

SURGERY

Synopsis



CHAIR'S MESSAGE



Douglas E. Wood, MD,
FACS, FRCSEd (*ad hom*)
*The Henry N. Harkins
Professor and Chair*

The 2020 Fall Issue of Surgery Synopsis is dedicated to our teaching mission. We are filled with pride as our graduating trainees—residents and fellows from all our programs: general, plastic, cardiothoracic, and vascular surgery—conclude this important phase of their career and begin the next phase, some moving on to fellowships, many beginning their full-fledged careers as clinicians, researchers and teachers. It is hard to find words that express the bittersweet emotions we all feel and we will miss them greatly!

This year's graduation celebrations were necessarily different due to COVID-19 but our excellent Residency Program Directors and education staff adeptly pivoted to virtual graduation ceremonies. Hard work, ingenuity and technology produced meaningful ending rituals. Please read more about our graduation ceremonies and events on [page 4](#).

While sad to see our graduates leaving, we are excited to welcome our new group of residents and fellows and are delighted to have them join the UW Surgery community. During this most unusual of years, so much had to be reconfigured to address the challenges of the pandemic while still providing a stellar training experience.

I am impressed with the collaborative response by our Program Directors (PDs) under the overall direction of our Associate Chair of Education, Dr. **Karen Horvath**: Drs. Horvath (General Surgery); **Jeff Friedrich** (Plastic Surgery); **Kathleen Berfield** (Cardiothoracic Surgery); and **Niten Singh** (Vascular Surgery) met extensively to coordinate and implement a cohesive Department plan. The dedicated work and imagination of our PDs and of

our education staff, all working together, resulted in new methods and incorporation of new technology to maintain and even enhance our high-quality training, in spite of a pandemic. Some of the changes include:

- Restructuring the resident teams in a 'platoon' fashion during the peak of the crisis. The experience was published in JAMA Surgery and served as a reference for many training programs in the US and worldwide in how to safely reorganize in a pandemic. "[Emergency Restructuring of a General Surgery Residency Program During the Coronavirus Disease 2019 Pandemic—The University of Washington Experience](#);"
- Restructuring department residency orientation days to allow for social distancing;
- Moving all didactic teaching to online formats;

Amidst these changes, we additionally look ahead to the next academic year as resident recruitment season begins. We are adapting and changing in order to attract and match medical students in all of our programs.

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CHAIR'S MESSAGE

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We are faced with the new challenge of introducing our Department, the University and the Puget Sound region to remote students from around the country. And, in turn, these students will be selecting and ranking residency programs without ever traveling to Seattle, visiting our teaching hospitals, or directly meeting our faculty and residents. The residency program hosted "Virtual Visits" for medical students interested in applying to our program. Topics included: Resident Rounds including Q&A with current trainees; hospital site overview; research and professional development opportunities; discussion of Department Diversity, Equity & Inclusion (including the Women's Council) as well as the Department's Wellness initiatives.

Finally, the residency website is in the process of upgrading to better assist and inform residency applicants and create virtual visits and interviews to closely reflect an in-person experience.

While everyone hopes we return to in-person interviews, the lessons learned now will continue to be invaluable long term. A silver lining of this experience is that we may find ways to use some of the virtual format in the future to help more students learn about our programs, and to simplify expenses and logistics for both the students and our programs, which may increase the number and diversity of medical students that might otherwise not make a physical trip to Seattle.

The pandemic has also affected our medical student education and our surgical clerkships have been adjusted to meet the challenge. The entire spring quarter was cancelled across the School of Medicine (SOM) and medical students were removed from clinical environments in March and were not able to return until June 29th.

Programs were then asked to accommodate 12 months of clinical education into 9 months and the Department of Surgery developed an altered course schedule that remains six weeks long but now consists of four weeks of in-person clinical training and two weeks of online virtual coursework to supplement their learning. This change eliminated overlap of students in the clinical environment while still accommodating required rotations and necessary training.

These changes were a tremendous undertaking. Collaboration among more than 30 Department faculty produced 32 new lectures on common surgical topics which integrated core curriculum from the American College of Surgeons and Association for Surgical Education, as well as incorporating numerous virtual cases. Students also now complete a virtual skills lab on suturing that is hosted by Dr. Dennis Kao and the plastic surgery faculty and residents.

The American Journal of Surgery [published the Department's plan](#) for the altered structured in April.

(continued on page 3)

It was an enormous undertaking to create this structure and implement extensive changes to the clerkships in a short period of time, and we are all so grateful for the faculty coming together to undertake this challenge.

The Surgery Recovery Initiative has proven vital as we have returned to pre-COVID clinical activities while continuing to work in a COVID environment. The Department continues to adapt to working during COVID, taking safe care of patients, faculty and other caregivers. I am pleased to report at this time that surgical volumes have ramped back up to near normal levels. This is good news for everyone: patients who need surgery, our faculty, trainees and our financial stability.

Our staff are unparalleled in their dedication to keeping the important work moving forward. Many of our Department staff are able to work remotely, even though many would prefer to return to work in our offices. Faculty have been supportive of their staff and have adapted to having fewer staff around on a day-to-day basis but are looking forward to a time when we can return to working together in person.

I am so proud of all members of our Department and their willingness to adapt to circumstances to keep taking excellent care of patients, providing quality teaching to our trainees, and keeping the research and administrative work of the department moving forward.

Our focus on Diversity, Equity, Inclusion and Anti-Racism continues within the Department. The Diversity Council has completed a Department environmental survey, which were shared at our annual Harkins Symposium on October 16th. A group

of faculty and residents have established a book club, open to all Department of Surgery employees, with a focus on self-education on race issues, believing that we all need to be responsible for our own education, and not simply lean on the Diversity Council or our minority colleagues to teach us about racism.

The staff have established an Anti-Racism Group that is composed of members from across the Department. Susan Marx, Vice-Chair of Finance & Administration, is leading this group. Their mission is to develop a space to brainstorm ideas and pathways for education, awareness and actions and become a department of conscience that embeds diversity, equity and inclusion in every aspect of our staff operations. This group works in alignment with the Diversity Council, but its work is focused on staff. Susan Marx has authored our "Diversity Column" for this issue. Please find it on page 27.

In keeping with our focus on education, our focus on Research is on the resident research activities. Please read on 9.

We have included a section on the Department of Surgery participation in this year's recently concluded American College of Surgeons (ACS) annual Clinical Congress. DoS faculty were highly involved with this year's virtual Congress activities, including numerous presentations, a keynote address, and through committees work and other ACS leadership roles.

Of note, featured at the ACS Clinical Congress was a presentation on the multi-year study Comparing Outcomes of Drugs and Appendectomy (CODA) conducted through the Surgical Outcomes Resource Center (SORCE) under the direction of Prin-

cipal Investigator **David Flum, MD, MPH**, Director of SORCE (he is also the Department's Associate Chair for Research) and Co-Investigator **Giana Davidson, MD, MPH**, Associate Professor of Surgery in General Surgery Division and Section Chief of Emergency General Surgery. The [CODA study results](#) have been published in the New England Journal of Medicine.

Our 71st annual Harkins Symposium and Strauss Lecture took place on Friday, October 16, 2020. This year's lecturer was Dr. Edward Cornwell, III, MD, FACS, FCCM, and he gave a lecture entitled "Outcomes Disparities in Trauma Care: Who, When, Why." Dr. Cornwell is the Surgeon-In-Chief at Howard University Hospital in Washington, D.C. as well as Chair of the Howard University College of Medicine Department of Surgery. Please read page 17 to learn more about this year's Harkins/Strauss events and topics.

We have added several new faculty in the past several months. They are introduced on page 11.

As always is the case, our faculty continue to shine, win awards, honors and are in the media. Sixty-four of our faculty were "Top Docs" in the two Seattle magazines, Seattle Met and Seattle Magazine.

I hope you enjoy reading this issue of Surgery Synopsis.

Sincerely,

Douglas E. Wood, MD, FACS, FRCSEd
The Henry N. Harkins
Professor & Chair
Department of Surgery
University of Washington

Surgery News

DEPARTMENT OF SURGERY 2020 RESIDENT GRADUATION DINNER

The 2020 Department of Surgery Chief Residents' Dinner was held virtually in Seattle, WA, June 2020. Welcome and introductions were presented by Drs. Douglas Wood, The Henry N. Harkins Professor and Chair, and Karen Horvath, Professor and Director, Residency Program in General Surgery. A special thanks was also given to the Department of Surgery's Education staff: Kira Martin, Gina Coluccio, Anne Long, Karyn Crowe, Joanna Ames, Suzanne Mills, Kristelle Calma, Laura Yale, Caroline Sabella, Katie Nowlin and Kaitlin Ree.

CHIEF RESIDENTS FINISHING JUNE 2020

DIVISION OF CARDIOTHORACIC SURGERY INTEGRATED RESIDENCY PROGRAM

Dr. Swaroop Bommareddi
*MCS/Transplant Fellowship
University of Wisconsin*

DIVISION OF VASCULAR SURGERY INTEGRATED RESIDENCY PROGRAM

Dr. Anna Ohlsson
*Clinical Assistant Professor
Division of Vascular Surgery
University of Pennsylvania*

DIVISION OF PLASTIC SURGERY INTEGRATED RESIDENCY PROGRAM

Dr. Kate Impastato
*Plastic Surgery
Marshall University*

Dr. Tommy Liu
*Craniofacial Fellowship
University of California, Los Angeles*

Dr. Shane Morrison
*Gender-Affirming Surgery Fellowship
University of Michigan*

Dr. Trent Morton
*Plastic Surgery
Proliance Plastic and Reconstructive Surgeons*

DEPARTMENT OF SURGERY GENERAL SURGERY RESIDENCY PROGRAM

Dr. Brian J. Cook
*Abdominal Transplant Fellowship
University of Washington*

Dr. Sarah M. Kolnik
*Surgical Critical Care Trauma Fellowship
University of Kentucky*

Dr. Vimukta M. Mahadev
*Surgical Critical Care Trauma Fellowship
University of Washington*

Dr. Amer H. Nassar
*Harvard University/BIDMC
Plastic and Reconstructive Surgery Fellowship*

Dr. Francys C. Verdial Argueta
*Breast Surgical Oncology Fellowship
Memorial Sloan Kettering Cancer Center*

Dr. Jay Zhu
*Minimally Invasive Surgery Fellowship
University of Washington*

PRELIMINARY RESIDENTS FINISHING JUNE 2020

Dr. Alex Charboneau
Dr. Waraporn Denjalearn
Dr. Robert Dionisio
Dr. Abhi Jain
Dr. Daniel Kaufman
Dr. Christopher Lewis
Dr. Jason Lizalek
Dr. Jacob LoMonaco
Dr. Ryan Musolf

Dr. Peter Park
Dr. Amar Shah
Dr. Charles Tandler
Dr. Justin Terracciano
Dr. Philip Tong
Dr. Theresa Wang
Dr. Michael Wong
Dr. Jefferson Yu

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SURGERY FELLOWS FINISHING JUNE 2020

Dr. Jeff Anderson
Surgical Critical Care

Dr. Navin Bhatia
Surgical Critical Care

Dr. Chelsea Boe
Hand Surgery

Dr. Mert Calis
Craniofacial Surgery

Dr. Peter Joseph Edpao
Transplant Surgery

Dr. Colette Inaba
Minimally Invasive Surgery

Dr. Abbie Jensen
Surgical Critical Care

Dr. Nicole Kurnik
Craniofacial Surgery

Dr. Stephanie Mason
Surgical Critical Care

Dr. David Miranda
Surgical Critical Care

Dr. Ugochi Okoroafor-Ridgway
Hand Surgery

Dr. Rachel Payne
Surgical Critical Care

Dr. Lela Posey
Surgical Critical Care

Dr. Brian Pridgen
Hand Surgery

Dr. Marko Rojnica
Pediatric Surgery

Dr. Joel Sternbach
Cardiothoracic Surgery

Dr. Rebecca Ur
Vascular Surgery

Dr. Kent Yamaguchi
Hand Surgery

2020 GRADUATING CHIEF RESIDENT AWARDS

HARKINS SOCIETY & HENRY HARKINS AWARD

Presented to a University of Washington School of Medicine medical student who has completed outstanding clinical work and demonstrated a strong interest in pursuing training in a surgical discipline.

Presented by Dr. Kristine Calhoun, Associate Professor,
Division of General Surgery

Awardee—Dr. Annie Yang, Graduate, University of Washington, School of Medicine, Class of 2020

DEPARTMENT OF SURGERY STUDENT RESEARCH AWARD

Presented to a student who has performed outstanding research within the Department of Surgery.

Presented by Dr. Kristine Calhoun, Associate Professor,
Division of General Surgery

Awardee—Dr. Arvind Bakthavatsalam, Preliminary (R1)

RESIDENT ACADEMIC EXCELLENCE AWARD

Presented to General Surgery residents who scored in the 85th percentile or greater from across the nation on the ABSITE exam in 2020.

Presented by Dr. Karen Horvath, Professor and Director,
Residency Program in General Surgery

Awardees—Drs. Oluwatobi Afolayan (Chief), Catherine Beni (Research), Kyle Bilodeau (R3), Nina Clark (R2), Matias Czerwonko Pupi (R3), Sara Daniel (R4), Lindsey Dickerson (R2), David Drouillard (Research), Dara Horn (R4), Daniel Kaufman (R3), Jason Lizalek (R2), Jamie Oh (Research), Joshua Rosen (Research), Kevin Sullivan (Chief), and Michael Weykamp (R3)

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Surgery

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2020 GRADUATING CHIEF RESIDENT AWARDS (CONT.)

JUNIOR RESIDENT ACADEMIC LEADERSHIP AWARD

Presented to an R1 or R2 surgery resident who participates in the greatest number of Journal Clubs in an academic year.

Presented by Dr. Karen Horvath, Professor and Director,
Residency Program in General Surgery

**Awardees—Drs. Kate McNevin (R2), General Surgery and
Lindsay Dickerson (R2), General Surgery**

HARBORVIEW HOUSESTAFF AWARD NOMINEE

This nomination recognizes the resident or fellow for their “extraordinary clinical ability and humanitarian concern,” as best shown through their exemplary care provided to Harborview Medical Center’s patients.

Presented by Dr. Karen Horvath, Professor and Director,
Residency Program in General Surgery

**Nominee—Dr. Amer Nasser, Chief,
Division of General Surgery**

STEVENSON FACULTY TEACHING AWARD

The Stevenson Faculty Teaching Award (est. 1989) in memory of former faculty member Dr. John K. Stevenson, salutes faculty teaching excellence and dedication to resident education.

