

Message from the President



In this issue of *JPOSNA*[®], the History & Archives Committee present an historical perspective: *POSNA: Where Are We Now?* Dr. Hugh Watts wrote an amazing [history of POSNA from 1971 to 1996](#). Dr. Scott Rosenfeld and the History & Archives Committee have worked hard to update this history.

It is important for us as pediatric orthopaedic surgeons to know our past, present, and future.

PAST: Prior to 1969, the practice of orthopaedic surgery restricted to children alone was unusual. The Pediatric Orthopaedic Society (POS) was formed in 1971 by 12 surgeons: Drs. Bianco, Coleman, Curtis, Green, Griffin, Lovell, MacEwen, McKay, Ryder, Samilson, Stelling, and Tachdjian. In 1974, Drs. Hamlet Peterson of the Mayo Clinic and Henry Cowell of the duPont Institute believed that the young pediatric orthopaedists needed their own forum and formed the Pediatric Orthopaedic Study Group (POSG) and included Drs. Cowell and Peterson as well as Badger, Eilert, Gallien, Hensinger, Klassen, Lyne, and Simons. After trials, tribulations, and negotiation, the two groups (POS & POSG) merged in 1984 to form POSNA. Dr. John Roberts, the first President of POSNA, chose a logo (right) and a Latin motto: *Pueri Providentur Melius Coniunctis* (we unite to take better care of children). The logo was two bent trees with a single stake, representing the two societies coming together under a common collective leadership. Many of the senior members lived through this transition and through the formation of this new society, POSNA. They are members of our Hall of Fame and we should hear and appreciate their stories. Our history is one of collaboration in the best interest of the musculoskeletal care of children.

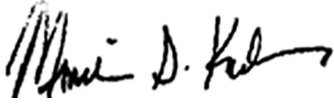


PRESENT: Over the last 2+ years, POSNA has struggled (like we all have personally and professionally) with COVID. The pandemic resulted in virtual board meetings, changing the 2020 Annual Meeting to virtual, cancelling 2020 IPOS[®], changing the 2021 Annual Meeting to hybrid, and affected access to pediatric orthopaedic care, education, and advocacy. As such, POSNA has had to adjust meetings, finances, and procedures. Nevertheless, POSNA remains strong. Membership continues to grow, and the acceptance of new members this year is the largest in POSNA history. POSNA continues to deliver on its core competencies: education, research, and advocacy. Although finances have been altered by the impact of in-person meetings, POSNA has remained financially strong with an increase in net assets through membership, industry support, investments, hybrid meetings. We have successfully navigated the transition to independent management and new headquarters. We recently completed an effective strategic plan and we have examined best practices for corporate governance. We are blessed with talented and dedicated staff led by our Executive Director Teri Stech. POSNA has been able to implement a number of important initiatives including *JPOSNA*[®], diversity activities, and committee streamlining. POSNA is fueled by volunteers on the board, in committees, and in membership who care and support their professional home.

FUTURE: The future of POSNA is bright. The future includes increasing diversity efforts in pediatric orthopaedics. We will lead orthopaedics overall with increased membership and leadership of women and underrepresented minorities. We also will successfully navigate the “new normal” in education: in-person and virtual education. We will continue

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to advocate for the musculoskeletal care of children, and we will lead the way with our QSVI efforts including the POSNA Safe Surgery Program (PSSP). We will continue to fund pediatric orthopaedic research and identify areas of key research importance. *JPOSNA*[®] will include original scientific research and will become the preeminent scientific journal in pediatric orthopaedics. Most importantly, we will protect and nurture the secret sauce of POSNA: our culture, collaboration, friendship, and fun!



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