

UW Medicine

# SURGERY Synopsis

## 2008 Hooding Address UW School of Medicine



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We are very proud of Hugh Foy who was selected by this year's graduating medical students as one of two recipients for the Clinical Faculty Distinguished Teaching Award. Hugh was further honored by being invited to deliver the students' Hooding Address. Since operating room schedules typically do not allow surgeons to spend as much one-to-one time with students as other disciplines, it is, therefore, especially significant to note that Hugh was also chosen to give the commencement address in 2003. Furthermore, he was the keynote speaker at the 2004 Clinical Transition Ceremony, which marks the graduation of second-year students from the classroom to the ward. Our medical students clearly hold Dr. Foy in the highest esteem. We hope you enjoy these selected excerpts from his Address.

Congratulations, what a great day, a truly a great day, one for which you have worked and waited for a long time! June is a very busy time and as I walk across the campus, I see the students coming and going, brows furrowed and filled with the angst of coming final exams. It must seem like so long ago to you now. Now, at least for a moment, you can relax.

As you look back to your first year in medical school, you likely remember the doubts, the cramming and, during second year, those interminable, long, dark, dreary days in the T-wing that you thought would never end. (Hopefully, that new psychedelic wallpaper will help.) Then out to the wards and the clinics for those months on your clerkships visiting those strange new cultures of Psychiatry, OB, Medicine, Pediatrics and Surgery. Scattered over WWAMI-land, you were in a Diaspora across the vast expanse of one-third the landmass of the United States. Finally in the past year, I received your messages from Botswana to Kabul. But now you return to gather and learn a new more practical kind of cramming called Capstone and to celebrate.

Surrounded by your fellow classmates, families and friends you ready yourselves for the next adventure: internship, residency and practice. You are to be congratulated and celebrated, all of you sitting here in your ancient gowns and hoods, and all of

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you up there – parents, grandparents, spouses, siblings, partners and friends. If it takes a village to raise a child, it surely takes all of us together, to make a doctor. Congratulations to you all!

Back to you up front here, this class of 2008. I am so proud of you and so

Johnson Syndrome while just an R4) who once said, “It’s not intern work and R3 work, but work. And when the work is done, we will all go home.” Or one of the greatest heroes of all times – **Dr. Michael Copass** – who used to remind us that when someone calls for help, that’s what you give them:

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**YOU ARE HERE NOW TO HELP MITIGATE THE UNFORTUNATE  
FACT THAT OVER 25% OF THE PEOPLE IN OUR COUNTRY –  
47 MILLION PEOPLE – DON’T HAVE HEALTH INSURANCE.**

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grateful for your invitation to have the last words while you are still a captive audience. I am incredibly humbled that you have asked. I am also grateful to my mentors and colleagues who have given me the opportunity to work with all of you these last four years. I have the greatest job in the world!

I doubt any of you will remember many of these words today. I surely can’t remember those from my graduation. So for the sake of simplicity, I will get you off the hook. Just remember three things: be nice, use your mind, and be a good citizen.

I think it best to simply remind you that it all comes down to helping others: the sick and the needy who have had their health ripped from them by the ravages of disease, injury, poverty and angst. That’s really why we signed up, why we do what we do. To help. We remember those that have gone before us who showed the way and served as examples as we looked up to them out of the starched collar of our new, short, white coats. I remember my favorite senior resident (actually the one who thought of pigskin treatment of Steven’s

help. Not shuck, not jive, not another number to call, but help. Sometimes it’s just a matter of showing an anxious visitor the way to the bathroom, helping the nurse understand the hieroglyphics of the surgery call schedule, or our patient understand their disease by showing them their CT scan and turning a frightening abstraction into a real image on a screen. But most important, giving them hope, a reassuring word, or a calm, undistracted listening ear. Remember, you came here to help.