Presented by Chief Residents: Drs. Swaroop Bommareddi, Anna Ohlsson, Kate Impastato, Tommy Liu, Shane Morrison, Trent Morton, Brian J. Cook, Sarah M. Kolnik, Vimukta M. Mahadev, Amer H. Nassar, Francys C. Verdial Argueta, and Jay Zhu

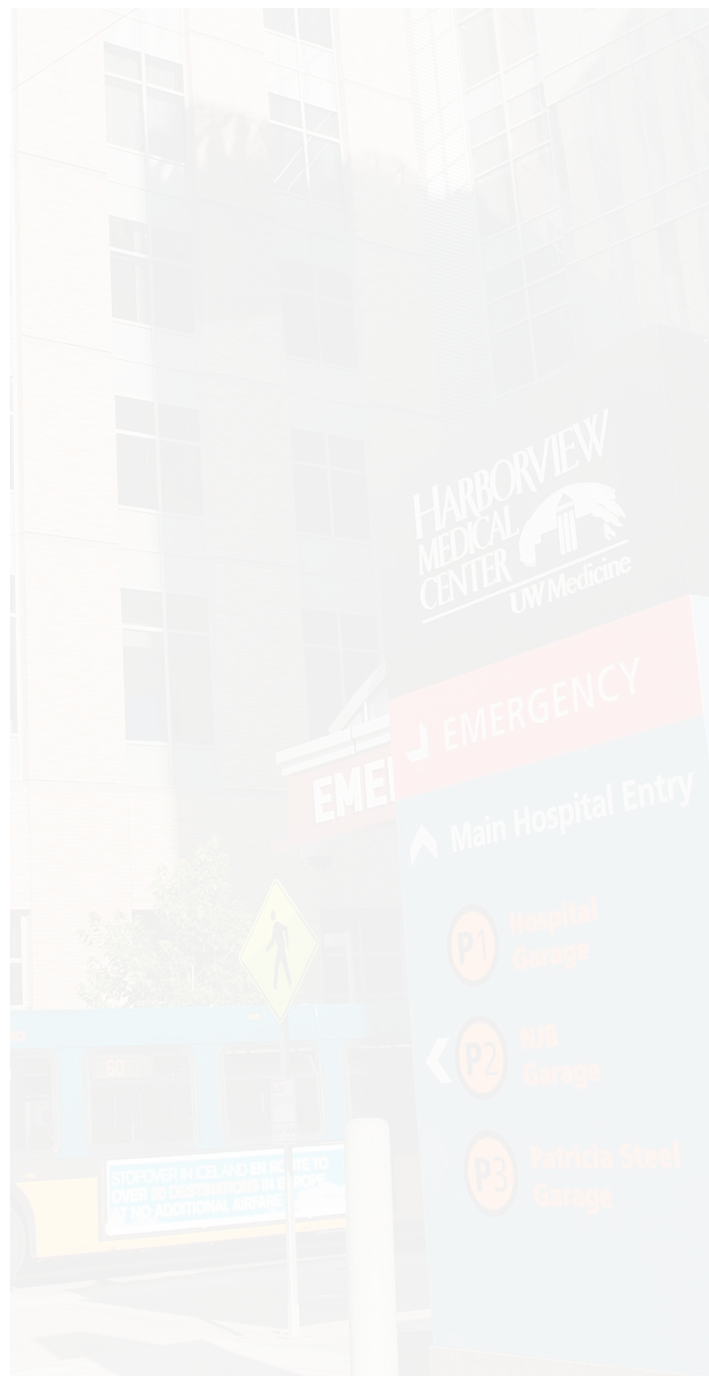
**Awardee—Dr. James Oh Park, Professor,
Division of General Surgery**

THE DAVID TAPPER RESIDENT TEACHING & LEADERSHIP AWARD

The David Tapper Resident Teaching and Leadership Award is presented to a General Surgery Chief Resident who exemplifies the teaching and leadership qualities that others seek to emulate.

Presented by Dr. Douglas Wood,
The Henry N. Harkins Professor and Chair

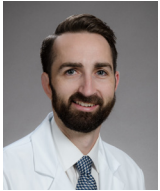
**Awardee—Dr. Brian J. Cook, Chief,
Division of General Surgery**



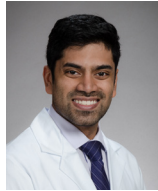
WELCOME 2020-21 NEW SURGERY RESIDENTS

Surgery News

The Department of Surgery welcomes our new, first-year 2020-2021 residents. The Department is proud to have this group begin their surgical educational journeys working towards being leaders in their fields.



Max Adcox, MD
Cardiothoracic
Surgery R1



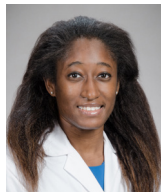
**Arvind
Bakthavatsalam, MD**
Preliminary R1



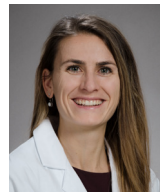
**Giulia
Daneshgaran, MD**
Plastic Surgery R1



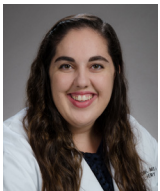
**Marlie
Elia, MD**
Preliminary R1



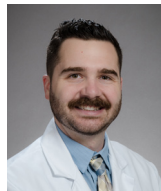
Onyi Ensou, DMD, MD
Oral & Maxillofacial
Surgery R1



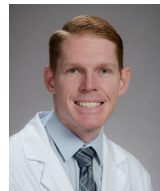
**Lindsay
Eysenbach, MD**
Preliminary R1



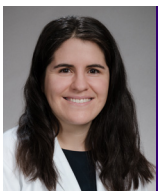
**Natalie
Friedrichs, MD**
Preliminary R1



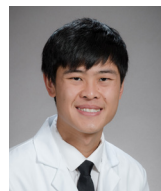
**Jonathan
Gatto, MD**
Preliminary R1



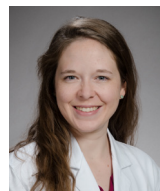
**Ronald
Goubert, MD**
Preliminary R1



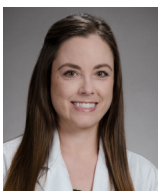
**Alexandra
Hernandez, MD**
General Surgery R1



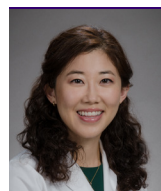
**Kevin
Huang, MD**
Preliminary R1



**Sarah
LaPierre, MD**
Preliminary R1



**Chelsey
Lemaster, MD**
Preliminary R1



Rachel Lim, DDS, MD
Oral & Maxillofacial
Surgery R1



**Catherine
Lynch, MD**
Preliminary R1



**Connor
Mamikunian, MD**
Preliminary R1



**Shanique
Martin, MD**
Plastic Surgery R1

WHY DID I CHOOSE UW DOS RESIDENCY?

"I chose the UW DoS for the rigorous breadth and depth in clinical training and the exceptional mentorship for resident academic development."

"I thought it would provide the most options I would be interested in as a preliminary resident."

"I searched for and found a residency program that offers a diversity of settings to learn in. I will have a broad swath of experiences that are only possible at trauma centers and academic centers. I will learn to work with the sickest of surgical patients."

WHAT EXCITES ME THE MOST REGARDING MY RESIDENCY?

"I am thrilled to train not only with such knowledgeable and approachable attending surgeons but also wonderful the wonderful residents, fellows, and staff of UW as a whole. Everyone I have met embodies "Patients are first" to the fullest, and every day I am inspired to push harder to be a better doctor, surgeon, and person."

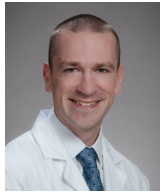
"All my amazing co-residents. I am also very excited for the opportunity to serve the patients in the WWAMI region."

"I get to work with faculty who are really committed to my education and growth as a surgeon. There is a lot of positivity and encouragement around you everyday."

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Surgery News

WELCOME 2020-21 NEW SURGERY RESIDENTS



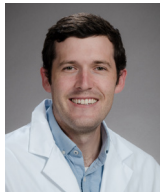
Craig
May, MD
Preliminary R1



Cody
McHargue, MD
General Surgery R1



Reece
Miller, MD
Preliminary R1



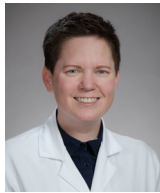
William
Montagne, MD
Preliminary R1



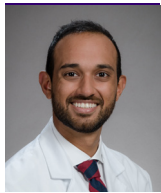
Nzuekoh
Nchinda, MD
General Surgery R1



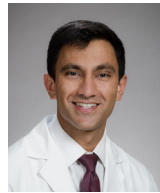
Reginald
Nkansah, MD
Vascular Surgery R1



Courtney
Orsbon, MD
Preliminary R1



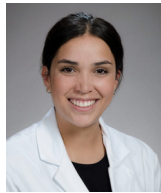
Kanvar
Panesar, DDS, MD
Oral & Maxillofacial Surgery R1



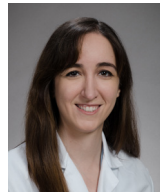
Amit
Pujari, MD
Vascular Surgery R1



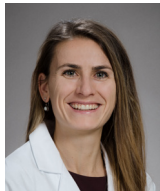
Divya
Ramakrishnan, MD
General Surgery R1



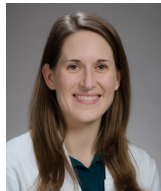
Daniela Rebollo
Salazar, MD
General Surgery R1



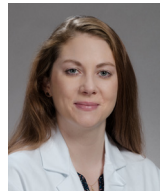
Editt
Taslakian, MD
Plastic Surgery R1



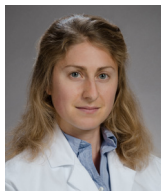
Lindsey
Teal, MD
Plastic Surgery R1



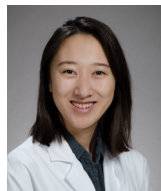
Hannah
Van Patten, MD
Preliminary R1



Amanda
West, MD
Preliminary R1



Hannah
Wild, MD
General Surgery R1



Annie
Yang, MD
General Surgery R1

WHY DO I WANT TO BE A SURGEON?

"I want to help patients through some of the most vulnerable times in their lives. I prefer pressure situations because it challenges me to constantly hold myself accountable and improve on a regular basis."

"I like being able to help patients in a tangible way. Surgery gives you a technical skillset as an additional way to take care of your patients."

"I have always enjoyed working with my hands, whether it was through ceramics, knitting or cooking, and for me, being a surgeon will allow me to harness my creativity and drive to provide patient care through tangible results."

HOW DID I CHOOSE MY SURGICAL SPECIALTY?

"I chose general surgery because it was the rotation I enjoyed most during medical school. Especially after my Sub-I in surgical oncology, I knew that I enjoyed not only the cases themselves but also the management decision-making processes in general surgery."

"I chose cardiothoracic surgery because I really love physiology and was drawn to the ability to change and manipulate physiology in the OR. As a result, in both cardiac and thoracic surgery, the majority of operations can be life-changing for patients. I'm biased, but also think cardiothoracic surgery has the best anatomy."

2020-21 SURGERY RESEARCH RESIDENTS

Surgery News

We are proud to present this year's new research residents. Research is a key component of the UW Department of Surgery's residency programs and these residents have each "paused" their clinical training in order to complete a two-year research fellowship. Our research residents, along with their clinical peers who work hard to find time to participate in numerous projects throughout their training, all play an integral role in fulfilling the Department's research mission.



Dr. Christopher Little
2020-2021

Dr. Little is a research fellow in the NIH-funded T32 Transplant Research Training Program at the University of Wisconsin under the direction of Principal Investigator Dr. Dixon Kaufman, Ray D. Owen Professor and Chair of the Division of Transplantation. Their work will focus on developing a safe and effective tolerance

induction protocol for MHC-disparate renal transplantation in a non-human primate model. Specifically, they seek to establish a novel post-transplant non-myeloablative, helical tomotherapy-based total lymphoid irradiation conditioning regimen followed by donor hematopoietic stem cell infusion as a strategy to generate mixed chimerism and sustained operational tolerance. Furthermore, they seek to elucidate the immunologic mechanisms that underlie induction and maintenance of chimeric-based immunotolerance. Following residency, Dr. Little plans to pursue a fellowship in abdominal organ transplantation.



Dr. Kajal Mehta
2020-2022

Dr. Mehta is a Global Surgery research fellow currently completing a NIH-Fogarty International Global Health Research Fellowship with funding from NHLBI. She is working under the mentorship of Dr. Barclay Stewart and Dr. Tam Pham from UW and Dr. Shankar Rai and Dr. Kiran Nakarmi from the Nepal Cleft and Burn Center in Kirtipur, Nepal. She will be based out of

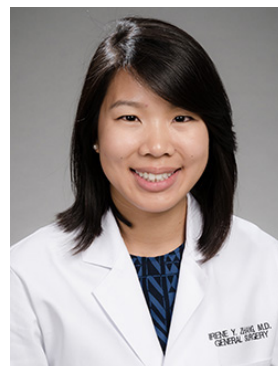
Nepal, focusing on burns and injury prevention in low-resource settings. Dr. Mehta's work encompasses studying enteral resuscitation for major burn injuries in austere settings, critical care-based quality improvement initiatives, cookstove-related burn injuries, and the gut/skin microbiome in burn-injured patients. She plans to ultimately pursue a fellowship in Burns and Critical Care and a career in global public health research and program development.



Dr. Josh Rosen
2020-2022

Dr. Rosen is a research fellow in the NIDDK-funded T-32 fellowship in Gastrointestinal Surgical Outcomes Research at the Surgical Outcomes Research Center (SORCE) under the mentorship of Dr. David Flum, Professor in the Division of General Surgery. Dr. Rosen's main interests lie in improving the quality of decisions made in the care of acutely

ill and medically complex surgical and trauma patients. He plans to address this from multiple perspectives including analyzing large datasets to better understand disease outcomes, improving decision-making frameworks, and understanding how to better utilize outcomes data in real-world clinical decisions. Dr. Rosen will also be completing coursework in advanced epidemiologic and statistical methods. He plans to ultimately pursue a fellowship in trauma and critical care.



Dr. Irene Zhang
2020-2022

Dr. Zhang is a research fellow in the NIDDK-funded T32 Fellowship in Gastrointestinal Surgical Outcomes Research under the mentorship of Principal Investigator Dr. David Flum, Professor in the Division of General Surgery, and collaborators at the Surgical Outcomes Research Center (SORCE). Her research interests include surgical

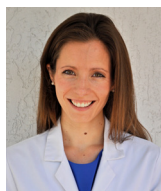
decision-making, patient-reported outcomes, as well as health economics and health policy. During this time, Dr. Zhang will also complete a MPH degree in Health Services, with a concentration in Health Systems and Policy, at the University of Washington. She ultimately plans to pursue a career in academic surgery.

Surgery

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WELCOME 2020-21 NEW SURGERY FELLOWS

The Department of Surgery is honored to welcome our new clinical and research fellows.



Dr. Jamie Anderson
Fellow, Pediatric General
& Thoracic Surgery



Dr. Abhiram Bhashyam
Hand and Microvascular
Surgery Fellow,
Orthopaedic and
Plastic Surgery



Dr. Ronald Brown
Hand and Microvascular
Surgery Fellow,
Orthopaedic and
Plastic Surgery



Dr. Rocio Carrera
Senior Fellow, Center for
Videoscopic Surgery
Esophageal Research Fellowship



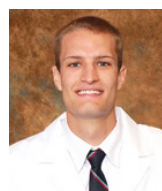
Dr. Brian Cook
Senior Fellow, Abdominal
Transplant Fellowship



Dr. Gina Farias-Eisner
Hand and Microvascular
Surgery Fellow,
Orthopaedic and
Plastic Surgery



Dr. Bryce French
Vascular Surgery Fellow,
Vascular Surgery



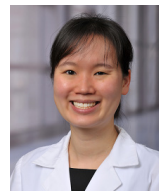
Dr. Benjamin Huebner
Fellow, Surgical Critical Care
- Trauma Track



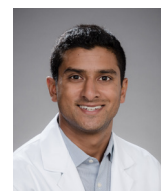
Dr. Katherine Iverson
Fellow, Surgical
Critical Care - Trauma Track



Dr. Peter Johnston
Fellow, Surgical
Critical Care - Trauma Track



Dr. Madonna Lee
Senior Fellow, Congenital
Cardiac Surgery Fellowship



Dr. Vimukta Mahadev
Fellow, Surgical
Critical Care - Trauma Track



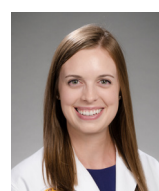
Dr. John McClellan
Fellow, Surgical
Critical Care - Burn Track



Dr. Osa Okunbor
Vascular Surgery Fellow,
Vascular Surgery



Dr. Dale Podolsky
Craniofacial Surgery Fellow,
Craniofacial Surgery



Dr. Lauren Poniatowski
Pellegini/Oelschlager Endowed
Fellowship in Healthcare
Simulation Training



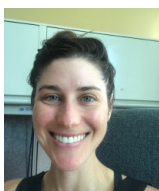
Dr. Joshua Preiss
Senior Fellow, Thoracic
Surgery Fellowship



Dr. Joshua Rosen
T32 Research Fellow,
Gastrointestinal Surgical
Outcomes Research
Fellowship



Dr. Clifford Shekter
Fellow, Surgical
Critical Care - Trauma Track



Dr. Katie Stern
T32 Research Fellow,
Translational Research in
Trauma and Critical
Care Fellowship



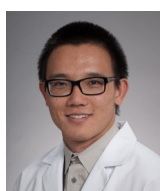
Dr. Stephen Viviano
Microvascular
Reconstructive
Surgery Fellow



Dr. Howard Wang
Craniofacial Surgery Fellow,
Craniofacial Surgery



Dr. Irene Zhang
T32 Research Fellow,
Gastrointestinal Surgical
Outcomes Research
Fellowship



Dr. Jay Zhu
Senior Fellow, Advanced GI/
Minimally Invasive
Surgery Fellowship

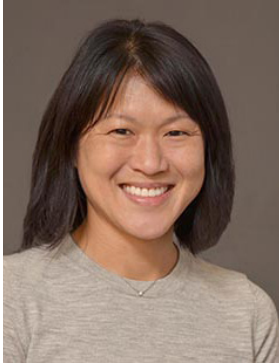


Dr. Stephen Zoller
Hand and Microvascular
Surgery Fellow,
Orthopaedic and
Plastic Surgery

WELCOME NEW FACULTY

Surgery News

It is with great pleasure we announce and welcome our new faculty members. Each new faculty member introduces an added level of experience, quality, and service to the Department of Surgery.



