Foreword

The *Annals of Cardiothoracic Surgery*, one of AME's peer-reviewed journals, is lucky to have an author from Rochester, USA. He is left-handed. When he began his training in surgery, he encountered he encountered a particularly intractable obstacle: when using... when using scissors or doing knotting during a surgery, his actions were the mirror opposite of what was described in textbooks. Therefore, he often "took a beating" from his mentors when performing a surgery.

Later, he summarized his experience and published it in a journal in an attempt to find other surgeons that "suffer from the same fate". Surprisingly, after his article was published, many surgeons e-mailed him, asking him how left-handed doctors should undergo surgical training, and so on. Then he met Professor Tristan D. Yan, the editor-in-chief of *Annals of Cardiothoracic Surgery*, who also happens to be a left-handed doctor. Tristan encouraged him to become a heart surgeon because there are steps in cardiac surgery that require the use of the left hand to complete the suture threading technique. Tristan's view was that it was better if surgeons were trained to use both their left and right hands.

A few days ago, on my daughter's first day of kindergarten, I chatted with her teacher for a while; finally, she asked me if there was anything about my daughter that she should take note of . "Please do not correct my daughter's left-handedness," I said, "Just let it be." "Why?" the teacher asked in wonder.

On December 7th, 2013, we held the second AME Academic Salon in the Hospital Affiliated to Nantong University. After dinner, Dr. Shen Yaxing from the Department of Thoracic Surgery of Shanghai Zhongshan Hospital invited several attendees to have tea in his room. The elevator was in the middle of the hotel. After we walked out of the elevator, he led us to the left, then to the left, then to the left, and finally to the door of his room. Although we were confused and disoriented, some of us figured out out that the door was just diagonally across the elevator. We all burst into laughter. Yaxing divulged that he took this route the first time he entered his room, and so he decided to bring us on the same route the second time. Yaxing then said that this was the behavior of a "typical" surgeon!

During the training to be a surgeon, each step and each action are done under the strict direction and supervision of a senior surgeon. Thus, many surgeons like to affectionately address their mentors as their "masters".

How, then, can you become a master of surgery? In addition to your own intelligence and diligence, the expertise and mentorship offered by a "master" is also very important. Just like in the world of martial arts, there are many different schools that are independent from each other and have their own strengths and weaknesses, and the surgical world is very much the same.

Therefore, it is important for a young surgeon to gain knowledge and skills from different masters by taking in only the essence and discarding the dregs. With this in mind, we have here determined to publish the AME Surgery Series, in an attempt to share with our readers the surgical skills of some of the prominent surgical teams in China and from abroad, as well as their philosophical thinking and some interesting stories. We sincerely hope that our colleagues in the surgical departments find these books insightful and helpful.

Stephen D. Wang Founder and CEO, AME Publishing Company

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