

SURGERY Synopsis



CHAIR'S MESSAGE



**Douglas E. Wood,
MD, FACS, FRCSEd**

The Henry N. Harkins
Professor & Chair

This issue of *Surgery Synopsis* is our education issue, in which we celebrate our residents and fellows who have completed their training and we welcome our new trainees. We're always happy to see our graduates begin their careers, knowing they have been well-trained. But we're sad as well. We worked side by side for years and become like a family. Each resident and fellow influences us all and pushes us to be better. They bring their unique qualities to the department and patients they serve. But with the bitter-sweet loss of our graduates, we welcome our new residents with great enthusiasm. Each of our programs has matched with excellent surgeons who are committed to their patients and to having a positive impact in the world.

I want to express gratitude for all the adaptation and improvements our education team has undertaken this year. The education team—the Education Vice Chair, our four Program Directors and Associate Program Directors, as well as our education staff (with **Kira Baker** as the Administrator over our Education Division), have come together to improve the department's educational experience for our trainees, in ways big and small. We continuously work to make the trainee learning environment and experience meet the needs of the whole resident. We want to ensure that they leave with the best surgical and patient care skills, but we want to focus on the whole person—not just their skill set. Burn-out became all too real during the pandemic. We learned from that time, and our PDs and APDs keep the “whole” resident in focus in whatever we do.

The education team has worked together to make rapid changes that needed to be made. “It's been a whirlwind of a year,” as Dr. Friedrich, newly appointed Vice Chair of Education, discusses in his column which you can read on [page 5](#). What constituted the whirlwind? What has our education team focused on, and what has been accomplished in the last year? Here are some of the highlights (certainly not the entire list):

- Our first Vice Chair of Education (Dr. [Jeffrey Friedrich](#)) was appointed to

an initial 3-year term. He has laid out some of the accomplishments and challenges in his article, which you can read on [page 5](#).

- Our rural training track has come to fruition. With intense planning and cooperation, the Billings Clinic has partnered with us in providing a non-ACGME residency year. Please read about this long-awaited and exciting development in an article by Dr. [Dana Lyng](#)e, Associate Professor at the VAPSHCS, and the Associate Program Director for this program. A special thanks to Drs. Lyng and [Barclay Stewart](#) for their work in developing and initiating the Rural and Global Surgical residency training track. We are excited about this development and believe it will be hugely impactful for our general surgery residency program. And we're thrilled Dr. [Hannah Wild](#) is the inaugural surgery resident at the Billings Clinics.
- Through unbelievably hard work, cooperation between all parties and buy-in by leadership, Dr. [Rebecca Peterson](#) (Program Director), APDs and residents revamped the residency didactic training for the department. This is a paradigm shift and cultural change. Dr. [Saurabh Khandelwal](#) (APD, General Surgery

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Residency, Mountlake campus) says about this effort (paraphrased): “We got the right stakeholders involved, got buy-in from leadership and got the changes over the finish line to implementation so that we could deploy at the beginning of this new academic year (started July 2023). This is something people said would take two or more years. With the residents and Dr. Peterson’s leadership, it was completed it in about nine months.” You can read more about this change by reading the “Getting To Know DoS” column, which features Dr. Khandelwal this issue.

- Our department has and is conducting recruitment interviews virtually. This started as a necessity during the pandemic, but much as we enjoy in-person interviews, virtual interviews do offer some strong advantages, including substantial cost-savings for the candidates. It is still to be determined if in-person or virtual is the best method. We will continue to monitor our own experience as well as learn from ACS and our peers at other academic institutions.
- With important input from our Diversity Council and Dr. [Estell Williams](#), our recently appointed Vice-Chair for Diversity, Equity, and Inclusion, we have completely revamped the screening, interview, and match ranking process for our general surgery residency. Incredible efforts from Dr. [Rebecca Petersen](#), the general surgery APDs, education staff, and our general surgery faculty have led to an improved holistic review of applications, equitable selection of a diverse group of candidates to interview, standardized interviews, and a more objective process for the rank list. This year’s incoming general surgery residents are beneficiaries of our improved review of resident applications, and also prove the merit of our revamping of the application review and selection.

POLICY AND PRACTICE ISSUES

Substantial work was done during the pandemic to improve the efficiency of the OR. We know that OR inefficiency is perceived as a negative for our training program. OR efficiency is a perennial problem (not just for UW) but the pandemic spurred greater action with respect to addressing this problem.

The American College of Surgeons (ACS) has placed increasing emphasis on what can be done to lessen residency time—without sacrificing quality training. The Cardiothoracic and Vascular Surgery Integrated models are being further explored for replication in other specialties. Continued effort and sustained attention are being given to the balance between independence and efficiency, autonomy, and supervision. For example, increased proctoring time in surgery may be good for skills training but must be balanced against the importance of developing independence and autonomy by the trainee in the OR. And with trainee time in the OR at a premium, we keep innovating and working to build skills in the most efficient way. As an example, the department’s General Surgery Residency (under the leadership of Dr. [Andy Wright](#)) is actively redesigning the technical skills curriculum to increase the efficiency of learning basic surgical skills. UW Surgery is very thoughtful in our addition of fellowships in order to carefully balance

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our commitment to provide more OR time and experience opportunities for our resident trainees, along with great fellowship experience to develop specialty skills.

We have 13 outstanding clinical fellowships, including a recently approved new fellowship in Colorectal Surgery. You can easily review our [fellowship offerings](#) in our DoS website.

As a regent of the American College of Surgeons, I am involved in finding ways for trainees to become active in professional societies early in their career. I believe this to be an important aspect of our residents' career development, and preparation for a rich professional life of engagement and lifelong learning. It is my conviction that early involvement in professional societies not only promotes important networking, but provides opportunities for presenting research, participating on panels and forums, and is a training ground for future involvement in committees that move the practice of surgery forward. For some time, the department has actively promoted residents' involvement in professional societies in several ways, including scholarships for attendance.

Another way the department is promoting professional growth is through sponsorship. Sponsoring a colleague is not new and has been happening unofficially and through networks of established relationships that often serve to elevate people that we like and who look like us. "Sponsorship" as a targeted and organized effort to boost professional growth for junior faculty, residents, and fellows, and as one method to mitigate the impact of longstanding gender and race bias, has been slow to develop. Despite good intent, in surgery we have been slow to change the power structures to become more equitable and more diverse.

What is sponsorship? Sponsorship involves faculty with well-established careers and connections, as well as those in positions

of leadership, talking about, promoting, and nominating residents and faculty for leadership positions, committees, research projects, and awards. Sponsorship is about actively seeking opportunities for a more junior colleague. An example, faculty surgeon X suggests to an ACS Committee Chair that faculty trainee Y (their spouse) would be an excellent choice for participation on a panel or a particular presentation, and you'd like for them to be given the opportunity, followed by introductions, and assistance in working through any barriers.

I am happy to say that the department, led by the Women's Council, is deeply involved in launching a formal structure to enhance sponsorship within our department.

We continuously work to make the trainee learning environment and experience meet the needs of the whole resident. We want to ensure that they leave with the best surgical and patient care skills, but we want to focus on the whole person—not just their skill set.

The Women's Council, led by Dr. [Kris Calhoun](#), Professor in the Division of General Surgery is also making impressive inroads on better understanding and recommend-

ing changes to address the persistent issues that face women surgeons. One of their first successful projects resulted in the creation and adoption of the Pregnancy and Leave Policy for faculty and residents by the department. This policy, which addresses issues encountered during pregnancy, such as leave and lactation, has proven to be a template for a similar policy written by the ACS.

