeetings.org

June 2013
June 12 -15, 2013
ASAIO 59th Annual Conference
Chicago, IL
www.asaio.com

Abstract Deadline
February 13, 2013

Student Design Competition Preliminary Proposals
Due January 18, 2013

Medical Device Entrepreneur’s Forum Business Plan
Abstracts Due
January 28, 2013

www.ASTS.org
American Society of Transplant Surgeons
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Meeting the Challenges of Innovation

January 23–26, 2014
Loews Miami Beach Hotel

Pre-Registration Deadline
January 9, 2014

Abstract Submission Deadline
September 9, 2013

For more information visit
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