SLS NOW

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MIS WEEK 2022

The Future of MIS

Sept. 7 - 10, 2022
New Orleans, LA

A Publication of the Society of Laparoscopic & Robotic Surgeons

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This Newsletter is Interactive. Look for the

Article Spotlight

JSLS

Reference Hygiene and Death on the Internet – Decay, Rot, Half-Life, Deterioration, and Corruption

JSLS (2022) 26(1):00082

Review Article

Douglas E. Ott, MD, MBA

Abstract

References for medical articles are not always retrievable. This eliminates the ability to check on the validity of statements, methodologies, data collection, and conclusions.

Methods: References of review, scientific, and research articles published in the 2019 and 2020 Journal of the Society of Laparoscopic & Robotic Surgeons were evaluated for ability to retrieve the reference cited.

Results: Ninety-five articles with 2,424 references were evaluated. There were 1,025 (1,025/2,424 = 42.3%) open access versus 1,399 (1,399/2,424 = 47.7%) paywall articles. There were 357 (14.7%) citations unavailable (misreference) due to bad, broken, or nonexistent links and wrong article, abstract or citation only, and missing citations.

Conclusion: Loss of reference existence or retrievability is a scientific hazard. Science is self-correcting but is doomed to not knowing what was said or discovered when references are no longer available.

Key Words: Citation, Link rot, References.

INTRODUCTION

References are fundamental to scientific communication. They acknowledge and credit prior work influencing the article presented providing insight to methodologies, data, and conclusions. This gives readers information about who, where, and when the reference was made and how to retrieve the source and learn more. Assessment of reference availability of medical articles after publication where all references to the original articles were available, read, and analyzed compared to what an author said, showed that nine to 25 percent (%) of statements cited were incorrectly quoted and misrepresented as "facts."[1–6] These errors and distortions become imbedded and magnified over time and need to be accessed for what was actually said or how data was interpreted at the time of publication. This requires access to the references. Before the internet, libraries and personal subscriptions were the source for checking references. As the cost of journals increased along with the volume of articles written, digital access formats through the internet quickly diminished. Not being able to get a reference is a misreference that is unsubstantiated and the potential of misinformation. Original article statements should be compared for misstatements and misrepresentations. A statement that cannot be checked may represent the truth, bend it, or reconstruct it. It cannot be validated because it is missing. How often does this happen? This study assesses reference availability and accuracy of articles published in Journal of the Society of Laparoscopic & Robotic Surgeons (JSLS) in 2019 and 2020 post-publication.

MATERIALS and METHODS

Articles identified as "scientific papers," "research articles", and "reviews" as published online at https://www.ncbi.nlm.nih.gov/pmc/journals/1326/ for JSLS had their references checked for availability and citation accuracy using the author information or the hyperlink provided by PubMed, MEDLINE, and PubMed Central at the end of the reference citation for each article identified as "PubMed," "CrossRef", or "Google Scholar" hyperlinks.

MISWEEK 2022 REGISTRATION IS NOW OPEN

EXPLORE THE AGENDA

MISWeek 2022

Courses @ LSU Lions Building

Hands-On Skills Courses

CO_2 Laser MIS Surgery Skills Course

Wednesday - 8:00 AM - 12:00 PM

The application of new technologies to minimally invasive abdominal surgery has brought great interest in recent years. A new field of reduced port surgery has come into the surgical scene. Minilaparoscopy (Mini) has stood out as one of the more reproducible techniques amongst the different varieties of reduced port options due to its simplicity, enhanced dexterity, improved visualization, low cost and above all, safety. Less analgesic consumption due to less postoperative pain, early recovery and outstanding cosmesis are features that are hard to be equaled by other techniques. The surgeon must be familiarized with the rationale for this surgical alternative and the equipment needed in order to safely and properly apply the principles of Mini in clinical practice.

Objectives: After this course the student will understand the basic principles and science behind Mini, and will be able to identify the instruments and specific surgical techniques to safely apply Mini in clinical scenarios. Participants will have an opportunity to develop basic skills necessary for incorporating Mini technologies in their surgical repertoire.

