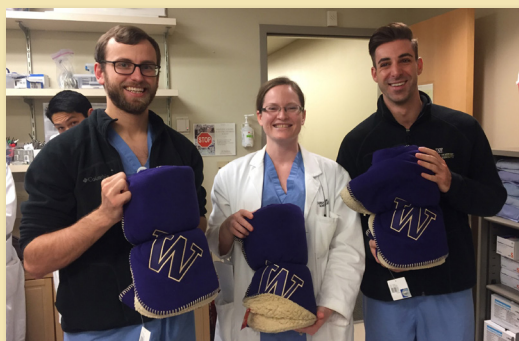


Surgery News

LAP TOP GUN ACTIVITY

Every year Department of Surgery residents participate in “Laparoscopic Top Gun,” a technical skills contest started by Dr. Ed Auyang (former CVES Fellow from 2011-12). All Department of Surgery residents across all PGY levels put their laparoscopic and suturing skills to the test in a friendly competition for the title of “Top Gun.” The contest is led by the CVES Fellows—this year Drs. Hope Jackson and Monica Young. There is one winner per PGY level – congratulations to David Drouillard (R1) (*below left*), Cambia Rome (R2) (*below center*), Amer Nassar (R3) (*below right*) and Ravi Sood (R4). But there is only one Top Gun and this year’s winner was recent graduate Bijibaa Garrison! Thanks to everyone, including the WISH Staff, who helped. It was a fun event for all!



Surgical Ethics Conference

Members of the Department of Surgery were proud to participate in the 30th Annual Summer Seminar in Healthcare Ethics and the program’s first Surgical Ethics Conference (July 31–August 5). The two events were held in conjunction and sponsored by the Department of Bioethics and Humanities and the Department of Surgery. The inaugural one-day conference, following the week-long seminar, was targeted to surgeons, anesthesiologists, surgical nurses, physician assistants, social workers, and hospital administrators to analyze topics of ethical



Left to right: Dr. Alberto Ferreras, CSE Center Director
Megan Sherman, CSE Center Co-Administrator and Mark
Cumpston, CSE Center Administrator

Madigan Army Medical Center Honor

In January 2017, Dr. Vance Sohn from Madigan Army Medical Center presented the Department of Surgery a token of thanks for training the Madigan Army Medical Center residents over the years: a U.S. flag in a shadow box which was flown in from Erbil, Iraq in the department’s honor in support of Operation Inherent Resolve on September 16, 2016. The accompanying letter read:

“The University of Washington and your program have played a critical role in the development and maturation of the residents from the Madigan General Surgery program. Our graduates are called to serve our Nation by deploying overseas into combat zones and caring for the wounded. Our partnership helps ensure that our future graduates will be able to perform in their roles as combat surgeons with skill, expertise, and experience. During this tumultuous times in our Nation’s history, we are deeply thankful for your ongoing support.”



Left to right: Drs. Karen Horvath,
Vance Sohn and Doug Wood
Photo credit: Clare McLean/UW Medicine

debate in the surgical community. The seminar included lectures from Dr. Denise Dudzinski, Chair for the Department of Bioethics and Humanities, University of Washington, Dr. Gretchen Schwarze, Department of Surgery, University of Wisconsin, and Dr. Alberto Ferreres, Department of Surgery, University of Buenos Aires. The seminar also included multi-disciplinary panel presentations and small group discussions.

The conference was the collaborative vision of Dr. Douglas Wood, The Henry N. Harkins Professor and Chair for the Department of Surgery and Dr. Denise Dudzinski. In the coming year, Dr. Wood, in partnership with Dr. Dudzinski and Dr. Ferreres, looks forward to further collaboration with the Department of Bioethics and Humanities and the development of the Department of Surgery’s Center for Surgical Ethics (CSE).

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WA ACS Delegation Meeting with WA Senator Cantwell

Physicians from UW Medicine Department of Surgery pose with Washington State Senators at the sixth annual American College of Surgeons (ACS) Leadership & Advocacy Summit in May 2017.

More than 300 surgeons and residents participated in the ACS Advocacy Summit, May 7–9. Participants in the Advocacy portion of the ACS Leadership & Advocacy Summit came to Washington primarily to meet with lawmakers and congressional staff to educate them about key ACS legislative priorities that affect surgical patients, including ensuring an adequate surgical workforce in underserved areas; advancing childhood cancer research and surveillance and providing resources for pediatric cancer survivors; allocating funding for the Children's Health Insurance Program, which provides health care coverage to uninsured children from low-income families; improving liability protections for trauma care providers; and providing greater flexibility for providers during implementation of the Merit-based Incentive Payment System (MIPS).



Senator Maria Cantwell and team pose with Department of Surgery faculty and residents Ron Maier, Sam Arbabi, Eileen Bulger, Ted Kohler, Lorrie Langdale, Sam Mandell, Mika Sinanan, Anne Ehlers, Rishi Sekar

Society of Black Academic Surgeons 27th Annual Conference

The **Society of Black Academic Surgeons (SBAS)** held its 27th annual conference in April 2017 at the University of Chicago. Residents, faculty, and medical students from the University of Washington (UW) were in attendance along with numerous other academic institutions from across the country. On the first morning of the conference, attendees were treated to a tour of the historic campus following a series of lectures given by University of Chicago faculty. This commenced the first of two days of scientific sessions featuring podium presentations and poster sessions covering a broad body of scientific work being conducted around the country. UW residents Edo Bedzra, Chief Resident, Cardiothoracic Surgery and Estell Williams, Chief Resident, General Surgery, both presented their work in the podium session and poster session respectively.

