



Minutes

SAGES Membership Committee

Hyatt Hotel, Long Beach, California

Tuesday, March 11, 2025, 7:00 a.m. – 8:30 a.m. (Pacific)

Chairs: Maria Altieri, MD, Nabeel Obeid, MD, Co-Chair; Yewande Alimi, MD, Co-Chair

Staff: Dee Berry, Carla Bryant, Jason Levine

Attendees: Drs. Ryan Horsley, Paraskevas Pakataridis, Maria Altieri, Yewande Alimi, Nabeel Obeid, Andrea Stroud, Dee Berry, Carla Bryant, Jason Levine

The Spring 2025 Membership Committee meeting was called to order at 7:02 a.m. by the Chair, Dr. Maria Altieri, with announcements, introductions by the attendees, and review of the disclosures.

The minutes of the Fall 2024 were motioned for approval by Dr. Yewande Alimi and seconded by Dr. Nabeel Obeid.

Review and Discuss Committee Goals –

There was discussion regarding the growth goals of 5%, and possible concerns of hitting the ceiling with the current goals, since we have already reached the 2026 numbers. However, SAGES usually loses 8-9% of members at year-end because of lapsed dues, so we should be right at the 2026 targets next April.

Membership along with the Communications Committee continues to explore better ways to utilize social media platforms. Membership staff reaches out via email to all non-members registered for the Annual Meeting inviting them to join SAGES. Customized email messages also go out to Residency Program Directors who are members of SAGES reminding them to coordinate getting new residents to join the society. Postal mailings promoting SAGES membership and the Annual Meeting are sent to non-member Residency Coordinators.

A hot button topic for many residency programs concerns unionization, should SAGES somehow provide guidance? This idea has been discussed by leaders, and in accordance with the federal National Labor Relations Act (NLRA), SAGES should not take a stand one way or the other because it is very heavily regulated.

Review of Membership Numbers –

Recruitment finished strong in 2024 with over 800 new members, and there are 324 pending applications for the Winter 2025 reviews period.

International recruitment and retention ideas were discussed, such as creating International Chapters in conjunction with the Global Affairs Committee, although there are several obstacles such as the difficulty in obtaining funding for local/regional Annual Meetings, and utilization of SAGES content and Intellectual Property. People who cannot travel to the Meeting have the option to register for the Virtual Meeting, and much of SAGES other offerings are available online. Could SAGES create webinars focused on different areas of the globe, with international speakers? Budget for staff time coordinating new webinars is a concern, as SAGES charges an administrative fee per webinar. Could charging a registration fee to non-members be enough to cover expenses? Would inviting more International members to be presenters for webinars and the Annual Meeting improve engagement and retention?

SAGES had previously explored a partnership with the AIS Channel, and several other societies are allied with it (Association for Surgical Education, Association of Women Surgeons), but SAGES is not currently involved.



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Candidate to Active conversion was improved in 2024 over 2023. 59% of upgraded Candidate members converted, compared to 50% the prior year. We will continue last year's practice of upgrading in May/June instead of August, to encourage trainees to use any remaining training funds before the end of the academic year to cover their dues.

The dropped members percentage increased to 7.4% from 6.2% in 2023, which is 542 members. The dropped members by category are:

Active – 347	Candidate – 51	Medical Student - 4
Associate Active - 2	Affiliate - 12	International – 126

Active and International members drop out at a greater percentage than the other categories, however, this is partially affected by the timing (dropping at year-end, upgrading during summer).

The Demographics Report was reviewed, and data has been reported by half of the total membership. There was discussion about the statistics regarding member practice types. A survey and white paper done several years ago showed a higher percentage of members identifying as “community practice surgeons” than now. The current survey form has more practice type choices and covers all members whereas the earlier survey only covered Active members, so the two data sets are not comparable. While implemented by the Membership Committee, the current form is overseen by the DLPD Committee and approved by the Officers.

New and Pending Projects -

The committee reviewed the historical dues fees and will recommend to the Board an increase for the Active Military members, from \$60 per year to \$100 per year, but will waive the \$100 application fee for new Military members. Affiliate members will have the application fee waived. The leaders have asked the Membership Committee to review dues at least twice a year.

The partnership with AWS continues, and SAGES receives 20-50 new members every year through this, primarily medical students and candidates recruited at the AWS conference. There is a reciprocal agreement for free booth space at both meetings – AWS members are encouraged to spend some time in Long Beach at the AWS booth.

The possibility of having a membership booth at the Annual Academic Surgical Congress (February meeting) was discussed, however the price is currently high compared to projected new members joining.

The annual New Member Onboarding webinar will be held later this spring. Committee members are encouraged to spend some time at the SAGES Membership Booth this week, to help recruit non-members to join, and please stop by the Meet the Leader reception to welcome the new members who joined in the past year. 242 people have RSVP'd, so it will be a great opportunity to network. There will be no Trainee Town Hall in Long Beach, but we hope to be able to offer it for the 2026 Meeting in Tampa.

New Business/Ideas –

Some members have requested a way to automatically renew their membership every year, much like a subscription service as it would be more convenient. While the technical aspects appear to be feasible, problems



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occur after the renewal is completed the first time. Credit cards expire, members may forget they signed up for this and dispute the charges next year, and there will be a need to connect back with these members to obtain new card information, plus, if there are a high number of disputed charges the banks will start to penalize SAGES.

Unknown factors include how many members pay their dues through a departmental P-card or otherwise are not allowed to auto-renew by their institutions' accounting and business practices. It was decided to run a small pilot for the 2026 dues renewal billing. The results of the trial run would allow opportunities to measure effectiveness and resolve problems prior to expanding to the entire membership.

Amin Madani shared information from the Surgical Data Science Committee regarding a potential new platform for SAGES members to upload videos for Video Based Assessment. They are exploring technical elements regarding how members would access the platform, and financial costs.

The Committee was thanked for their attendance and participation, and the meeting was adjourned at 8:35a.m.