

SURGERY Synopsis

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Global Health: The Department of Surgery's Efforts in Meeting Global Health Needs



Charles N. Mock, MD
Professor
Division of Trauma &
Critical Care
(Joint appts Dept of Global
Health & Epidemiology)
University Medical Center
UW School of Medicine

The Department of Surgery's involvement in global health is natural given its location within a University with one of the country's largest and most prestigious Departments of Global Health. With the Bill and Melinda Gates Foundation, the largest single private contributor to global health efforts, also in Seattle, the University of Washington is at the epicenter of philanthropic efforts, focused on improving health throughout the world. Add to these factors the passion and commitment of a number of our faculty who are involved in bringing surgery into global health efforts, and a Chair who fosters and supports these endeavors, and you have a Department that is making a difference in addressing the burden of global disease by researching, enlightening, teaching, advocating and building surgical global health capability.

Relieving the burden of disease with surgical interventions requires a multi-pronged and multi-tiered approach. We have several Department faculty who are involved in singular or event-oriented surgical interventions. For example, **Dr. Eileen Bulger, Professor and Chief of Trauma**, is a member of the International Medical-Surgical Response Team (IMSURT) which responds to disaster situations worldwide (e.g. the Haitian earthquake). Without minimizing importance of any of our faculty who devote their time and energy to global health outreach, this article focuses on three who are involved in the areas of research, advocacy and training: **Dr. Charles Mock, Professor, Division of Trauma & Critical Care (with joint appointments in the Departments of Global Health & Epidemiology); Dr. Benjamin Anderson, Professor, Surgical Oncology and Director of the Breast Health Global Initiative (BHGI); and Dr. Brant Oelschlager, Professor and Director of the Center for Videoendoscopic Surgery (CVES).**

Dr. Charles Mock: Following his surgical residency, Dr. Mock worked for two years in Ghana. It was during that time that his life-long passion for improving health globally emerged.

Friends & Colleagues of the Department of Surgery:

I am pleased to present to you the Summer 2012 edition of *Surgery Synopsis*.

In this issue we examine the Department of Surgery's efforts in meeting global health needs. Relieving the burden of disease with surgical interventions requires a multi-pronged and multi-tiered approach. The Department is fortunate to have a number of faculty interested and involved in various global health projects. Without minimizing the importance of the efforts of any of our faculty who devote their time and energy to global health outreach, this issue is dedicated to research, advocacy, training and building surgical global health capability. In order to illustrate the work being done in these areas, we are highlighting the work of three faculty: Drs. Mock, Anderson and Oelschlager.

As we tell the story of the Department's work in Global Health, we also emphasize our residents with interest in this area. Six are currently enrolled in the Global Health in Academic Surgery Track, which Dr. Mock has helped to create and has championed within the Department. You will learn of their interests and how they hope to have their careers develop to encompass work in global health.

Our faculty profile in this issue is of Dr. Richard Satava, Professor within the Division of General Surgery, a moving force and innovator in simulation training. Dr. Satava's research interests span widely diverse areas of advanced surgical technology, including Surgery in the Space Environment, Video and 3-D imaging, Telepresence Surgery, Virtual Reality Surgical Simulation, and Objective Assessment of Surgical Competence and Training. His groundbreaking work in these areas has been highly influential.

We also congratulate one of our residents, Dr. Stephen Kwon, on an article he wrote that was published as the lead article in *World Journal of Surgery* (the official journal of the International Society of Surgery). His paper is entitled: "*Development of a Surgical Capacity Index: Opportunities for Assessment and Improvement*" (*World J Surgery* (2102) 36: 232-239). Dr. Kwon did this work as part of the Academic Surgery in Global Health Track.

Finally, we congratulate and bid farewell to our graduating residents and fellows and welcome all of our new residents. And, we welcome several new faculty and congratulate those that have been promoted. Our faculty are exceptional, moving healthcare forward in every way: clinical care, research and education and thus contributing to the overall mission of UW Medicine: to improve the health of the public. The awards and publications are numerous and reveal the strength and depth of our faculty.

I hope that you enjoy this issue of *Surgery Synopsis*.

Sincerely,

Carlos A. Pellegrini, MD, FACS, FRCSI (Hon.)
The Henry N. Harkins Professor & Chair
Department of Surgery
University of Washington



Carlos A. Pellegrini, MD, FACS,
FRCSI, (Hon.)
The Henry N. Harkins
Professor & Chair
Department of Surgery
University of Washington

Dr. Mock recalls working with a somewhat unexpected patient population. “While working as a surgeon in Berekum, Ghana (1989-1991), I was surprised at the high volume of trauma patients there were to treat. I had expected to see numbers of patients with tropical diseases (such as typhoid) and obstetrical complications, and I did see and treat those diseases and conditions. However, the high volume of trauma in a peaceful, agricultural area was surprising. I was also surprised to see the lack of attention to trauma as a health problem globally. The more I read and looked into it, the more I saw that trauma was a huge problem globally; that it was growing quickly in most Low and Middle Income Countries (LMICs), primarily due to increased use of motor vehicles; and that there was very little going to systematically improve care for injured persons or to improve the scenario for road safety and other aspects of injury prevention.”

In 1992, he came to Harborview Medical Center (HMC) to enter the UW Trauma Fellowship that trains surgeons in clinical trauma care and in public health. He credits this training in injury prevention and systematic improvements in trauma care for making it possible for him to undertake high-impact research, identifying affordable and sustainable ways to strengthen care of the injured globally. The UW Department of Surgery has been his home base since that time as he continues to build on 30 years of experience.

Alongside colleagues within the Trauma and Critical Care Division of the UW Department of Surgery and colleagues in Ghana, Dr. Mock conducted the largest survey of injury ever undertaken in LMICs (at that time). With over 20,000 persons surveyed, this research brought attention to this global health issue. He continued research in Ghana, and in a growing number of other countries, including India, Mexico and Vietnam. The World Health Organization (WHO) became increasingly interested and Dr. Mock was given leave from the UW from 2007-2010 to work at the WHO to establish a trauma care unit. The goal of the unit was to develop global standards for trauma care to assist ministries of health in LMICs to strengthen care for injured persons in the hospitals they manage as well as help provide them with on-the-ground assistance to improve trauma care for their citizens.

Since his return to HMC in 2010, Dr. Mock has been instrumental in creating a Global Health in Academic Surgery Track in our surgical residency program. With its

emphasis on research and policy development skills, it is unique among surgery residencies in the US and globally.