Minilaparoscopy Skills Course

Wednesday - 8:00 AM - 12:00 PM

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Suturing Skills Course - Advanced Laparoscopic Suturing For the Gynecologist, Urologist, and General and Robotic Surgeon

Wednesday - 12:30 PM - 4:30 PM

Participants will learn the uses and limitations of laparoscopic suturing. Suturing with two hands ipsilaterally allows the needle to operate in the sagittal plane, while permitting a restful and relaxed attitude of the elbows, forearms and hands. This course equips all attendees with improved suturing skills and insight into applications during surgery.

Objectives: Course participants will be better able to understand ergonomics, theory and rationale for reproducible and efficient laparoscopic suturing; learn port positions, instruments and tips to minimize fulcrum and maximize efficiency, perform interrupted suturing, continuous suturing, cinch knotting; apply learned skills in relevant surgical situations across specialties; and the prevention and management of bowel, bladder and ureteral complications by appropriate suture repair. A pre-test and post-test will demonstrate improvement in skills.

Mastering Tools and Techniques in Minimally Invasive Surgery

Wednesday - 12:30 PM - 4:30 PM

Surgical thinking and practice continues to evolve as our collective knowledge base and experience increase. Minimally invasive approaches have expanded the surgical armamentarium. Multiple energy modalities are available to the surgeon ranging from the traditional monopolar, bipolar to ultrasound and advanced tissue sealing bipolar devices. The differences between the energy sources will be described and compared. Participants will have an opportunity to use all of the different modalities and observe their effects. Techniques for safe removal of tissues and retrieval of specimens must be understood and mastered. Skill and indications for endoscopic stent placement for fistula and perforation management, the role of ureteral stents, the use of ICG fluorescence technologies, applications of surgical meshes and the use of suture assist devices will be highlighted.

Objectives: Participants will understand the indications, contraindications, benefits and limitations of new techniques and technologies in MIS procedures. Participants will learn the proper technique for tissue extraction and specimen retrieval, the use of energy sources, stents, ICG fluorescence technologies, and the applications and limitations of these techniques in clinical practice, and more.

Didactic Course

Current Problems in General Surgery - Perspectives from the Experts

Wednesday - 12:30 PM - 4:30 PM

Surgical thinking and practice continues to evolve as our collective knowledge base and experience increase. Minimally invasive approaches have expanded the surgical armamentarium. The choices of technique and technologies available for use are also expanding at a time when access to and use of technology must be reconciled against procedural costs and clinical outcomes. The applications, indications and limitations of laparoscopic and robotic solutions in bariatric surgery; endoscopic approaches to bariatrics, GI and advanced endoscopy; the development of stents for bowel anastomoses; interventional radiology and the removal of vena cava filters; and a discussion of NASH liver disease and its treatment will be addressed by a panel of experts. The work up, management algorithms, technical details and postoperative management will be highlighted.

Objectives: By the end of the course, participants will: Understand the indications, contraindications, benefits and limitations of endoscopic, laparoscopic and robotic surgical approaches in the management of conditions encountered in general surgical practice. The appropriate work up, treatment options and management algorithms, surgical techniques and postoperative management in managing obesity, NASH, use of stents for bowel anastomoses, endoscopic approaches to GI conditions, and interventional radiologic approaches to manage vena cava filters and their removal.