The Faculty Women's Council and the companion Resident Women's Council are engaged in a number of projects and initiatives that continue to address the systems and policies that have led to gender disparity, discrimination and exclusion in surgery. Subgroups have investigated grading in the General Surgery clerkship to see if there is gender bias as a means to identify why a high number of women medical students fail to translate into high numbers of women faculty, whether there are ACGME milestone rating evaluation differences between men and women at the resident level, and are next planning to study whether summative comments vary between the genders. All of these projects are designed to erase disparities for our students, residents, fellows and faculty as a whole.

Dr. Calhoun reports that the Resident Women's Council has a number of additional initiatives and projects they are actively working on. Residents have launched a mentor pairs program for medical students who have expressed interest in exploring surgery as a future career. The Resident Women's Council has also set up Zoom meet and greets and Q&A sessions for medical students as they are making decisions about residency. I am proud and grateful for the work of these groups. You can view membership and review their ongoing work in more detail, by clicking on the DoS website, [Women's Council web pages](#).

Gender inequity has been persistent in all of surgery and has been true within our department as well. I have come to deeply

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believe in and champion changes that will move us closer to gender equity. I wrote an article that explains my own journey in this regard [“How can men be good allies for women in surgery? #HeForShe.”](#)

At the same time, we have many examples of strong women faculty in our department that have moved us closer to gender equity. These outstanding surgeons include Dr. [Eileen Bulger](#), who is the Chief of our Trauma, Burn and Critical Care Division & Surgeon in Chief at Harborview Medical Center and Immediate Past-Chair of the Committee on Trauma (COT), a national committee under the auspices of the ACS; Dr. [Lorrie Langdale](#), Professor and Chief of the Division of General Surgery at the VA, who has been involved in residency training at the ACGME and ACS level for many years. Her input and voice for trainees has had a lasting impact; Dr. [Kris Calhoun](#), Professor and Vice-Chair of Faculty Affairs and Development, is also the Director of Medical School Clerkship Program, and a strong voice for women in surgery. She is Chair of The Women's Council and is the faculty advisor to the Resident's Women Council as well. I want to re-recognize Dr. [Nicole Gibran](#), Professor Emeritus, previous Chief of Burn Surgery at UW and a national leader in burn research and clinical care.

Finally, I want to say that as a white, male surgical Chair, I have come to understand that to be effective in leading our department to become a more equitable and inclusive department, I must be willing to recognize my own privilege, biases and shortcomings, to listen openly and learn from my mistakes. I benefit from the residents and staff and faculty who correct me when I am wrong and who help me build a more diverse, equitable, and inclusive department with a culture of belonging and value. For me, the process of being chair of a great department is definitely “leading while learning” - [“Department of Surgery Leadership Towards Diversity, Equity, and Inclusion.”](#)

I see myself and male colleagues as Allies with our women and minority colleagues: standing shoulder to shoulder with them, being aware, alert, and courageous; backing them up when microaggressions occur; as well as helping to ensure professional opportunities through sponsorship or other mechanisms. We want to make certain there are equal leadership opportunities, and that we are consciously inclusive; i.e., realize who does not have a seat at the table, which barriers exist, and work to remedy. Our department is unwavering in our commitment to create a climate that is inclusive, and where all have a voice.

I want to acknowledge my colleagues who lead with integrity and inclusivity, and have been great partners, mentors, sponsors, and allies to their female and minority colleagues. Our department is becoming better as we learn and grow together.

I hope you enjoy this edition of *Surgery Synopsis*.

Sincerely,

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

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

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Department of Surgery Education Visions



Jeffrey B. Friedrich, MD, MC

Associate Chair, Education
Chief, Division of Education

It certainly has been a whirlwind of a year in terms of education in the Department of Surgery (DoS), as there were numerous leadership changes at the program and department levels.

I became Interim Chief of the Division of Education in Fall 2022 and was subsequently fortunate to be selected as Vice Chair for Education in March 2023. In all honesty, this is a position in which I had envisioned myself for a while. I have been involved in resident and fellow education for a number of years and have been surgical program director for Plastic Surgery for the past 11 years. The position of Vice Chair for Education is a natural growth and expansion of my surgical education efforts. To say that I am excited about this job and education in our department would be significantly understating it. The future of surgical education in the Department of Surgery is bright, and I feel privileged to be a part of it.

The role of the Vice Chair for Education is, in some ways, nebulous, but the core of the job is to oversee all educational efforts for all Department of Surgery trainees: whether medical students, residents, or fellows. Overseeing educational activities in the DoS may sound straightforward until one realizes education is a component of nearly everything that we do. A myriad of issues is related to surgical education.

“

To say that I am excited about this job and education in our department would be significantly understating it. The future of surgical education in the Department of Surgery is bright, and I feel privileged to be a part of it.

”

I do take comfort in knowing I am not alone in this challenge of defining an educational oversight role. The notion of a vice chair for education is a relatively new one—emerging within the last decade. A number of clinical departments, here and in other institutions, are defining this role and appointing individuals to serve, and at the University of Washington Graduate medical Education (GME) level, we have a working/support group of all the education vice chairs across UW School of Medicine’s clinical departments. We meet, discuss challenges, and encourage each other on a regular basis.

At its most simple, I envision the role of the Vice Chair for Education, and more importantly, of all the members of the Education Division, to be advocates for both learners and educators in this department. This is the second core responsibility of the Vice Chair of Education. We have a duty to ensure the educational environment is safe, ethical, and effective, for medical students, residents in our four residency programs and fellows in our large number of post-residency training programs. This duty is in the context of meeting all regulatory challenges, which vary from program to program and increase or change sometimes yearly. We also know our educators need advocates. A surgical educator faces several challenges, in addition to the clinical care we provide to our patients. Additionally, as Vice

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Department of Surgery – Education Visions

Chair of Education, I liaison with other entities beyond our department including our own GME office, the Accreditation Council for Graduate Medical Education (ACGME), our respective specialty boards, and other accrediting bodies. This is critically important as we demonstrate to these stakeholders, and to the public at large, that our trainees and students are obtaining the best educational experience that can be found anywhere in the country.

Finally, the third role of the Vice Chair of Education is to help the department and its programs develop a cohesive educational vision for all our learners. We do this so our current trainees may provide the best patient care as they inevitably move on from their UW Department of Surgery training programs.

Above and beyond the Education Division's usual and continuous work (think: onboarding, applications, interviews, recruitment, program maintenance, graduation, etc.), we are working on a number of other efforts. There have been recent program expansions in the Surgery residency, and new fellowships, notably we are currently working to obtain approval for a new Fellowship in Colorectal Surgery and recently, the General Surgery residency program increased its categorical positions by one.

Our extraordinary Education Division staff have done a tremendous amount of work to make our processes universal so individual programs do not have to reinvent the wheel. We are adapting to new tools as they are incorporated into our learning environment, such as the [SIMPL app](#) which uses assessment data to improve how we train the next

generation of providers. Thousands of faculty and trainees have used the SIMPL assessment toolkit to improve assessment and feedback. At the same time, the SIMPL collaborative network has used data from that assessment infrastructure to advance the science of medical education. We continue, by way of our annual Education Seminar, to delve deeply into thought-provoking and sometimes uncomfortable issues around the educational environment, including bystander training, and most recently, improving our recruitment processes.

The supporting environment here has enabled us to continue developing a vision for our Education Division as well as work on future efforts that will further propel all our training programs. It is inarguable that an educational environment is only as good as the people in it. Recruitment and retention are perhaps the most important work we do. We will continue to adapt and modernize these efforts, so we get the right people and the right representation into our department and ensure we continually support their growth and development. We also aim to rethink the ways we recognize and incentivize educational efforts in this department.