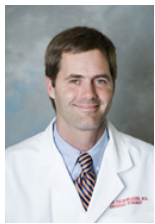


Dr. Benjamin Anderson: Dr. Anderson’s interest in global health arose from his clinical work as a surgeon primarily involved with the multi-disciplinary treatment of breast cancer disease. Although breast cancer is the most common cause of cancer-related deaths for women worldwide, he realized that the methods and standards of care practiced in resource-rich countries (like the US) would not translate well in LMICs. He was inspired to seek out ways to lessen the impact of cancer in these areas of the world. The difficulty in treating cancer in LMICs is multiplied by the fact that cancer treatment is not a single intervention. “The global challenge of breast cancer extends beyond the capacity of any one partner or sector to address. Surgical intervention is one part of treatment, but there must be other treatment modalities as well,” says Dr. Anderson.

In 2002, this awareness led Dr. Anderson and his co-founding sponsors, The Fred Hutchinson Cancer Research Center and the Susan G. Komen for the Cure, to create the the Breast Health Global Initiative (BHGI). BHGI is an innovative alliance and network of individuals, regional, national, and world health organizations, government agencies, non-governmental organizations (NGOs) and corporations, who share a dedication to improving breast health care and cancer treatment for women in economically disadvantaged countries.

The stated mission of BHGI is to “develop, implement and study evidence-based, economically feasible, and culturally appropriate Guidelines for International Breast Health and Cancer Control for low- and middle-income countries to improve breast health outcomes and access to breast cancer screening, detection and treatment for women.” BHGI serves as a catalyst for public health research and international demonstration projects aimed at validation and implementation of these Guidelines. International educational, research and guideline-based projects have been coordinated by BHGI world-wide. Currently BHGI has active collaborations in Bogota, Colombia with the Colombian National Cancer Institute, Mexico City with the Mexican National Cancer Institute, Shanghai, China with the Shanghai CDC and Jeddah, Saudi Arabia with the Shiekh Mohammed Hussein Al-Amoudi Center of Excellence in Breast Cancer.

While BHGI is supported by many and has made great advancements in achieving its goals, the international health community has not always shared the vision. In a recently published Op-Ed piece (Anderson BO. Breast Cancer and Noncommunicable Diseases: Where in the World Do We Start? ASCO Post, 3(10): 2012), Dr. Anderson discusses the work being done to advocate for change of the mindset that says “breast cancer interventions are impractical for poorer countries, both because of implementation costs and limited feasibility of treatment in the primary care settings.” Among other activities, BGHI is focused on developing core indicators and metrics for breast cancer such as the median invasive tumor size at initial diagnosis. As he points out, “as simple as it might sound, knowledge of median invasive tumor size provides a powerful indicator regarding the state of breast cancer detection.”



Dr. Brant Oelschlager: Dr. Oelschlager’s interest and venture into global health began more recently. He was asked to travel to Ethiopia to help teach laparoscopy skills to the faculty at the Addis Ababa University (AAU) School of Medicine. This and other factors, such as the data on high esophageal cancer rates in Ethiopia, led him to the University’s Black Lion Hospital.

Dr. Oelschlager’s main purpose in Ethiopia was to train surgeons, in their own environment, in laparoscopic techniques by using teaching methods that could be replicated when a master teacher was not there. He concluded that this should include training by simulation. The teaching model at AAU hospital at the time was more of an apprenticeship, with residents observing faculty perform surgery during the day that they then did without faculty supervision at night. AAU did have a simulation skills lab built in 2007, funded by a Canadian NGO and supplied by Storz. However, this lab got very little use – they had the tools and the willingness, they just did not have a process for using it or training surgeons in laparoscopic surgery.

Dr. Oelschlager, in his several trips to Ethiopia, has helped to define and build a model of teaching based upon progressive, supervised learning in clinical situations as well as learning in a simulated environment. He has set up a laparoscopic training program that uses best practices while taking into account the realities of surgery in a developing country. But in many ways, his main focus has been to extend his ability to train by “training the trainers,” by teaching them to teach, to run a basic simulation lab and to train other faculty (and now residents) to do laparoscopic surgery. He

reports that after about 2 years, the faculty at AAU have performed more than 100 laparoscopic cholecystectomies and are doing 2-5 per week. In addition, AAU faculty are attempting new procedures and are beginning to integrate residents into the training program.

Dr. Oelschlager admits he went to Ethiopia with some preconceived notions of what could be accomplished. By spending time in their environment, spending time listening – often more than doing – he was able to begin to help build a learning environment that is sustainable and works in their specific environment. He notes this work is different than of BHGI or the work around trauma that Dr. Mock has done but it was something he could do. By concentrating on a smaller project in a defined area, a different avenue and opportunity was created that lessened the burden of global disease.



Brant Oelschlager, MD, assisting the chief of GI surgery at Black Lion Hospital, Addis Ababa University (AAU), Ethiopia doing a laparoscopic cholecystectomy.

Each of these featured faculty believe that their interest and involvement in global health has been possible because of the leadership and collegial environment within the Department of Surgery. And, while much can still be done, the Department is increasing its attention on global health very directly through training residents. Our Global Health Academic Surgery Track in the surgical residency program (<http://depts.washington.edu/uwsurgap/global.htm>), with its emphasis on research and policy development skills is unique among surgery residencies nationally and internationally. On the next pages we will read about some of the residents currently involved in the global health surgical residency track.

Surgery Residents Involved in Global Health

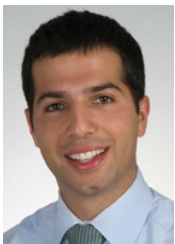


Frederick Thurston Drake, MD

What are your Professional Goals? I want to have a clinical and academic career in the United States that is balanced by a long-term relationship with a developing world site where I hope to be involved in clinical service, resident and student education (ideally, both local trainees and visiting American residents from my home institution), research, public policy involvement, and writing for both the academic and lay reader.

I am currently obtaining a MPH in the Department of Global Health at the University of Washington and plan to spend approximately 6 months of the next academic year in Kenya. I will be conducting research on breast cancer (MPH thesis) and assisting with development of the new UW resident rotation site at a district hospital in Naivasha, Kenya (MPH practicum). This is part of the University of Nairobi's PRIME-K Medical Education Programme Initiative and a collaborative venture with the University of Washington.

How is the Department of Surgery Helping You Reach These Goals? The Department of Surgery has been instrumental in providing support and mentorship in these undertakings. Dr. Charles Mock serves as my thesis committee chair and MPH advisor. Dr. David Flum (my T32 Fellowship mentor) and Dr. Ben Anderson have been guiding development of my research project. Drs. Pellegrini and Horvath have fostered a culture in which global health is a valued academic and clinical interest.