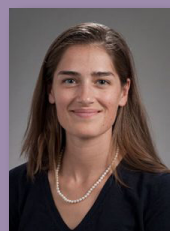


Both current and former UW residents, faculty, and medical students were in attendance at the 2017 SBAS meeting in Chicago, IL. Pictured here on the University of Chicago campus (from left to right): Dirir Abdullahi (medical student), Lara Oyetunji (fellow), Leah Backhus (former UW faculty), Tobi Afolayan (resident), Estell Williams (resident), John Monu (resident), Elina Quiroga (faculty), and Damien Carter (former UW resident).

SBAS was founded in 1989 and is the first and only national network of African-American academic surgeons. The organization's primary goal is to motivate, mentor and inspire African-American surgeons to pursue careers in academic surgery and make significant contributions and advancements to the field. Recognizing the significance of such work and the importance of this mission, the University of Washington's Department of Surgery created a **scholarship** for surgical residents wishing to attend the SBAS annual conference. The scholarship covers housing, transportation, membership fees, and meeting registration costs. This year's awardees were Cardiothoracic Surgery resident Edo Bedzra, and General Surgery residents, Tobi Afolayan, John Monu and Estell Williams.

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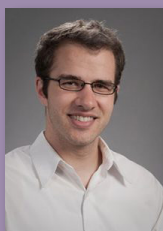
I-PASS: Standardizing Hand-Offs A Resident-led Initiative to Decrease Medical Errors via Improved Communication



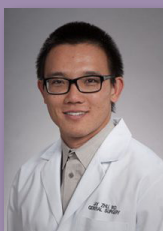
LaGrone



Ludwig



Parent



Zhu

The Department of Surgery was pleased to host four of its own residents, Drs. **Lacey LaGrone**, **Andrew Ludwig**, **Brodie Parent**, and **Jay Zhu** for their I-PASS grand rounds presentation in January 2017. Their presentation, **“Standardizing Hand-Offs: A Resident-Led Initiative to Decreases Medical Errors via Improved Communication”** discussed their I-PASS project which is the process of standardizing handoff communication between providers at UW Medicine. Dr. LaGrone was inspired by a project called “I-PASS,” first introduced at Boston Children’s Hospital, which was shown to decrease medical errors after its introduction. She and Dr. Parent developed ‘UW I-PASS’ by modifying the original I-PASS curriculum to fit an adult critical-care population. This curriculum is integrated into the electronic medical record, and is designed to teach residents, fellows, advanced practice providers, and attending surgeons how to conduct verbal handoffs of patient information using a standard format.

Drs. LaGrone and Parent brought I-PASS to the surgical ICUs at the University of Washington Medical Center (UWMC) and Harborview Medical Center (HMC). They led a multidisciplinary team to implement and study the effect of UW I-PASS on resident communication and clinical outcomes across eight ICUs. After analyzing nearly 1,500 handoffs, they found that residents participating in UW I-PASS handoffs felt more prepared for their shift, critical care fellows judged residents to be more knowledgeable about their patients, and there was no detriment to ICU length of stay, days of ventilator support, or re-intubations within 24 hours, despite the new patient handoff format.

Drs. Jay Zhu and Andrew Ludwig are currently leading team efforts to bring UW I-PASS to all of the General Surgery services at UWMC and HMC. They have developed digital tools within the electronic medical record to help providers categorize clinical information into the format taught in the UW I-PASS curriculum. In October 2016 they introduced UW I-PASS to the four major General Surgery services at UWMC. They continued to expand

to the Trauma services at HMC and launched the program on the day of their presentation.

In addition, this Department of Surgery resident-led team has partnered with residents from the Departments of Medicine and Rehabilitation Medicine to share their experience, knowledge, and tools in order to expand UW I-PASS in other, non-surgical services. The UW I-PASS team has been in consistent communication with the Graduate Medical Education office, working together to gather data regarding acceptability of UW I-PASS across services, with the joint plan to standardize all hand-off communication at UW Medicine.

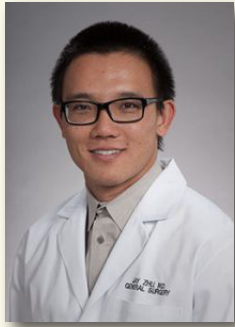
Center for Advanced Minimally Invasive Liver Oncologic Therapy (CAMILOT)



Department of Surgery is proud to announce the creation of the UW Medicine **Center for Advanced Minimally Invasive Liver Oncologic Therapy (CAMILOT)**. CAMILOT harnesses the strength of the UW Medical Center Liver Tumor Clinic, the region’s longest running multidisciplinary clinic, and leverages ongoing partnerships with Surgical Oncology, Radiation Oncology, Interventional Radiology and Medical Oncology to provide state-of-the-art, personalized treatments for hepatobiliary tumors (benign and malignant) using the most advanced and minimally invasive approaches to achieve optimal disease control. The philosophy behind CAMILOT is to exploit cutting-edge technologies to maximize the chance of cure and to improve the quality of patients’ survivorship through seamless coordination and execution of personalized care. Through teamwork and innovation, CAMILOT is poised to transform the care of patients with liver cancers in the Pacific Northwest and beyond.

