

## 2024 EAST Presidential Address: One Day

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I extend my deepest thanks to each of you gathered here today for your unwavering support of this organization, my family, and myself. Standing before you at this podium, addressing such a distinguished assembly, is an experience both humbling and exhilarating. It's crucial to recognize the invaluable contributions of those who have been part of my journey and those I have the honor of representing today. This year has been marked by significant achievements, for which I owe a tremendous debt of gratitude to our board of directors, committee chairs, and members. The dedication and time you all invest in committee work, especially in leadership roles, are pivotal, in fostering a space where innovative ideas can flourish. I hope today will illuminate the profound impact your commitment has on advancing the field of trauma surgery.

To my children, Nathan and Grace, your achievements, work ethic, and authenticity amaze me everyday. You are truly remarkable. And to Heather, my partner in every aspect of life, you are my rock, my love. I must also acknowledge our incredible staff: Christine, Rachel, Kinga, Nakia, and Erin. Your tireless efforts are the backbone of our success, and I am profoundly grateful for all you do. My phone holds countless memories of all my friends and colleagues, from organizational events to casual gatherings within EAST, filled with discussions, laughter, and camaraderie. I am thankful for your support, for accepting me as I am, and for helping shape the person I aspire to be. As Andrew Bernard and I have consistently expressed, one of the best parts about EAST is that it's genuinely remarkable to scan the crowd and spot unfamiliar faces, as it signifies the arrival of a fresh group and an opportunity to make new acquaintances. The next generation of trauma surgeons in the audience exudes a sense of authenticity and confidence. I have no doubt that this organization is in great hands.

I am profoundly thankful for the mentorship I received early in my career at Ohio State University. Drs. Larry Martin, Steve Steinberg, Charles Cook, and Chris Ellison instilled in me a passion for our field and the drive for continuous improvement. My good friend Dr. Scott Armen showed me that mentorship knows no age bounds. In Louisville, the guidance of Brian Harbrecht, Glen Franklin, and Frank Miller was invaluable, each setting a sterling example of what it means to be a surgeon and providing insights into the multifaceted roles and responsibilities of a newly appointed attending. I consider myself a blend of their best qualities: I have adopted some of Glen's communication style, strive for Brian's analytical approach, and endeavor to share wisdom in the manner Frank did, reminiscent of Yoda. Kelly McMasters, an exceptional department chair, has also played a significant role in my professional development. Like a skilled jockey, his leadership style knows precisely when to allow autonomy and when to provide motivation.

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Finally, I am truly fortunate to have been blessed by meeting both, Drs. J. David Richardson and R. Neal Garrison, who have had a transformative impact on my life, serving as additional father figures. David Richardson, in particular, held a special place not only in my heart but also in the hearts of many present here today, and his absence is profoundly felt.

When you have to give an address such as this, you soon realize you have no idea how you're meant to deliver this speech. This isn't an elaborate oration, nor is it a discourse about science. Something we have all given in the past. This is different. As you prepare, you begin conversing with those who have delivered these presentations. Dr. Kim Davis was one of the first people to contact and speak with me. She has been a great friend and mentor, and she told me that I needed to talk about research, the necessity for research, what it means to be a surgical scientist, and the value of fundamental science. That is not the topic of this discussion, but I believe it's a crucial point to consider, so I hope Ben or the person who comes up after us gives that some thought. After J. David passed away, Dr. Dave Livingston has served as a sounding board for me. And he responded in the most David-like way, "I'm not sure what you're meant to talk about; I barely got mine together." He did, however, provide me some guidance. "Write it down, make it about you and who you are, and be brief. He added, "Enjoy the moment, and "remember, at the end of this speech, they will still stand up and applaud you even if you go up there and talk about a cookbook."

It's a reminder, in the most David Livingston of ways, that in our pursuit of the future, we might lose sight of the present. Its a reminder to embrace the moment. As surgeons, we're often caught in the trap of deferring our aspirations to "one day" or "tomorrow," only to realize that time has slipped by. Our existence is essentially a tapestry of individual days. If we are fortunate, these days will be rich, dynamic, and colorful, yet they will always be finite in number.

Should you reach the age ripe old age of 82, you will have experienced approximately 30,000 days. At first glance, this number may seem substantial, but considering that a third of this time is spent in sleep—a fraction possibly less for us, given our nocturnal commitments—the magnitude diminishes. Further investigations reveal more about how we allocate our time: 1,100 days in personal care, 485 in exercise, 1,583 in eating, and 1,642 in driving. Alarming, modern lifestyles see us spending around 11,000 days in front of screens, encapsulating two-thirds of our existence either in slumber or digital engagement.

