

Profile of Dr. Leslie Kohman: Founder of the Women in Thoracic Surgery (WTS) and a leader in thoracic oncology.

The path to surgery

In 1985, Leslie Kohman's breakfast and lunch invitations to female surgeons she encountered at meetings coalesced into what is now Women in Thoracic Surgery. Her path to this pivotal role in our history began at the age of six with dreams of becoming a physician. In spite of this early interest in medicine, she entered the liberal arts program at Oberlin College focused on poetry until persuaded to take a science class during her sophomore year. This was an eye-opening study of evolution and from then on, Leslie was hooked, transferring to Boston College to pursue a more science-based curriculum. She initially planned to attend graduate school to study paleontology and the evolution of mammals, but in the process of deciding her life's path, her early interest in becoming a physician resurfaced and solidified into a clear goal.

After working for a year in a lab at Tuft's University, she was accepted into the 6th graduating class in the school of medicine at Pennsylvania State University in Hershey. At that time, the charter of the medical school was to train primary care practitioners who would serve the population in Pennsylvania. With her outgoing personality and knowing that she would "never be bored", primary care appeared to be the perfect fit until she met Dr. Jane Petrow, the chief resident during her surgery rotation. Jane clearly saw the potential surgeon and convinced her to pursue a career in surgery.

Early surgical career

Dr. Kohman never looked back, excelling in the general surgery program at the Guthrie Clinic where smaller residency classes allowed for individualized attention from the faculty. Intending to practice general surgery, she worked on lining up a job in rural Pennsylvania. Things seemed to be going well in the interview process, however after the second visit she was inexplicably not offered the job. The employer cited an economic downturn as the reason that he had changed his mind and opted not to take on a new partner at that time. Later she would discover that a male surgeon had been hired instead. Undeterred, Dr. Kohman settled in Norwich, New York, took out a small business loan and started a solo practice. There, she was one of two surgeons in a small town where the general surgeons also did obstetrics, orthopedics, maxillofacial surgery, vascular and thoracic surgery and even primary care. Dr. Kohman enjoyed this variety, but drew the line at primary care. The two years spent in Norwich proved to be quite the learning experience. There were the clinical challenges posed by working with a part-time anesthesiologist who was also the town's family doctor and so would leave the operating room in the middle of a case to deliver a baby. On the business side, an employee of hers was discovered embezzling funds and after two years, Dr. Kohman was ready for a more stable surgical practice. She had always enjoyed thoracic surgery, so when a PGY-6 opening occurred in the residency program at State University of New York (SUNY) in Syracuse, New York, she took the opportunity without hesitation.

Becoming a General Thoracic Surgeon

The initial training position offered Dr. Kohman no guarantees for the future, but she was able to secure a second year and, importantly, board eligibility, allowing her to become the 37th woman certified by the American Board of Thoracic Surgery. She stayed on as cardiac surgery faculty in Syracuse and also engaged in basic science research, working with Dr. Ed Bove on the physiologic aspects of the Norwood operation, in its infancy at the time. After seven years studying neonatal perfusion using rabbits, Dr. Kohman was asked to assume the

clinical responsibilities of a general thoracic surgeon who was on sabbatical, and as a result, had less time for her laboratory commitments. She gradually took on more general thoracic cases until it comprised the majority of her practice, and cites two of her happiest days as when she stopped doing cardiac surgery and when she closed the rabbit lab.

Dr. Kohman went on to become a leader in lung cancer research and remains an active member of the Alliance for Clinical Trials in Oncology. Through her passionate work in thoracic oncology she rose to become head of both the Thoracic Surgery and the Surgery sections of the CALGB. In Syracuse, she built a General Thoracic Surgery service and became the director of the thoracic surgery residency program, one of several leadership positions held. Currently, Dr. Kohman is the Medical Director of the Upstate Cancer Center where she recently spearheaded the building of a \$74 million state of the art facility that opened in 2014.

WTS – Inception and early years

It was in the early 1980s that Dr. Kohman was asked how many women there were in thoracic surgery at the time. She had no idea but embarked on a mission not only to find out the number, but also to bring these women together. Inspired by the work done Dr. Patricia Nunann had done in founding the AWS, Dr. Kohman invited women she encountered at meetings to breakfast or lunch. She wrote letters to program directors inquiring if they had women in their training programs. Dr. Cooley in responding indicated, “we have not had a suitable applicant.” Notwithstanding, the quest to bring women together continued and through collaborations with other women, namely Margaret Allen, a heart transplant surgeon, the efforts bore fruit. Soon her persistence was rewarded as other female thoracic surgeons joined the effort to organize. By sheer force of will these early pioneers who included Dr. Valerie Rusch, Dr. Jemi Olak and the late Dr. Carolyn Reed, were able to reach a critical mass and create the structure of what is known today as the WTS. These days the organization is large enough that Dr. Kohman finds it difficult to know everyone’s name and she considers this a good problem.