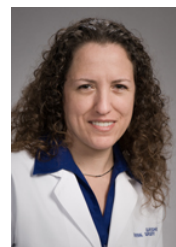


Andre Ilbawi, MD

What Are Your Professional Goals? My wife and I are planning to relocate abroad and commit ourselves to a community in a low-income country. Once we understand the goals and needs of the community, the emphasis of our work will likely be on helping develop local health capacity with particular attention to training surgical residents and non-physician practitioners. I hope to establish outreach clinics, referral practices and centers of excellence to improve cancer and pre-hospital trauma care.

My current global health research projects center on improving access to surgical services in low-income countries by promoting equitable health policies, advocating for cancer care and changed perceptions of surgery as a public health intervention. I also spent vacation time rotating at a hospital in East Africa with which I still remain in touch.

How Has The Department of Surgery Helped You Reach These Goals? The Department of Surgery has provided support in every regard. I have received support with my research and submission of manuscripts and I have received funding for conferences and lectures. Most critically, I have received mentorship that has shaped my professional and personal decisions regarding a career in global surgery.



Elina Quiroga, MD

What Are Your Professional Goals? My long-term career goal is to improve global health care through improvements in surgical education, training and research in low-income countries. I hope to accomplish this through developing a model that documents and evaluates approaches that are relevant to local problems and needs, and is appropriate to the economic, technical and human resource capacity present. Currently I am working on my Global Health MPH as well as participating as a steering committee member of the "Residents & Fellows in Global Health" (<http://rfguhw.wordpress.com/>) group and its "GHET-IT" curriculum.

My global health experience to date has included performing a simulator-based series of training rounds in Phnom Penh, Cambodia, using a simple webcam, a cheap laptop, a flashlight, a box, and some instruments. Residents were able to experience first-hand techniques of laparoscopic surgery and acquire basic surgical skills, such as knot tying, suturing and instrument handling.

How Has The Department of Surgery Helped Your Reach These Goals? I have the full support of the Division of Vascular Surgery in completing my MPH and making low-income surgery education the main theme of my research agenda. The support of the UW at large with its impressive network and projects in global health, makes these efforts much easier.



Lacey LaGrone, MD

What Are Your Professional Goals? My goal in global health is to participate in clinical education and policy development. I am particularly interested in educating non-physician practitioners to perform advanced trauma life support and basic

general surgery procedures by collaborating with physicians from Surgeons Overseas (SOS). I recently completed a paper on ultrasound training opportunities in low-middle income countries which has been accepted for publication.

How Has The Department of Surgery Helped You Reach These Goals? The Surgery Department has several excellent mentors who have helped me form my plans for future research and who provide supervision and possible collaboration in future research projects. I have also found my fellow residents to be excellent resources for advice and contacts. They have already facilitated fruitful research partnerships.



Meera Kotagal, MD

What Are Your Professional Goals? I want to integrate a career in pediatric surgery and global health. I would like to have a pediatric surgical practice in the US and a longitudinal relationship with a site in a resource-poor setting abroad where I can

focus on infrastructure development, development of surgical services and training of local capacity.

I am preparing to begin my research time in July (2012) and look forward to focusing on questions related to the development of surgical capacity in resource-poor settings. This will be as part of the UW Global Health in Academic Surgery Fellowship track. I will be pursuing my MPH and then anticipate spending 6-8 months of my second year of research time abroad. I am looking to spend time in either Haiti or Rwanda through Partners In Health (PIH) I previously spent a year in Rwanda working for PIH when I was in medical school. My work in the Global Health Track and abroad, as well as additional pediatric surgical outcomes research here in the US, will be supported by the T-32 Post-Doctoral Training Grant through SORCE.

How Has The Department of Surgery Helped You Reach Your Goals? The Department of Surgery at the UW has helped me tremendously as I pursue my goals of an integrated career, most specifically by being supportive of those goals and recognizing them as a legitimate career choice. The mentorship available through the Global Health track will prove invaluable over the two years as I work to develop a specific academic focus within the field of global surgery. Rather than solely applying the lessons we learn here in an internal context, the department's emphasis on global surgery allows residents to work with each other and with dedicated faculty, to pursue training specific to our interests abroad.



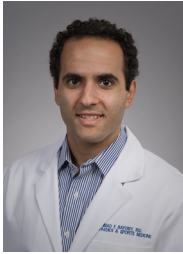
Lara Oyetunji, MD

I was born in Ibadan, Nigeria and came to the United States at the age of 17 to pursue my higher education. I am a PGY4 surgical resident and currently doing a two year surgical oncology research fellowship at the Surgery Branch

of the National Cancer Institute at the National Institutes of Health. My current research interests are in tumor immunology and gene therapy primarily in gastrointestinal cancers.

At the end of my research fellowship and completion of surgery residency, I plan to pursue a clinical surgical oncology fellowship as well as obtain a Master's in Public Health degree. The field of surgery and its role in oncology prevention and treatment has been long neglected in the realm of global health and my long-term interests are in academic surgical oncology with plans to engage in research collaborations in low and middle income countries with a primary focus on sub-Saharan Africa.