DR. JOY CHEN
ASSISTANT PROFESSOR
DIVISION OF GENERAL SURGERY

Dr. Chen joins us from the San Francisco Bay Area where she grew up and attended college at Stanford University. After completing undergraduate studies, she spent three years working in the laboratory investigating oncogene-initiated tumorigenesis in a mouse model of

lung cancer. As a medical student at Case Western Reserve University, Dr. Chen pursued her interest in improving access to preventive health and education in local underserved communities. At the same time, she discovered her love for the operating room. Dr. Chen completed her general surgery residency at Stanford University, where she conducted health services research in cancer disparities. She spent this past year completing her colon and rectal surgery fellowship at the University of Minnesota. She brings her passion for minimally invasive and endoscopic surgical approaches and enthusiasm for multidisciplinary, collaborative care of colorectal cancer, inflammatory bowel disease and pelvic floor disorders. Dr. Chen's primary scholarly interest is institutional partnerships to promote equitable access to colorectal cancer prevention and treatment. Outside of work, she enjoys baking and misses live music. Among the many reasons she is excited to be living in the Pacific Northwest, Dr. Chen loves running and is eager to explore the trails.

[Dr. Chen's UWM Provider Bio >>](#)



DR. LAUREN DESTEFANO
ASSISTANT PROFESSOR
DIVISION OF GENERAL SURGERY

Dr. DeStefano's primary interests are benign and malignant diseases of the breast. She is excited to be joining the Breast team where she will be primarily based out of Northwest Hospital and Seattle Cancer Care Alliance. After completing her undergraduate training at Fordham University in

New York, she completed medical school at Temple University and her General Surgery Residency at Mercy Catholic Medical Center, both in Philadelphia. She then moved to the West Coast where she completed her Breast Surgical Oncology Fellowship at Cedars-Sinai Medical Center in Los Angeles. Dr. DeStefano has had a passion for breast cancer care after seeing her grandmother and mother fight the disease. She is thrilled to be joining UW as her first faculty position, where she can aid in the advancement of the field of breast cancer as well as educate our future surgeons. An East Coast native, Dr. DeStefano is looking forward to exploring the Pacific Northwest with her 5-year-old son, Aidan.

[Dr. DeStefano's UWM Provider Bio >>](#)

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Surgery

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WELCOME NEW FACULTY



DR. SARAH GOLDSBERRY—LONG

ASSISTANT PROFESSOR
DIVISION OF PLASTIC SURGERY

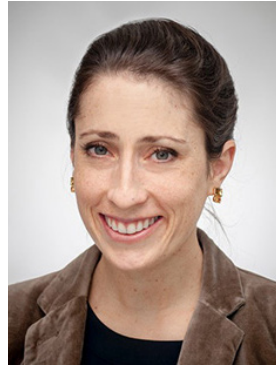
Dr. Goldsberry—Long is a plastic and reconstructive surgeon with specialized fellowship training in microsurgery. Her primary areas of interest are oncologic reconstruction of the breast, trunk, and extremities in addition to surgi-

cal lymphedema management. Her primary sites of practice are both Montlake and Northwest campuses of University of Washington Medical Center. With the new designation of University of Washington [Lymphedema Network of Excellence](#), she is eager to continue the strong legacy of lymphatic surgery by providing such services to this complex patient population.

Dr. Goldsberry—Long was raised in Southern California. She graduated summa cum laude from Whittier College earning a bachelor's degree in both biology and comparative cultures with an African interest. Her strong interest in other cultures led her to serve as a medical volunteer in Ghana. She then completed a master's degree in nutrition at Columbia University. During her time in New York, she performed research assessing various herbal remedies for chemoprevention of breast cancer while also organizing nationally funded clinical trials. She then matriculated to Keck School of Medicine at USC where she was entered into the AOA honors society prior to graduating. She completed plastic surgery residency and later a microsurgery fellowship at the University of Washington.

She is now eager to expand the presence of plastic surgery on the Northwest campus to make such services more accessible in our community. She is excited to continue exploring the Pacific Northwest with her husband, young son, and their English mastiff.

[Dr. Goldsberry—Long's UWM Provider Bio >>](#)



DR. SARAH GREENBERG

ASSISTANT PROFESSOR
DIVISION OF PEDIATRIC
GENERAL SURGERY

Dr. Greenberg is a pediatric general and thoracic surgeon with primary focus on global health and equity. A Pacific Northwest native, she grew up on a small farm in Snohomish, WA. She attended the University of Washington as an undergrad with

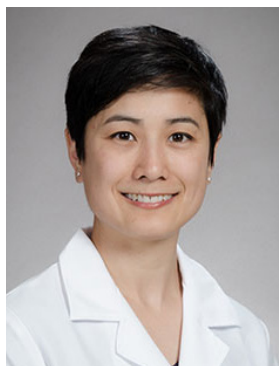
a major in biology. Medical school was completed in Upstate New York, where she spent time working with newly arriving refugee children. General surgery residency brought her to the Medical College of Wisconsin with the opportunity to work with the pediatric surgeons at the Children's Hospital of Wisconsin and the longitudinal collaborations they have developed with pediatric surgical care providers in Peru. She took three years away from formal clinical training to complete a global surgery fellowship at Boston Children's Hospital and Master of Public Health degree at Harvard Medical School. This time was split between helping to develop the surgical system for a new hospital in Haiti's Central Plateau with Partners In Health and working as a Commissioner and author for the Lancet Commission on Global Surgery. She completed her pediatric surgical training at the University of Washington and Seattle Children's Hospital (SCH), where she is staying on as faculty with a position that will allow her to spend approximately half of her time working on improving equity in pediatric surgical care delivery in the United States and globally. She currently serves as the liaison between the Global Initiative for Children's Surgery and the Program for Global Surgery and Social Change and is an At Large Director for the Global Initiative for Children's Surgery.

[Dr. Greenberg's SCH Provider Bio >>](#)

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WELCOME NEW FACULTY

Surgery News



DR. COLETTE INABA
ASSISTANT PROFESSOR
DIVISION OF GENERAL SURGERY

After completing her undergraduate studies at the University of Washington, Dr. Inaba spent a year teaching English in Japan. Once back in Seattle, she developed continuing medical education courses at Swedish Medical Center, then returned to the UW for her medical training. She

completed her general surgery residency at the University of California Irvine, where she also spent a year as a research fellow in minimally invasive surgery. Dr. Inaba recently graduated from her clinical fellowship at the UW Center for Videoendoscopic Surgery and is thrilled to join the UW Northwest Surgical Services and Hernia Center. Her husband and two children are also delighted to stay in the Pacific Northwest, where they enjoy hiking, traveling, and spending time with family and friends.

[Dr. Inaba's UWM Provider Bio >>](#)



DR. JEFFREY KEENAN
ASSISTANT PROFESSOR
DIVISION OF
CARDIOTHORACIC SURGERY

Dr. Keenan's primary area of interest is adult cardiac surgery with a focus in heart failure, including cardiac transplantation and mechanical circulatory support. He grew up in Baltimore, MD and received his bachelor's degree from the Uni-

versity of North Carolina at Chapel Hill. He then spent a year working in an immunology laboratory at the National Institutes of Health in Bethesda, MD, before matriculating to the University of Maryland for medical school, where he was elected to the AOA honor society. He spent 9 years at Duke University Medical Center training in general and subsequently cardiothoracic surgery. During this time, he also completed a two-year research fellowship supported by a post-doctoral National Research Service Award from the NIH investigating aspects of mitochondrial quality control in the myocardium and conducting health services research

in the Department of Surgery. Dr. Keenan is excited to join the faculty at UW and hopes to contribute to its rich tradition in cardiothoracic surgery. After spending his entire life on the East Coast, he also looks forward to exploring Seattle and the Pacific Northwest with his wife Allison and their four kids, including 2-year-old triplets.

[Dr. Keenan's UWM Provider Bio >>](#)



DR. MAZIAR KHORSANDI
ASSISTANT PROFESSOR
DIVISION OF
CARDIOTHORACIC SURGERY

Dr. Khorsandi was born and raised in Tehran. He was inspired by his father, an orthopaedic surgeon, and pursued a path in medicine. He completed his schooling in London, England and was admitted to the University of Dundee School of

Medicine, Scotland, UK. While in medical school, he dedicated 1 year to full-time research and obtained intercalated Bachelor of Medical Sciences (BMSc) with honours. Upon graduating from Medical school (MBChB, 2010), he completed General Surgery residency in Manchester, England. During his general surgery training he developed an interest in cardiothoracic surgery and completed a part-time research master's (MSc) in examining the outcomes of thoracic trauma in England following centralisation of major trauma care in that country.

After completion of his general surgical training, he matched into the Scottish training program in cardiothoracic surgery through UK national selection (NTN) and completed a 6-year integrated training. During his specialty training he completed the USMLE exams and undertook a 12-month "Out-of-Program" subspecialty fellowship in cardiopulmonary transplantation and mechanical circulatory support at Duke University Medical Center, NC, USA. He completed his board certification examination in cardiothoracic surgery and was awarded Fellowship of the Royal College of Surgeons of Edinburgh in Cardiothoracic Surgery (FRCS C/Th), 2019. He then completed his specialty training in 2020. He has clinical and academic interest in general adult cardiac surgery and more specifically advanced heart failure therapies. He

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Surgery

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WELCOME NEW FACULTY

is the managing editor of the "Oxford Specialist Handbook in cardiopulmonary transplantation and mechanical circulatory support", an international collaboration project, which is currently in the editing process. Dr. Khorsandi is excited to return to the USA and work at UW Medicine for the new stage in his career. He is passionate about outdoor activities such as skiing and hiking.

[Dr. Khorsandi's UWM Provider Bio >>](#)



DR. HARVESH P MOGAL

ASSOCIATE PROFESSOR
DIVISION OF GENERAL SURGERY

Dr. Mogal was born and raised in Mumbai, India. He obtained his medical education from D. Y. Patil Medical College, University of Mumbai, after which he completed a surgical residency at Grant Medical College, University of Mumbai. He subsequently moved to the US and completed a general surgical resi-

dency at Saint Louis University, St. Louis, MO, and an ACGME accredited complex general surgical oncology fellowship at Wake Forest Baptist Medical Center, Winston Salem, NC. Dr. Mogal was then recruited to the Department of Surgery at the Medical College of Wisconsin where he led the regional cancer therapy program including HIPEC and completed a Master of Science in Clinical and Translational Science. Dr. Mogal joined the University of Washington on November 1st and now serves as the Director of the UW Medicine HIPEC Program and Section Chief for Complex Abdominal Cancer. His clinical and research interests are in regional cancer therapy including HIPEC, sarcoma, general GI oncology including small bowel neuroendocrine tumors, and melanoma.

[Dr. Mogal's Seattle Cancer Care Alliance's Provider Bio >>](#)



DR. DAVID ROTHSTEIN

PROFESSOR
DIVISION OF PEDIATRIC
GENERAL SURGERY

Dr. Rothstein joined the Division of Pediatric Surgery, with interests in neonatal minimally invasive surgery, the multidisciplinary care of patients with thyroid nodules and differentiated thyroid cancers, as well as general pediatric oncology.

After finishing university, medical school and residency training in New England, Dr. Rothstein completed a surgical critical care fellowship at Boston Children's Hospital and a pediatric surgery fellowship at Long Island Jewish Hospital. He held positions at Northwestern University and SUNY-Buffalo before joining the University of Washington in November.

His research interests lie in clinical outcomes, cost effectiveness and transition of care between pediatric and adult surgery.

He spent a decade working for the international humanitarian relief agency, Médecins Sans Frontières, on annual month-long missions to sub-Saharan Africa. Subsequently he began working with local assets in the eastern Democratic Republic of Congo to improve pediatric surgical infrastructure and care delivery; this project is ongoing.

In spare time, Dr. Rothstein enjoys exploring the great Pacific Northwest outdoors with his family – Dr. Sara Berkelhamer (a neonatologist who completed her pediatric residency at Seattle Children's Hospital) and 2 and 7 year-old daughters, Sam and Alex (and their three-legged, osteosarcoma surviving black Labrador, Maddie).

[Dr. Rothstein's Seattle Children's Hospital Provider Bio >>](#)

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UW Medicine

WELCOME NEW FACULTY

Surgery News



DR. MATTHEW SMITH

CLINICAL ASSISTANT PROFESSOR
DIVISION OF VASCULAR SURGERY

After completing his undergraduate degree in biomedical engineering at Washington University in St. Louis, Dr. Matthew Smith attended the University of Utah School of Medicine to complete an MD/PhD with a focus on molecular biology and platelet biodynamics. He

completed his general surgery residency at New York Presbyterian–Weill Cornell Medical College in New York City followed by a Vascular Surgery fellowship at New York Presbyterian–Cornell/Columbia. Dr. Smith has a special interest in carotid disease as well as peripheral vascular disease and limb salvage, and is trained in both open and complex endovascular techniques to treat a variety of vascular pathologies including carotid disease, peripheral vascular disease and aortic aneurysm. Dr. Smith is also very interested in education, specifically augmenting surgical training with audio and video study aids. When not in the hospital, he can be found spending time with his family or venturing into the mountains to rock climb, mountain bike and back country ski.

[Dr. Smith's UWM Provider Bio >>](#)



DR. DUANE WANG

ASSISTANT PROFESSOR
DIVISION OF PLASTIC SURGERY

Dr. Wang's primary areas of interest are breast reconstruction, lymphedema surgery and targeted muscle reinnervation. His primary sites of practice will be University of Washington Montlake and Northwest campuses. He was born in Wisconsin but mostly grew up in

Melbourne Australia and Hong Kong. His bachelor's degree was from Duke University and he attended medical school at Ohio State University. Dr. Wang completed an integrated plastic surgery residency at the University of Kentucky and then went back to Ohio State for a one-year fellowship in microsurgery. He is excited to move to the Northwest with his new wife. Outside of work he enjoys cycling, hiking and rock climbing.

[Dr. Wang's UWM Provider Bio >>](#)



DR. SARA ZETTERVALL

ASSISTANT PROFESSOR
DIVISION OF VASCULAR SURGERY

Dr. Zettervall is an Assistant Professor in the Division of Vascular Surgery. Born and raised in New England, she earned a dual MD and MPH at George Washington University School of Medicine and Health Sciences. Following medical school, she remained in Washington, DC to

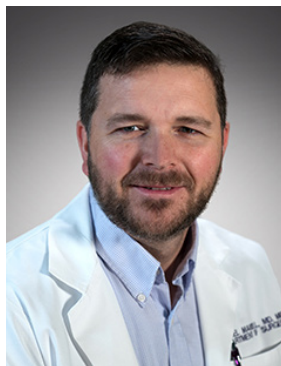
obtain her General Surgery training. During her residency, Dr. Zettervall was awarded a National Institute of Health 2-year post-doctoral fellowship with the Harvard–Longwood T32 in vascular surgery. As part of the T32 program, she performed basic science research on arterial calcification in peripheral arterial disease. During this time she also completed extensive work in health services research, with a focus on population outcomes and quality improvement for patients with aortic aneurysms. After residency, she returned to Boston to complete her Vascular Surgery Fellowship at Beth Israel Deaconess Medical Center. Dr. Zettervall enjoys all areas of vascular surgery, but has particular interest in aortic aneurysms, mesenteric disease, and carotid stenosis. Her research focuses on the evolving treatment of complex aortic disease.

Dr. Zettervall is excited to join the division of vascular surgery and explore the Pacific Northwest. Outside of the hospital, she enjoys skiing, traveling, and spending time with friends and family.