Reflecting on youth, the period before 18, often dismissed as inconsequential, comprises 6,500 days. Whether these are "wasted" is debatable. Indeed, the achievements of a single day in infancy are modest, but as a parent witnessing the fleeting nature of adolescence, the value of these days becomes apparent. Echoing Kelly McMasters' words to the Western Surgical Association, "The years are short, but the days are long." This encapsulates the essence of our lives: the daily experiences sculpt our identity, imbue our existence with purpose, and, ultimately, define the legacy we leave behind.

Thus, I am going to tell the tale of 3 days. Three snapshots out of thousands, 3 days encompassing three pressing issues that we, as trauma surgeons, face. First and foremost, I'll provide some context. In 2017, I had been at Louisville for about a de-

cade, was content, had a grant, and worked as a busy surgeon at our hospital. Life was good. I was called into Kelly McMasters office. Now, I don't get called into Kelly's office too frequently, but I do occasionally. On this occasion he remarked, "Hey, would you ever consider becoming the hospital's CMO?" To which I responded, "Nope. There's no chance." He remarked, "Well, some of us think you do an excellent job with this. I want you to consider it, and we'll talk later." I then strolled down to Glen Franklin's office to discuss this idea, and complain a little. If you're familiar with Glen, you'll know that I spent around 90 minutes in his office and felt much better after talking with him. However, I left the office unclear of what we had actually discussed, had forgotten why I went in the office and was certainly no clearer on what I was expected to do regarding this decision.

Next, as was typical, I chatted with J David Richardson and laid out my plans and reasons I didn't want to do the job. J David responded, "Hey, remember that some of your best plans yield the worst results. You ought to consider being flexible. Sometimes, you must consider doing something outside your comfort zone because it will benefit those around you, the people you care about." As usual, he was correct, so I took the position outside my plans and my comfort zone short; I took a chance to be a spork ... more to come on that. Fast forward to November 2019, and as part of our tale, the UofL Health system acquired another hospital system. The first case of COVID-19 in Louisville was identified in March 2020, but what stands out is how the University of Louisville's biosafety laboratory, having been engaged with a COVID specimen from Seattle for 3 months, developed a non-commercial test capable of detecting the virus from a nasal swab by April 2020. This innovation prompted immediate calls for deployment from state and local leadership.

In true trauma surgeon fashion, we assembled a makeshift team with basic tools: three nurses, an Excel spreadsheet, and a mobile phone. We tackled the unfamiliar challenge with the adaptability and resourcefulness characteristic of our profession. Remarkably, this scenario was not isolated; trauma surgeons led the principal COVID response in 28 academic medical centers nationwide, with five such professionals present here today. Our versatility in practice and clinical care, spanning general to trauma surgery and critical care, underscores the unique adaptability and improvisational skills we bring to the table.

During the pandemic's peak, this adaptability was on full display. From finance directors directing traffic to finance staff and nurses undertaking tasks outside their usual remit, and even my children contributing to the effort, it was a testament to the power of versatility. This collective effort highlighted the essential role of generalists like us in a world that demands adaptability.

Dr. Karen Brasel's upcoming Frame lecture on the value of being a generalist in medicine promises to explore this theme further. Her insights will undoubtedly reinforce the importance of our unique skill set in the medical field, encouraging us to lean into the qualities that set us apart.

The second day was a very different one. On the morning of April 10, 2023, a tragic mass shooting occurred at the Old National Bank in Louisville, claiming five lives and injuring eight others. Surveillance footage captured my vehicle passing by the bank, unknowingly, just minutes before the incident, with

the shooter visible in his car. That day, at UofL Hospital, we tended to nine victims; eight survived, but despite our extensive efforts over 5 hours and six surgeries, one life was lost. It's an experience I hope none will have to endure, yet the rising trend in mass shootings suggests otherwise, with 656 incidents in 2023 alone, an increase from the previous year.<sup>1</sup>

Such events are unlike any routine trauma situation. They draw intense public and media scrutiny, with individuals from outside the immediate community and various levels of government converging on the hospital, often transforming the site into a focal point of national attention. This not only impacts the healthcare professionals involved but also adds a surreal layer to the already intense emotional and professional challenges faced in the aftermath of such violence.

After the final operation on the patients, I had to go out to the press conference, and I had press conferences and phone calls for about 3 or 4 hours that afternoon. Many family members of those slain came to our hospital, looking for loved ones who were never transported. So, as we delivered news of patients who had never made it to our institution, and we tried to find people and get them back with their loved ones we had saved, the stress just built up. And I remember going home that night, and Joe Sakran called me and said, "Hey, you're doing great, how are you holding up?" I said, "Man, I don't know about this; I am not sure what I am supposed to say to people about this on the news." He replied, "I know; keep going, tell people those facts. Keep it up, we're all really proud of you." Sometimes you just have to hear the words to realize how important what you're trying to do means to the people around you. I think too often, as surgeons, we compartmentalize things, and it's essential for us to do that in our lives so that we can do the jobs that we have to do and save the people we have to save. But I think the critical part of compartmentalization is that you have to take that out sooner or later. You have to address that. You cannot leave that alone because if you leave that alone, it will eat you up inside. So, a moment with a friend talking on the phone allowed me to do that.