2012-13 New Surgery Residents



Ahmad Bayomy, MD
Orthopaedics



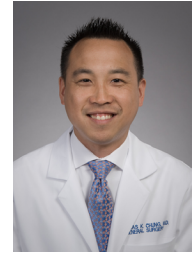
Edo Bedzra, MD
Cardiothoracic



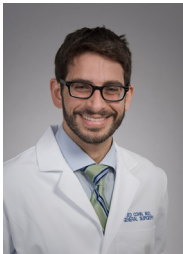
Angelique Berens, MD
Otolaryngology



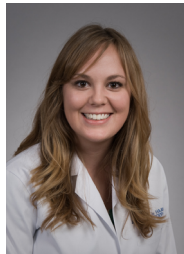
Swaroop Bommareddi, MD
General Surgery



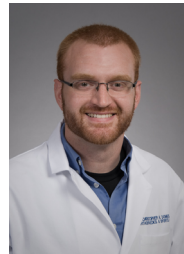
Thomas Chung, MD
General Surgery



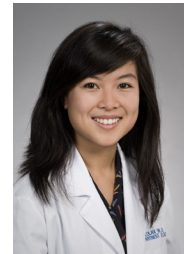
Jed Cohn, MD
General Surgery



Johanna de Haan, MD
General Surgery



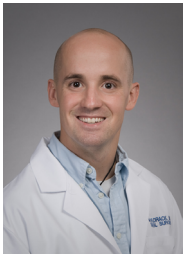
Christopher Domes, MD
Orthopaedics



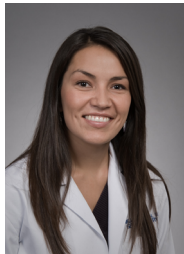
Geolani Dy, MD
Urology



Lara Felts, MD
General Surgery



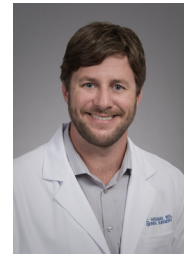
Michael Florack, MD
General Surgery



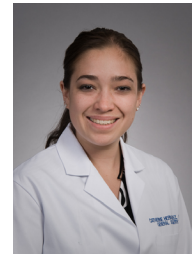
Bijiibaa' Garrison, MD
General Surgery



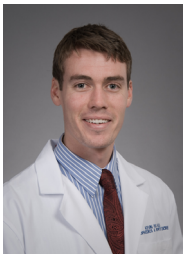
Cameron Gaskill, MD
General Surgery



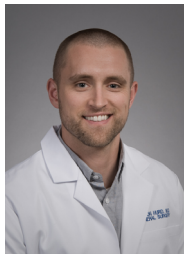
John Hardaway, MD
General Surgery



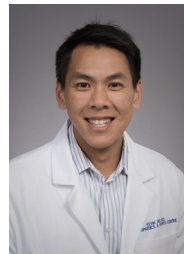
Catherine Hernandez, MD
General Surgery



Kevin Hug, MD
Orthopaedics



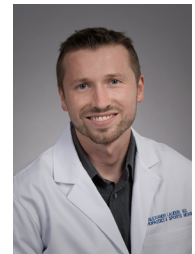
Jason Hurd, MD
General Surgery



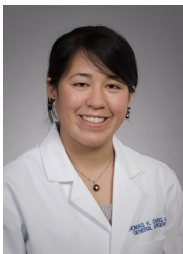
Michael Kao, MD
Otolaryngology



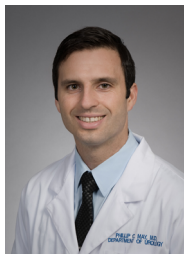
Tamara Kemp, MD
Plastics



Alexander Lauder, MD
Orthopaedics



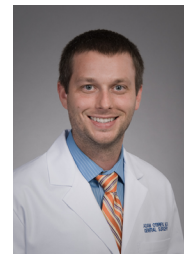
Victoria Lee, MD
Otolaryngology



Philip May, MD
Urology



Erin Miller, MD
Plastics



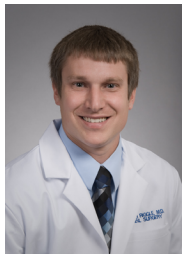
Adam O'Brien, MD
General Surgery



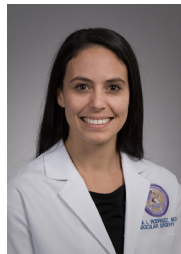
Eugene Oh, MD
Plastics



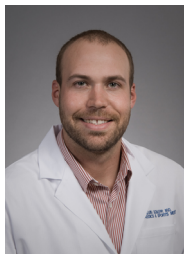
Nathan Osbun, MD
Urology



Kevin Riggle, MD
General Surgery



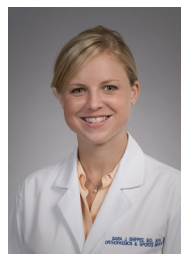
April Rodriguez, MD
Vascular



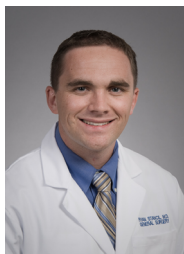
Calvin Schlepp, MD
Orthopaedics



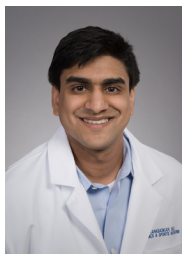
Nabil Seyidov, MD
General Surgery



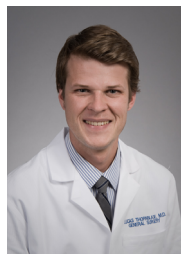
Sara Shippee, MD
Orthopaedics



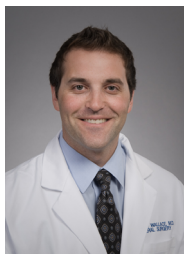
Ryan Stancil, MD
General Surgery



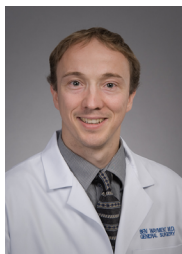
Neil Tarabdkar, MD
Orthopaedics



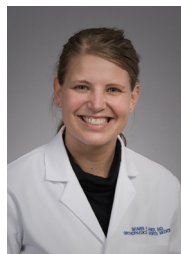
Lucas Thornblade, MD
General Surgery



Gabriel Wallace, MD
General Surgery



Benjamin Wayment, MD
General Surgery



Shawn Werner, MD
Orthopaedics



Cordelie Witt, MD
General Surgery

Why I Chose Residency at University of Washington Department of Surgery...

“Outstanding clinical training, diverse research opportunities, and breadth of faculty strength.”

“My vision is to bring Cardiothoracic Surgery to the poor in Ghana and elsewhere. The University of Washington provides me with that unique blend of surgical training excellence and dedication to service to the world beyond these borders necessary for realizing that vision. I am here, most importantly however, because of the people and the culture.”

“Patient population/acuity in conjunction with academic excellence in an amazing city.”

“UW is a pre-eminent surgical training program that offers everything I need to fulfill my goal of becoming an academic surgeon. The faculty are renowned leaders in their fields, the facilities are top-notch, and everyone within the UW system is genuinely passionate about their work. And to make it even better, we’re in Seattle!”

“The culture within the UWMC. The plethora of interesting patients and surgical problems.”

“Great clinical training - Positive learning atmosphere - Enthusiastic residents and staff - Research opportunities”

“I chose UW because of the breadth and depth of the faculty, excellent clinical and operative experience, abundant research opportunities, and collegial atmosphere of the program. Seattle is also a great place to live.”

“UW has a phenomenal hospital system and great mentors. Also, I’ve never lived in the Pacific Northwest and wanted to take a few years to explore the area.”

“It is one of the leading clinical and research institutions with prominent and experienced team of surgeons that puts the patient care and education/training of future surgeons first.”

“Overall a high caliber program, excellent clinical teachers, and the opportunity to work at Harborview.”

