Over a matter of 48 hours, the promotion of the manuscript entitled “Prevalence of unprofessional social media content among young vascular surgeons,” aptly demonstrated the power of social media and dangers of unconscious bias as it spread across Twitter with the #MedBikini tag. In response, vascular surgeons from around the world have come together in a call to action to address the paper and highlight misogynistic, racist, and oppressive issues facing young surgeons today. We, as female Vascular Surgery trainees, would like to make our own call to action. The publication of this article (now appropriately retracted) has encouraged important dialogue among female Vascular Surgeons, male colleagues who support #HeforShe initiatives, other disadvantaged and marginalized groups in surgery, and the future generation of surgeons who will pave the path forward. We have converged to discuss the current climate of our specialty and have determined that now is an opportunity for change.

It is essential that we pursue ethics as well as excellence in surgical practice and research. The inherent conscious and unconscious bias, poor study design, and unethical data collection methods within this article demonstrate a critical flaw within the editorial process of the JVS. We are disappointed to find ourselves represented by the article. The publication was both tone deaf towards and discriminatory against us as professionals, trainees, and women. As Vascular Surgeons, we must hold ourselves to a higher standard. Our call to action for JVS includes:

1. Re-examine the review process for publication of ethical abstracts from regional and national meetings and manuscripts. Provide training in ethical research for all editors and reviewers.
2. Involve an ethics expert to critically review all future submissions regarding topics of social media, professional behavior, and vulnerable groups (e.g., trainees).
3. Create "Associate Editors in Training" positions that include a diverse group of vascular surgery residents and fellows to review and evaluate trainee-related manuscripts.
4. Prioritize the appointment and hiring of women, LGBTQ+ individuals, and underrepresented minorities (URiM) on the JVS editorial board and staff.

The JVS publication has diminished the reputation of the field of Vascular Surgery beyond the realm of the medical community. Recent network news and social media coverage portrayed Vascular Surgery as a profession that lacks gender and racial/ethnic diversity, and unfairly targets trainees, particularly those who are women and minorities. This highlights the need for more diversity in our field and support from the SVS in this endeavor. We acknowledge that the SVS has started and continues to work on initiatives of equity, diversity, and inclusion, but this must be accelerated and augmented. Our Vascular Surgery resident, fellow, and faculty demographic is rapidly changing and the future of our specialty demands engagement from our leadership. Our call to action for the SVS includes the following:

1. Actively engage and involve Vascular Surgery residents and fellows in policy creation regarding recruitment and retention of a diverse future SVS Leadership, including trainee representation on the Task Force on DEI.
2. Develop a formal, year-round mentorship program for all vascular trainees to assist with success during residency/fellowship and in junior faculty positions to foster the growing diversity of our specialty.
3. Create a secure, anonymous bias related incident reporting system where SVS members can bring up issues related to bias and discrimination in their work environments (including but not limited to training programs, institutions/hospitals, and societies) and the SVS Leadership can track and address concerns as they arise.
4. Invest in pipeline programs and intervene at multiple points of the "leaky pipeline" in STEM fields to increase diversity in our specialty. It is not enough to recruit a diverse group of medical students and trainees into residency and fellowship programs, respectively.

As female Vascular Surgery trainees, we will not be silent in our support for our female, URiM, and LGBTQ+ Vascular Trainees. We as a group are multi-racial/ethnic, LGBTQ+, international, multilingual, and actively seek to make a difference in the lives of our Vascular Surgery patients. We are a vital component of the future of the continuously evolving field of Vascular Surgery and want the JVS and SVS to partner with us to alter the course of our specialty and change the tides for all those who follow in our footsteps. We hope that the JVS and SVS leadership will see the recent publication misstep as an opportunity to better itself by creating a supportive environment for all its members and being a visionary leader among surgical societies.

Respectfully,
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