



#GETTING TOKNOWDOS

Dr. Shannon Colohan
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Why Did You Decide to Specialize In Plastic Surgery?

SC: I came into medical school thinking of doing general surgery as I'd worked with some liver transplant surgeons doing research and running a clinical trial starting in undergrad. My first surgical experience was flying to Newfoundland on a Lear Jet for organ retrieval and getting to suture at the end of the harvest (super exciting for pre-med student!). In medical school I did a 1-year longitudinal observership with a surgical oncologist and really felt this was my future. However, when I did a third-year clerkship rotation in plastic surgery I really found myself enjoying it. I quickly realized it would be possible to have a surgical career that would still allow me to work with cancer patients, but that also deals with the reconstructive aspects of this care, which appealed as it allowed more surgical creativity/artistry to custom tailor reconstructive options for patients to fit their needs.

What Do You Believe Is A Major Obstacle in Surgical Medicine Today?

SC: Access. I think in surgical medicine, access is a big issue for both trainees who want to pursue this as a career, as well as for patients who need our care. For example, getting into medical school and training, as well as being able to pursue the career you want can be challenging. It's important to help us

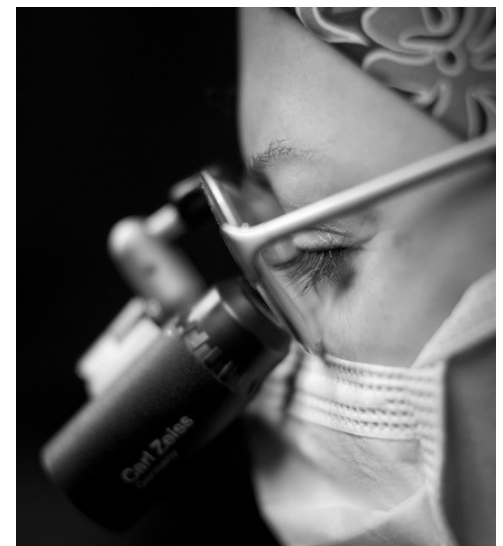
diversify the type of students/residents we recruit into surgical training, and we should focus on helping them to overcome barriers to achieve this. As a surgeon, the challenges I face are often times my patients' access to care that is covered by their insurance. I trained in a Canadian system, so this wasn't really an issue I dealt with, given our universal healthcare. I like to be a patient advocate, and it's frustrating that insurance is not more willing to cover procedures that really make a difference. The criteria they use for approval of some surgeries is particularly stringent and based on very old/poorly done research. For example, an issue we deal with commonly in our oncologic reconstructive practice is the surgical management of lymphedema. There are surgical options for this which are demonstrated in the literature to be successful (and many were pioneered by our own Dr. Neligan), but insurance companies are still considering them experimental, and they're largely not covering it. It's very frustrating to see a cancer patient pay out of pocket for an operation to help them deal with a problem that resulted from their cancer treatment.

What Do You Believe Could Be A Reality in Surgical Medicine But Isn't?

SC: A lot of surgical innovation involves technology, which usually requires large capital budgets for the purchase of high-end equipment. For example, we do a lot

of microsurgery, and with our increasing performance of super microsurgery (e.g., lymphatic surgery), this requires more powerful microscopes, and equipment for angiography to map out lymphatics and assess perfusion. I also believe we could do some of our surgeries robotically and there is talk of some of us getting additional training for this.

As an aside, the University of Washington (UW) is a very progressive institution for technology and technological advancements. I believe our group is always on the cusp of trying new things. We try to get the equipment so we can try new techniques to incorporate into our practice.



Microsurgical concentration
(photo credit: Dr. Geoff Cook)

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Top photo: (back) Anne Chapin (PA-C), Shannon Colohan, Otway Louie, Suzie Inchauste, Shirley Taylor (ARNP); (front) Duane Wang, Stephen Viviano (micro fellow), Sarah Goldsberry-Long, Hakim Said

Bottom photo: (back) Drs. Alexander Gougoutas, Peter Neligan, Hakim Said; (front) Shannon Colohan, Otway Louie, Ted Kung (micro fellow)

Who Do You Admire Most and Why?