“Seattle is great, no 10-foot piles of snow on the streets.”

Researcher Profile: Dr. Richard Satava



Richard Satava, MD
Professor of Surgery
University Medical Center
UW School of Medicine

For the past decade as Professor in the division of General Surgery at the University of Washington, **Dr. Richard Satava** has pushed the boundaries of the possibilities of technology's role in surgical practice and instruction. His work in many ways exemplifies the ways in which Department of Surgery researchers are pioneers in developing innovations that will improve the lives of patients.

As the Senior Executive Advisor at the Institute for Simulation

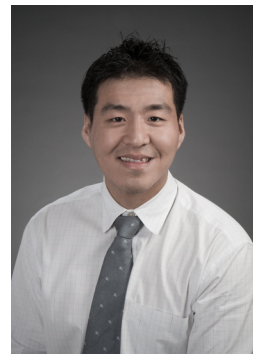
and Interprofessional Studies (ISIS), Dr. Satava has been a major advocate for advancing the work and establishing the center's reputation across the country as one of the premier simulation centers in the nation. Dr. Satava was instrumental in helping to secure nearly \$8 million of congressional funding from the Department of Defense—funds that have been critical to allow ISIS to achieve its mission to improve health regionally, nationally and globally through its programs in simulation and modeling.

Dr. Satava's research interests span widely diverse areas of advanced surgical technology, including Surgery in the Space Environment, Video and 3-D imaging, Telepresence Surgery, Virtual Reality Surgical Simulation, and Objective Assessment of Surgical Competence and Training. His groundbreaking work in these areas has been highly influential. For over 15 years, the Medicine Meets Virtual Reality conference gives out the Satava Award, recognizing unique vision and commitment to the improvement of medicine through advanced technology.

Among his many roles prior to joining the University of Washington, Dr. Satava had a military appointment as Professor of Surgery (USUHS) in the Army Medical Corps assigned to General Surgery at Walter Reed Army Medical Center and Program Manager of Advanced Biomedical Technology at the Defense Advanced Research Projects Agency (DARPA).

Dr. Satava has played a unique role in the Department of Surgery's research community. His work offers a perfect example of a researcher unafraid to look beyond the realm of what was once considered possible—and makes discoveries that are actually very much in our reach.

Development of the Surgical Capacity Index



Steve Kwon, MD
Surgery Resident
University Medical Center
UW School of Medicine

A significant proportion of the overall global burden of premature death and disability is from conditions whose treatment involves surgery, including (among others) trauma, obstetrical complications, cancer, vascular disease, and congenital anomalies. Thus, surgery is increasingly recognized as an important component of public and global health. Significant gaps exist in the provision of surgical care in low- and middle-income countries, with many patients dying or suffering prolonged disability due to lack of access to surgical care. There is a need to objectively characterize conditions at the health facilities where surgical care is provided to allow clinicians, policy makers and donors to more easily identify gaps and evaluate interventions.

Collaborating with surgeons in Sierra Leone, Liberia, and the Solomon Islands, UW Surgery Resident **Dr. Steve Kwon** and co-workers developed a method for standardizing assessment of surgical capacity in multiple hospitals (10 hospitals in Sierra Leone, 16 hospitals in Liberia, and 9 hospitals in Solomon Islands) in the form of the Surgical Capacity Index. They used the World Health Organization's Tool for Situational Analysis to Assess Emergency and Essential Surgical Care to assess the status of surgical care in these three countries with very different health care systems. Using this survey, they developed an objective scoring methodology to rate surgical capacity on an easy-to-use 100 point scale for overall capacity and for four specific categories (infrastructure, personnel, interventions, and equipment).

This index provides an objective measure of surgical capacity that will be globally useful in identifying problematic areas of surgical care and to monitor changes over time, both at individual institutions and across all hospitals in a given country.

As an indication of the importance of this work, Dr. Kwon's article was published as the lead article in this month's issue of the *World Journal of Surgery*, the official journal of the International Society of Surgery. His paper is entitled: "Development of a Surgical Capacity Index: Opportunities for Assessment and Improvement" (*World J Surgery* (2102) 36: 232-239). Dr. Kwon did this work during his research years, past part of the Academic Surgery in Global Health Track, a unique feature of the UW Surgery Residency.

2012 Chief Residents' Dinner

The Department of Surgery held its 2012 Graduating Chiefs Residents & Fellows Dinner on Friday, June 22, 2012 at the Bell Harbor International Conference Center. **Dr. Dana Lyngge, Associate Professor**, practicing general surgery at the Veteran's Affairs Puget Sound Health Care System (VA), was this year's Master of Ceremonies.

This annual dinner reception honors the Department's graduating residents and fellows (listed below) as well as provides an opportunity for presentation of special awards and recognitions. Among the awards this year was: the Faculty Teaching Award, given to **Dr. Ron Maier** and a special staff recognition award given to **Ms. Gina Coluccio**, manager of the General Surgery Residency program.



Dr. Ron Maier, Chief of Trauma, Critical Care & Burn Surgery (pictured left), was the recipient of the 2012 Faculty Teaching Award. This award, established in 1989, is in memory of former faculty member Dr. John K. Stevenson and salutes teaching excellence and dedication to resident education. **Dr. Shahram**

Aarabi, incoming Chief Resident, presented the award. In his comments he said, "not only is Dr. Maier an excellent mentor and teacher, but over the years many of the previous teaching award recipients have been his trainees. Incredibly, about one-third of the current clinical faculty in the entire Department of Surgery were trained by him as residents or fellows."

Dr. Aarabi continued, "what I've learned is that mentorship, like so many human endeavors, is an art that requires balance between conflicting impulses. It requires that the mentor be demanding yet respectful, that he be at the pinnacle of his field while at the same time being humble, that he remain constantly busy and yet always has time to teach, that he advocate for the professional success of his mentee while also realizing the importance of family and personal success. And, perhaps most importantly, it requires that the mentor be an icon and role-model while at the same time maintaining a true humanism and caring about his students. Obviously, Dr. Maier has mastered the art of mentorship, and we're all very lucky for that."



Ms. Gina Coluccio, Manager for the General Surgery Residency Program (pictured left) received special recognition presented by **Dr. Karen Horvath, Professor, Division of General Surgery and Program Director, General Surgery Residency Program**. Gina was recognized for her significant contributions over her 30 year tenure within

the Department of Surgery and was awarded an honorary title of 'Outstanding Chief Resident.' Although it was done with an element of humor, the Department wanted to give Gina the highest and most honored distinction for being "superior and exceptional" in each of the seven core competencies used to evaluate our residents: Fund of Knowledge; Patient Care (or in this case, 'Resident Care'); Technical Skills; Practice-Based Learning and Improvement; Systems-Based Practice; Interpersonal Communication Skills; and Professionalism.

