

## Taking AAGL to the Next Level



Dr. Isaacson

Throughout the history of the AAGL, there have been a number of milestones achieved by the organization which have elevated the credibility and respect, not only for society as a whole, but also for all members as well. Key moments include the organization of the first meetings by Jordan Phillips and his band of brothers; the election of Barbara Levy as the society's first female president; the birth of the Journal and the publication of evidence-based clinical guidelines, the incorporation of SurgeryU, and the successful launch of a highly competitive Fellowship in Minimally Invasive Gynecologic Surgery.

It is more than a coincidence that minimally invasive gynecologic surgery has become the standard of care in general gynecology, urogynecology, gynecologic oncology and reproductive surgery. This has been accomplished by the pioneering work of those "who have taken the road less traveled." In 2011, the AAGL published a hysterectomy position statement that, if possible, this surgery should be performed laparoscopically or vaginally. The statement was supported by strong evidence demonstrating better outcomes for our patients. This position statement was accepted by other gynecologic organizations. The AAGL and its members have worked hard to be the world leaders in innovation, research, education and public advocacy for minimally invasive gynecologic procedures for women.

Since the AAGL has come so far in 40 years, how do we take it to the next level?

**FIRST** sound infrastructural and fiscal decisions have secured our existence for the next 20 years. Under the direction of Franklin Loffer and Linda Michels, and several boards of trustees, the AAGL has run an efficient office and made wise conservative investments. We are in a good position to pursue our mission for years to come.

**SECOND** each AAGL member should encourage his or her institution to become a Center of Excellence in Minimally Invasive Gynecology (COEMIG). This will be the first program in gynecology to allow centers to have the distinguished designation by maintaining accurate documentation of case volume, surgical complexity and complications. When successfully launched by other groups such as cardiology and bariatric surgery, the complications for patients dramatically decreased while patient outcomes improved. This program will give patients and payors objective information they can use when selecting or referring to a MIGS surgeon or surgery center. Every AAGL member from all countries are encouraged to participate in the program.

**THIRD** is the development of the Essentials in Minimally Invasive Gynecology program. The AAGL has taken the lead in developing a curriculum, a cognitive test and a skills test that should be passed by every MIGS surgeon. The cognitive test is in its final development stages and will be beta tested by the Las Vegas

meeting this November. The skills test will not be far behind. The Essentials program firmly places the AAGL as the leader in resident and fellow education as well as cognitive and skills assessment. It is my goal to see this test become mandatory for each resident to pass before he or she can sit for the oral board exam.

**FOURTH** the AAGL is working on several projects with our large sister organizations whose mission overlaps with our own. This includes ACOG, ASRM, CREOG, SAGES (the minimally invasive society for general surgery), and the AUA (American Urology Association). We don't just have a seat at the table. Minimally invasive gynecologic surgery is here to stay and the AAGL, now known as the respected leader in this field, will work with these societies to promote our shared mission of providing the best outcomes for our patients through research and education.

I am honored to be the AAGL President in these exciting, rapidly changing times for the AAGL. We are taking the society to the next level and that in turn will be a boost for our members around the globe and provide better outcomes for our patients.

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### WE NEED YOUR OPINION

The AAGL is conducting two online surveys and would appreciate your participation.

The surveys are:

**SMOKE SURVEY**

**Deadline to complete this survey is April 15, 2012**

**PREVELANCE OF MUSCULOSKELETAL PAIN AND DISORDERS IN GYN SURGEONS**

**Deadline to complete this survey is May 15, 2012**

Thank you in advance for your help! The surveys can be found at [www.aagl.org/surveys](http://www.aagl.org/surveys)