[Dr. Zettervall's UWM Provider Bio >>](#)



FACULTY PROMOTIONS



DR. SAM MANDELL

ASSOCIATE PROFESSOR
DIVISION OF TRAUMA, BURN &
CRITICAL CARE SURGERY

Dr. Sam Mandell is a Trauma, Critical Care & Burn Surgeon at Harborview Medical Center. His clinical interests include the acute care of trauma and burn patients and Extracorporeal Life Support (ECLS). With an interest in quality improvement, he serves as the Director of Quality Improvement for

the ECLS program at Harborview, as well as the Central Region Trauma Quality Improvement Committee. Nationally, he will be working with the American Burn Association to develop new quality improvement dashboards for the Burn Quality Improvement Program. Active in the Washington State Trauma System, he serves on the State of Washington Trauma and EMS Steering Committee. He has helped to drive forward a state TQIP collaborative for all Level 1 and 2 trauma centers and serves as the Chair of the State Outcomes Technical Advisory Committee. As a past selection by the ACS Committee on Trauma as a part of their Future Trauma Leaders program, he worked on creating best practice guidelines for imaging in trauma and incorporating patient reported outcomes into quality improvement programs. Dr. Mandell is also an educator directing the burn resident rotation as well as being an Assistant Program Director for the Surgical Critical Care Fellowship. His research interests include ECLS, burn wound imaging, and the management of burn pain.

[Dr. Mandell's UWM Provider Bio >>](#)



DR. JAMES PARK

PROFESSOR
DIVISION OF GENERAL SURGERY

Dr. Park, is a surgical oncologist specializing in hepatopancreatobiliary surgery and the Director of UW Medical Center's [Liver Tumor Clinic](#). He has extensive experience with complex minimally invasive surgical techniques, and was the first to perform [robotic hepatectomy](#) and Whipple procedures in the Pacific Northwest and in Washington State,

respectively. Dr. Park serves as the Chair of the Robotic Steering Committee, and in 2019 successfully led efforts to designate UWMC-Montlake a [Center of Excellence in Robotic Surgery](#),

Surgery News

making UWMC-ML the first academic medical center on the West Coast to receive such a designation. Dr. Park is Clinical Director of Surgical Specialties for the [WWAMI Institute for Simulation in Healthcare](#), through which he developed a formal robotic training curriculum for surgical residents which incorporates both hands-on and simulation training. Dr. [Park's translational research program](#) involves cutting-edge nanotechnology therapeutics to improve both diagnosis and treatment of liver cancer. He believes more precise technology using antibody-targeted immuno-PET imaging can be used to select patients for surgery more effectively and enhance its impact. Additionally, alpha- and high-energy beta-particle emitting radioisotopes can be used for targeted treatment for these patients. Nationally, he holds leadership positions as a member of the NCCN hepatobiliary cancer panel and the ISDS executive committee.

[Dr. Park's UWM Provider Bio >>](#)



DR. VENU PILLARISETTY

PROFESSOR
DIVISION OF GENERAL SURGERY

Dr. Venu Pillarisetty is a pancreatic surgical oncologist at the University of Washington Medical Center and the Seattle Cancer Care Alliance (SCCA). He runs a basic science laboratory – the [UW Tumor Immune MicroEnvironment \(TIME\) lab](#) – that studies pancreatic and other gastrointestinal cancers, using cutting-edge techniques to ultimately

develop effective immunotherapies for these aggressive diseases. His laboratory is funded through federal grants and industry partnerships, and he is currently working with the Southwest Oncology Group (SWOG) to develop a multicenter neoadjuvant immunotherapy/chemotherapy trial for patients with resectable or borderline resectable pancreatic cancer based on his [lab's recent findings](#) (Seo et al. Clinical Cancer Research 2019). His team is completing enrollment for a novel Phase II study at UWMC evaluating preoperative lanreotide for the prevention of pancreatic leaks, and they hope this will lead to a larger multicenter randomized controlled trial. In his administrative role as Medical Director of Continuous Performance Improvement at SCCA, he is working with clinical and operational teams to apply lean principles to optimize cancer care. The pancreatic surgery group at UWMC has successfully used these principles to achieve remarkably low complication rates and short lengths of stay for pancreaticoduodenectomies (Whipple procedures).

[Dr. Pillarisetty's UWM Provider Bio >>](#)

2020 ANNUAL

DR. ALFRED A. STRAUSS LECTURE & HARKINS' SURGICAL SYMPOSIUM

Surgery News

The Annual Dr. Alfred A. Strauss Lecture was held October 16, 2020 with invited lecturer Edward E. Cornwell, III, MD, FACS, FCCM, FWACS (hon.), The LaSalle D. Leffall, Jr., MD, Professor of Surgery, Howard University College of Medicine. His lecture was titled "Outcomes Disparities in Trauma Care: Who, When, Why."

Dr. Cornwell is the LaSalle D. Leffall Jr. Professor and Chair, Department of Surgery, Howard University College of Medicine. He received his surgical training (internship and residency) at the Los Angeles County University of Southern California Medical Center (1982-1987) and his trauma/critical care fellowship at the Maryland Institute for Emergency Medical Services



Dr. Edward E. Cornwell

Systems in Baltimore, Maryland (1987-1989). He has been certified and re-certified in both General Surgery and Surgical Critical Care by the American Board of Surgery. He has risen through the academic ranks through teaching and clinical appointments at Howard University (1989-1993), the University of Southern California (1993-1997), and Johns Hopkins School of Medicine (1998- to 2008). Dr. Cornwell's career interest is in the prevention, treatment, and outcome disparities of traumatic injuries, and their critical care sequelae. He has authored or co-authored over 300 articles and chapters and has given over 365 invited presentations in the field. He has delivered the named lecture or keynote

address at over 25 institutions and conferences. He is a reviewer for several surgical journals and is former deputy editor of JAMA-Surgery (formerly Archives of Surgery). He has served as President, Society of Black Academic Surgeons; President, Surgical Section of the National Medical Association, and Chairman of Trauma Net of Maryland.

He is presently Secretary of the American College of Surgeons and is on the Board of Managers of the American Association for Surgery of Trauma.

Dr. Cornwell has received numerous awards and citations for his efforts in education, outreach, and violence prevention. He has received major teaching awards in every faculty position he has held, and was selected as the commencement speaker at the USC School of Medicine in 1996, and at the HUCM in 2002. He received the Distinguished Alumni Award from HUCM in 2014.

HARKINS' SURGICAL SYMPOSIUM SPEAKERS

DR. BARCLAY STEWART

ASSISTANT PROFESSOR

"Injured and Broke: National Health Insurance, Catastrophic Health Expenditure, and Death Among Injured Ghanaians"

DR. EILEEN BULGER

PROFESSOR & CHIEF, TRAUMA

"The Importance of Regional Coordination in the COVID-19 Response"

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Surgery News

2020 ANNUAL DR. ALFRED A. STRAUSS LECTURE & HARKINS' SURGICAL SYMPOSIUM

HARKINS' SURGICAL SYMPOSIUM SPEAKERS (CONT.)

MAJ DR. JOHN MCCLELLAN, USA, MC

FELLOW, SURGICAL CRITICAL CARE
HARBORVIEW MEDICAL CENTER

*"Role of Military—Civilian
Partnerships for Trauma
Readiness"*

DR. BRYCE ROBINSON ASSOCIATE PROFESSOR

*"COVID ICU Care: What You Need
to Know"*

DR. SAM ARBABI PROFESSOR

"Rib Fractures in the Elderly"

DR. DEEPIKA NEHRA ASSISTANT PROFESSOR

*"Understanding the Long-Term
Impact of Injury"*

DR. SAM MANDELL ASSOCIATE PROFESSOR

"What's New in Burns"

DR. ANDRE DICK ASSOCIATE PROFESSOR

"Diversity in Academic Surgery"

DR. BETH ANN REIMEL CLINICAL ASSISTANT PROFESSOR

*"Department of Surgery
Diversity Survey"*

DRS. ANDREW WRIGHT PROFESSOR &

GIANA DAVIDSON
ASSOCIATE PROFESSOR

*"Anti-Racist Initiatives in the
Division of General Surgery"*

DRS. ESTELL WILLIAMS ASSISTANT PROFESSOR &

EDWIN LINDO
ACTING ASSISTANT PROFESSOR,
MEDICAL STUDENT EDUCATION

"March of Doctors for Justice"

DR. EDWARD CORNWELL THE LASALLE D. LEFFALL, JR., MD, PROFESSOR OF SURGERY, HOWARD UNIVERSITY COLLEGE OF MEDICINE

HARKINS LECTURE: *"Charles R.
Drew, MD—His Life, Death, and the
Stimulus for Diversity in Academic
Surgery"*

DR. JONATHAN SHAM ASSISTANT PROFESSOR

*"The Role of Surgery in Locally
Advanced Pancreas Cancer"*

DR. EDGAR FIGUEROA ASSOCIATE PROFESSOR

"Robotic Hernia Repair"

DR. KENNETH GOW PROFESSOR

*"Conquer the Divide: Improving
Access to Care for Children
Needing Surgery"*

DR. CRAIG BIRGFELD ASSOCIATE PROFESSOR

"Facial Trauma Reconstruction"

DR. JOHNATHON ROLLO CLINICAL ASSISTANT PROFESSOR

*"Impact of Limb Preservation
Service"*

DR. CHRIS BURKE ASSISTANT PROFESSOR

"Aortic Valve Preservation Surgery"

[WATCH THE 2020
DR. ALFRED A. STRAUSS LECTURE >>](#)

[WATCH THE 2020
HARKINS' SURGICAL SYMPOSIUM >>](#)

AMERICAN COLLEGE OF SURGEONS 2020 CLINICAL CONGRESS

DR. DOUGLAS WOOD INDUCTED INTO AMERICAN COLLEGE OF SURGEONS ACADEMY OF MASTER SURGEON EDUCATORS™



Dr. Douglas Wood

Dr. Douglas Wood, The Henry N. Harkins Professor and Chair, is among a group of 22 esteemed surgical educators inducted into the American College of Surgeons (ACS) Academy of Master Surgeon Educators™ at a Virtual Induction Ceremony in September 2020. Developed by the ACS Division of Education, the Academy recognizes surgeon educators who have devoted their careers to surgical

education. The Academy's mission is to play a leadership role in advancing the science and practice of education across all surgical specialties, promoting the highest achievements in the lifetimes of surgeons.

Academy membership carries an obligation for commitment to the Academy's goals, which are to identify, recognize, and recruit innovators and thought leaders committed to advancing lifelong surgical education; translate innovation into actions; offer mentorship to surgeon educators; foster exchange of creative ideas; disseminate advances in surgical education; and positively impact the quality of surgical care and patient safety.

"The Academy of Master Surgeon Educators is actively advancing the science and practice of education and

training across all surgical disciplines. It is an honor and privilege to join this incredible group of thought leaders. I look forward to learning from them and contributing to the mission of improving the practice of education in surgery. There is nothing more important than training the next generation of surgeons, those who will care for us," said Dr. Wood as he spoke at the induction ceremony.

Dr. Wood joins 3 other Department of Surgery faculty in the Academy of Master Surgeon Educators: Drs. Carlos Pellegrini, Ed Verrier and Karen Horvath (Associate Member).

ACS 2020 CLINICAL CONGRESS FACULTY AND RESIDENT PRESENTATIONS

For the first time in the 107 year history of the American College of Surgeons, the 2020 Clinical Congress met virtually from October 3rd-7th. Department of Surgery faculty and residents were well represented at the event, notably participating in the following lectures and panels:

CARDIOTHORACIC SURGERY FACULTY



Dr. Douglas Wood, The Henry N. Harkins Professor and Chair, gave the John H. Gibbon Jr., Lecture titled "Lung Cancer Screening: Saving Lives with Science and Policy."

GENERAL SURGERY FACULTY AND RESIDENTS



Drs. David Flum, Professor and Associate Chair for Research, (top left) and Giana Davidson, Associate Professor and Section Chief of Emergency General Surgery, (bottom left) presented "Antibiotics for Appendicitis? What the Results from the CODA Trial Mean for Your Practice," and also hosted a virtual press conference on the same topic.



Dr. Giana Davidson additionally spoke on the "Ethical Consideration for Surgeons Participating in Clinical Research."

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ACS 2020 CLINICAL CONGRESS FACULTY AND RESIDENT PRESENTATIONS (CONT.)

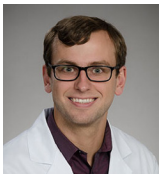
GENERAL SURGERY FACULTY AND RESIDENTS



Dr. **Kevin Labadie**, General Surgery Resident (R4), presented his findings on *"Laparoscopic vs Robotic Hepatectomy: A Propensity Score Matched Analysis Accounting for Resection Complexity."*



Dr. **Mariam Hantouli**, Senior Fellow, spoke on *"Acute Cholecystitis Management and Outcomes During Pregnancy."*



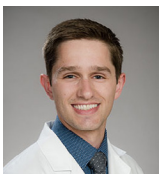
Dr. **David Drouillard**, General Surgery Research Resident, presented *"The Natural History of Diverticulitis Symptom Burden,"* and *"Management of Appendicitis in Pregnancy."*



Dr. **Jamie Robinson**, General Surgery Resident (R4), spoke on *"COVID-Related Respiratory Failure; Ventilator Adjuncts for ARDS and Severe Hypoxemia."*



Dr. **Sara Daniel**, General Surgery Resident (R4), presented her research findings on how *"IL-10 Blockage Promotes Tumor Cell Death in Fibrolamellar Carcinoma"*



Dr. **Alex Lois**, General Surgery Research Resident, gave the talk *"Cholecystectomy After Cholecystostomy?"*

PEDIATRIC GENERAL SURGERY

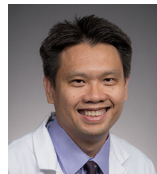


Dr. **Kimberly Riehle**, Associate Professor, lectured on *"Pediatric Head and Neck Masses."*

TRAUMA, BURN AND CRITICAL CARE FACULTY



Dr. **Eileen Bulger**, Professor and Chief, presented two talks, the first titled, *"Scudder Oration on Trauma: I'm not Comfortable with This,"* and the second, *"Addressing the Social Determinates to Reduce Firearm Violence."*

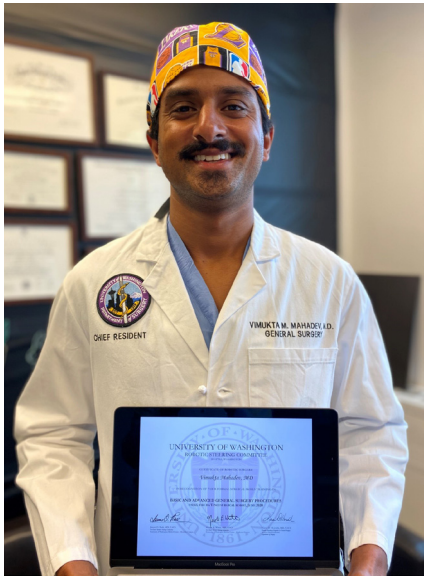


Dr. **Tam Pham**, Professor and Director of the UW Regional Burn Center, co-moderated the Surgical Forum for Burn/Trauma and Critical Care.



Surgery News

DR. VIMUKTA MAHADEV FIRST TO GRADUATE WITH ROBOTIC PRIVILEGES



On June 19, 2020, Dr. **Vimukta Mahadev**, 2020 chief resident, became the first resident in the Department of Surgery to graduate with full robotic privileges. To successfully achieve this certification a resident must complete a comprehensive training curriculum which includes a minimum of 10 cases as the patient-side assistant and 20 cases as the primary console surgeon. The resident robotic curriculum was gradually introduced between 2014 and 2016 under the direction of Drs. **Karen Horvath**, Professor, Division of General Surgery, Director, Residency Program in General Surgery, Associate Chair for Education, and **James Park**, Professor, Division of General Surgery. Dr. Mahadev was motivated and a quick study, and he started logging cases in 2017 and successfully met the requirements by graduation in June. Dr. Mahadev intends to pursue a career in Trauma Surgery and Critical Care, and saw the value in applying advanced minimally invasive techniques in his future practice. Dr. Mahadev stated, "The UW faculty have numerous robotic mentors at multiple different hospital sites. No matter what specialty you are planning to go into, please consider taking full advantage of this unique opportunity. You never know how useful these advanced minimally invasive techniques will become in your future practice."