Dr. Horvath concluded "when you get to work with someone like Gina every day - someone who makes you love your job and laugh through even the tough times - it all boils down to one thing: Gina Coluccio makes the world a better place by being who she is and we are the fortunate beneficiaries. Gina we thank you and we love you."



Group photo from Chief Residents' Dinner. From left to right: Karen Horvath, Samuel Mandell, Heather Wheeler, Carlos Pellegrini, Martin Montenov, Anton Mccourtie, Nader Massarweh and Elizabeth FitzSullivan.

Other awards presented that evening:

University of Washington
Department of Surgery Student Research Award -
Recipient Dr. Gabriel Wallace

Henry Harkins Award -
Recipient Dr. Cameron Gaskill

David Tapper Teaching & Leadership Award -
Recipient Dr. Samuel Mandell

Nurse of the Year Award -
Recipient Andrea Gahl, RN

2012 Graduating Chief Residents -

Coordinated Plastic Surgery Program:
Dr. Kari Keys – faculty position split between the Veterans Affairs and Harborview Medical Center in Plastic and Reconstructive Surgery
Dr. Daniel Liu – group practice with University Plastic Surgery in Chicago, IL
Dr. Daniel Suver – joining Jana Cole, MD (former UW graduate and faculty) in practice in Anchorage, AK

General Surgery Program:
Dr. Elizabeth FitzSullivan – Breast Surgical Oncology Fellowship at University of Texas MD Anderson Cancer Center
Dr. Samuel Mandell – Burn Fellowship followed by Trauma/Critical Care Fellowship at Harborview Medical Center
Dr. Nader Massarweh – Surgical Oncology Fellowship at the University of Texas MD Anderson Cancer Center
Dr. Anton McCourtie – private practice at the Wenatchee Valley Medical Center in Wenatchee, WA
Dr. Martin Montenovio – Abdominal Transplantation Fellowship at the University of Washington
Dr. Heather Wheeler – community practice general surgery at Valley Medical Center in Renton, WA

Fellows Finishing June 2012:

Trauma and Surgical Critical Care:
Dr. Scott Brakenridge, Dr. Alexis Gage and
Dr. Thomas Weiser

Transplant Surgery:
Dr. George Rofaiel

Burn Surgery:
Dr. Jon Gayken and Dr. Lisa Rae

Craniofacial Surgery:
Dr. James Smart (Microsurgery) and Dr. Julie Holding

Vascular Surgery:
Dr. Sherene Shalhub

Cardiothoracic Surgery:
Dr. Rob Meguid and Dr. Awori Hayanga

Pediatric Surgery:
Dr. Robert Ricca, Jr.

Center for Video Endoscopic Surgery:
Dr. Edward Auyang, Dr. Marcelo Hinojosa and
Dr. Maximillano Loviscek

The Department of Surgery congratulates all of the graduating residents and fellows on this important milestone and wishes them well in their new endeavors.

Other News in the Department of Surgery...

- **Dr. David R. Flum, Professor, Associate Chair of Research and the Director of the Surgical Outcomes Research Center (SORCE)**, provided insights to several areas regarding the growing obesity epidemic in the HBO documentary film *'The Weight of the Nation.'*
- **Drs. Karen Horvath, Professor & Erik Van Eaton, Assistant Professor & Adjunct Assistant Professor: Medical Education Biomedical Informatics** and past Surgery fellow and resident, **Drs. Dave Lal & Alysandra Schwarz** participated in a video production on how a career in surgery is being redefined. *Redefining Surgery* is a project sponsored by the Association for Academic Surgery, the Society for University Surgeons, and the American College of Surgeons to provide information for young bright students contemplating a career in surgery.
- The Vascular Surgery Fellowship Program recently received an accreditation status of four full years from the Accreditation Council for Graduate Medical Education (ACGME). Since 2007 (the last accreditation site visit), **Dr. Benjamin W. Starnes, Program Director**, and Anne G. Wallace, Program Administrator, have made significant changes in the fellowship's curriculum including: significant increases in the amount of OR and on-call experience for fellows; a weekly schedule that includes daily morning report and weekly breakfast meetings with the program director; a more detailed evaluation system and a focused emphasis on faculty development. The UW GME Office was instrumental in their preparation for the site visit, and the Division deeply appreciates their continued support of the UW educational programs.

2012 New Faculty & Promotions

New Faculty



Rafael Alfonso, MD
Res. Assistant Professor
General Surgery
SORCE

Dr. Rafael Alfonso, Research Assistant Professor graduated from Medical School from Universidad del Rosario in Colombia, his native country. He also holds a Master in Sciences in Pharmacoepidemiology from the Universidad Autonoma de Barcelona in Spain and a PhD from the Pharmaceutical Outcomes Research and Policy Program (PORPP) at the University of Washington (UW). He is currently

working as the Scientific Director of the Surgical Outcomes Research Center (SORCE) at the School of Medicine in UW in Seattle.

Prior to joining the UW, Dr. Alfonso spent close to ten years developing several projects in Latin America in clinical research, patient reported outcomes, and pharmacoepidemiology while working in medical departments of pharmaceutical companies. In the last few years, his research interests have been focused on three main areas: 1) Development of economic and disease models in chronic conditions such as diabetes, obesity, rheumatoid arthritis, and endocrine tumors; 2) Comparative Effectiveness Research, particularly focused on surgical interventions and new methods to provide indirect comparison analysis of different interventions for specific conditions; and 3) Health Policies, specifically involving the assessment of biologics and biosimilars and the policy implications of the regulatory status in Latin America.

Dr. Alfonso has been appointed as Advisor for the Pan American Health Organization (PAHO-Bio PANDRH working group-2010) and has been invited to work on projects to advise governments, particularly in middle income countries, and private insurers in the development and improvement of Health Technology Assessment.

Dr. Alfonso is an active member of the International Society for Pharmacoeconomics and Outcomes Research (ISPOR), was the first President of the ISPOR Chapter of Colombia, and Co-Chair of the first Latin American Conference in Cartagena in 2007. Currently, he is Chair of the Advisory Board for the Latin American Consortium (2012-2014) and

also the Chair of the ISPOR Distance Learning & On-site Training Committee (2010-2012). Additionally, he is the Founder, Chairman, and Scientific Director of RANDOM Foundation, a non-profit organization in Colombia dedicated to promote and improve Clinical and Outcomes Research in Latin America.



