OPEN LETTER TO THE AMERICAN COLLEGE OF SURGEONS

August 31, 2021

I became board certified by the American Board of Surgery in 1985. I specialized in plastic surgery, obtaining certification by the American Board of Plastic Surgery in 1991. From the time I decided to become a surgeon, I have loved my chosen vocation and always practiced in a manner that would honor my training, my professors and mentors, and, above all, my patients. I always felt that the surgeon, especially the general surgeon, was the most “complete” doctor, having to possess both a vast fund of knowledge and a technical mastery of the art and science of surgery. I love plastic surgery for its unique melding of that art and science.

One of my first professional goals was to attain fellowship in The American College of Surgeons. Even beyond board certification, I felt that this would serve as the ultimate validation of my years of hard work to become a competent surgeon. I was very proud to achieve my goal and place the honorific designation of “FACS” after my “MD.” I have been a proud member of the ACS since 1993, a board-certified general surgeon, then a board-certified plastic surgeon, who grew up in two cultures (Brazilian and American), overcame ADHD, worked very hard to obtain an excellent education, and paid for that with nine years of military service in the Navy. During my professional career, I have been actively involved in my community, serving on various hospital committees and as a delegate to our state medical society; I served a term as Chief of Surgery at my primary hospital, and I became president of the county medical society. I look back on a career spanning nearly forty years with pride. I have always strived to represent the College honorably, and I have always taken the Fellowship pledge seriously.

Recently, I have become alarmed that our professional society has embraced a regressive and intolerant ideology in which group identity trumps individual identity. I am aware, more generally, that many now elevate victimhood and twist the meaning of liberal terms to further an ideological narrative that is more intolerant than what came before. We accuse our country and institutions of being systemically racist, ignoring a history in which our predecessors have arguably done more to defeat racism and expunge it from those very institutions than any other society in history. We are embracing notions that are counter to liberal ideals and norms going back generations.

In March 2019, the Bulletin of the ACS published a transcript of the Olga M. Jonasson Lecture, given by Joan Reede, MD, MS, MPH, MBA who also runs the Office for Diversity Inclusion and Community Partnership at Harvard. I found her lecture very troubling, and I responded with a commentary, noting her failure even to acknowledge the notion of excellence in our profession. I
was one of four surgeons who commented; the others limited their comments to a sentence or two, but clearly supported my position.

The most recent Bulletin demonstrates that the ACS has now fully embraced the neo-racist and regressive ideology of “antiracism.” According to the January 8, 2021 Bulletin, I am now viewed, not by my accomplishments and service as a professional, but as a “white, heteronormative male who lacks an appreciation or awareness of the importance of diversity [and] fails to acknowledge this deficit, then incorrectly claims to be culturally dexterous.” I find this idea professionally and personally demeaning. I also reject the idea that “the lack of diversity in the surgical workforce” is a result of my “cognitive bias.” This ideological framework of thinking about our profession runs counter to concepts of fairness, understanding, and common humanity underlying our liberal society.

Sadly, by openly embracing this ideology, the ACS is discarding hard work, overcoming obstacles, meritocracy, and, most importantly, excellence. ACS’s orthodoxy flies in the face of its mission of excellence in patient care. Surgery is hard and demands much of us. It has been my experience, now more than ever, that anyone with the intelligence, capabilities, and drive to become a surgeon, regardless of skin color or gender, is welcome in our profession. To ascribe any deficiency in representation to victimhood or oppression is an insult to the surgical community at large. There will always be individuals who exemplify the worst of human nature, but to imply that this is systemic or “structural” in our College is wrong.

I urge the College to reject its current path toward regressive ideology, and instead promote diversity and inclusion though pro-human and liberal values that further the excellence that defines the College. Since I have paid my dues for 2021, I will retain my fellowship status for now, but I will be watching the College’s actions and announcements closely. If the College continues on its current path, I will rescind my status as a Fellow after 2021. It won’t be easy, as FACS Fellowship has been such an integral part of my professional life, but my conscience will demand such action.

I could not imagine when I attained Fellowship in the College that I would ever write such a letter or consider taking such a step.

Respectfully,
Richard T. Bosshardt, MD, FACS