DR. ANDRE DICK APPOINTED ASSOCIATE SURGEON-IN-CHIEF AT SEATTLE CHILDREN'S HOSPITAL



Dr. **Andre Dick**, Associate Professor of Transplant Surgery in the section of Pediatric Transplantation, has been appointed by Seattle Children's Hospital (SCH) as Associate Surgeon-in-Chief, effective September 2020. Dr. Dick is joining Dr. Sanjar Parihk (Orthopedics and Sports Medicine), Dr. Suzanne Yandow (Otolaryngology), and Dr. **Jeff Avansino** (General Surgery)

as fellow Associate-in-Chiefs. Under the direction of Dr. Jeff Ojemann (Neurosurgery), Dr. Dick's work will cover a broad range of critical initiatives across SCH. Initially, the areas in which Dr. Dick will focus will be on patient safety initiatives, volume recovery following significant OR constraints over the past two years, OR operational efficiencies, and addressing equity concerns in healthcare outcomes. Dr. Dick is taking on this new role in addition to his current leadership roles as the Surgical Director of Renal Transplantation, Medical Director of the Surgical Unit, and Transplant Surgery's Fellowship Program Director. Dr. Dick's appointment to Associate Surgeon-in-Chief is a significant honor for both Dr. Dick and for the Department of Surgery.

DR. ANDRE DICK APPOINTED FIRST CO-ADVISOR TO ASTS DIVERSITY, EQUITY AND INCLUSION COUNCIL

Dr. **Andre Dick**, Associate Professor, Director of Pediatric Kidney Transplant, Division of Transplant Surgery, was appointed as the first American Society of Transplant Surgeons' (ASTS) Co-advisor to the Diversity, Equity and Inclusion Council. These new positions were created as part of ASTS's larger diversity initiative and will have a key role in the implementation and creation of new ASTS diversity and inclusion initiatives.

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SEATTLE MAGAZINE'S & SEATTLE METROPOLITAN MAGAZINE'S 2020 TOP DOCTORS RECOGNIZES UW DEPARTMENT OF SURGERY

"Seattle Magazine and Seattle Metropolitan Magazine announced their 2020 Top Doctors and I am pleased to share the extensive recognition of Department of Surgery (DOS) faculty.

DOS had 69 faculty listed in 11 specialties—this is more than 50% of our faculty, and accounted for over 40% of the magazine's listed surgeons in all of the specialties. This represents a remarkable presence in this year's Top Doctor listings. Top Doctors is one form of recognition by the community and shows they hold our surgeons in high esteem.

I shared this with the faculty. The faculty responded with appreciation for being named as a Top Doctor in the Seattle metropolitan area, but they were uniformly quick to point out that what they do is a team effort and they are one member of the team.

I congratulate these faculty and am honored to lead this exceptional Department of Surgery.

Below is a listing of our faculty honored this year by their specialty:

BARIATRIC

Judy Chen, MD, Assistant Professor
Saurabh Khandelwal, MD, Associate Professor

BREAST

Ben Anderson, MD, Professor
Christina Blanchette, PA-C
Kris Calhoun, MD, Associate Professor
Meghan Flanagan, MD, MPH, Assistant Professor
Sara Javid, MD, Associate Professor

CANCER SURGERY

David Byrd, MD, Professor
Teresa Kim, MD, Assistant Professor
Jim Park, MD, Professor
Venu Pillarisetty, MD, Professor
Jonathan Sham, MD, Assistant Professor
Ray Yeung, MD, Professor

CARDIAC SURGERY

Gabriel Aldea, MD, Professor
Chris Burke, MD, Assistant Professor
Ed Verrier, MD, Professor (Emeritus 2020)

COLORECTAL

Sarah Atkinson, MD, Assistant Professor
Mukta Krane, MD, Associate Professor

GENERAL SURGERY

Sam Arbabi, MD, MPH, Professor
Eileen Bulger, MD, Professor
Joe Cuschieri, MD, Professor
Giana Davidson, MD, MPH, Associate Professor
Dan Kim, MD, Clinical Assistant Professor
Lorrie Langdale, MD, Professor
Deb Marquardt, MD, Assistant Professor
Lisa McIntyre, MD, Associate Professor
Brant Oelschlager, MD, Professor
Grant O'Keefe, MD, MPH, Professor
Zoe Parr, MD, Clinical Assistant Professor
Rebecca Petersen, MD, Associate Professor
Mika Sinanan, MD, PhD, Professor
Roger Tatum, MD, Professor
Estell Williams, MD Assistant Professor
Andy Wright, MD, Professor

HAND

Jeff Friedrich, MD, Professor
Dennis Kao, MD, Assistant Professor
Nick Vedder, MD, Professor

PEDIATRIC SURGERY

Jeffrey Avansino, MD, MBA, Associate Professor
Adam Goldin, MD, MPH, Professor
Pat Healey, MD, Professor
Patrick Javid, MD, Associate Professor
Kim Riehle, MD, Associate Professor
Bob Sawin, MD, Professor (Emeritus 2019)
John Waldhausen, MD, Professor

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SEATTLE MAGAZINE'S & SEATTLE METROPOLITAN MAGAZINE'S 2020 TOP DOCTORS RECOGNIZES UW DEPARTMENT OF SURGERY (CONT.)

PLASTIC SURGERY

Craig Birgfeld, MD, Associate Professor
Shannon Colohan, MD, Associate Professor
Jeff Friedrich, MD, Professor
Richard Hopper, MD, Marlys C. Larson Professor of
Craniofacial Surgery
Suzie Inchauste, MD, Assistant Professor
Kari Keys, MD, Associate Professor
Otway Louie, MD, Associate Professor
Peter Neligan, MB, Professor
Hakim Said, MD, Associate Professor
Nick Vedder, Professor
Shirley Taylor, ARNP

THORACIC SURGERY

Kathleen Berfield, MD, Assistant Professor
Aaron Cheng, MD, Associate Professor
Farhood Farjah, MD, MPH, Associate Professor
Mike Mulligan, MD, Professor
Douglas Wood, MD, The Henry N. Harkins Professor and Chair
Christa Franz, PAC
Kristin DeGroot, PAC

VASCULAR SURGERY

Mark Meissner, MD, Professor
Elina Quiroga, MD, MPH, Associate Professor
Sherene Shalhub, MD, MPH, Associate Professor
Niten Singh, MD, Professor
Ben Starnes, MD, Professor
Matt Sweet, MD, MS, Associate Professor
Nam Tram, MD, Associate Professor

We have exceptional surgeons who are a credit to UW Medicine. I am incredibly grateful to work for such a wonderful team."

With pride and gratitude,

Douglas E. Wood, MD, FACS, FRCSEd
The Henry N. Harkins Professor & Chair
Department of Surgery
University of Washington

DR. DAVID BYRD NAMED INTERIM SCCA MEDICAL DIRECTOR



Dr. **David Byrd**, Professor, Division of General Surgery, has been named Interim Medical Director of the Seattle Cancer Care Alliance (SCCA). Dr. Marc Stewart, SCCA Medical Director and Senior Vice President, left SCCA in July 2020 for a position at City of Hope Cancer Center. Dr. Stewart has been an outstanding leader and an instrumental force helping SCCA grow to be one of the

top 10 cancer centers in the United States. We wish him well in his new role at City of Hope and owe him enormous appreciation for all he has done for our cancer programs at UW Medicine and SCCA. While SCCA decides next steps for this position, Dr. Nancy Davidson, SCCA President and Executive Director, requested Dr. Byrd serve as Interim Medical Director starting August 2020.

There could not be a better person to step in and serve in this interim capacity than Dr. Byrd. Dr. Byrd has served his entire academic career here at University of Washington (UW), completing his residency at UW, surgical oncology fellowship at MD Anderson, and joining the faculty in 1992 to serve as the first Chief of Surgical Oncology. Dr. Byrd has served in a number of important and influential roles in oncology. Most recently, completing a six-year term as Chair of the American Joint Committee on Cancer, which is responsible for our cancer staging systems that drive all treatment decisions. At SCCA, Dr. Byrd has been the Chief of Surgical Oncology for 12 years, a member of the Senior Management Team for 10 years, and Chair of the Medical Executive Committee for 6 years. Most importantly, Dr. Byrd complements his enormous institutional knowledge with his calm and thoughtful decision-making, emotional intelligence and deep sense of integrity and fairness that makes him a trusted colleague and leader.

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I am thrilled that Dr. Byrd has agreed to serve in this important leadership role for SCCA, and I feel confident that we are in the best possible hands while identifying a new permanent Medical Director. Please join me in congratulating Dr. Byrd, and in helping to support him as he takes on this important role for our institution.

Douglas E. Wood, MD, FACS, FRCSED
The Henry N. Harkins Professor and Chair
Department of Surgery
University of Washington

DR. GIANA DAVIDSON ASSISTANT DEAN FOR PROFESSIONALISM



In July, Dr. **Giana Davidson**, Associate Professor, Division of General Surgery and Section Chief of Emergency General Surgery, started her new role as UW School of Medicine (SOM) Assistant Dean of Professionalism. Partnering with Drs. Trish Kritek and Anne Browning in the Office of Faculty Affairs, her focus is addressing the current climate impacting students, trainees, staff and faculty across SOM. Dr. Davidson

will serve as Chair of the Continuous Professionalism Improvement (CPI) Committee for the SOM, which is a role originally led by one of her mentors and former Department of Surgery Chair, Dr. Carlos Pellegrini.

Dr. Davidson stated, "I have been inspired by the commitment that UW has made in working towards a climate that honors the diversity of individuals we educate, care for, work with, and mentor. The development of the UW Medicine Equity Blueprint and wellness initiatives including the UW Medicine Peer to Peer Program are examples that reflect values I am passionate about: 1) looking for ways that our systemic-isms (e.g., racism, sexism, ableism) have led to variable health experiences for our patients and differential educational opportunities for our trainees and advancement of our faculty, and 2) examine how we can better support one another to thrive within this environment to achieve our academic aspirations and improve the

health of the community. I am inspired by the collaboration of the team in the Office of Faculty Affairs and the opportunity to work closely with Dr. Paula Houston in the Office of Healthcare Equity."

DR. NICOLE GIBRAN RECEIVES UW DISTINGUISHED STAFF AWARD



Dr. **Nicole Gibran**, Professor, Division of Trauma, Burn & Critical Care Surgery, is one of 53 Radiological Release Response Team members who received the UW Distinguished Staff Award for their management of the radioactive material leak at the Harborview Medical Center Research and Training (R&T) building.

While the general public was safe, the researchers who worked in and whose research was housed in the building were not. Those who had been in R&T at the time of the leak were evacuated, and those who intended on going to their labs the next day weren't allowed to.

Dr. Gibran helped to find them new workspaces. She had recently been appointed associate dean for research and graduate education and suddenly had 200 labless researchers to worry about—including herself, as her lab was housed in R&T.

"People literally left experiments on their benches and were planning to come back the next day. In weeks after the leak we were still finding tissue samples on counters," she says.

During the first few days, she routinely checked on all the freezers holding research materials to make sure they weren't failing—the HVAC in the building had been turned off to prevent the cesium from spreading, and a strange May heatwave was hitting the Seattle area.

Then she had to work on finding space at other UW Medicine facilities for the displaced researchers and their equipment and create access schedules for those who had to share too-small lab spaces. A big part of her job has also been keeping researchers updated on the cleanup progress and providing reassurance, for both researchers and the radiation teams doing the cleanup.

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DR. JOHN WALDHAUSEN ELECTED APSA PRESIDENT



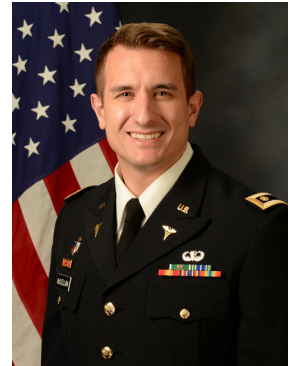
The presidential gavel of the American Pediatric Surgical Association (APSA) was passed to incoming President and 2019–20 President-Elect, Dr. **John Waldhausen**, Chief of Pediatric General and Thoracic Surgery and Director of the Pediatric Fellowship Surgery Training Program, at the APSA annual meeting in May.

Dr. Waldhausen commented, “It was an honor to be elected to the presidency of APSA and represents the pinnacle of one’s academic career. The APSA, like many other associations, faces new challenges this coming year due to COVID–19. We just finished our first virtual meeting which was a large success with worldwide participation and are looking at ways to continue this level of involvement from colleagues around the globe. We are restructuring our governance and committee leadership positions as well as organization and have implemented ideas such as the Rooney Rule to insure we are more inclusive, diverse and equitable. We are reconsidering our finances and management to ensure organizational health and sustainability and set APSA up for continued success long into the future. We have created the Right Child/Right Surgeon initiative to be published soon as a white paper in the Journal of Pediatric Surgery with the goal of ensuring that every child in America has the access to not only the appropriate resources but also to an appropriately trained surgeon to provide their pediatric surgical care. We are working with the American College of Surgeons and other organizations to bring this to fruition. Despite the challenges we face, it will be an exciting year and one which the Board of Governors, the membership and I look forward to.”

THE HARBORVIEW MEDICAL CENTER MILITARY–CIVILIAN PARTNERSHIP FOR TRAUMA TRAINING



Dr. Brian Beldowicz



Dr. John McClellan

For many years, Harborview Medical Center (HMC) has served as a training site for residents from Madigan Army Medical Center in General Surgery and Emergency Medicine. In addition, there have been active collaborations to support the training of special forces medics in the Emergency Department and on the Burn Service. We are excited to announce that this program is now advancing to a formal collaboration in which the US Army has designated Harborview Medical Center as one of its initial Military-Civilian Trauma Team Training programs, which will support the integration of all members of military surgical teams into Harborview for training on a rotating basis. These military surgical teams include Special Operations Teams and Forward Surgical Teams, which must provide damage control surgery and resuscitation in the most austere environments. The teams include surgeons, emergency medicine physicians, nurses, nurse anesthetists, physician assistants, and combat medics. The Army has recognized the value of ensuring they are always ready to deploy by maintaining their skills in a busy Level 1 trauma center.

The Department of Surgery has led this effort under the direction of Dr. **Eileen Bulger**, Chief of Trauma at Harborview, and Dr. **Bryce Robinson**, Associate Medical Director for Critical Care, who will serve as a mentor to the surgeons participating. Our first two participants in this program are Drs. **Brian Beldowicz** and **John McClellan**, who joined the Department of Surgery this past year. Lieutenant Colonel Beldowicz completed his Surgical

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Dr. Eileen Bulger



Dr. Bryce Robinson

Critical Care and Trauma Fellowship at UC Davis and after several deployments was stationed at Madigan Army Medical Center. Major John McClellan completed his surgery residency at Madigan and joined the trauma faculty at HMC for one year prior to starting his Surgical Critical Care and Burn Fellowship at HMC this month. Both Drs. Beldowicz and McClellan serve in leadership roles on Special Operations medical teams and have had multiple deployments.

In describing their initial experiences, Dr. Beldowicz writes, "At Harborview, John and I are privileged to practice with some of the most experienced and insightful medical professionals across a variety of trauma-related specialties, and we experience the volume and complexity of patients necessary to continuously develop our understanding of trauma physiology and patterns of injury. When we're overseas and we encounter severely injured patients in uniquely challenging circumstances, we don't have to invent some completely novel solution. Instead, we draw from the experience and perspectives we accumulate every single day to adapt the highest standard of care to less than ideal situations. In a way, it's the logical progression of providing exceptional care without exception. We're just extending it to the world's most unforgiving environments."

Dr. McClellan writes, "This collaboration has been instrumental to my development as a new General Surgeon. The time spent working closely with the experienced HMC Staff refreshed and expanded my knowledge of managing a wide range of traumatic injuries. Additionally, these skills gained were crucial to my most recent deployment. I am very grateful for this opportunity and looking forward to continuing to build this relationship in the years to come."