Program *at a Glance*

READ THE FULL PROGRAM

** Schedule is subject to change.*

TUESDAY, SEPTEMBER 6, 2022	
Conference Registration @ The Roosevelt Hotel	03:00 PM - 06:00 PM
WEDNESDAY, SEPTEMBER 7, 2022	
Conference Registration @ LSU	06:30 AM - 03:00 PM
Conference Registration @ The Roosevelt Hotel	06:30 AM - 08:00 PM
Shuttle Service between the Roosevelt Hotel & LSU	06:45 AM - 04:30 PM
Current Problems in General Surgery - Perspectives from the Experts	08:00 AM - 12:00 PM
CO2 Laser MIS Surgery Skills Course	08:00 AM - 12:00 PM
Minilaparoscopy Hands-on Skills Course	08:00 AM - 12:00 PM
Hands-on Suturing Skills Course - Advanced Laparoscopic Suturing	12:30 PM - 04:30 PM
Mastering Tools and Techniques in Minimally Invasive Surgery	12:30 PM - 04:30 PM
Poster Set Up	02:00 PM - 04:30 PM
Last Shuttle Service from LSU	04:30 PM
Opening Ceremony	05:15 PM - 06:30 PM
Poster Gallery Opens	06:30 PM - 08:00 PM
Welcome Reception in Exhibit Hall	06:30 PM - 08:00 PM
THURSDAY, SEPTEMBER 8, 2022	
Conference Registration @ The Roosevelt Hotel	06:30 AM - 05:00 PM
Exhibits Open	07:00 AM - 02:00 PM
Poster Gallery Open	07:00 AM - 05:00 PM
Complimentary Coffee and Bakery Items/Visit Exhibits/Product Presentations by Exhibitors	07:00 AM - 07:30 AM
Highlights	07:30 AM - 07:45 AM
Multidisciplinary Plenary Session - The Source of Surgical Complications: Man, Machine, or Both?	07:45 AM - 08:45 AM
Multidisciplinary Plenary Session - Surgery as a Team Sport: What Makes a Great Team?	08:45 AM - 10:00 AM
Refreshment Break/Visit Exhibits/Product Presentations by Exhibitors	10:00 AM - 10:30 AM
Didactic Lectures	10:30 AM - 12:45 PM
Moderator Briefing Meeting	12:30 PM - 12:45 PM
Refreshment Break/Visit Exhibits/Product Presentations by Exhibitors	12:30 PM - 01:45 PM
Global Perspectives in MIS	01:45 PM - 05:00 PM
Concurrent Sessions - Room 1: Poster Showcase (Multispeciality)	01:45 PM - 05:00 PM
Concurrent Sessions - Room 2: General Surgery - Scientific Papers & Videos	01:45 PM - 05:00 PM
Concurrent Sessions - Room 3: General Surgery - Scientific Papers & Videos	01:45 PM - 05:00 PM
Concurrent Sessions - Room 4: Multispeciality - Scientific Papers & Videos	01:45 PM - 05:00 PM

Adjournment	05:00 PM
FRIDAY, SEPTEMBER 9, 2022	
Conference Registration @ The Roosevelt Hotel	06:30 AM - 05:00 PM
Complimentary Coffee and Bakery Items/Visit Exhibits/Product Presentations by Exhibitors	07:00 AM - 07:30 AM
Exhibits Open	07:00 AM - 02:00 PM
Poster Gallery Opens	07:00 AM - 02:00 PM
Highlights from Scientific Sessions	07:30 AM - 07:45 AM
Multidisciplinary Plenary Session - Developing and Transferring Skills from Do-It-Yourself (DIY) Working at Home to Coaching and Mentoring	07:45 AM - 08:45 AM
Multidisciplinary Plenary Session - Cross Collaboration in Minimally Invasive Surgery - Why Are the Lines Drawn so Straight?	08:45 AM - 09:45 AM
Best Poster, Best Poster by a Resident Award Presentation	09:45 AM - 10:00 AM
Refreshment Break/Visit Exhibits/Product Presentations by Exhibitors	10:00 AM - 10:30 AM
Video Session: Surgical Surprises - When the Unexpected Happens	10:30 AM - 12:15 PM
Refreshment Break/Visit Exhibits/Product Presentations by Exhibitors	12:15 PM - 01:45 PM
Concurrent Sessions - Room 1: Multispeciality - Scientific Papers & Videos	01:45 PM - 05:00 PM
Concurrent Sessions - Room 2: Gynecology & Urology - Scientific Papers & Videos	01:45 PM - 05:00 PM
Concurrent Sessions - Room 3: Gynecology - Scientific Papers & Videos	01:45 PM - 05:00 PM
State of the Art Lectures in Robotic Surgery	01:45 PM - 05:00 PM
Adjourn for the Day	05:00 PM
SATURDAY, SEPTEMBER 10, 2022	
Conference Registration @ The Roosevelt Hotel	07:00 AM - 10:30 AM
Sit-down Breakfast with Spouses/Guests Breakfast & Future Technology Session	07:30 AM - 08:00 AM
Highlights of “New and Exciting Technology”	08:00 AM - 08:15 AM
Introduction of Excel Award Recipient	08:15 AM - 08:25 AM
Presentation by Excel Award Recipient: Gustavo L. Carvalho, MD, MSc, MBA, PhD	08:25 AM - 08:40 AM
Presentation of Excel Award	08:40 AM - 08:45 AM
Introduction of Janis Chinnock Wetter Award Recipient	08:45 AM - 08:55 AM
Presentation by Jannis Chinnock Wetter Award Recipient: Jannis Chinnock Wetter	08:55 AM - 09:10 AM
Presentation of Jannis Chinnock Wetter Award	09:10 AM - 09:15 AM
Future Technology Session with Keynote Speaker	09:15 AM - 10:00 AM
Introduction of Keynote Speaker	09:15 AM - 09:20 AM
Keynote Speaker - Sam Glassenberg	09:20 AM - 10:05 AM
Closing Ceremony - Passing the Presidential Gavel	10:05 AM - 10:10 AM
SLS Business Meeting and Post-Conference Evaluation	10:10 AM - 11:00 AM