As I think about our department's educational efforts, the main emotion I feel is gratitude. I am thankful for the department's trust in me as we embark on these educational challenges, and I am grateful to every single person in this department who helps make this the best learning and teaching arena for which anyone could hope.



[Dana C. Lynge, MD](#)

Associate Professor, Division of VA Division, Associate Program Director, General Surgery Non-ACGME Fellow Program, Billings Clinic, Billings MT

A Rural Surgery Rotation for the UWSOM Department of Surgery

The UWSOM serves the largest rural landmass of any medical school in the country comprised of the WWAMI - Washington, Wyoming, Alaska, Montana, Idaho - states. More than 40% of the population of these states live in rural regions.

Other specialties at the UWSOM - Family Medicine, Internal Medicine and Psychiatry in particular have long had opportunities for training and recently even part or all of a residency located in rural regions.

General surgeons are the second most prevalent form of physician - after family medicine - in rural regions. General surgeons are a crucial component of rural health care for a multitude of reasons:

(1) they provide crucial surgical (e.g. performing C-sections) back up for family practice physicians (who are often loath to locate where there is

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Department of Surgery – Education Visions

no surgeon); (2) the fiscal viability of small rural hospitals (often the largest employer in these areas) often depends on the revenues from surgery; (3) general surgeons are often the de facto critical care and nutrition expert in small hospitals; and (4) the presence of an Advanced Trauma Life Support (ATLS) certified general surgeon is associated with lower mortality from trauma in rural areas.

Given the above facts, the high interest from a number of highly qualified medical students from the WWAMI region in rural surgical training and returning to practice as surgeons in the rural regions of their home states and the fact that the legislatures of these states provide funding for the UWSOM - it is only fitting that our department provide a rural surgery training opportunity for general surgery residents. An added bonus is that residents interested in global surgery/international surgical care - a burgeoning program in our department under the aegis of [Barclay Stewart](#), MD - often seek the kind of surgical training available in rural areas.

Thanks to [Roger P. Tatum](#), MD, Professor, Chief of VA Division & Surgeon-in-Chief, VA Puget Sound Health Care System, there are many opportunities for medical students to do a rotation with a WWAMI area rural surgeon (a program which has markedly increased the number of UW medical students interested in surgery).

Finding a suitable site for a comprehensive rural surgery experience for residency training is, however, a complex process.


There needs to be a base hospital in a larger town that has all the surgical sub-specialists - orthopedics, obstetrics-gynecology, ENT, etc. - necessary for the diverse training a rural general surgeon (who can be called upon to perform procedures outside the usual purview of urban general surgery such as: C-sections, tonsillectomies, fracture treatments, endoscopies, etc.) needs. There needs to be a cadre of surgeons dedicated to training residents and an administration willing to support such an effort with funding (the host institution pays the salary of the resident) and logistics (housing, Continuing Medical Education, etc.). Finally, there needs to be the opportunity for experience in more remote towns with small hospitals and solo or few surgeons.

After a search of over a decade - and thanks to the support of [Douglas Wood](#), MD, Chair of the UW's Department of Surgery and the enthusiasm Gordon Riha, MD, of Billings - [Barclay Stewart](#), MD, PhD, MPH, Assistant Professor, Division of Trauma, Burn & Critical Care Surgery, and I have found such a place in the Billings Clinic. The Billings Clinic is the provider of healthcare for eastern Montana and adjacent Wyoming. In Billings itself they have a large hospital with all the surgical subspecialists and now is the only level 1 trauma center in the state and they have satellite clinics/ small hospitals and agreements with many critical access hospitals staffed by solo surgeons throughout the eastern half of Montana and northwestern Wyoming. WWAMI medical students already rotate there and the UW psychiatry department has a residency located there. The hospital administra-

tion is very invested in training residents and promoting research. Residents from the University of Arizona do a rotation in rural surgery there and as of July 6 of this year they have been joined by [Hannah Wild](#), MD, and R3 resident in our department (specifically in the [Global and Rural Surgery program](#)) who will be there for a year as the UW inaugural resident.

It is hoped that eventually our program will match a resident per year into the Global and Rural Track and make the rural surgery year in eastern Montana an ACGME accredited part of this program. We would also like to develop the opportunity for all the UW general surgery residents to do a rotation/elective in Billings and the critical access hospitals as part of their training. Not only would this broaden their urban-based training, but also give them greater appreciation of the clinical realities and challenges facing their colleagues who practice in more remote areas.

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Department of Surgery – Education Visions

The Division of Healthcare Simulation Science: Driving Excellence in Healthcare Education and Elevating Patient Care through Innovation



Victoria Roach, PhD

Director of Evaluation and Assessment,
WWAMI Institute for Simulation
in Healthcare (WISH), Research
Assistant Professor, Division of
Healthcare Simulation Science



Haneen Alnazzawi, MD

ACS-AEI WISH Fellow,
Division of Healthcare Simulation Science

In the healthcare field, where lives are at risk and the stakes are high, simulation-based education has transformed medical training and patient care. It bridges the gap between theory

and practice in a safe, controlled environment. Simulation-based education also offers countless opportunities to develop effective teamwork and communication skills in our interprofessional, interdisciplinary healthcare teams and provides a unique platform to actively address and overcome barriers and biases within the field, encouraging diversity, equity, and inclusion.

With a mission to improve the health of the public through simulation science, the Division of Healthcare Simulation Science (DHSS) has created two academic programs that lay the groundwork for healthcare professionals in the development, assessment, and delivery of simulation-based education: The American College of Surgeon (ACS) – Accredited Education Institutes (AEI) Simulation Fellowship and the new Master's in Healthcare Simulation Science Education.

ACS-AEI Simulation Fellowship

To date, DHSS has hosted eight fellows, hailing from diverse backgrounds, including the United States, Argentina, Italy, China, Saudi Arabia, and Turkey, practicing in a wide range of specialties such as anesthesia, general surgery, critical care, and urology. During their tenure, each fellow was involved in developing curricula, teaching residents, running simulations, initiating quality improvement projects, creating simulators at the [Center for Research in Education and Simulation Technologies \(CREST\)](#) and developing the leadership/administrative skills to consider launching their own center of excellence to support

their communities. These fellows have contributed their one-of-a-kind perspectives and experiences, which have resulted in an enrichment of the collective knowledge and capabilities of the division.

Master of Science in Healthcare Simulation Education

In addition to the fellowship program, the DHSS has established a Master of Science in Healthcare Simulation Education (HCSS-Ed). This 18-month (six quarter), 44-credit, part-time, online course-based master's program combines didactic coursework, a simulation center practicum, and a non-thesis capstone project to prepare graduates for a career in healthcare simulation. The didactic coursework and practicums are meant to provide a logical progression in the development of student knowledge and competencies. The capstone project is intended to exhibit students' ability to think critically and create a project that leads to the synthesis of a conclusion to be presented in a scholarly environment. The initial class of 14 students is planned to matriculate in autumn of 2024, with yearly enrollment increasing progressively each year afterwards, reaching a maximum cohort size of 22 students in the fall of 2029.

Additionally, DHSS is dedicated to advancing the landscape of medical training and patient education through innovation and technology by developing state-of-the-art simulators within CREST. These simulators aim to improve both patient and healthcare professional education. Two examples include MyProcedure and the Trauma

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Department of Surgery – Education Visions

Laparotomy Trainer. MyProcedure is a 3D animation-based simulator designed to improve the informed consent process for pregnant patients by providing 3D imaging of procedures (such as epidural and combined spinal epidural) and their complications, ensuring patients have a better understanding of their treatment options. Conversely, the Trauma Laparotomy Trainer is directed towards the training of residents and faculty. It simulates an abdominal cavity with complications, including vena cava hemorrhage, a ruptured spleen, and a perforated bladder. The continuous bleeding and monitoring of blood loss create a realistic scenario for residents to practice their skills, allowing them to perform the necessary interventions and execute appropriate repairs.