The next step in this emerging partnership will be the integration of members of the Forward Surgical Teams later this year. Per Dr. Bulger, "We have really enjoyed welcoming Brian and John into our division and we have learned a great deal from their experiences in military medicine as well. We look forward to integrating additional team members over the coming months. We are honored to play a role in ensuring the readiness and training of these military medical teams who put themselves in harm's way to support our troops." Photos attached: formal Photos of Dr. Beldowicz and Dr. McClellan and Photo of Dr. Beldowicz on deployment.

DR. ESTELL WILLIAMS ELECTED TO WSMA BOARD OF DIRECTORS



Dr. [Estell Williams](#), Assistant Professor of Surgery, Division of Emergency General Surgery, was elected to the Board of Directors of the Washington State Medical Association (WSMA) Foundation for Health Care Improvement as a physician member-at-large. She will serve in this capacity for a 3-year term. The mission of the Foundation is to create transformational

health care change at all levels—individual, organizational and statewide. The Foundation goals are to strengthen physician wellness and restore the joy of practice, enhance the patient/physician partnership and advance quality care and patient safety. The Foundation has recently added addressing disparities in healthcare as one of its four goals, which Dr. Williams was specifically invited to help spearhead. She is excited to expand her passion for advocating for marginalized patients through this role and extends a debt of gratitude to Dr. Mika Sinanan, Professor, Division of General Surgery, who was instrumental in nominating her for this opportunity. Learn more about the [WSMA Foundation](#).



Susan Marx

DIVERSITY IN DOS

"REFLECTIONS ON SYSTEMIC RACISM"

While I am proud to be an administrative leader in the Department of Surgery, which has history of leading change in diversity, equity and inclusion, I struggled to write this piece on diversity.

Recently, during our newly formed Anti-Racism Workgroup, comprised of staff, a question was raised: "How do we encourage Diversity in the Department of Surgery? The background behind this question is our team is currently hiring and while reviewing some of the resumes, I was wondering how diversity typically is included in the conversation of hiring someone. I'm typically not involved in the hiring process and am unsure how to bring it up to my manager since I am not sure if it is appropriate to mention this within our team. I think I am acutely aware of the lack of ethnic diversity within my team as the only non-white person. And while diversity encompasses many different areas, including ethnicity and culture, how heavily weighed is diversity, specifically ethnic diversity, when looking at a job applicant?"

My answer, similar to the question, focused on staff diversity: the honest answer is we have not centrally encouraged diversity through processes or communications to hiring managers. There are some units, such as the Surgical Outcomes Research Center (SORCE) which are ahead of the department, but as whole, we are not enabling processes that encourage diversity of staff.

Stating that truth out loud made me uncomfortable; acknowledging that the systems that are in place continue to remain mostly unchanged. I am supposed to be a leader, and purport to be an ally; yet, a straightforward set of questions shone a light on an obvious

gap to our BIPOC staff. It was a moment to own the issue, and commit to transparency and improvement.

What have I learned through participating in anti-racism workgroups and through diversity, equity and inclusion trainings: I can say with certainty that I embody white privilege – previously oblivious to the privileges I took for granted that others do not have access to. Like many white folks in recent months, George Floyd's murder made me sick; the protests here in Seattle gave me an entryway into action. I started searching for the stories, narratives and documentaries about black experience in America. The one that hit me with such sadness and sickness is "Say Her Name: The Life and Death of Sandra Bland." I started following anti-racism thought leaders on Twitter and Instagram. All of this to say, I am starting to learn, acknowledging and working through my discomfort, and starting to act. I have a long way to go on this path.

Part of that path is learning about others' paths, particularly BIPOC paths. What has also made me increasingly uncomfortable is the recent "Executive Order on Combating Race and Sex Stereotyping" issued by the White House on September 22, 2020. In the preamble, it states, "...many people are pushing a different vision of America that is grounded in hierarchies based on collective social and political identities rather than in the inherent and equal dignity of every person as an individual. This ideology is rooted in the pernicious and false belief that America is an irredeemably racist or sexist country; that some people, simply on account of their race or sex, are oppressors; and that racial and sexual identities are more important than our common status as human beings and Americans."

Further, "...unfortunately this malign ideology is now migrating from the fringes of American society and threatens to infect core institutions of our country." The Executive Order specifically calls out diversity training as the root cause of infection, and goes on to mandate that federal dollars will not be used to

support such activities that do not promote equality. In addition, contractors and agencies are supposed to report any training activities within the federal fiscal year 2020 within 90 days of the order date. A hotline to report non-compliance will be created.

We, at the UW, are part of the "academy" – the place where ideas and theories are discussed, argued and tested. Diversity training has become increasingly part of our lives as UW faculty, trainees or staff. As a white person, my view is that diversity training is meant to help take the blinders off, to see a reality that has been ignored, consciously or not. What do these reflections have to do with the Department of Surgery? It is common to hear that we should show up as our "authentic selves" in work and in life. I have realized that I like to solve problems; I like to understand how we got where we are and figure out how to remedy it. Institutional racism is a problem. I am a leader in an institution. How can I contribute to fixing the problems, instead of passively perpetuating systems that are broken or flawed, that continue to hurt others?

We at the University engage in research supported by federal funds, receive funding for graduate medical education, or bill for Medicare in a clinical setting – our professional lives are intertwined with federal support. I am angry; angry that the current administration is attempting to censor ideas. This is what keeps me up at night. I look forward to the next administration to remedy this Executive Order.

Author Brené Brown has stated in her books and podcasts: "I want to get it right not to be right." It's something that resonates with me from studying philosophy, specifically Socrates, "I know that I do not know." I want to cultivate curiosity, which includes learning uncomfortable truths and stories, so that I can contribute to dismantling systemic racism as it exists at the UW and in the United States of America.

Susan Marx, MBA, PMP, CPC
Vice Chair, Finance & Administration,
Department of Surgery

CLINICAL HIGHLIGHT Thoracic Aortic Program

Aortic aneurysms and dissections that involve the branch vessels in the arch or perivisceral aorta are among the more challenging conditions faced by our patients. Because these segments of the aorta involve critically important branch vessels, they are not amenable to treatment with standard endovascular devices, and open surgical repair is a complex endeavor as flow must be maintained during the reconstruction.



Dr. Christopher Burke Dr. Matthew Sweet

Historically, a patient with such a condition would see one surgeon, whether a cardiac or vascular surgeon, and that individual would utilize whichever approach they were most comfortable with. In the last few years, advances in endovascular stent graft technology as well as refinements in the operative techniques used for open surgical repair have expanded our ability to treat these patients. Each approach has its advantages and disadvantages, and the choice between which approach is best for each patient, and when to combine them, requires expertise and comfort with both techniques. As our population ages, we anticipate continued growth in the incidence of such aneurysms and establishing a robust team with the right technology and expertise will be critical. To address this specific need, we have recently initiated the UW Multi-disciplinary Thoracic Aortic Program (UW MTAP) at UW Medical Center-Montlake (UWMC-ML). UW MTAP is a group of Cardiac and Vascular surgeons with interest and expertise in both the open and endovascular approaches to these specific aortic domains, the aortic arch and thoraco-abdominal aorta.

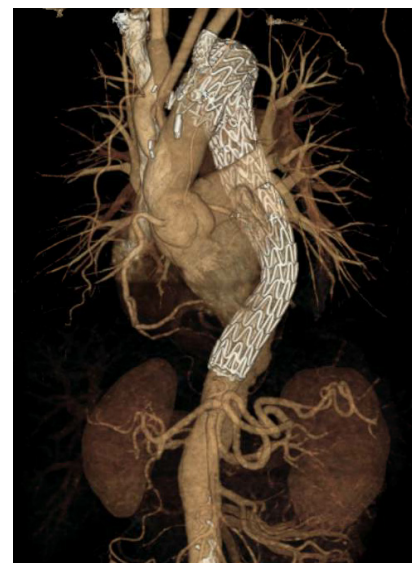
Dr. **Christopher Burke**, Assistant Professor in the Division of Cardiothoracic Surgery, is a cardiac surgeon who did a postgraduate aortic surgery fellowship under Dr. Joseph Bavaria, a world renowned expert in

the surgical repair of the ascending aorta and aortic arch using open and “hybrid” approaches (where open surgery is combined with endovascular stenting at the same operation). Dr. Burke brings a wealth of experience in new techniques for valve sparing root repair and open arch repair with and without concomitant stenting. He has a particular clinical interest in aortic valve preservation surgery (aortic valve repair).

Dr. **Matthew Sweet**, Associate Professor and Section Chief of Vascular Surgery at UWMC-ML, is a vascular surgeon with expertise in the open repair of thoraco-abdominal aneurysms as well as the use of endovascular branched stents. These devices are only available within clinical trials and he runs one of only 10 studies utilizing the Cook Medical custom-made branched endografts for thoraco-abdominal aneurysms in the USA. Dr. **Sherene Shalhub**, Associate Professor in the Division of Vascular Surgery, is a vascular surgeon with national recognition for her expertise in the genetics of complex aortic disease, also called genetic triggered aortopathies. She has been prolific in her clinical research endeavors and has received federal funding support to study the impact of these aortic dissections on patients and their families. Dr. Shalhub has developed a national reputation within the field of genetic aortopathies and sees patients from around the country in her clinic.

The team meets weekly to review all complex aortic cases. This regular interaction facilitates the coordination of care, allows for shared decision making about operative approach, and reduces variation in how these complex issues are managed. Standardization is an important step forward in improving the safety and effectiveness of these complex operations. The formation of this program is essential in furthering UW's role as a national leader in cardiovascular care and in elevating the care for patients with these aneurysms in the Puget Sound region, WWAMI, and beyond. Furthermore, new technologies continue to emerge. Endovascular repair of the ascending aorta as well as combined catheter based aortic valve and ascending technology is in its infancy. When that technology arrives, UW will be well positioned to lead with this group and the excellent structural heart team at the Regional Heart Center. Through integration of services, we

will ensure that all UW Medicine patients get the benefit of different expert opinions and all operative approaches.



Post-operative CT scan from a patient treated emergently with an arch replacement for an acute type A aortic dissection. He went on to have a single-branched stent graft placed in his descending thoracic aorta as part of a clinical trial. In appropriate candidates, aggressive treatment with a combination of open and endovascular therapy following aortic dissection allows the aorta to “remodel” and limits future aortic-related morbidity.



Post-op CT scan from a woman treated with a custom made branched endograft for an extent 2 thoracoabdominal aortic aneurysm in the B-TEVAR IDE study. This minimally invasive technique utilized only access from the femoral arteries.



Dr. Kristine Calhoun

#GETTING TOKNOWDOS

Dr. Kristine Calhoun

Associate Professor

Division of General Surgery

SS: How is the continuation of CV19 impacting your life?

KC: Have you got a couple of hours? [laughs] Remote learning for my children has been a juggling act. I have a three-year-old who was supposed to begin preschool and a 7-year-old who was in kindergarten last year and pivoted to remote learning. On top of this, I've been on the parent committee that looked at the reintroduction of remote learning and how it was going to look like in the fall. Let's say it was quite heated and interesting.

I think it's been an interesting time and I think we're just going to continue to see fallout from it. I do think one of the perks has been Zoom. I did a CME talk in Wenatchee. Instead of having to miss two days of clinic, I operated all day and then came into my office and gave the CME.

SS: When did you know you wanted to be a surgeon?

KC: I was one of those who wanted to be a doctor for as long as I can remember but I came into medical school thinking I was going to be a pediatrician. Then I did my pediatrics rotation and found I do not do well in an all-clinic environment.

I was a medical student here and I did my surgical rotation at Harborview Medical Center (HMC). I was able to work a little bit with Hugh Foy and I was like, "oh, now I really like this!"

I thought maybe it was just the excitement of HMC because it's unlike any place. I gave it a shot and did a Sub-I with Dr. Kaj Johansen, a vascular surgeon who's just retiring and he's phenomenal. I did the Sub-I because I really wanted to do surgery but I wasn't sure. There was this mentality at that time that surgery is so hard and you can't have a family and do it all. There was also the archaic belief that you only went into surgery if there was nothing else that you could think of doing. I fell for all of those stereotypes at first and believed I couldn't do it. This as well as I'm a woman and there weren't as many women in the field at the time. I did a couple Sub-I's back to back, doing the surgery Sub-I first, and that's when I knew surgery was for me.

SS: What are your personal thoughts on being selected as a 2020 Top Doc in Seattle Magazine?"

KC: It's flattering because it's a mark of approval and I think everyone enjoys being liked. It goes back to the whole Sally Field Oscar award acceptance speech, "You like me, you really like

me." I think it's easy for us to say, "oh, it's just a popularity contest," or "oh, well, look at all the UW docs on the list because they have this machine that can vote for all their UW docs." Honestly, I do believe it's an endorsement of your clinical work.

SS: What professional advice do you have for our new residents?

KC: I think it's similar to parental advice. A couple of sayings come to mind... "it's a marathon, not a sprint," and "the days are long but the years are short." I think when you start off and you're looking at five or seven years, it seems you're going to be here forever but when you get to those middle years you may feel you've given up a lot and start questioning, "did I do the right thing?" Just keep your eye on the prize. It's the patients, when you are actually able to operate on them, that's most rewarding. You're actually correcting something and I think it's an honor to actually be able to do that. It's a huge compliment that someone trusts you to do that.

I won't lie, residency is hard and I almost quit a couple times. But if it is for you don't let the difficulty of residency dissuade you because it is a very fulfilling career. It's a long haul and we all get tired. Have your outlets and take care of yourself.

(continued on page 30)

#GETTING TOKNOWDOS

Dr. Kristine Calhoun

SS: What do you consider to be your most impressive achievement?

KC: Honestly, I think it's having two kids as a single mom. I got to the point in my life where I had to make some very difficult decisions. I have always been a "rule-follower," and in my mind, I thought, "well, I'm not following the typical rules and I'm not following the typical course." I was a little worried about how people in the department would see it when I announced that I was pregnant with my first son.

And I basically just said to myself, "You know what? I'm going to level the playing field here." I sent out an email and I said, this is it. Dr. Patch Dellinger was the first person who e-mailed me back. His email was a paragraph long and it was all in caps. It was classic Patch. And he said, "you just made the best choice of your life. There's nothing like it." He was so supportive. Dr. Carlos Pellegrini was the second person. He said, "This is fantastic! We will support you and everything!"

My first son, Gus, was born with a fairly severe cardiac abnormality and had to have surgery at three and a half months of age. He was hospitalized at 16 hours of life and transferred to Seattle Children's Hospital and spent a month there. It was very touch and go. It was a challenging time and subsequently he's had another heart surgery. I had my second child, Finn, almost 4 years after having my first.



Finn & Gus Calhoun

So that's my proudest accomplishment because it was important to me. It did not go along the traditional channels. It's been hard but it's been incredibly worthwhile and I would never trade my kids for anything.

SS: What has been a profound missed opportunity in your life?

KC: When I was four my dad used to play hockey at an old rink in Tacoma called the Lakewood Winter Club and I started figure skating there. I started with group lessons then private lessons and found I actually had talent in it. I competed at the local level and everything. I bowed to peer pressure when I got to be about seven or eight as my friends didn't like that I couldn't play with them and that I was spending all the time in the rink. So I quit. I picked it up again when I was in junior high, but I missed those really critical years.

I look back and I probably could have accomplished a lot more if had I stuck with it. It's one of those times I listened to others and made decisions for them and not myself.



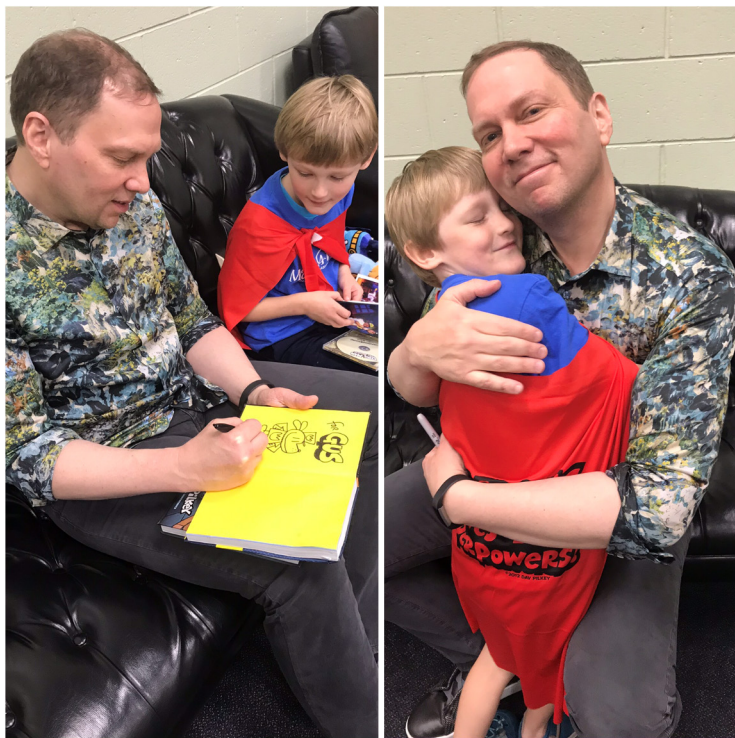
(continued on page 31)

#GETTING TOKNOWDOS

Dr. Kristine Calhoun

SS: What's been your most memorable vacation?