Keynote Speaker

Sam Glassenberg

Founder and CEO, LEVEL EX

Sam has spent his career leading teams and companies at the cutting-edge of the video game industry. Today his team at Level Ex harnesses video game technology and cognitive neuroscience to engage and train over 750,000 medical professionals. Before Level Ex, he was the CEO of the leading independent game publisher in Hollywood, releasing games based on popular films, including The Hunger Games and Mission: Impossible. Sam also led the DirectX graphics team at Microsoft, where he accepted a Technical Emmy on behalf of his team for advancing the visual realism of video games across the industry. His career began at LucasArts, creating Star Wars games for PlayStation and Xbox. Sam serves on numerous industry advisory boards and speaks internationally on video games in medicine.

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The Roosevelt-Waldorf Astoria is a symbol of the American Dream, of prosperity, and of course of old New Orleans charm.

Welcome to The Roosevelt

The Roosevelt-Waldorf Astoria was originally conceived as a rear extension to Grunewald Hall, but when the hall was destroyed by fire in 1892, it was instead re-built as the then-six story Hotel Grunewald a year later, just before Christmas of 1893. The anticipation of the holidays in New Orleans was doubled. After Christmas, Mardi Gras would be dawning in only a few short months.

Louis had promised his new hotel – all of 200 delicately decorated rooms worth – would be "in full readiness for the Carnival of 1894." He accomplished his goal and his hotel was an immediate success. The guest rooms were reached by corridors lined with wall sconces and trimmed with strings of crystal beads, which also served as an elegant accent to the many overhead lights, hanging like ornate necklaces from the center to the edges of the circular fixtures. The carpeted floors were equally majestic, and provided a lavish and colorful surface for the extravagant furniture. Before long, the hotel was ready for expansion.

The Forest Grill, Grunewald Hotel

A new 14-storey, 400-room annex (which is now the main building) was added on University Place and was unveiled to the public by a bountiful New Years' celebration at the flash of midnight of 1908. Its cost was an unthinkable $2.5 million dollars, which all but guaranteed that its grandeur would be worth seeing. Louis's youngest son Theodore would inherit the hotel after Louis's death in 1915, and the business continued to flourish under Theodore's management until health problems forced him to sell in 1923. When the new owners took over, they partially demolished the original building, re-opening the hotel in 1925 with the larger, more elaborate structure as the main entrance. History also has it that the anti-German movement that swept across the city during the first world war still ran deep, compelling them to change the hotel's name. It would now begin a new life as the Roosevelt, and later the Fairmont. It was a beauty, spanning the entire block from its origin on University to Barrone Street, was the lobby that would, in the years to come, become a legend in and of itself. The extraordinary décor featured gilded colonnades, posh flooring in the shape of a series of intricate tile mosaics, walls covered in French, African, and Italian marble, and detailed cornices gracing the thirty-foot ceilings. **It was a phenomenal sight, described by author Garry Boulard as, "a palace gleaming out of the otherwise dormant Sahara of the Deep South."** Of course, this was only the beginning, and everything was done to be sure that this awe-inspiring first impression would also be a final one.

