

Starting Faculty Should Spend Their Time in the Operating Room

Duke Cameron
Professor of Surgery
Cardiac Surgeon-in-Charge
Division of Cardiac Surgery
The Johns Hopkins Hospital

American Heart Association
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No disclosures

- 4:15 **Debate: Starting Faculty Should Spend Their Time in the Operating Room**
Duke Cameron, Baltimore, MD
- 4:20 **Debate: Starting Faculty Should Have Protected Time for Research**
Marc Ruel, Ottawa, ON, Canada

Not mutually exclusive!

Cardiac Surgery is a Pleomorphic Entity

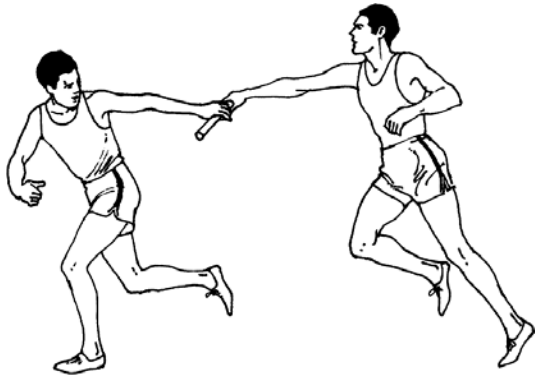
- As a specialty, we need operative surgeons, skilled clinicians, educators, administrators and researchers (basic and applied)
- However, most of us start out wanting to become a clinical/operative expert and the “go-to-guy/girl.”

Cardiac Surgery is an Operative Specialty



- Technically demanding (precision and expedience are key)
- Scrutiny of outcomes is unprecedented in history of medicine
- Failure not tolerated
- Need to achieve competence and mastery early in career

There is Momentum at Completion of Training



- “All dressed up and ready to go”
- Chief year is usually a varied, high volume operative experience
- Young surgeons are eager to prove their ability and competence
- Good judgement comes from experience (and experience comes from bad judgement)

The Body is Willing



- Technical mastery usually occurs early in life (music, athletics, warfare)
- Focus and resistance to fatigue are strong enablers
- Clinical availability encourages collaborative relationships
 - ❖ Remember 3 A's: ability, availability, affability
- Hunger is a strong motivator

Cardiac Surgery Research



- Vital to specialty but NIH support elusive
- Tends toward practical and applied
- Collaborative
- Focused and productive when arises from clinical questions and experience
- Industry support built on relationships with device manufacturers
- Increasingly driven and supported by philanthropy....***from grateful patients***

Sir Magdi Yacoub



- High operative volume in early career
- Landmark contributions in transplantation, aortic, and newborn surgery
- Now focused on basic research

Surgeons Belong in the Operating Room