KC: My son Gus' Make A Wish® trip last October is most memorable. Gus was born with a heart defect qualifying him for Make-A-Wish® and his wish was to meet his absolute favorite author, Dav Pilkey, who writes and illustrates the "Captain Underpants" and "Dog Man" book series. We were flown to LA and had over an hour meet and greet with Dav. The wish also included going to a "Dog Man Do Good" tour stop with 3,000 other kids as well as awesome excursion to Universal Studios. Dav was amazing with Gus and for a couple days his cardiac condition made him special in a GOOD way.



Gus with Dav Pilkey

SS: Do you have any travel plans after COVID travel restrictions lift?

KC: A gift to myself when I hopefully achieve promotion to professor is going to be a trip with my family to Australia and New Zealand. It's always been a goal of mine and it's always been on my list and it's time. It's going to be my present and my pat on the back. (When they actually will let an American in).

SS: If you could know the answer to any question, what would that question be?

KC: Is there life on other planets. The reason I ask that is my son, Gus, right now is completely obsessed with planets—the solar system. He's constantly asking Siri, "Siri, what's the farthest planet?" and the like.

The universe is so huge that there has to be some other life out there. And are they aware of us? Are they just watching us? I would love to know is there life out there.

SS: What is your fondest childhood memory?

KC: My paternal grandmother died when I was five. Interestingly, she died of neglected breast cancer. She had a mass and hid it thinking it would go away. But I have a very clear memory of her. Me and my cousin, Allison, who is only about six months younger than I am, would play in my Grandma Calhoun's backyard. She let us pick flowers and ride the family tricycle.

It's one of those memories where it was just a perfect time where I was with people that I loved and doing something that I loved at the time. I don't have many memories of her, so this is a very comforting memory.



Kristine, age 5 at her grandmother's house

(continued on page 32)

#GETTING TOKNOWDOS

Dr. Kristine Calhoun

SS: What has been your biggest mind-blow in life?

KC: I come from a very blue-collar family. My mom's dad actually immigrated from the former Yugoslavia so my mom is first generation American. Then my dad lost his father when he was 13. My mom was a teacher and my dad has a degree in fisheries but he always had to help out with the family. I don't think my dad necessarily tapped his potential.

So when I look at this, I placed education as always being very important so I set goals for myself. I look back and it sometimes amazes me I'm actually where I am because I'm in a very strong academic program and I've achieved the goals that I set for myself.

SS: What is your favorite movie genre?

KC: I love action movies. One of my favorite movies of all time is "Die Hard."

I also like "Star Wars." I know it's science fiction but I also think of it as an action. I like things that are completely removed from my life and complete fantasy and the complete opposite of the life that I am living. In college, one Halloween I went as Princess Leia. I had really long hair, and I did the side-roll things on my hair.

The movie I cannot skip if I come across it on TV, "Gladiator." It does not matter where it is in the movie, if "Gladiator," is on I have to sit down and watch it.

SS: Who is your favorite music group or single vocalist?

KC: Easy one. U2. I've seen them three or four times. The last time I wanted to see them I couldn't because I was 39 weeks pregnant with Finn. I didn't feel like it would be the wisest choice to go and stand at CenturyLink for hours. But I went to the tour before, which had been the tour they postponed because Bono had broken his back from a bike accident.

SS: What's your favorite Seattle restaurant?

KC: I really like sushi—there are several places in Madison Park, and Wataru on 65th is really good as well. My one son, Gus, hates sushi but my other son, Finn, loves it. Finn is a sushi snob. He'll only eat the ahi tuna. If I bring it home, he'll eat the entire thing of ahi tuna as well as sashimi. He's a strange three-year-old.

SS: What do you believe is the meaning of life?

KC: The meaning of life for me is we'll all have regrets but at the end, the goal is to look back and be satisfied with the path that you took.

Nobody's life is perfect. We all have disappointments and sometimes it's hard to move on from them but we have to. I believe all disappointments and failures build character. We're all on a path and I think in the end we get to where we're supposed to be.

SS: Tell us something that nobody knows about you.

KC: I was an extra on the show Desperate Housewives. I wound up on the cutting room floor but I actually have a check paying me for my services. A patient of one of my mentors when I was a fellow in Los Angeles found out I loved the show, and he's like, "well, why don't you come on set one day?" So he had arranged for me to be "Mom Pushing Stroller." I got to spend all day on the set and met all the stars and everything. I met Teri Hatcher, James Denton, Marcia Cross and Nicolette Sheridan, and I have this Desperate Housewives' water bottle. It was my brush with fame.



James Denton, Kristine Calhoun & Teri Hatcher

Visit Dr. Calhoun's UW Medicine [provider page](#) to learn more about her education and training, clinical specialties and research.

department of surgery in the media

Dr. Eileen Bulger, Professor
& Chief, Trauma, Division of
Trauma, Burn & Critical
Care Surgery

**How the State With the First
Major Outbreak Contained
Coronavirus**

**With National Data Lacking,
Harborview Medical Center Joins
New Study On Gunshot Injuries**

Dr. Nicole Gibran, Professor,
Division of Trauma, Burn &
Critical Care Surgery

**After the Leak: An Award-winning
Response to a Radioactive
Material Leak**

Dr. Elina Quiroga, Associate
Professor, Division of
Vascular Surgery

**Idea full of holes wins U.S. prize
for kidney-dialysis team**

Dr. Jonathan Sham, Assistant
Professor, Division of
General Surgery

**For some patients with pancreatic
cancer, a newly introduced
procedure at SCCA provides hope**

Dr. Barclay Stewart, Assistant
Professor, Division of Trauma,
Burn & Critical Care Surgery

**'The fire is right on us': Parents
share desperation to outrun a
wildfire with young son**

Dr. Estell Williams, Assistant
Professor, Division of
General Surgery

**Estell Williams: Mentoring the
Next Generation of Black Doctors**

**Celebrating Women's
Equality Day**

HARKINS' CORNER



Dr. Nicole Zern

Dear Harkins Society Members and Alums of
the University of Washington Surgical Training
Programs,

What a strange and unusual year this has been
for us all. We hope you are all in good health and
continuing to enjoy your practices, retirements
and other pastimes!

This year we were honored to graduate exceptional
surgeons from all of our training programs
including General Surgery, Integrated Plastic
Surgery, Integrated Vascular Surgery, Integrated
Cardiothoracic Surgery as well as many fellowships.
As a result of the COVID-19 pandemic, our
celebrations were limited to virtual formats but
we did our best to honor the achievements of
these amazing surgeons as they completed their
training in June.

CHIEF RESIDENTS FINISHING JUNE 2020

Division of Cardiothoracic Surgery Integrated Residency Program

Swaroop Bommareddi, MD MCS/Transplant Fellowship,
University of Wisconsin

Division of Vascular Surgery Integrated Residency Program

Anna Ohlsson, MD Vascular Surgery, VA Medical Center

Division of Plastic Surgery Integrated Residency Program

Kate Impastato, MD Plastic Surgery, Marshall University

Tommy Liu, MD Craniofacial Fellowship,
University of California, Los Angeles

Shane Morrison, MD, MS Gender-Affirming Surgery Fellowship,
University of Michigan

Trent Morton, MD Plastic Surgery, Proliance Plastic
and Reconstructive Surgeons

Department of Surgery General Surgery Residency Program

Brian J. Cook, MD Abdominal Transplant Fellowship,
University of Washington

Sarah M. Kolnik, MD, MPH Surgical Critical Care Trauma
Fellowship, University of Kentucky

Vimukta M. Mahadev, MD Surgical Critical Care Trauma
Fellowship, University of Washington

Amer H. Nassar, MD Harvard University/BIDMC, Plastic
and Reconstructive Surgery Fellowship

Francys C. Verdial Argueta, MD, MPH Breast Surgical Oncology
Fellowship, Memorial Sloane Kettering Cancer Center

Jay Zhu, MD Minimally Invasive Surgery Fellowship,
University of Washington

FELLOWS FINISHING JUNE 2020

Jeff Anderson, MD Surgical Critical Care

Navin Bhatia, MD Surgical Critical Care

Chelsea Boe, MD Hand Surgery

Mert Calis, MD Craniofacial Surgery

Peter Joseph Edpao, MD Transplant Surgery

Colette Inaba, MD Minimally Invasive Surgery

Abbie Jensen, MD Surgical Critical Care

Nicole Kurnik, MD Craniofacial Surgery

Stephanie Mason, MB, PhD Surgical Critical Care

David Miranda, MD, MS Surgical Critical Care

Ugochi Okoroafor-Ridgway, MD Hand Surgery

Rachel Payne, MD Surgical Critical Care

Lela Posey, MD, MPH Surgical Critical Care

Brian Pridgen, MD Hand Surgery

Marko Rojnica, MD Pediatric Surgery

Joel Sternbach, MD Cardiothoracic Surgery

Rebecca Ur, MD Vascular Surgery

Kent Yamaguchi, MD Hand Surgery

Usually Fall and the new academic year brings
a busy season for the Harkins Society with our
annual Harkins Symposium, annual society dinner in
Seattle and annual social gathering at the American
College of Surgeons meeting. However, due to the
extenuating circumstances of this year, we were
unable to hold these events in the traditional fash-
ion. We held the Harkins Symposium virtually on
Friday October 16th with honored Strauss lecturer
Dr. Edward Cornwell III M.D., FACS, FCCM. Dr. Corn-
well is the Surgeon-In-Chief at Howard University
Hospital in Washington, D.C. as well as Chair of the
Howard University College of Medicine Department
of Surgery. We were regrettably unable to host the
usual dinner following the symposium during which
we normally would honor a distinguished Harkins
Society alumnus of the year. Similarly, we missed
seeing our friends and colleagues at our American
College of Surgeons reception this year given the
virtual format.

We sincerely missed seeing you all at these events
and hope that we can reunite next Fall- cheers to
a better year in 2021!

Sincerely,
Nicole K. Zern MD, FACS
President, Harkins Society

FACULTY

CODA APPENDICITIS TRIAL BRINGS TOGETHER PAST AND CURRENT DOS MEMBERS

A collaboration of past and current Department of Surgery members lead national trial to answer the question: Are antibiotics as good as surgery to treat appendicitis?

Antibiotics may be a good choice for some, but not all, patients with appendicitis, according to results from the Comparing Outcomes of antibiotic Drugs and Appendectomy (CODA) Trial, published in the [New England Journal of Medicine](#) on October 5, 2020. The CODA Trial was led by current Department of Surgery faculty members – Drs. [David Flum](#), Professor and Associate Chair for research served as Co-Principal Investigator, and [Giana Davidson](#), Associate Professor, directed the Clinical Coordinating Center, leading the participation of 25 clinical sites in 14 states across the US. Current faculty members [Joseph Cuschieri](#), Professor, and former faculty member Dr. [Heather Evans](#) led Harborview Medical Center’s participation in the trial. Affiliate Associate Professor, Dr. [Danielle Lavallee](#), led the CODA Stakeholder Coordinating Center.



Flum



Davidson



Cuschieri



Lavallee

Deciding Between Antibiotics & Surgery for Appendicitis: Findings from the CODA Study

First results of the CODA Study tell us that both antibiotics and surgery may be good options for treating appendicitis. Each treatment has pros and cons. If you have appendicitis, you can talk with your doctor about what is most important to you when deciding on your treatment.

	Antibiotics	vs	Surgery
Good Health	After 1 month, participants rated their general health about the same in both groups.		After 1 month, participants rated their general health about the same in both groups.
Initial Time in ER & Hospital	During the first visit, time spent in the ER or hospital was about the same in both groups.		During the first visit, time spent in the ER or hospital was about the same in both groups.
Symptoms Go Away	After 1 month, symptoms like pain or fever were about the same in both groups.		After 1 month, symptoms like pain or fever were about the same in both groups.
No Surgery	✓ About 7 in 10 (71%) did not have surgery within 3 months.		✗ An appendectomy is surgery.
No Initial Hospital Stay	✓ About half (47%) did not have to be admitted to the hospital for their antibiotics treatment.		✗ Almost all (95%) participants were admitted to the hospital for their surgery.
Less Work Missed	✓ Participants missed an average of 5.3 days of work.		✗ Participants missed an average of 8.7 days of school or work.
Fewer Healthcare Visits	✗ 9 in 100 (9%) participants needed to visit an emergency room or urgent care clinic within 3 months.		✓ 4 in 100 (4%) participants needed to visit an emergency room or urgent care clinic within 3 months.
Appendicitis Does Not Return	✗ Appendicitis can come back if the appendix is not removed. Future CODA reports will tell us how often that happens.		✓ The appendix is fully removed when surgery is successful.
One Time Treatment	✗ About 3 in 10 (29%) overall had surgery within 3 months. About 4 in 10 (41%) who had an appendix stone (appendicolith) had surgery within 3 months.		✓ Most likely to be completed in one hospital visit.
Complications (Unexpected Problems)	For every 100 participants, there were about 8 problems in the antibiotics group. There were about 4 problems for every 100 participants in the surgery group. The higher number of complications in the antibiotics group was related to participants who had a small stone in their appendix, called an appendicolith.		

The CODA Collaborative. A Randomized Trial Comparing Antibiotics with Appendectomy for Appendicitis. Published online October 5, 2020 at [NEJM.org](#).

For more information: [CODAStudy.org](#)

The CODA Trial is the largest study to date comparing appendectomy and antibiotics for appendicitis, with 1,552 participants enrolled (roughly three times larger than the previous largest trial) in the randomized cohort. Funded by the Patient-Centered Outcome Research Institute and designed in partnership with patient stakeholders, CODA aimed to answer the question, “Based on my unique characteristics, preferences, and outcomes of interest, are antibiotics as good as appendectomy?”

As the CODA Trial was ramping up, the team reached out to several Department of Surgery alumni to bring their own health systems on board. “We were striving for a trial that captured the range of severity of appendicitis cases, diversity of health systems, and the broad range of experiences in healthcare to better understand what ‘success’ in treatment looks like for our patients,” said Dr. Davidson. “Developing and successfully completing a trial that was able to recruit patients to randomize to surgery or medical therapy 24/7 at 25 sites across the US took a tremendous amount of trust, communication, and collaboration across our individual teams. UW has produced phenomenal surgeon leaders and researchers, and for many of us, the years of experience we had in training together was a catalyst to launch this work. I’m hopeful it will be the first of our work together.”

Five Department of Surgery alumni led the CODA trial at their hospitals: Dr. Damien Carter (Maine Medical Center); Dr. F. Thurston Drake (Boston Medical Center); Dr. Kate Mandell (Swedish Medical Center); Dr. Sabrina Sanchez (Boston Medical Center); and Dr. Callie Thompson (Vanderbilt University).

“For me, and I know for my partner Dr. Sanchez as well, the opportunity to lead a trial of this magnitude was a huge opportunity,” said Dr. Drake. “The pragmatic nature of the trial made it fit well in different clinical environments, and the CODA team, in particular Dr. Davidson and [CODA project manager] Erin Fannon, were really hands on in making sure we were successful.”