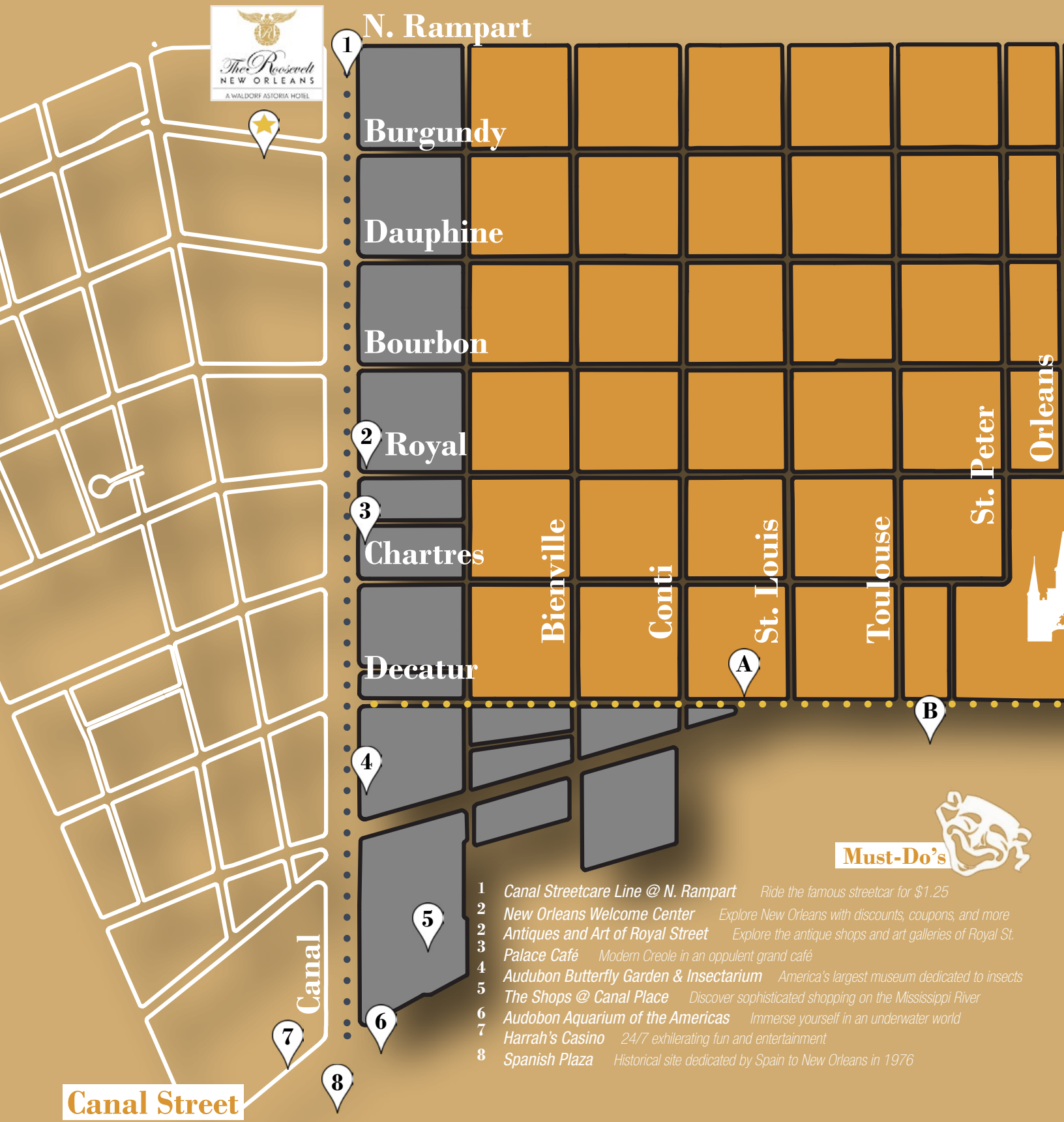
EXPLORE THE JAZZ HISTORY OF THE ROOSEVELT

The Sazerac Bar AT THE ROOSEVELT

The Sazerac is a local New Orleans variation of an old-fashioned cognac or whiskey cocktail, named for the *Sazerac de Forge et Fils* brand of cognac that was its original prime ingredient. The drink is some combination of cognac, rye whiskey, absinthe or Herbsaint, and Peychaud's Bitters and distinguished by its preparation method. **It is sometimes referred to as the oldest known American cocktail, with origins in pre-Civil War New Orleans, Louisiana, though there are much earlier mentions of the cocktail in print.** The defining feature of the Sazerac is the preparation of an old-fashioned glass with absinthe or an anise-flavored spirit. Pernod, Herbsaint, Absente and green Chartreuse were common substitutes for absinthe when it was not available.

The Sazerac Bar was originally located on Exchange Ally in the French Quarter. It later moved to Carondolet Street and Gravier and then to The Roosevelt Hotel located on Baronne Street where in 1949 it was stormed by women who were tired of it being only for men. It later moved into the hotel and The Roosevelt Hotel Bar was renamed Sazerac. The Bar is known for two specialty drinks, The Sazerac and The Ramos Gin Fizz.