The Division of Healthcare Simulation Science is committed to shaping the future of healthcare education and patient care, improving outcomes, and ultimately saving lives.

Mark Your Calendar

2023 Healthcare “SIM”Posium

[CLICK TO REGISTER](#)



74th Annual Dr. Alfred A. Strauss Lecture

Friday, October 13, 2023 | 3:00pm-4:00pm
Health Sciences Building - Hogness Auditorium

Steven C. Stain, MD, FACS, MAMSE

*Chief, Department of Surgery
Lahey Hospital and Medical Center
Professor, Department of Surgery
Tufts University School of Medicine*

“The Atlanta Compromise and the Talented Tenth”

[Event flyer >](#)

All persons in the medical and allied professions are welcome to attend.

2024 Research Symposium & 29th Annual Helen & John Schilling Lecture

Friday, March 15, 2024 | 8:00am-3:00pm | UW Tower

Fiemu Nwariaku MD, MBA, FACS

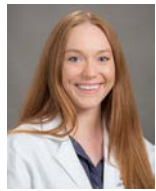
*Professor and Chair, Department of Surgery,
Spencer Fox Eccles School of Medicine, University of Utah
Helen Lowe Bamberger Colby Presidential
Endowed Chair in Health Sciences*

[CLICK](#) OR SCAN TO VIEW
OUR UPCOMING EVENTS

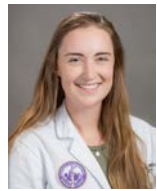


Welcome 2023-24 Surgery Residents

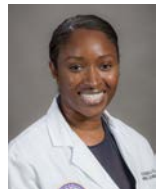
The Department of Surgery welcomes our new, first-year 2023-2024 residents. The department is proud to have this group begin their surgical journeys towards being leaders in their fields.



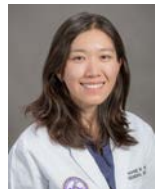
Dr. Naima Alver
Cardiothoracic Surgery



Dr. Eden Anderson
Preliminary Surgery



Dr. Otatade Bello
General Surgery



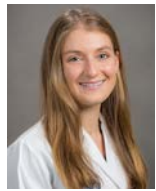
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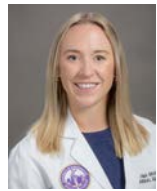
Dr. Jeffrey Farooq
Preliminary Surgery



Dr. Michael Finnan
Plastic Surgery



Dr. Grace Frecentese
Plastic Surgery



Dr. Christina Grabar
General Surgery



Dr. Vibol Heng
Preliminary Surgery



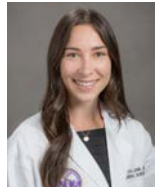
Dr. Liam Hovey
Preliminary Surgery



Dr. Samantha King
Plastic Surgery



Dr. Danielle Krakosky
General Surgery



Dr. Olivia Lane
Preliminary Surgery



Dr. Sanaa Mansoor
Preliminary Surgery



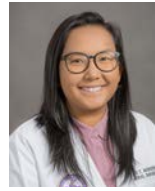
Dr. Flora Martz
General Surgery



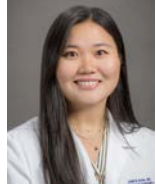
Dr. Thomas McNally
General Surgery



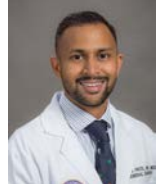
Dr. Anthony Menghini
Preliminary Surgery



Dr. Frances Tiffany Morden
Preliminary Surgery



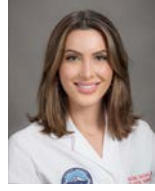
Dr. Janice Nam
Vascular Surgery



Dr. Mahul Patel
Preliminary Surgery



Dr. Alexandra Phocas
Vascular Surgery



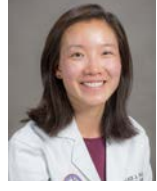
Dr. Rachel Segal
Plastic Surgery



Dr. Prithvi Shetty
Preliminary Surgery



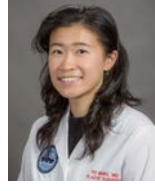
Dr. Ian Smith
Preliminary Surgery



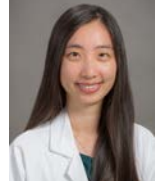
Dr. Alice Tao
General Surgery



Dr. Rut Thakkar
Preliminary Surgery



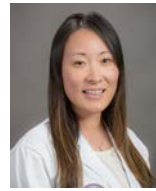
Dr. Fei Wang
Plastic Surgery



Dr. Sarah Watanaskul
General Surgery



Dr. Philip Whalen
Preliminary Surgery



Dr. Jolan Wu
Preliminary Surgery



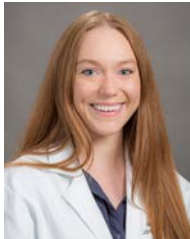
Dr. Betelhem Yohannes
General Surgery



Department of Surgery

New Residents Highlight

This is an exciting time of the year for the department as our new residents begin their training. Several of our new residents gave insights to their goals.



Naima Alver, MD, R1

Division of Cardiothoracic Surgery

Why did I choose UW DoS residency?

UW residency is the best of all the worlds. There is a large case volume with a variety of highly complex cases, so I knew I would get incredible training, and the culture is incredible. I think it is the only program that has the perfect balance of both.

What excites me the most regarding my residency?

I cannot narrow it down to one thing! I am honestly very excited about everything involved in becoming a cardiothoracic surgeon: managing patients, my surgical technique, really all of it! And I have the best co-residents to grow with and learn from.

Why do I want to be a surgeon?

I love how surgery can fix a problem in an afternoon. The delta is incredible! Especially in cardiothoracic surgery. We have the sickest patients and after surgical intervention, it's as if they're an entirely new person. You can have a variety of big open cases, tiny vessel anastomoses, and robotics!



Otatade Bello, MD, R1

Division of General Surgery

Why did I choose UW DoS residency?

I came to the UW as a SUB-I in the fall of 2022 and had an amazing experience with both the residents and attendings. I got to experience the supportive and enriching learning environment that UW offers firsthand and knew it would be a great fit for me.

What excites me the most regarding my residency?

I am excited about taking care of patients and continuing to learn how to best care for complicated patients. I am also excited about taking up projects that will further allow me to explore my interests in global surgery and pediatric surgery.

Why do I want to be a surgeon?

I want to help patients in a way that is only unique to surgeons. I love the hands-on nature of surgery and the amount of medical knowledge required to perform operations and care for patients postoperatively. I also love the aspect of having a good OR playlist going while operating.



Vibol Heng, MD, PhD, R1

Division of General Surgery

Why did I choose UW DoS residency?

I chose UW DoS Residency because of its excellence in surgical training, distinguished faculty, and diverse clinical experiences. The strong emphasis on education, research, and patient care provides me with an exceptional learning environment to develop surgical skills, knowledge, and leadership abilities, paving the way for a successful surgical career.

What excites me the most regarding my residency?

What excites me the most regarding my residency is the opportunity to acquire extensive knowledge and hands-on experience in various surgical procedures. The chance to work alongside skilled surgeons, collaborate with a multidisciplinary team, and make transformative impacts on patients' lives fills me with excitement and a sense of purpose.

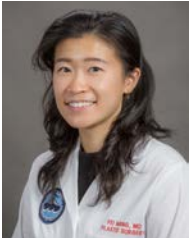
Why do I want to be a surgeon?

Being a surgeon allows me to combine my love for medicine, problem-solving, and helping others. I am drawn to the precision, complexity, and lifelong learning linked to the surgical field. I believe that having the ability to directly intervene and significantly impact patients' lives through surgical procedures is incredibly fulfilling.