This next year will likely be the most challenging experience of your life. You will be deprived of your basic human needs of sleep, rest, food, and, equally if not more painful, time. Time to spend with those you love. This challenge threatens to strip you of your manners, your patience, and your equanimities – all those things your mother taught you before you let go of her hand and walked through the doors of kindergarten. It will be all too easy to see yourself as a victim, usurping that honored position from your patients, as it will seem that the whole world is pitted against you; from the slow com-

puter, the Byzantine rules of the parking kiosk attendant or the limited hours of the cafeteria. You name it, they will all seem at times a conspiracy against you. Don’t let the pressure jade you. Don’t let it steal your spirit. Don’t let it blur your perspective; don’t lose the long-range vision that brought you to this point in time, this profession of healing and helping. Periodically revisit your intentions that you had as a premed, a second year and reaffirm your noble intent (a plug for those “Reflections” you had to write in 2nd year).

You are perched on the edge of great chasm, be careful, and don’t lose your balance. With an incomprehensible mountain of debt nipping at your heels, you risk losing sight of the fact that it is not you who is in need. It is your patient who is the victim, who is ill, dying or depressed. Remember, you are still in the top 5% of financial means in the whole world. You are here now to help, to help mitigate the unfortunate fact that over 25% of the people in our country – 47 million people in our country – don’t have health insurance. That over 50% of all personal bankruptcies are filed because of medical expenses. And that 76% of those who do file did have health insurance when they took ill. Remember that the lure of American medicine sucks over 8,000 physicians from less developed countries into the U.S. every single year to help fill residency slots and research positions that we cannot fill with our own graduates. Realize that the money for your monthly check comes from our federal government through Medicare funding. You will be the foundation of our country’s noble, but limping, sputtering, somewhat disorganized attempt to help those in need.

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So pay attention. Unfortunately, we know what happens when we don't pay attention, when we don't read and don't speak up. Take the time to be informed, to listen, to read, to ask questions and to take part in the great discussion that lies ahead. The next months may well be one of the most critical periods in our history as we decide which path we will take in the road ahead. For our government, for our health care, for our economy, for the environment, and more importantly, for the world we make for our children and all the world's children. You, this class of 2008 know the faces of the world's children because you have held them in your hands, started their IVs and dressed their wounds. From Guatemala to Cape Town, you took it upon yourselves to go see for yourself, to experience first hand the world outside the locked gates that hold too many of our fellow Americans inside in ignorance and hold back the rest of the world outside in their need, disease and poverty. Remember their faces.

You know, many of my contemporaries rail on about you Generation X, Y or Zs. How you just don't know commitment, just don't know hard work, just want a comfortable life and a "controllable lifestyle". They say, "You're different, you're not the same, you're not like us."

They are right, but for the wrong reason. You are different. You are better. Better educated, better informed, better traveled and full of real world, real life compassion and concern. Not just for yourself, but for your families and the people of the entire world. You are better and I have every bit of faith that you

will make good use of it. That you will make the world a better place. I have faith that you will vote, not just with your absentee ballot, but also with your cell phone. Never forget that you have free long distance. Never forget the area code for Washington D.C. is 202.

solution to the problem. A decompressive laparotomy, a cholecystectomy, lysis of adhesions, whatever. But always start with logic, and then consider the anatomy, then the physiology, then pharmacology and finally the genomics. But don't forget the first step: logic.

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**TAKE THE TIME TO BE INFORMED, TO LISTEN,  
TO READ, TO ASK QUESTIONS AND TO TAKE PART IN THE  
GREAT DISCUSSION THAT LIES AHEAD.**

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That's how we vote in today's world, we engage in the robust dialogue in a two-way exchange: reading, blogging, and calling in. What a gift this Internet, what an opportunity to participate in our democracy. What a gift it is to have the entire world's library, the entire anatomy atlas and medical literature just an arm's length away. Use it, and use it often to be both a better doctor and a better citizen.