According to the Sazerac Company of New Orleans, the modern day Sazerac Cocktail recipe calls for 1 cube of sugar, 1 1/2 ounces of Sazerac Rye Whiskey, 1/4 ounce of Herbsaint, 3 dashes of Peychaud's Bitters and a lemon peel. One Old Fashioned glass is packed with ice. In a second Old Fashioned glass, a sugar cube and 3 dashes of Peychaud's Bitters are muddled. The rye whiskey is then added to the sugar/bitters mixture. The ice is emptied from the first Old Fashioned glass and the Herbsaint is poured into the glass and swirled to coat the sides of the glass. Any excess Herbsaint is discarded. The rye/sugar/bitters mixture is then poured into the Herbsaint coated glass and the glass is garnished with a lemon peel.



Must-Do's

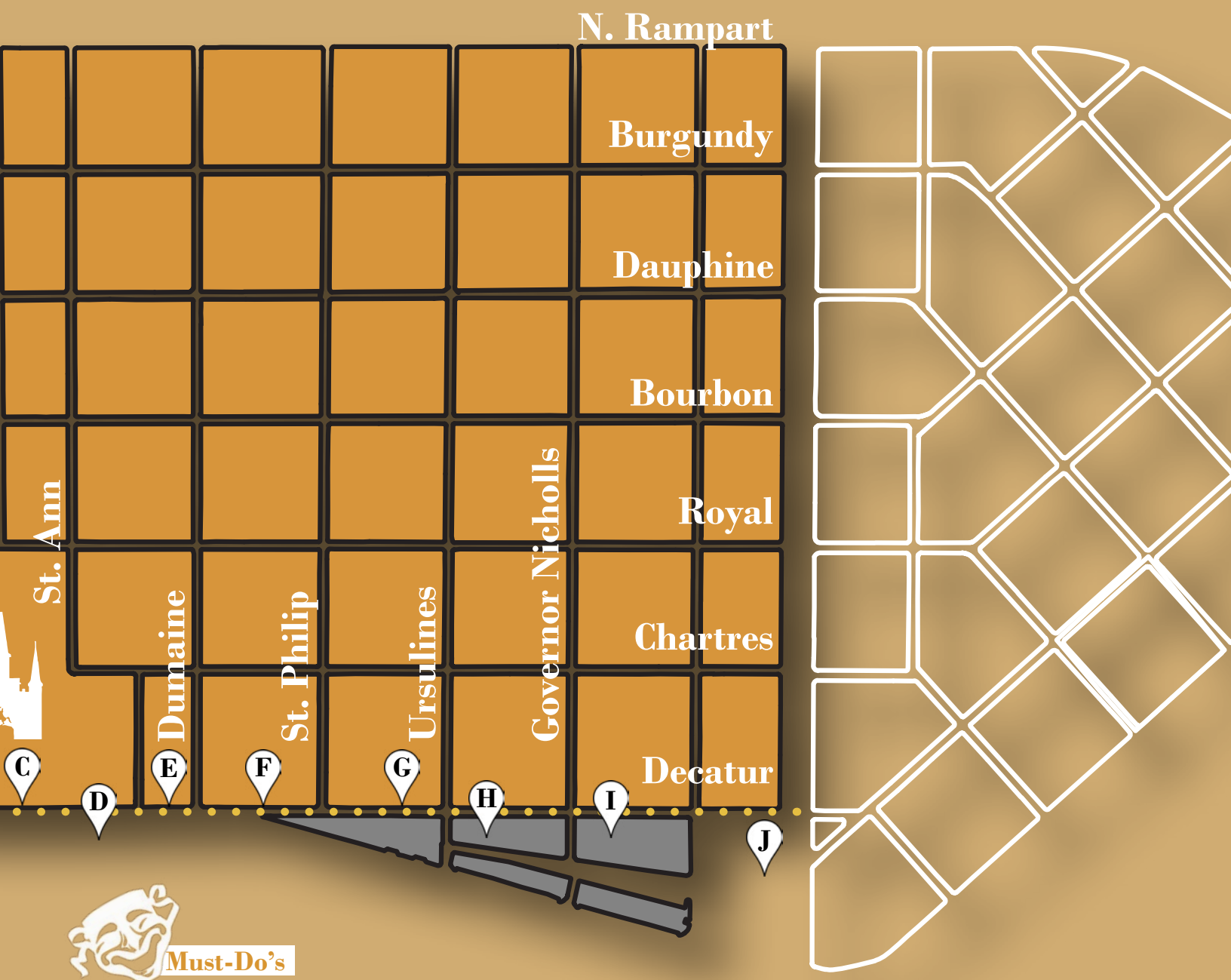
1 *Canal Streetcare Line @ N. Rampart* — *Ride the famous streetcar for $1.25*
2 *New Orleans Welcome Center* — *Explore New Orleans with discounts, coupons, and more*
2 *Antiques and Art of Royal Street* — *Explore the antique shops and art galleries of Royal St.*
3 *Palace Café* — *Modern Creole in an oppulent grand café*
4 *Audubon Butterfly Garden & Insectarium* — *America's largest museum dedicated to insects*
5 *The Shops @ Canal Place* — *Discover sophisticated shopping on the Mississippi River*
6 *Audubon Aquarium of the Americas* — *Immerse yourself in an underwater world*
7 *Harrah's Casino* — *24/7 exhilerating fun and entertainment*
8 *Spanish Plaza* — *Historical site dedicated by Spain to New Orleans in 1976*