(continued on page 12)



Department of Surgery – New Resident Highlights



Fei Wang, MD, R1
Division of Plastic Surgery

Why did I choose UW DoS residency?

As an away student rotating at UW, I saw residents of all levels make independent decisions in and out of the OR with a high level of autonomy, expertise, and creativity qualities I admire and hope to gain through my training here.

What excites me the most regarding my residency?

I am excited to be surrounded by attendings who are renowned in their fields and who value mentorship, as well as residents who are incredibly knowledgeable, skilled, and who have been so supportive and welcoming during my first days of residency.

Why do I want to be a surgeon?

I wanted to be in a field where I can work with my hands, find creative solutions to problems, and help patients live a life that they find meaningful. Being a surgeon will allow me to do all of that and more.



Michael Finnan, MD, MS, R1
Division of Plastic Surgery

Why did I choose UW DoS residency?

I chose UW plastic surgery because of how genuine and fiercely supportive the residents and faculty are of one another, the incredibly diverse and high-volume operative experience, and because my husband and I absolutely love living in Seattle.

What excites me the most regarding my residency?

I'm excited to finally have real ownership of my patients and to learn from attendings and senior residents across a wide array of surgical disciplines. My interests within plastic surgery are still fairly broad, so I'm excited to see how my experiences this year will help shape my interests going forward.

Why do I want to be a surgeon?

I want to be a surgeon because I enjoy the creativity that comes with tackling complex surgical problems and being able to provide a definitive solution that helps give a patient a longer or higher quality of life is a unique and gratifying privilege.



Janice Nam MD, R1
Division of Vascular Surgery

Why did I choose UW DoS residency?

UW DoS provides top-notch training to develop not only excellent surgeons but also confident leaders. During my sub-internship at UW, I felt immediately welcomed by the community. I knew UW would equip me to become a competent and confident surgeon by serving the diverse patient population in the WWAMI region with world-class surgeons.

What excites me the most regarding my residency?

I'm most excited about building long-lasting relationships with my co-residents and mentors.

Why do I want to be a surgeon?

Becoming a surgeon not only requires medical decision-making skills but also technical surgical skills. I am fascinated by the evolving skills in the field of surgery and management of surgical patients.



Department of Surgery

Welcome 2023-24 Surgery Fellows

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



Dr. Erin Anstadt
Craniofacial Surgery



Dr. Nicole Chicoine
Pediatric Surgery Research



Dr. Mustafa Chopan
Microvascular Surgery



Dr. Callistus Ditah
Adv Cardiac Fellow



Dr. Nishant Dwivedi
Hand Surgery



Dr. Claire Faltermerier
Cardiothoracic Surgery



Dr. Christopher Fleury
Hand Surgery



Dr. Melissa Forde
Trauma/Critical Care



Dr. Jolanta Gorecka
Cardiothoracic Surgery



Dr. Daniel Kaufman
Abdominal Transplant



Dr. James Kenny
Trauma/Critical Care



Dr. Andrew Linkugel
Craniofacial Surgery



Dr. Alex Lois
Adv Gastrointestinal MIS



Dr. Chris Marfo
Trauma/Critical Care



Dr. Heather Matheny
Vascular Surgery



Dr. Vanessa Miller
Congenital Cardiac



Dr. Alex Morzycki
Burn/Critical Care



Dr. Nzuekoh Nchinda
Pediatric Surgery Research



Dr. Jamie Oh
Burn/Critical Care



Dr. Graham Skelhorne-Gross
Trauma/Critical Care



Dr. Rebecca Sorber
Vascular Surgery



Dr. Alan Utria
Pediatric Surgery



Dr. Laura Wong
Hand Surgery



Dr. Jenny Yu
Hand Surgery



Department of Surgery

Education Staff Highlight

“The Department of Surgery will provide compassionate and high quality patient care, train future generations of surgical leaders and conduct research in a collegial environment which embraces diversity and promotes inclusiveness.”

The education portion of the department's mission, “train future generations of surgical leaders,” is a core component of our values and is embedded in our commitment to patient care, and to surgical research that advances the field. The Department of Surgery's education staff play a large part keeping the department on track to this mission dedication.

Our education staff shared their roles and inspirations to describe how they maintain the department's commitment to excellence in education.



JOANNA AMES

What is your role in your DoS education program?

My title, Manager, General Surgery Residency Program encompasses quite a

bit. My main focus includes recruitment, onboarding and offboarding, creating rotation schedules, co-managing the non-clinical leave and coverage systems, as well as ensuring each of our residents meet educational requirements necessary to apply for their boards.

What inspires you in your role?

I've been in this role a little over four years and I'm inspired that the job has evolved each year. While the basic tasks are the same (every year we recruit, onboard and offboard, etc.), the actual processes are evolving and each year I'm able to add my stamp to the role.



KAY BURKE

What is your role in your DoS education program?

I am the Program Administrator for the Cardiothoracic Surgery Education

programs: the cardiothoracic residency, fellowship, MCS/Transplant Fellowship, and the Advanced Cardiac Surgery fellowship. I am also the program administrator for the Abdominal Transplant fellowship. I organize the recruitment each year for each of these programs. Additional to recruitment, I onboard and offboard trainees to and from their roles. My duties also include complying with lots of GME and ACGME reporting.

What inspires you in your role?

What I enjoy most in my role is working with the trainees and creating relationships with the program directors and faculty. The trainees are all roughly the ages of my children, so they feel like my people!



KRISTELLE CALMA

What is your role in your DoS education program?

I am the Education Site Manager at Harborview Medical Center for the General Surgery Residency Program.

What inspires you in your role?

The education staff and faculty and working with them to be able to come up with new and updated ways to streamline and improve the general surgery program.



EVA CHILDERS

What is your role in your DoS education program?

I work in a hybrid role for Plastic Surgery, managing aspects of both the

residency program and division operations. I manage numerous credentialing and scheduling tasks, as well as larger projects like budgeting, policy review, and process improvement.

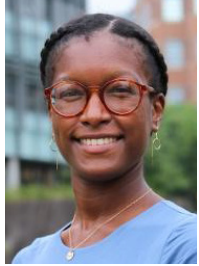
What inspires you in your role?

The collegiality and dedication among DoS Education staff inspire me.

(continued on page 15)



Department of Surgery – Education Staff Highlight



ARYN COOPER

What is your role in your DoS education program?

I am the Manager of the Center for Video Endoscopic Surgery’s two fellowship programs: the Advanced Gastrointestinal Minimally Invasive Surgery/Foregut (Adv GI MIS/Foregut for short!) Fellowship and the Esophageal Research Fellowship.

What inspires you in your role?

I get to work with some amazing fellows that move forward to do incredible things. Hearing about what our fellows are doing after they graduate and the skills that they take from our program is always inspiring to me and helps me feel like I’m doing something impactful and important.



MARGOT DUBOIS

What is your role in your DoS education program?

Program Administrator, Surgical Critical Care Fellowship.

What inspires you in your role?

My fellow program administrators, especially Anne Long. She has been a superior mentor and colleague, doing phenomenal work. The Trauma/Burn faculty are also an inspiration. Their passion for teaching and mentoring the Surgical Critical Care fellows is unparalleled. Program leaders Drs. Deepika Nehra, Saman Arbabi, Erika Bisgaard, Bryce Robinson, and Tam Pham, are wonderful to work with.

ANNE LONG (PHOTO NOT AVAILABLE)

What is your role in your DoS education program?

I’m a Senior Program Administrator for the Vascular Surgery Residency and Fellowship programs. I also work on education projects.

What inspires you in your role?