CODA results indicated that at least in the short-term, antibiotics are not worse than appendectomy for appendicitis, as measured by the EQ-5D13 measure of general health status. Among those assigned to antibiotics, there was an approximately 3 in 10 rate of appendectomy by 90 days, and patients with an appendicolith had a higher rate of appendectomy (25% if no appendicolith and 41% with appendicolith). Overall, antibiotics were associated with a higher rate of adverse outcomes than appendectomy, but this higher rate was largely driven by the appendicolith subgroup. Patients without an appendicolith were not at higher risk for complications. Antibiotics were associated with more days in both the emergency department and hospital after initial treatment. There were fewer days of missed work by both patients and caregivers in the antibiotics group. There is a chance of missing a cancer of

Click infographic for larger image

(continued on page 35)

CODA APPENDICITIS TRIAL BRINGS TOGETHER PAST AND CURRENT DOS MEMBERS (CONT.)

the appendix when an appendectomy is not done – CODA found cancers in 7/776 appendectomy-assigned and 2/776 antibiotics-assigned participants at 90 days with a mean age of 47 years (range 21 to 74). Clinical outcomes including the impact of a delay in diagnosis and risk factors associated with an occult neoplasm will be a future area of focus of the CODA trial to help patients and surgeons determine if an antibiotic or surgical treatment should be considered.

“There were advantages and disadvantages to each treatment, and patients will value these differently based on their unique characteristics, concerns, and perspectives,” said Dr. Flum. Some people will look at these trade-offs and find antibiotics an acceptable, or even preferable option. Others will look at these trade-offs and choose appendectomy. Clinicians, researchers, and health systems can play an important role in encouraging this individualized approach to treatment by developing and deploying decision support tools to help patients prioritize and weigh multiple outcomes.

The CODA Trial is ongoing and future publications will detail long-term results, factors associated with antibiotic treatment success, and results from observational and EMR-only cohorts.

CODA was managed by the team in the Department of Surgery’s [Surgical Outcomes Research Center \(SORCE\)](#). More information on the CODA Trial and results can be found on the [CODA website](#).



Dr. Sherene Shalhub

The [Aortic Dissection Collaborative](#), led by Dr. [Sherene Shalhub](#), Associate Professor, Division of Vascular Surgery, has received a funding award through the [Patient-Centered Outcomes Research Institute \(PCORI\)](#) Eugene Washington Engagement Awards program to convene a collaborative of patients with-and at risk for-aortic dissection.

The team aims to improve the management of aortic dissection and increase quality of life for people impacted by this condition. To do so, the collaborative is engaging stakeholders to build a research infrastructure focused on patient-centered outcomes. It will feature research training; support and networking among patients, physicians and researchers with expertise in aortic dissection; research consortia dedicated to aortic dissection; industry stakeholders; and patient advocacy groups.

The main deliverable over the next two years is to create a virtual research network and establish research priorities among the stakeholder group, Shalhub explained. These research priorities will then be used to guide future research proposals that reflect patient centered priorities.

Dr. Shalhub was recognized as a “Vascular Hero” through Vascular Cures’ #vascular-hero social media campaign. Each year, Vascular Cures honors, celebrates and appreciates heroes who are on the front line battling the devastating effects of vascular disease such as strokes, pulmonary embolisms, aortic aneurysms, vascular dementia and peripheral artery disease. Vascular Cures requested nominations by

posting the nominee’s photo or a story on social media (Twitter, Facebook, LinkedIn, Instagram) with the hashtag #vascular-hero and the tag @vascularcures.

Dr. Shalhub remarked, “I am deeply honored to be named a vascular hero: None of this work is possible alone and I am grateful for our partners in the VEDS and Aortic Dissection Collaboratives. Engaging patients as partners in the research process has been one of the most fulfilling experiences as a surgeon and researcher.”



Dr. Jonathan Sham

Dr. [Jonathan Sham](#), Assistant Professor, Division of General Surgery, published “[Management of primary hepatic malignancies during the COVID-19 pandemic: recommendations for risk mitigation from a multidisciplinary perspective](#)” in The Lancet Gastroenterology & Hepatology.

The management of hepatobiliary malignancies is complex and resource intensive. The COVID-19 pandemic imposed unique limitations on healthcare resources and access to care. Dr. Sham worked with an international team of experts to develop guidelines for the management of complex hepatobiliary malignancies during the pandemic to aid clinicians around the world in making difficult treatment decisions in real time.

Dr. Sham won Swim Across America’s Young Investigator Award for his research with Dr. Buddy Ratner Professor & Director, Department of Bioengineering, University of Washington, to develop a novel biopolymer that can be used during pancreatic surgery to reduce the rates of pancreatic fistula. [Vimeo video >>](#)

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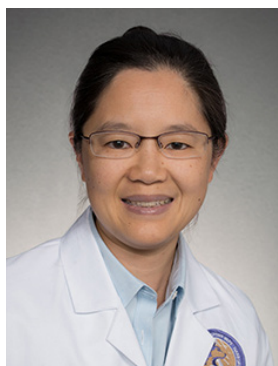


Dr. Barclay Stewart

Dr. **Barclay Stewart**, Assistant Professor, Division of Trauma, Burn & Critical Care Surgery, was awarded the Inaugural HMC Pilot Award to develop a new, innovative inter-disciplinary research collaboration and study the gut and wound microbiomes of patients with major burn injuries. The collaboration includes researchers from UW Medicine Regional Burn Center and collaborators from the UW Center for Microbiome Science and Therapeutics and the Salipante Lab. Their project aims to: describe shifts in the relative composition and function of gut and burn wound communities over the course of injury; and characterize strain-level communication between the gut and burn wound microbiomes. The findings will allow them to establish a novel interdisciplinary collaboration to study a new frontier in burn research: the role of the human microbiome in recovery from major injury. Additionally, Dr. Stewart and colleagues from Stanford University, Nepal Cleft and Burn Center and the Walter Reed laboratory in Nepal will be conducting a sister study that will allow comparison of the findings between two different environments and burn-injured populations. This line of investigation will inform interventions that positively influence the gut and wound microbiomes to improve survival and function after major burn injury.

Dr. Stewart explains, "Together, this collaboration will allow us to develop interventions that may translate to improvements in resuscitation strategies that maintain gut mucosal health and immune function (e.g., enteral resuscitation), infection prevention and avoidance of multisystem organ dysfunction, novel approaches to wound healing (e.g., therapeutic microbial dressings), and prevention of pathologic hypertrophic scarring."

UW Medicine Regional Burn Center continues to support and conduct impactful research that transforms our understanding of patients' responses to injury and ways we might improve their outcomes.



Dr. Gale Tang

Dr. **Gale Tang**, Associate Professor, Division of Vascular Surgery, was appointed the new Associate Editor of JVS Vascular Science.



Dr. Raymond Tse

Dr. **Raymond Tse**, Associate Professor, Division of Plastic Surgery, was awarded the **American Association of Plastic Surgery's (AAPS)** 2020 James Barrett Brown Award. This award was established in memory of Dr. James Barrett Brown, past AAPS president, and is presented for the best plastic surgery paper published during the previous calendar year. The 2020 award recognizes Dr. Tse's paper "**Unilateral Cleft Lip Nasal Deformity: Foundation-Based Approach to Primary Rhinoplasty.**" Drs. **Craig Birgfeld**, Associate Professor, Division of Plastic Surgery, **Joseph Gruss**, Professor Emeritus, **Richard Hopper**, Maryls C. Larson, Professor of Craniofacial Surgery & Chief of Pediatric Plastic Surgery, Division of Plastic Surgery, and **Ezgi Mercan**, Craniofacial Image Analysis Researcher, Division of Plastic and

Craniofacial Surgery, Craniofacial Center, Seattle Children's Hospital, played significant roles in this research project as well. AAPS will present the award and \$2,000 prize to Dr. Tse at the AAPS Annual Meeting in May 2021.

Raymond Tse remarks, "In many ways, it's a special paper for us given that it challenges dogma and was Joe Gruss' last paper before he retired." As Rich Hopper noted, "Joe taught us all so much about how to address the cleft nasal deformity, and the paper was a great testimony to the fundamental concepts he brought to our team and specialty."



Dr. Nicholas Vedder

Dr. **Nicholas Vedder**, Professor of Surgery & Orthopaedics, Jamie Hunter Endowed Chair, Chief of Plastic Surgery, and Vice Chair, Department of Surgery, remarked, "Dr. Gruss also won this award in 1985 for a paper that again challenged dogma, describing his novel approaches to craniofacial trauma with primary bone grafting, something quite controversial at the time, but as we all know, has become the standard of care. We are all tremendously proud of our world-leading team of craniofacial surgeons who are our colleagues at the University of Washington."

(continued on page 37)

honors, awards & publications (cont.)



Dr. Eugene Zierler

Dr. **Eugene Zierler**, Professor, Division of Vascular Surgery, received the Society for Vascular Medicine's (SVM) 2020 Jess R. Young Outstanding Vascular Medicine Educator Award. This award is conferred upon individuals who have made an exemplary contribution to the field of vascular medicine through the education of its practitioners. The award is presented in honor of Dr. Jess R. Young, the first SVM president and Chairman of the Department of Vascular Medicine at the Cleveland Clinic, in recognition of his ground-breaking

work in the field of vascular medicine, his pre-eminence as an educator and his vision for multi-specialty programs.

"It was a very special honor to receive this award from the SVM. It is especially meaningful because it comes from a Society which is outside my primary specialty of vascular surgery," said Dr. Zierler. "The list of previous recipients includes some of the most respected names in vascular medicine, but only one other surgeon. I am grateful to the SVM leadership for this recognition."

RESIDENTS



Beni



Dasari



Haruta

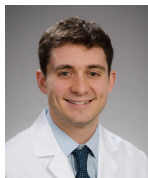


Miranda

Drs. **Catherine Beni**, Research Resident, **Mohini Dasari**, (R4) **Alison Haruta**, (R4) and **David Miranda**, (R4), **Joshua Rosen**, Research Resident, were nominated for the Harborview Medical Center "Outstanding Consultant of the Year Award" for the 2019-20 academic year by the University of Washington Department of Emergency Medicine Residency Program.



Little



Czerwonko-Pupi

Drs. **Christopher Little**, (R2) and **Matias Czerwonko-Pupi**, (R3), were nominated for the University of Washington Medical Center "Outstanding Consultant of the Year Award" for the 2019-20 academic year by the University of Washington Department of Emergency Medicine Residency Program.



Massenburg



Mehta

The Resident and Associate Society of the American College of Surgeons (RAS-ACS) selected Drs. **Ben Massenburg**, (R4), and **Kajal Mehta**, Research Resident, for two Global Surgery Work Group Leadership positions.

Dr. Massenburg will hold the Subspecialty Engagement Lead position and Dr. Mehta will be Secretary, which will advance to Vice Chair in 2021-22 then to Chair.

"I am excited to be working alongside Kajal and the other members of the ACS RAS Global Surgery Work Group as the Subspecialty Lead. With this group, I hope we can engage with other trainees, surgeons, and healthcare institutions to develop a bidirectional and multi-disciplinary partnership that will strengthen surgical health systems worldwide" said Dr. Massenburg. "I would like to thank Drs. **Jeffrey Friedrich**, Professor, Division of Plastic Surgery, **Kari Keys**, Associate Professor, Division of Division of Plastic Surgery, and **Richard Hopper**, Marlys C. Larson Professor of Craniofacial Surgery & Chief, Pediatric Plastic Surgery, Division of Plastic Surgery, for supporting my passion for global surgery during residency, and to Drs. John Meara and Nivaldo Alonso for their continued mentorship."

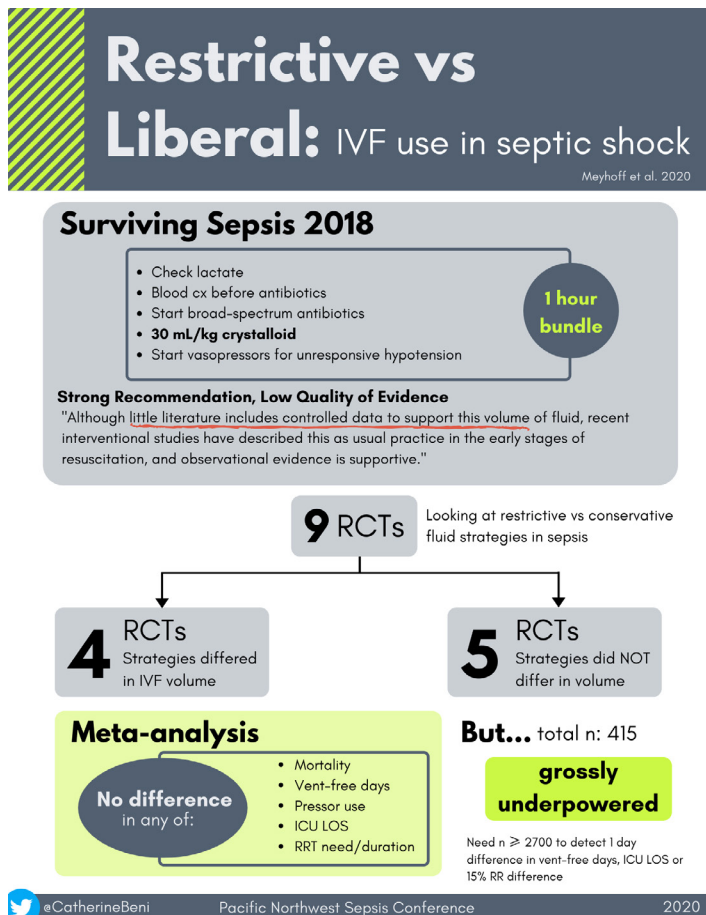
"I'm thrilled for the opportunity to work with Dr. Massenburg and other rising leaders in Global Surgery from around the country as Secretary of the RAS ACS Global Surgery Working Group." Dr. Mehta continues, "after our group's recent meeting, I am in awe of my colleagues' wide range of experiences and dedication - I am certain the coming years will be collaborative, productive and accelerate our progress in addressing surgical health inequity around the globe. I'd like to especially thank my mentor, Dr. **Barclay Stewart**, Assistant Professor, Division of Trauma, Burn & Critical Care Surgery, for his continual support, as well as Dr. **Douglas Wood**, The Henry N. Harkins Professor and Chair and Dr. **Karen Horvath**, Professor, Director, Residency Program in General Surgery, Associate Chair for Education, for their support of UW DOS Global Surgery initiatives."

"I have the fortune and opportunity to spend my first year of dedicated research time as an NIH Fogarty Global Health Research Fellow. This year is different due to the COVID-19 pandemic, but even then, I have had incredible opportunities in the past 2 months through the program. During our virtual NIH orientation (typically held at the NIH campus) in July, we worked on developing and practicing our "elevator pitch" for our research projects," said Dr. Mehta. "After giving my pitch to Dr. Roger Glass, the director of the Fogarty International Center, I was one of four fellows who had the opportunity to present my pitch "Enteral Resuscitation for Burn Injuries in Nepal" to Dr. Francis Collins, the Director of the NIH! This was an incredible honor in my early career that is built on the work and mentoring from generations of global surgery researchers at UW like Dr. **Barclay Stewart**, Assistant Professor, Division of Trauma, Burn & Critical Care Surgery and Dr. **Charlie Mock**, Professor, Division of Division of Trauma, Burn & Critical Care Surgery.

(continued on page 36)

Dr. **Catherine Beni**, a T32 Postdoctoral Research Fellow under the guidance of Dr. **Grant O'Keefe**, Professor, Division of Trauma, Burn & Critical Care Surgery, presented her work on improving the precision of IV fluid administration in trauma patients by utilizing mathematical modeling to create decision-making tools and feedback-control algorithms at the 2020 Pacific Northwest Sepsis Conference.

Intravenous (IV) fluids are a common treatment in the intensive care unit (ICU) to boost and maintain blood pressure or improve organ perfusion in patients suffering from shock. However, IV fluids are not entirely benign, and larger volumes of fluid are associated with complications including increased time on mechanical ventilation, risk of adult respiratory distress syndrome (ARDS), and need for continuous dialysis. Excess fluid is also a common problem: approximately one third of patients are discharged from the ICU with over 10% of their body weight in fluids. Knowing who will benefit from IV fluid and how much to give are major questions that remain unanswered. Further, there is controversy over whether these complications are a marker of illness severity – sicker patients tend to receive more fluid – or due to IV fluids themselves. Several randomized control trials have investigated restrictive versus liberal IV fluid strategies. While promising, these trials are also limited: half of the trials had no difference in given volume between the two strategies, and the other half were underpowered to show a significant difference in outcomes. Much work remains to be done on this important topic.





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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