SC: Hands down, Dr. Peter Neligan who retired last year from the Department of Surgery. I came to UW as my first job out of training and I was mentored by a giant in plastic surgery! It was a gift, and I was very fortunate. Dr. Neligan's gift comes from not having ego and not creating hierarchy in his team. I believe a lot of UW surgeons didn't realize how globally known he was (and still is) for his craft, and what he's done for plastic surgery simply because he is so humble and considerate. He would be just as likely as any of us to get up and do a case at 2:00 am or just do what was needed to get the

job done. His mantra was "never say no" and he would always fit in patients who needed to be seen or do operations that needed to be done because "it was the right thing to do." I believe that because of that, he really engendered a strong team spirit when he started at UW and worked hard to build a great group of collegial folks. For example, when recruiting/hiring other plastic surgeons or clinic team members, he always insisted that our whole group cast a "unanimous vote" in order to hire that person. Promoting a family environment within the work team makes work as well as life so much more enjoyable. I admire his leadership

style, but I also admire his surgical skill and innovation for pioneering so much in plastic surgery, including his more recent work in developing lymphedema treatments. He was on the forefront of many surgical achievements throughout his career. I miss him a lot.

Which Life Event Was Most Impactful to You?

SC: I had cancer (intra-abdominal/spinal column neuroblastoma) when I was one, and it necessitated a series of treatments including surgery, chemotherapy and radiation therapy. It set a course where I needed frequent follow-up with physicians and was exposed to surgical environments as I ended up needing two spinal fusions at age 16 and 21 for painful curvature related to my prior treatments. I feel it brought me to a greater level of understanding for what it is to go through many different medical/surgical experiences. These experiences fortified my desire to practice medicine and surgery including drawing me to surgical oncology and to patients going through various cancer treatments. I feel like I have a lot of empathy which is enriched by my experiences. I don't remember the treatments I underwent when I was a baby, but I feel like the subsequent medical experiences I had as a result of this life event put me on a course



Dr. Shannon Colohan - age 5
(from Dr. Colohan's Canadian citizenship card)

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in life that enabled me to understand what people could be going through. The emotions related to getting through treatments, surgeries, and the family dynamic that plays out when there's medical stress within one's family is something I understand. That's been very impactful on both my professional career and the closeness I feel with my own family who have always been so supportive.

What Is Your Biggest Regret?

SC: It's funny because I ask people this question during our resident/fellow interviews! In general, I'm not a regretful person. I think everything good or bad in life, at least in my life, happened for a reason. I have this faith everything works out no matter what the bumps in the road are along the way. I tend to not hold regret because that makes me question or doubt my own decision making or my own gut feeling about things. I trust my gut feelings.

On a deeply personal level, I do have regret about not looking into fertility treatments sooner in life. I had not realized the impact my prior cancer therapies as well as my delaying this phase to late 30s would have. It's a very hard emotional adjustment when one is used to working hard and succeeding, only to fail (over and over again) at something you really want. So, despite the fact that I generally hold this part of my life very private, I am trying to be more open about it to help my female trainees understand that it may be useful to explore this at an earlier age, especially because women do tend to put off family building until later due to training. Sadly, the rates of infertility among female surgeons are

not insignificant. I think we owe it to our future generation to educate them, and to fight for things like insurance coverage. It's frustrating (and somewhat ironic) that working for Starbucks or tech companies affords you insurance coverage of what are very expensive procedures but being a healthcare provider does not!

What Do You Consider to Be Your Greatest Accomplishment?

SC: I'm the Assistant Program Director and Site Director for the University of Washington Medical Center. In this role, I'm involved in resident education which includes working on teams and committees with residents restructuring our curriculum. It's been very impactful for me to work directly with residents. This year, I was honored to receive the newly established "Educator of the Year Award," which was presented to me at the chiefs' graduation ceremony. I was very humbled as it was completely unexpected. I love what I do so I am very appreciative for the recognition.

What Do You Find Most Satisfying in Life?

SC: Honestly, I think seeing that people around me are happy! I'm a "people pleaser" by nature, which is where the artistic side of what I do is so rewarding. For example, I love to see whether a patient is appreciative or happy with their surgical results. I also love to see a resident feel proud of their work or progress as a result of the training/teaching we provide. Seeing other people succeed or experience happiness is what makes me feel validated and good about life.