What inspires me is the commitment and perseverance of our trainees and our faculty.

- The trainees are pushed to their limits, mind, body and spirit, and they keep going; they stay engaged and I know it’s a confronting, exhausting experience. The way they care for our patients shows their commitment to making a difference while doing excellent work.
- The faculty— especially education leadership, engage deeply in our programs. They are profoundly committed to our trainees and it’s a LOT of work! Their commitment, wisdom and guidance is invaluable; those things, and the fact that they genuinely care about our trainees makes the whole experience one I’m honored to be a part of.



KARINA MARTINEZ

What is your role in your DoS education program?

I am the Program Administrator (PA) for the Plastic Surgery Integrated Residency

Program. I work very closely with my partner PAs, Program Director and the GME office to ensure our program meets annual training requirements and supports resident life work balance. I’ve been in the UW Plastic Surgery family since 2007 in all capacities. I’m only a few months into this role and it’s still surreal.

What inspires you in your role?

Aside from my daughter, the people who inspire me the most in my role are these amazing young women surgeons I support. They are doing everything 24 hours a day—I’m glad I can be their person when an issue arises. I look forward to continuing to support the program and I am very excited for what the future brings—especially as I learn how to advocate for equal representation in plastic surgery.



LINH PHAN

What is your role in your DoS education program?

I am a Program Operations Specialist—I split my time between the Education

Division and General Surgery Program. I am in charge of a few projects such as coordinating Ski Day, Annual Education Seminar, managing residents’ verifications and I support Dr. Rebecca Petersen, Program Director, General and Preliminary Surgery.

What inspires you in your role?

What inspires me is knowing I am part of an important process helping our residents go through their residency and providing them support in what they need to transition into their specialties. My position is also structured so I am always learning new things, which is rewarding.

(continued on page 16)

Department of Surgery – Education Staff Highlight



KAITLIN R. REE

What is your role in your DoS education program?

“I have been employed with the department for nearly 8 years, the General Surgery Education

Team for over 5 years, and I recently accepted a promotion in July 2023, as the Manager of Accreditation and Compliance for the General Surgery Program. As the Manager of Accreditation and Compliance for the General Surgery Residency Program, I oversee accreditation and ensure compliance with various bodies, including the Accreditation Council for Graduate Medical Education (ACGME), American Board of Surgery (ABS), and competency-based admissions (CBA). I work with my colleagues and faculty leadership to foster a high-quality educational environment for our General Surgery trainees. I collaborate closely with faculty leadership to ensure our program meets accreditation requirements and residents meet their own training requirements effectively.”

What inspires you in your role?

As a residency program manager, I find immense inspiration from our dedicated and passionate surgery residents. Our residents exhibit a remarkable blend of resilience and compassion, tackling complex cases with a determined spirit and a caring touch. Their willingness to embrace challenges head-on and their pursuit of excellence remind me every day of the transformative power of medical education. It is a privilege to support and guide these junior surgeons on their journeys, and their unwavering dedication serves as a constant reminder of the profound impact that medical professionals can have on the lives of patients.



KHAILA SAKAMOTO

What is your role in your DoS education program?

I am a newly appointed Program Operations Specialist for the Breast and Plastic Surgery

teams. As the Plastics POS, I also support the Microsurgery Fellowship as a Program Administrator.

What inspires you in your role?

Helping my team any way I can, no matter how big or small, is what inspires me each day. If I can make their day run smoother so they can, in turn, help more people, my cup is full.



KRISTEN J. SEILER

What is your role in your DoS education program?

I am the Medical Student Program Manager. I manage the required and elective clerkship

rotations in Seattle and WWAMI, and I assist in advising students who plan to apply to General Surgery. I also work with the Clerkship Director on strategic planning of the program, such as opening new rotation sites, addressing student concerns, and identifying areas for potential improvement.

What inspires you in your role?

I enjoy working closely with the faculty to make sure students enjoy their clerkship rotations while getting a beneficial educational experience. Medical school can be a challenging and stressful time for students, and I like being a source of information, direction, and support for them. Also, I am learning more about the specifics of advising students applying to General Surgery, and I find it extremely rewarding to guide them through the application process and the next steps to becoming a resident.

New Research Residents

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.



ALEXANDRA H. HERNANDEZ, MD

Dr. Hernandez is a PGY-4 General Surgery Resident beginning her research years as a [Surgical Outcomes Research Center \(SORCE\)](#) T32 Fellow. She is

originally from Southern California, attended the University of Washington for undergraduate studies, Oregon Health and Science University for medical school, and returned to UW for General Surgery Residency. She has a background in qualitative work through prior education research and completed an ethnographic study on gender bias involving structural competency, which introduced her to Trauma Informed Care. This work ignited her interest in the care of traumatically injured patients, focusing on mental health and functional recovery after injury.



NZUEKOH N. NCHINDA, MD

Dr. Nchinda is a research fellow at the Seattle Children's Hospital Division of Pediatric General Surgery under the mentorship of Dr. [Matthew Dellinger](#), Assistant

Professor, Division of Pediatric Surgery, who is leading clinical research through the Interdisciplinary Airway and Esophageal Center. Dr. Nchinda's research interests include optimization of systems-based clinical management, and quality of life metrics in patients with congenital aerodigestive malformations and thoracic pathologies. During her research fellowship, Dr. Nchinda will also complete a Master of Public Health in Health Services with a concentration in Health Systems and Policy at the University of Washington School of Public Health. Dr. Nchinda plans to pursue a fellowship in Pediatric Surgery and continue a career in academic surgery.



DIVYA RAMAKRISHNAN, MD

Dr. Ramakrishnan is a T32 research fellow in [Gastrointestinal Surgical Outcomes Research](#) funded by the National Institute of Diabetes and Digestive and Kidney

Diseases (NIDDK) in the [Surgical Outcomes Research Center \(SORCE\)](#) under the guidance of Dr. [David Flum](#), Professor in the Division of General Surgery. Dr. Ramakrishnan's research interests include digital communication for patient education, resident and medical education, team communication, and wellness. During her fellowship, she will also complete a Master of Science in Health Services at the University of Washington.



HANNAH WILD, MD

Dr. Wild is a research fellow in the [UW Rural Surgery Track Fellowship](#) in the Division of Trauma, Burn, and Critical Care Surgery in partnership with the Billings Clinic in Montana. She is

under the mentorship of Dr. [Barclay Stewart](#), Assistant Professor, Division of Trauma, Burn & Critical Care Surgery, and supervising Billings Site Director Dr. Gordon Riha. Dr. Wild pursues this clinical training in rural surgery in support of her long-term career objectives to work in low-resource settings. In her second research year she will be based in an international setting to continue her research related to improving the trauma response to civilian casualties in conflict. Dr. Wild will continue to develop a longitudinal project strengthening linkages between humanitarian mine action and emergency health response to mitigate civilian harm from explosive weapons. This work is undertaken as a core member of the International Blast Injury Research Network and in collaboration with the United Nations Mine Action Service. Dr. Wild plans to pursue a career in trauma surgery, working both clinically and at a policy level to improve humanitarian surgical response for civilians affected by conflict.