Canal Street

This grand street shows off the hustle and bustle of downtown.

At a grand 171 feet wide, traversed by streetcars, taxis, automobiles, cyclists and pedestrians, Canal Street is more than just a major downtown thoroughfare. Throughout its 210-year history, it also has served as an entertainment district, shopping destination, parade route, and above all, a gathering place for New Orleanians. Stand on this broad, bustling street and you can see New Orleans' history all around you—from the historic French Quarter to the modern Central Business District. You just have to know where to look.

1 minute (300 ft / 90 m)
walk from The Roosevelt



Must-Do's

A *Jean Lefitte National Historic Park and Preserve French Quarter Visitor Center*
B *New Orleans Steamboat Company* — *Take a tour on the authentic Jewel of the Mississippi, Steamboat Natchez*
C *Jackson Square* — *Tour this National Historic Landmark, the site of the Louisiana Purchase in 1803*
D *Cafe du Monde* — *The grand dame cafe of café au lait and beignets since 1862*
E *Tujague's* — *Dine at the 2nd oldest Restautant in New Orleans*
F *Central Grocery and Deli Market* — *Home of the Original Muffaletta Sandwich since 1906*
G *Santa's Quarters* — *Celebrate 24/7/365 in this Christmas-themed store made for all ages*
H *B.B. Kings* — *Have the time of your life in the Big Easy. Official social event of MISWeek 2019*
I *Palm Court Jazz Cafe* — *Jazz Cafe showcasing pure Old New Orleans elegance*
J *New Orleans Jazz Museum* — *Immerse yourself in the rich History of Jazz in New Orleans*

8 minute (0.4 mi / 0.64 km) walk from The Roosevelt

Decatur Street

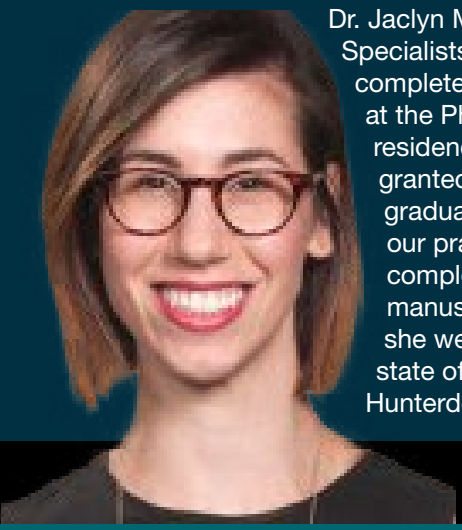
Eat , Drink, and be Merry on this bustling street on the French Quarter

Decatur Street runs parallel to the Mississippi River, starting on Canal and ending at St. Ferdinand Street in the Marigny. Decatur was previously known as Rue de la Levee ("Levee Street") but was renamed in 1870 after Stephen Decatur, the American naval war hero and Commodore. Basically a waterfront strip, the French Quarter part of Decatur Street has catered to sailors and hosted the kinds of businesses a big port would have. By the 80s it still retained its port feel, especially in the Lower Decatur near Canal Street, but the part closer to Esplanade and Frenchmen Street became a bohemian haven with a vibrant goth and punk scene.