Alessandro Fichera, MD
Professor
General Surgery

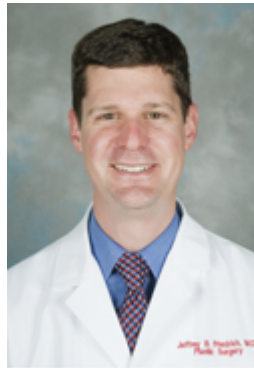
Dr. Alessandro Fichera, Professor is a nationally-renowned, board-certified colorectal surgeon specializing in the latest surgical techniques and research. He spent the last 10 years at University of Chicago Medical Center, where he has been the Program Director for the Colon and Rectal Surgery Residency Training Program since 2008. Dr. Fichera will lead the UW Medicine initiative to further develop and expand the Colorectal Surgery Program.

Dr. Fichera received his Doctorate with academic honors from the Catholic University of Rome, Italy and completed his internship and residency in general surgery at the 2nd University of Rome and the University of Chicago, followed by fellowship training in colorectal surgery at Mt. Sinai in New York. In addition to his surgical expertise in all types of colorectal disorders, Dr. Fichera has a strong interest in inflammatory bowel disease and pelvic floor disorders. Dr. Fichera's research interests focus on inflammatory bowel disease, minimally invasive and robotic surgery, and the prevention and treatment of colorectal cancers through the management of a wide variety of digestive diseases.

Dr. Fichera's long-term goals include the development of multidisciplinary programs for Inflammatory Bowel Disease, Rectal Cancer and Pelvic Floor Disorders. With the expansion of these key programs, he looks forward to the development of an ACGME-accredited Fellowship Program.

Promotions

Jeffrey Friedrich, MD
Promoted to
Associate Professor



Nahush Mokadam, MD
Promoted to
Associate Professor



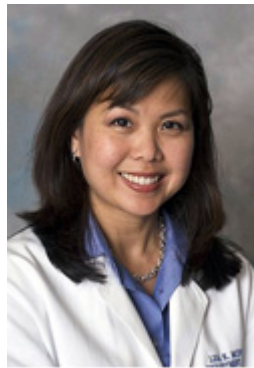
Adam Goldin, MD
Promoted to
Associate Professor



James Park, MD
Promoted to
Associate Professor



Lisa McIntyre, MD
Promoted to
Associate Professor



Hakim Said, MD
Promoted to
Associate Professor



D. Michael McMullan, MD
Promoted to
Associate Professor



Thomas Varghese, MD
Promoted to
Associate Professor



Honors, Awards & Publications

Faculty



Clowes

Congratulations to **Dr. Alec Clowes, Professor, Vascular Surgery Division, Department of Surgery** and his team, for their successful NIH competing grant renewal for a 4 year continuation of the research project: “*Mechanisms of Arterial Graft Healing.*” NIH funding, along with other funding, has continuously funded Dr. Clowes laboratory since 1981 – a span of 27 years. The Award is for approximately \$400,000 in direct costs for each year and funding begins on August 1, 2012

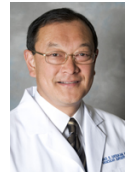


Sobel

Vein grafts are frequently used to bypass extensive infrainguinal arterial occlusive disease, the underlying cause of claudication and limb loss. These grafts, like other forms of vascular reconstruction, exhibit a variable healing response to the trauma of surgery. Despite decades of research, almost nothing is known about the factors that account for the variability in healing. In addition, all of the original vascular graft studies were conducted using either cell culture or non-human primate models of graft healing. There is now a major shift in focus. The team is studying healing in human grafts and investigating the possibility that there is a genetic basis for graft failure. The preliminary studies are very informative and very exciting. Dr. Clowes says, “we have identified a variation in the regulatory region of the p27^{Kip1} gene that is strongly associated with the patency of the grafts in two groups of patients from Seattle and Boston. This result, coupled with previously published results showing a strong association between this SNP (at position -838 in the p27 gene) and the outcome of coronary stent angioplasty in two groups of Dutch patients, indicate to us that this genetic variation might be of broad use as a biomarker for predicting outcomes of vascular reconstruction.”

Eventually they hope to determine whether p27 is a good pharmacological target for improving the performance of bypass grafting and other forms of vascular reconstruction.

The remaining three years (through July 31, 2016) will be funded as non-compete renewals, dependent upon continued availability of funds from NIH. Dr. Clowes is PI and Project Director. He is joined by a great team, with

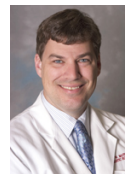


Hatsukami

Dr. Michael Sobel, Professor, Division of Vascular Surgery, practicing at the Veterans’ Affairs Puget Sound Health Care System (VA) as co-PI.

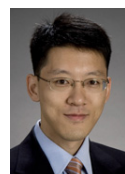
Thomas S. Hatsukami, MD, Professor, was awarded the Multicenter Clinical Studies Planning Grant from the Society for Vascular Surgery (SVS) Foundation for his proposal titled “MRI of High-Risk Carotid Plaque.”

The SVS Foundation Multicenter Clinical Studies Planning Grant is one component of a broad strategy to facilitate clinical research directed at solving high-impact questions in the care of patients with vascular diseases. SVS recognizes that members face significant gaps in knowledge in their day to day care of patients with vascular disease and acknowledges the challenge of designing and executing clinical studies of a scope necessary to provide concrete clinical guidance. Prospective multicenter studies are particularly challenging; yet these studies may be the only practical approach to recruit patient numbers and concomitantly achieve statistical power within a relevant time frame. A major hurdle for investigators planning such studies are the costs of developing compelling preliminary data, recruiting and training collaborators, and creating supporting tools necessary to write a competitive application.



Mathes

David W. Mathes, MD, Associate Professor has been selected for the 2012 Provost Bridge Funding Award.



Park

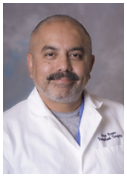
James O. Park, MD, Associate Professor, received Royalty Research Fund Award for his proposal titled “Nanoparticle-Based Gene-Silencing Therapy of Hepatocellular Carcinoma.”

Faculty (cont.)



Pellegrini

Carlos A. Pellegrini, MD, The Henry N. Harkins Professor and Chairman received the Andrew L. Warshaw Master Educator Award from the Society for Surgery of the Alimentary Tract Foundation (SSAT) for exemplifying excellence as a mentor, teacher, and educator.