Have faith in yourself. It is well founded. Don't panic. Remember when that Code 199 page goes off, the first tools to pull out of your toolbox are your common sense and logic, and intuition. You don't have to take them out of your backpack, boot up the computer, or grab a textbook. They are yours, always there and where your critical thinking should begin. The rest of your professional life you will be called on to solve problems, figure things out. The teleology of thought and analysis should always begin first, with common sense: logic. Ask yourself, "Does this obey the laws of physics, of gravity, or of pressure relationships?" As a surgeon, surely you know I am always looking for a simple, mechanical

We teachers know that in this world of real-life, adult education it all comes down to three things.

1. What you do with your hands,
2. What you do with your mind, &
3. What you do with your heart.

Regarding the latter, remember to be nice, no matter what. That grace under pressure, that Equanimitas as exposed by Osler is the essence of a physician. "Kindness is never wasted." Treat each and every patient like your grandmother. Stay away from accusation and innuendo – others will invite you into the speculation and gossip, "Did you hear what he did before he was shot?" That's not your job. Your job is to fix them. It is the job of the police, lawyers and judges down the hill at the courthouse to figure out who did what to whom. Fix them all and let them figure it out. I have come to appreciate that there are nine sides to every story, not just two.

I am so excited for you to join us in that greatest of callings, that incredible honor and responsibility to help others

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restore their health or comfort them and their loved ones when we run out of tricks, treatments and solutions and their time has come. But soon, in just a few minutes you will take an oath – an oath that is more than two thousand years old. Keep it in mind; keep it close to your heart. Read it often and live it always. You now have the tools to use as a life-long learner, as a doctor, a physician as a healer.

Remember just three things:

1. Be nice,
2. Use your mind,
3. Be a good citizen.

In closing, I want to share with you a beautiful poem about this oath written by the father of one of our patients.

One event took her leg in the blink of an eye and easily would have also taken her life had not her friends, the medics, the local doctors, nurses, the flight crew and all the resources we could muster downtown been brought to bear. It is with his permission that I share the following words in closing.

It is called “Hippocrates’ Child”  
by Dan Holland

*We lay her at your doorstep,  
Our child, tattered and torn.  
You rushed to her with no obligation,  
Save an oath you had sworn.  
You doctored her and nursed her,  
You braided her hair,  
Though her only connection,  
Was an oath you did swear.*

*“It’s a marathon,” you counseled,  
For patient and family both,  
But you still ran alongside us,  
As you practiced your oath.  
Your science healed her body.  
You restored what was broke.  
Your art healed her spirit,  
Through the oath that you spoke.  
This covenant is more than words,  
It is life; it is hope,  
It is the miracle of existence,  
Wrought with love in an oath.  
Now the joy of your healing,  
Cometh to us each dawn,  
While your heart and your oath,  
To another move on.*

Thanks and congratulations!

## Distinguished Alumnus Award: Call for Nominations

Nominations are now being accepted for the twelfth annual *Department Distinguished Alumnus Award* which recognizes the professional achievements and/or humanitarian services to society by a department alumnus. Any physician who has completed his or her residency or fellowship training at the UW Department of Surgery is eligible for consideration.

In selecting the Distinguished Alumnus, we consider professional or humanitarian contributions that have enhanced the surgical profession, improved the welfare of the general public, or brought distinction to the Department. These contributions may have been made over a long period of time or may be a single outstanding achievement. Both academic and non-academic achievements are eligible.

Past awardees include:

2008	Mika N. Sinanan	2001	Roger Moe
2007	John H.T. Waldhausen	2000	Keith Kelly
2005	Ronald V. Maier	1999	Lloyd Nyhus
2004	J. Roland Folse	1998	Robert Condon
2003	D. Eugene Strandness, Jr.	1997	Hilding Olson
2002	Robert Barnes		

Faculty, staff, residents, and alumni are encouraged to submit nominations of those who deserve recognition. The recipient will be announced at the annual Harkins Society banquet in October. Nominations must be received no later than Monday, December 29, 2008.