Meet the Graduated Fellows of:

Florida Surgical Specialists Enhanced General Surgery Fellowship: Advanced Laparoscopic and Robotic Foregut, Hernia and Colorectal Fellowship

Program Director: Paul Toomey, MD, FACS | Program Co-Director: Riva Das, MD

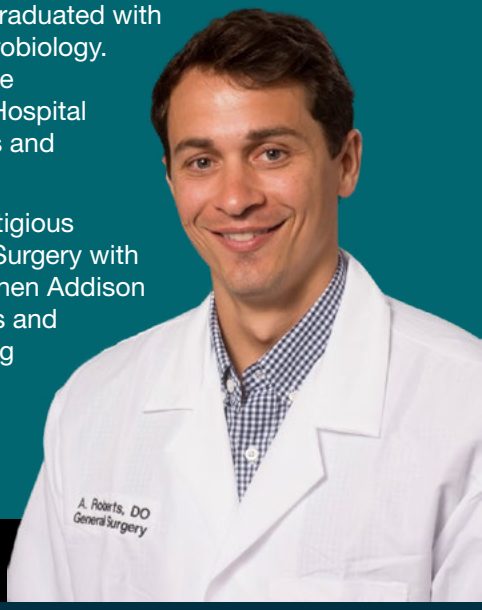


Dr. Jaclyn Malat is one of our newest graduates from the SLS Fellowship by Florida Surgical Specialists in Advanced Laparoscopic and Robotic Foregut, Hernia and Colorectal Surgery. She completed her undergraduate degree at Franklin & Marshall College and attended medical school at the Philadelphia College of Osteopathic Medicine (PCOM). She completed her general surgery residency at PCOM. During her time there she earned the Resident of the Year award, was granted the Brennan Resident Scholarship in Surgical Oncology at Memorial Sloan Kettering and graduated as chief resident in 2021. Her passion for robotic and colorectal surgery led her to our practice under the guidance of Dr. Toomey and Dr. Das. During her one year fellowship she completed over 300 robotic cases, presented at two national conferences, co-authored three manuscripts and initiated the first clinical trial in this fellowship's history. Of most importance, she welcomed her first child, Esther, this past November. Dr. Malat will be returning to her home state of New Jersey as a General Surgeon with a focus in robotics and colorectal surgery with Hunterdon Surgical Associates in Flemington, NJ.

Jaclyn Malat, DO

An Oklahoma native, Addison Pierce Roberts is a board certified General Surgeon who graduated with a dual degree from the University of Oklahoma in Zoology Biomedical Sciences and Microbiology. He then attended A.T. Still University Kirksville College of Osteopathic Medicine, where he graduated in 2016. He completed his General Surgery residency at Ascension Genesys Hospital in Grand Blanc, Michigan and then went on to complete a one year fellowship in robotics and minimally invasive surgery with Florida Surgical Specialists.

After graduation, he will be moving back to Oklahoma to join Surgical Associates, a prestigious private practice located in the heart of Tulsa. He plans to have a broad focus in General Surgery with an emphasis in hernias, colorectal and foregut surgery in a minimally invasive fashion. When Addison is not working, he is spending quality family time with his wife, Taylor, his two young sons and their two chocolate labs. Addison and his family can also be found watching and cheering on almost any Oklahoma Sooners team. His top three ambitions after fellowship are to travel to Europe and Australia, compete in a half iron man, and read one book a month. Addison is looking forward to starting his General Surgery practice where he can help and give back to his local community.



Addison Pierce Roberts, DO

Fellowship in Minimally Invasive & Robotic Surgery in Gynecology & Reproductive Surgery

Program Director: Camran Nezhat, MD

Shruti Agarwal, DO

Deborah Lee, MD

Mahkam Tavallaee, MD

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"For the last 5 years I have had the opportunity to become involved with the SLS. As a urologist I have found the meetings extremely informative learning from my colleagues not just in Urology but also from the fields of General Surgery and Gynecology. It is the best collaborative meeting I have attended. Not only is the learning portion of the meeting exceptional but the people I have met nationally and internationally are truly professional whom I consider great friends as well."
- Michael McDonald, MD

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