Department of Surgery 2023 Chief Residents' Graduation Dinner

On June 24, 2023, the Department of Surgery (DoS) graduating trainees, faculty and education staff gathered for the Chief Residents' Dinner at Bell Harbor International Conference Center. Dr. **Douglas Wood**, The Henry N. Harkins Professor and Chair, welcomed guests and DoS faculty presented awards to the attendees. This annual event celebrates the graduation of all program residents and fellows from some of the top training programs in the nation. A special thanks to the education staff for their dedication to make this a special event:

Kira Baker, Senior Administrator of Operations, Surgical Education Programs/Education Division

Joanna Ames, Manager, General Surgery Residency Program

Kaitlin Ree, Manager, Accreditation & Compliance, General Surgery

Kristelle Calma, Surgical Education Site Manager, Harborview Medical Center

Kristen Seiler, Medical Student Program Manager

Aryn Cooper, Manager of CVES Advanced GI Minimally Invasive Surgery/Foregut and Esophageal research Fellowship Program

Kay Burke, Program Administrator, Cardiothoracic Surgery

Anne Long, Program Administrator, Vascular Surgery

Margo DuBois, Program Administrator, Surgical Critical Care Fellowship

Karina Martinez, Program Administrator, Plastic Surgery

Eva Childers, Education Program & Division Operations, Plastic Surgery

Linh Phan, Program Operations Specialist, General Surgery and Education Division

China Hardison, Program Operations Specialist, Colorectal Surgery & Emergency General Surgery

GRADUATING CHIEF RESIDENTS

PRELIMINARY RESIDENTS

Panayotis Apokremiotis, MD

Luke Edwards, MD

Mark El-Miniawi, MD

Tristan Fielder, MD

Nicklaus Houston, MD

Peter Lee, DO, MS

Luke Mascarenhas, MD, MS

Daniel Mohammadi, MD

Shashank Patil, MD

Lucas Rizkalla, MD

Mariam Saleh, DO, MS

Einav Silverstein, MD

Nihal Thapa, MD

Trey Thompson, MD

Tyler Tryon, DO

DIVISION OF PLASTIC SURGERY INTEGRATED RESIDENCY PROGRAM

Alison Bae, MD
Plans: Microsurgery Fellowship
Stanford University

Sean Fisher, MD
Plans: Aesthetic and Cosmetic Plastic Surgery Fellowship
Dallas Plastic Institute

Ben Massenberg, MD
Plans: Craniofacial Plastic Surgery Fellowship
Children's Hospital of Pennsylvania

Jenny Yu, MD
Plans: Hand Surgery Fellowship
University of Washington

DIVISION OF VASCULAR SURGERY INTEGRATED RESIDENCY PROGRAM

Amir Ghaffarian, MD
Plans: Vegas Vascular Surgery Specialists
Las Vegas, Nevada

DEPARTMENT OF SURGERY GENERAL SURGERY RESIDENCY PROGRAM

Matias Czerwonko, MD
Plans: Cardiothoracic Surgery Fellowship
New York Presbyterian Hospital/Cornell University

David Jeffrey Drouillard, MD, MS
Plans: Colon and Rectal Surgery Fellowship
Spectrum Health/Michigan State University

(continued on page 19)



Department of Surgery – 2023 Chief Residents' Graduation Dinner

DEPARTMENT OF SURGERY GENERAL SURGERY RESIDENCY PROGRAM (CONT.)

Justin Kaufmann, DO

*Plans: Rural General Surgeon
Navarro Regional Hospital*

Kevin Paul Labadie, MD

*Plans: Complex General
Surgery Oncology Fellowship
City of Hope Cancer Center*

Alex Wayne Lois, MD, MS

*Plans: Foregut and Bariatric
Surgery Fellowship
University of Washington*

Chris Marfo, MD, MBA

*Plans: Trauma and Surgical Critical
Care Fellowship
University of Washington*

Jamie Oh, MD, MS

*Plans: Trauma and Surgical
Critical Care Fellowship
University of Washington*

GRADUATING FELLOWS

Hira Ahmad, MD

Pediatric Surgery

Mary Kate Bryant, MD, MSCR

Minimally Invasive Surgery

James Clark, MD

Cardiothoracic Surgery

William Crannell, MD

Abdominal Transplant Surgery

John Dimarakis, MD, PhD

Cardiothoracic MCS & Transplant Surgery

Callistus Ditah, MD

Cardiothoracic Surgery

Alix Dixon, MD, MPH

Trauma/Critical Care

CJ Hillenbrand, MD

Vascular Surgery

Dara Horn, MD, MS

Trauma/Critical Care

Molly Hunter, MD, MS

Burn/Critical Care

Megan Miles, MD

Hand Surgery

Travis Miller, MD

Hand Surgery

Risa Reid, MD

Hand Surgery

Lori Rhodes, MD, MS

Burn/Critical Care

Jamie Robinson, MD

Trauma/Critical Care

Miranda Rogers, MD

Hand Surgery

Nallely Saldana-Ruiz, MD, MPH

Vascular Surgery

Paymon Sanati-Mehrziy, MD

Craniofacial Surgery

Ida Wilson, MD

Trauma/Critical Care

Thomas Wright, MD

Microsurgery

Roderick Yang, MD

Congenital Cardiac Surgery

Domenick Zammit, MD, MS

Craniofacial Surgery

2023 GRADUATING CHIEF RESIDENT AWARDS

**HARKINS SOCIETY &
HENRY HARKINS AWARD (EST. 1985)**

*This award is 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.*

Awardee: Bete Yohannes, MD

**DEPARTMENT OF SURGERY RESIDENT
RECOGNITION AWARD FOR MEDICAL
STUDENT TEACHING (EST. 2013)**

*This award is presented biannually to
a Department of Surgery resident of any level
who has had a positive impact on medical
students through teaching and mentoring.*

**Awardees: Thais Calderon, MD,
and Jamie Schnuck, MD**

**RESIDENT ACADEMIC
EXCELLENCE AWARD (EST. 2017)**

*This award is presented annually to those
General Surgery residents who scored in the
85th percentile or greater from across the
nation on the ABSITE exam this year.*

**Awardees: Griffen Allen, MD, Cat Beni, MD,
Mia Bertalan, MD, Jason Carter, MD, David
Drouillard, MD, Kristin Goodsell, MD, Chris
Little, MD, Paul McClure, MD, Josh Rosen,
MD, Ben Vierra, MD, Jamie Oh, MD**

**JOHN K. STEVENSON FACULTY
TEACHING AWARD (EST. 1989)**

*This award is presented in memory of
former faculty member John K. Stevenson,
and salutes faculty teaching excellence and
dedication to resident education.*

Awardee: Kathleen O'Connell, MD, MPH

**ANNUAL HARBORVIEW HOUSE
STAFF ACHIEVEMENT AWARD**

*This award is presented annually to a resident
for their "extraordinary clinical ability and
humanitarian concern," as best shown
through their exemplary care provided to
Harborview Medical Center's patients.*

Awardee: Chris Marfo, MD, MBA

**THE DAVID TAPPER RESIDENT TEACHING
& LEADERSHIP AWARD (EST. 2003)**

*This award is presented to a General
Surgery Chief Resident who exemplifies
the teaching and leadership qualities
that others seek to emulate.*

**Awardees: Chris Marfo, MD, MBA,
and Jamie Oh, MD, MS**



Department of Surgery Harkins Corner



[Jonathan Sham, MD, MBEE](#)

Assistant Professor
Division of General Surgery

Dr. Jonathan Sham was recently appointed as President of the Henry Harkins Surgical Society (HHSS) - the Department of Surgery's (DoS) alumni organization. This position provides executive oversight and guidance for the HHSS. Some of the qualities necessary for success in this position are strong communication and leadership skills, characteristics of Dr. Sham.

Dr. Sham also exhibits strong fundraising skills. While attending the University of Pennsylvania School of Medicine, he served as president of the Agnew Surgical Society, the oldest surgery interest group in the country. Dr. Sham's activities and coordination efforts as president of the society, raised nearly \$250,000 over a three-year period. Funds were used to advance research and clinical programs.