Reyes

Jorge D. Reyes, MD, Professor & Chief of Transplant Surgery, UWMC; Pediatric Transplant Program Director, Seattle Children's Hospital was appointed as the inaugural holder of the Roger K. Giesecke Distinguished Professorship in Transplant Surgery.

The Roger K. Giesecke Distinguished Professorship in Transplant Surgery was established in 2011 by Mary Piggott to enhance the University's ability to recruit and retain distinguished faculty in the Division of Transplant Surgery and to honor Roger K. Giesecke, Ms. Piggott's late husband.



Vedder

Nicholas B. Vedder, MD, Professor & Chief of Plastic Surgery, was appointed to the American College of Surgeons (ACS) Board of Regents to be an active member of the Committee on Trauma (COT) for a three year term.

Residents



Chang

Jeff Chang, MD, abstract "*Long-Term Tolerance After Transplantation of Mismatched Vascularized Composite Allografts Without the Use of Chronic Immunosuppression*" was accepted for presentation in the American College of Surgeons (ACS) 2012 Surgical Forum program. The abstract has been selected for an Excellence in Research Award for the category of Plastic/Maxillofacial Surgery.



Jensen

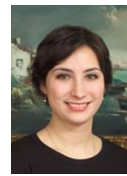
Aaron Jensen, MD, received the Association for Surgery Education's (ASE) Linnea Hauge, PhD Promising Educational Scholar Award. He was nominated for this award in recognition for demonstrating promise as a future leader and scholar in surgical education.



Lao

Victoria Lao, MD, was awarded a Cancer and Smoking Disease Research grant for a proposal titled "TIMP3 Methylation In Colorectal Cancer Pathogenesis" from Nebraska Department of Health and Human Services. The goal of this study is to understand of the role of TIMP3 methylation in the pathogenesis of CRC and to investigate its potential as a biomarker for responsiveness to EGF receptor inhibitor therapy and/or early detection of metastasis.

Dr. Lao was also awarded a National Institutes of Health (NIH) grant for a proposal titled "Novel Molecular Signatures of Colorectal Cancer." The goal of this study is to identify markers for responsiveness to chemotherapy in colorectal cancers by determining novel molecular signatures of colorectal cancer with specific focus on epigenetic changes.



Sanchez

Sabrina Sanchez, MD, was awarded an Outstanding Presentation Award from the Seattle Children's Hospital Fellow and Resident Research Day. She presented recent data on IV lipid restriction to prevent PN-associated cholestasis.



Thompson

Callie Thompson, MD, was awarded the Henry Harkins Award/3rd prize in the Best Basic Science Paper competition at the Washington State chapter of American College of Surgeons (ACS) meeting for her presentation "*Toll-like receptor 1 polymorphisms and associations with outcomes in sepsis after traumatic injury.*"

**Department of Surgery
Resident News...**

UW Department of Surgery residents win first place in American College of Surgeons' Resident Jeopardy. UW Surgery team included Drs. Roni Prucz, Colleen Priddy, Jarod McAteer, Jonathan Sham and Callie Thompson.

Save the Dates

SEATTLE SURGICAL SOCIETY
Monthly Meetings
Monday, September 24, 2012, 6:00pm
Monday, October 22, 2012, 6:00pm
Rainier Club, Seattle, WA

HARKINS SOCIETY ANNUAL RECEPTION
at ACS Clinical Congress
Tuesday, October 2, 2012, 6:00pm - 8:00pm
Hilton Chicago

HARKINS SURGICAL SYMPOSIUM
FOR RESIDENT EDUCATION
Friday, October 12, 2012, 7:30am - 2:30pm
UW Tower Auditorium
(Please bring UW HuskyCard
for building security access.)

63RD ANNUAL
ALFRED A. STRAUSS LECTURE
Michael J. Zinner, M.D.
Moseley Professor of Surgery
Harvard Medical School
Clinical Director, Dana-Farber/BWH Cancer Center
Surgeon-in-Chief
Brigham and Women's Hospital
Boston, MA

Friday, October 12, 2012, 4:00pm
Hogness Auditorium, Room A-420
Magnuson Health Sciences Building
Reception immediately following lecture
in Magnuson Health Sciences Building lobby.

THE HARKINS SOCIETY
ANNUAL MEETING & DINNER
Friday, October 12, 2012, 6:30pm
Seattle Yacht Club

DAVID TAPPER LECTURE
Professor Paul Johnson, MBChB MA MD FRCS
(Eng+Edin) FRCS(Paed.Surg) FAAP,
of the John Radcliffe Hospital in Oxford, England
Thursday, October 25, 2012, 8:00am
Wright Auditorium
Seattle Children's Hospital

ANNUAL DAVID M. HEIMBACH
UW BURN CENTER
VISITING PROFESSOR LECTURE
Steven Boyce, PhD
Director, Engineered Skin Laboratories
Shriners Burns Hospital
Cincinnati, OH
Wednesday, November 28, 2012, 6:30am
Magnuson Health Sciences Building, Room K-069

DEPARTMENT OF SURGERY
ANNUAL HOLIDAY BRUNCH
Saturday, December 8, 2012, 10:30am - 1:00pm
UW Club

19TH ANNUAL
HELEN & JOHN SCHILLING LECTURE
Anthony Atala, MD
Director of the Wake Forest Institute for
Regenerative Medicine, the W.H. Boyce Professor
& Chair of the Department of Urology at
Wake Forest University

Friday, February 22, 2013, 3:00pm
Hogness Auditorium, Room A-420
Magnuson Health Sciences Building
Reception immediately following lecture
in Magnuson Health Sciences Building lobby.

22ND ANNUAL VISITING SCHOLAR
IN CARDIOTHORACIC SURGERY
Shaf Keshavjee MD MSc FRCS FACS
Surgeon-in-Chief, UHN
James Wallace McCutcheon Chair in Surgery
Director, Toronto Lung Transplant Program
Director, Latner Thoracic Research Laboratories
Scientist, McEwen Centre for Regenerative Medicine
Professor, Division of Thoracic Surgery &
Institute of Biomaterials & Biomedical Engineering
University of Toronto
Friday, May 10, 2013, 3:30 pm - 4:30 pm
Magnuson Health Sciences Building, Room K-069

Please see the Department of Surgery's
Grand Rounds schedule under Special Events
at our website: www.uwsurgery.org

UW Medicine

DEPARTMENT OF SURGERY

Surgery Synopsis is an in-house newsletter published on a quarterly basis to highlight the academic and research activities of the University of Washington School of Medicine Department of Surgery. This publication is distributed to the Department's faculty, residents, staff, and friends.

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