It is inconceivable that anyone immersed in this profession over the past decade, witnessing the realities we have faced, could fail to recognize the escalating issue of gun violence. While it may seem like a recent trend, looking back 30 years ago to Dr. Schwab's 1993 discourse on the metaphorical "uncivil war" reveals that this issue has long been a critical concern for trauma surgeons.<sup>2</sup> The imperative to confront and address the surge in gun violence, both nationally and within our own cities, is underscored by the stark increase in incidents of both suicides and homicides by nearly a third from 2018 to 2023. We as a society must acknowledge that the prevalence of firearm related homicides and mass shootings is not an inescapable reality. Additionally, suicides involving firearms significantly outnumber homicides in the United States and yet we do not discuss this in the media and barely acknowledge it is occurring across the country. At the Southern Surgical Association meeting in 2023, the stark reality of firearm-related suicides was laid bare for me by Dr. Stephen Barnes, a colleague and friend of 15 years. His remarks, "I'm a white male veteran over the age of 40 who has been deployed downrange and seen combat casualties. I own firearms. I have a high-stress job. I am the most at-risk demographic for firearms suicide in the United States." We are them; we are they, and this issue is too important for us not to begin a dialogue.<sup>3</sup>

Addressing firearm injuries and violence is undeniably challenging. I personally have a complex relationship with guns, stemming from a rural upbringing and outdoor pursuits, however I remain acutely aware of the critical need to examine the implications of gun violence. While my background may not position me as the foremost authority on this topic, experts like Dr. Joseph Sakran and Dr. Ronald Stewart, through initiatives like the American College of Surgeons Committee on Trauma, offer valuable insights.<sup>4</sup>

The responsibility falls on us in the middle ground to initiate and engage in discourse despite potential opposition from extremes. Establishing a starting point for dialogue and striving for incremental improvements and consensus on initial measures to address this crisis is vital. We must champion discussions that encompass all viewpoints, aiming for consensus on preventing access to firearms for individuals at risk of suicide or ill intent. This includes returning firearms postcrisis and ensuring that those unfit to own firearms are effectively barred. As surgeons our unique exposure to the consequences of gun violence positions us as powerful advocates for change. The time has come for us to leverage our experiences and spearhead these crucial conversations, owing a duty to our patients and society to make a tangible difference.

Finally, my last day is today. This meeting, the room of people and this connection with each other.

Today marks a significant transition for me, a moment that is merely a fraction of our shared experiences. Amidst discussions on various critical topics, including the pressing issue of mental health among surgeons and physicians, it's evident we're facing a nationwide crisis. Reflecting on Simon Sinek's words, our era is marked by unparalleled connectivity that paradoxically lacks genuine connection. Despite the ease of digital interaction, authentic connections form in our personal moments, away from the digital sphere. It's the spontaneous conversations post-conference or over a meal, perhaps even during a spirited game of dodgeball, where meaningful bonds are forged. These interactions, often overlooked, are where genuine connections occur, transcending the superficial engagements of social media. In the grand tapestry of this organization, with its over 3,500 members, the essence of our gathering, this annual scientific assembly, is to foster these real connections. In times when mental health challenges are increasingly prevalent among our peers when physician suicide is rising, the value of in-person interactions and the support and understanding they provide cannot be overstated.

My journey with you all has been about more than just this day or this platform. It's about the relationships built, the collective service to our community, and the shared mission that unites us as trauma surgeons. This gathering, this moment, is an opportunity for each of us to reflect on how we can support one another, take bold steps, engage in necessary but difficult dialogues, and cultivate lasting relationships that enrich our professional and personal lives.

As I stand here, humbled, and grateful, I am reminded of the immense privilege of being part of this community. My commitment to you is unwavering, and I am thankful for the chance to contribute to our collective journey. Thank you for the trust, the memories, and the opportunity to serve alongside each of you.

I genuinely hope that one day, you can create a vibrant tapestry of your dots the way you have allowed me to do that in my life. I will never be worthy of standing at this podium. But I do

my very best for you every day. Thank you very much for this opportunity. I appreciate the time.

#### DISCLOSURE

Conflicts of Interest: Author Disclosure forms have been supplied and are provided as Supplemental Digital Content (<http://links.lww.com/TA/D769>).  
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