- Why?
 - Decreased funding / role in cooperative groups
 - Death of ACOSOG
 - Historically, no meaningful input from professional societies (STS, AATS)
 - until recently **AATS TSOG**

Gaps: limited number of centers, trials

Remaining unmet need:

Mechanism for prospective, multi-institutional, practical, real-world clinical trials in Thoracic Surgery

- Studies relevant to surgeons
- Minimize barriers to get trials up and running, accrue, and complete
- Broad participation, community effort

COVID delay in moving things forward

- Website live
- Contract template done for data transfer agreements
- Ground rules set
- Ready to go!!
 - Sign up member surgeons/institutions (Karly, Amy)
 - Bring studies online

Ground rules:

- PI in charge of protocol, data, QC, leading publication
- Concepts reviewed and approved by steering group
- GTSC (thru Mayo) will look after Data transfer agreements, central IRB function, contracts, website maintenance

What do we need for this to be successful?

- Need you (members) sign up and participate!
- Need simple, straightforward, surgical trials asking important questions for what we do every day
 - Examples: 1) Abx vs not with Heimlich (Shen)
 - 2) Blood patch for air leaks (Seder)

Other trial ideas:

- 1. Imaging surveillance post esophagectomy
- 2. Gastric conduit ischemic pre-conditioning
- 3. Registry trial for salvage esophagectomy