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So Proudly We Hailed



"I wrote this essay following the election, in response to a growing national discourse that seeks to label immigrants as scapegoats. I wrote this to address the undercurrents of discrimination that immigrants face whenever we are forced to consider what it takes to belong—whether it's at work, in our communities, or even in our own country. But mostly, I wrote it to tell my family's story, to remind myself of who I am, where I come from, and that yes, we all belong."

— Dr. **Jay Zhu**, Surgery Resident

It was 1987. My dad arrived at the airport early, and stood waiting at the gate. A year had passed since he had last seen my mom. A year since he had borrowed just enough from a friend to pay for his one-way flight out of China. And a year since he had said goodbye to his new family—just a month after my birth—to start school in the United States. Now, after his first year in the U.S., he had managed to save up enough to not only pay back his original flight, but to also fly my mom and me to join him.

He stood waiting as strangers filed past, one by one. And as the plane began to empty, he could feel the knot in his stomach tightening. He had planned out all the details over the phone with my mom weeks in advance. Long distance phone calls were expensive in 1987. Personal cell phones were still a decade away. And my mom didn't speak a word of English.

My dad had sent hand-written signs to my mom in China with instructions on how to use them during her trip. "Can you help me find my connecting flight," one sign read in English. Then in Chinese: *use this if you get lost trying to make your connection*. There was a sign for finding a bathroom. A sign to ask for water when thirsty. And a sign to apologize when I needed a diaper change. Altogether, about a dozen signs were packaged neatly and sent to my mom prior to her intercontinental journey. It was her first time flying.

As the last passengers filtered out of the jet bridge, my dad had to subdue his panic. Did she board the right flight? Where could they be? Are they okay? And just as fear began to flood his chest, my mom's tiny frame slid into view with my one-year-old self tucked in her arm. She would later explain that she had intentionally waited for everyone else to exit before attempting to juggle an infant and all her belongings. We had arrived safely.

It was my first day in America.

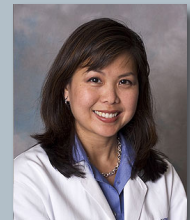
I was raised in a home of immigrants. In many ways, it was a typical Chinese American home, if there can even be such a thing. As a kid, home meant family outings to the lake and game nights in the living room. It also involved absorbing my dad's lessons on atomic particles, and visiting Harvard during a family road trip—all before I had finished the third grade. But primarily, it was where I could be myself. Where I could scream and jump and explore, always

knowing that the primary forces to reel me in, even if not so gently, were ones that had fully embraced the challenges of my existence.

My parents raised me on a father's graduate student stipend and a mother's minimum wage from waiting tables and cleaning homes. Like most parents, they wanted more for their children than they ever had for themselves. And as immigrants, they pushed me—steadied me—as I inched my way along a tightrope suspended between the cultural norms of my family's past and an American dream that stretched beyond them. I think they always knew that with every step of my journey, I would be covering a certain distance that could not be walked back. It's a distance spanning a chasm not of love, but of cultural and generational transformation—paid for in recurring increments of assimilation. Yet even before I could understand it, my parents were pushing me down this path, intentionally nudging me further away from the life and culture they had come to embody. Perhaps they thought that by doing so, I could become *more* American.

[Continue reading Dr. Jay Zhu's online essay >>](#)

"What Our Patients Are Saying"



Drs. **Hugh Foy**, Professor, and **Lisa McIntyre**, Associate Professor, Division of Trauma, Burn, & Critical Care Surgery, were highlighted in Harborview Medical Center's internal "What Our Patients Are Saying" blog:

Dr. Foy: *"I am writing to express my gratitude to Dr. Hugh Foy who helped me in an emergency situation as I tried to obtain advice regarding my daughter who was injured in Jamaica. I was not sure where to turn regarding her care then I remembered having worked with Dr. Foy. After a minute on the phone with him, it became clear we needed to evacuate her by air. Dr. Foy then quite willingly and cheerfully took the initiative to contact a former fellow of his at the University of Florida in Gainesville who within minutes called me and offered to take on her care. We expected no long-term ramifications. I will always treasure the opportunity I had at UW to work with superb individuals like Dr. Foy who without expecting to take credit or be rewarded, will help others in need. I can't speak more highly of anyone."* — Associate Professor, Emeritus

Dr. McIntyre: *"A big thank you to Dr. Lisa McIntyre. She is the best surgical doctor and I'm blessed to have had her. She is caring, respectful and does the best surgical job. A big thank you to my nurses on the 9th floor ICU Main Building. They were the best nurses I had and took such good care of me. I will not forget them."* — 9MB Patient