Tell Us Something About Yourself Nobody Knows.

SC: When I started here, I made it a mission to learn more musical instruments in my spare time. I took cello lessons for my first several years in Seattle, and now I'm taking oboe lessons. My team knows when I have a lesson because I'll be scrambling to finish cases to make a lesson on time. It can be difficult to juggle the lessons and more importantly practicing (!) while being a surgeon. It's given me a lot of joy outside of work because it's another artistic outlet I love. I am also known for seeing just about every concert/musical that comes to town. I especially adore Christmas concerts, and love my annual trip to the Seattle Men's Chorus show with my girlfriends. It's been sad that this has taken a hiatus during the pandemic, as it is a real source of joy!

SS: Did you play musical instruments while growing up?

SC: I played violin for about a year and piano for several years—I still play piano. I also played tenor saxophone, and I was in the school band as well as a regional jazz band. I also sang in choir, including during medical school. Some people are sporty—I'm more on the artistic-musical spectrum. I'm the kid that went to music theatre camp growing up!

Do You Have Pet Peeves?

SC: I don't like disingenuous people. I prefer to make real connections with people and share details with them back and forth. I probably share too much about myself in my interactions, but I honestly feel like it is how I relate to my patients and colleagues best. I don't like fakeness or people that have to build up who they are when that's not who they truly are inside.

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What's Your Most Memorable Vacation?

SC: I took a year off when I was in residency and earned my master's degree (Epidemiology) in London, England. I had time off before Easter break I decided to quickly throw together a two-week trip to tour Spain and Portugal on my own. I borrowed a classmate's hiking backpack and stayed in hostels in both Spain and Portugal, and kind of made up the details of the trip as I went. It was both exciting and scary because I did it on my own, and I'm normally a super-planner/OCD about things. It was also a bit of a push for me because I would have preferred to travel with someone else, but that is what made it a fun adventure. I met some cool people along the way with whom I'm still friends.

As an aside, my favorite "non-vacation" was my trip to Jimma, Ethiopia with Operation Smile in 2009. In my residency, all 4th year residents got to take a mission trip with one of our faculty. I met some of the most amazing mission volunteers and patients. The cultural immersion was amazing and unforgettable. I got to do several cleft lips (with mentorship/appropriate supervision), including one for a man in his 20s who'd never had his repaired as a child. I did that one under pure local anesthesia, including lip and nose! The smile on his face was unforgettable when we were done!

We operated without air conditioning with 3 operating tables in one big room. There were monkeys perched on the open windowsills as we operated, and even one monkey with cleft lip (no joke!). I also

got to work with our own Raymond Tse (SCH plastic surgery faculty) as he was a mission surgeon who was working in Victoria BC at the time!

What Is the Most Embarrassing Thing You've Experienced?

SC: When I moved to London for the year I earned my master's, I flew a red-eye from Nova Scotia and was going to stay with one of my co-resident's sister until I found a place to live. I landed half asleep at Heathrow Airport lugging two massive suitcases, with instructions on how to take the Tube to the stop where I would meet the girl then we'd walk to her place.

Once you get off the plane, you take escalators down the Tube. I had my two huge suitcases, and I was trying to figure out how to get them on the escalator. I kicked one suitcase in front of me and pulled the other behind. I soon realized I was in trouble at the bottom of the escalator. I attempted to lift the heavy suitcase in front of me over the little lip at the bottom of the escalator, but it didn't work. Then I tried to kick it but lost my balance as the escalator stairs remained in motion and fell backward. I found myself sandwiched between the two suitcases—literally lying on top of one case and the other one on top of me. Meanwhile, there is an entire line of people behind me rushing to leave the airport to get to the Tube. The escalator kept running beneath me, tearing my jogging pants, until someone hit the emergency stop and someone else helped me off the escalator.

I finally get to the Tube station to meet this girl when she informs me, she lives five blocks from the stop. Next, I'm hauling these massive suitcases five blocks. I was exhausted and defeated before even settling into my new city!

Learn more about Dr. Colohan's [surgical practice](#) and [research](#).



Solo backpacking tour of Spain/Portugal - Plaza de Espana (Seville, Spain)