Dr. Sham started his tenure at UW during residency and after a Fellowship at John Hopkins in complex General Surgical Oncology and a second Fellowship in Hepatopancreatobiliary Surgery (at Johns Hopkins), Dr. Sham returned to the Pacific Northwest and joined the DoS as a faculty member. Dr. Sham is an Assistant Professor in General Surgery and is board-certified in hepatobiliary and complex surgical oncology.

With his background in fundraising and leadership skills, Dr. Sham is primed to successfully execute the responsibilities of this position!

Please consider a contribution to support Harkins activities for our chief residents and alumni.



When completing your gift, please enter "Apply to Chief Residents" in the Comments/Special Instructions field.

Thank you.



Department of Surgery Grand Rounds



August 2023

["A Surgical Scientist's Tale of the COVID-19 Pandemic: Making Lemonade When Life Gives You Lemons"](#)

[Scott Brakenridge, MD](#)

Associate Professor of Surgery
Division of Trauma, Burn & Critical Care Surgery
University of Washington



July 2023

["Academic Surgery and DEI: Current and Future Directions?"](#)

[Wendy Chen, MD, MS](#)

Assistant Professor of Plastic Surgery
Department of General Surgery
Division of Plastic and Reconstructive Surgery
Children's Memorial Hermann
Hospital Pediatric Plastic Surgery



June 2023

["Spinal Cord Ischemia: The Achilles' Heel of Thoracoabdominal Aortic Repair, or Just Another Hurdle??"](#)

[Adam Beck, MD](#)

Professor of Surgery
Department of Surgery
University of Alabama at Birmingham



May 2023

["Entrustable Professional Activities: Why, What, How and SO What?"](#)

[James R. Korndorffer, Jr. MD, MHPE](#)

Vice Chair, Education
Department of Surgery
Stanford School of Medicine
University of Washington

DIVERSITY IN DoS



Estell Williams, MD

Vice Chair, Diversity, Equity, and Inclusion

DEPARTMENT OF SURGERY DIVERSITY COUNCIL

DIVERSITY COUNCIL HISTORY

The Department of Surgery (DoS) Council on the Promotion of Diversity and Inclusion ([Diversity Council](#)) was created in January 2013 under the leadership of Dr. **Carlos Pellegrini**, Professor Emeritus and former Chair of the Department of Surgery (1993-2015) to establish and report on best practices and metrics to fully integrate and assure the promotion of diversity, equity, and inclusion in our department. The council has grown to include staff, residents, and faculty from the subspecialty divisions within the Department of Surgery.

EVOLUTION OF THE DIVERSITY COUNCIL

Under the guidance of the CMO's office and the leadership of Drs. Carlos Pellegrini and [Dave Flum](#), Professor, Division of General Surgery, UW Medicine created a [Healthcare Equity Blueprint](#) in alliance with the University of Washington campus wide [UW Diversity Blueprint](#). These blueprints guide ongoing efforts to promote diversity and inclusion in our university community. As an overarching framework, this blueprint sets forth that *"The School values diversity and inclusion and is committed to building and sustaining an academic community in which teachers, researchers and learners achieve the knowledge, skills and attitudes that value and embrace inclusiveness, equity and awareness, as a way to unleash creativity and innovation."*

To further this mission, Dr. [Douglas Wood](#), The Henry N. Harkins Professor and Chair, delegated the Diversity Council with reviewing and evaluating the culture of diversity and inclusion in UW Department of Surgery, outlining recommendations for how to best make the department and UW Medicine a place that encourages career advancement and supports employee satisfaction. This will enable our department to accomplish several objectives:

- Establish and report on best practices and metrics on diversity and inclusion.
- Work with leadership to ensure policies and practices are aligned with ongoing promotion of diversity and inclusion.
- Provide ongoing evaluation of departmental composition and advancement to guide recruitment, retention, mentorship, and faculty development.

Develop strategic programming that ensures DoS curricular efforts are aligned with those in the UW community at large. Presently, the Council members include DoS faculty, staff, residents, and UW Campus Healthcare Equality Members.

2023-2024 DIVERSITY COUNCIL MEMBERS

Dr. Elina Quiroga, Associate Professor,
Division of Vascular Surgery
(Current Chair, Founding member)

Dr. Kathleen Berfield, Assistant Professor
Division of Cardiothoracic Surgery

Dr. Giana Davidson, Professor,
Division of General Surgery

Dr. Andre Dick, Professor,
Division of Transplant Surgery, Surgeon-in-Chief
Seattle Children's Hospital *(Founding member)*

Deci Evans, Administrative Manager,
Division of Trauma, Burn and Critical Care Surgery

China Hardison, Program Operations Specialist,
Division of General Surgery,
EGS/Colorectal Montlake

Dr. Suzanne Inchauste, Assistant Professor,
Division of Plastic Surgery

Dr. Colette Inaba, Clinical Assistant Professor,
Division of General Surgery

Tea Florence Morland, Program Operations
Specialist, Division of Trauma, Burn &
Critical Care Surgery

Dr. Mukta Krane, Associate Professor,
Division of General Surgery

Dr. Harveshp Mogal, Associate Professor,
Division of General Surgery

Dr. Brant Oelschlager, Professor, Division Chief,
Division of General Surgery

Dr. Lara Oyetunji, Assistant Professor,
Division of Cardiothoracic Surgery

Dr. Tam Pham, Associate Professor,
Division of Trauma, Burn & Critical Care Surgery

Dr. Beth Ann Reimel, Clinical Assistant
Professor, Division of Trauma, Burn &
Critical Care Surgery

Dr. Jorge Reyes, Professor Emeritus
(Founding member, Immediate Past Chair)

Dr. Elina Serrano, Resident R3
Division of General Surgery

Dr. Rebecca Stark, Assistant Professor,
Division of Pediatric General Surgery,
Seattle Children's Hospital

Dr. Nam Tran, Associate Professor,
Division of Vascular Surgery
(Founding member)

Dr. Denzel Woode, Chief Resident
Division of General Surgery

Dr. Estell Williams, Assistant Professor,
Division of General Surgery,
Vice-Chair, Diversity, Equity, & Inclusion (DEI)

Dr. Andrew Wright, Professor,
Division of General Surgery

Dr. Peter Wu, Associate Professor,
VA Puget Sound Health Care System
(Founding member)

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DIVERSITY IN DoS

HIGHLIGHTING OUR #B.A.B.E.S INITIATIVE

One way in which the Diversity Council seeks to provide an inclusive culture and foster community building, belonging and professional development of our residents and fellows that self-identify as underrepresented minority (URM) in medicine, is through **#B.A.B.E.S (Black and Brown Excellence In Surgery)**.

B.A.B.E.S members convene monthly over a casual dinner to spend quality time with each other outside of the hospital setting. These monthly dinners are held either in the home of a faculty member or at a minority owned restaurant in the community, thereby helping our trainees explore and learn more about the communities they serve. This event, paid for by a sponsoring faculty member, has come to be cherished by our resident and fellow community as an invaluable part of their residency experience.

Additionally, while offering a social space to build community, sessions are held every other month on a professional development topic of the trainees' choice. This has included a diverse range of topics such as navigating difficult relationships with superiors, contract negotiations, and understanding how to excel on UW specific rotations. These sessions are led by chief residents for juniors. We also welcome any URM in medicine trainees, including those who identify with, gender, gender orientation, or religious groups and their allies.

OUR FUTURE INITIATIVES

The Diversity Council seeks to continue our initial charge while also growing to meet the needs of our expanding DoS community and the ways in which we incorporate DEI into all we do. We have many initiatives for the coming year:

- Expanding DEI-focused research opportunities for our trainees.
- Enhancing the [Carlos A. Pellegrini Diversity Sub-Internship](#) for URM in surgery fourth year medical students to include additional professional development with capstone scholarly work (such as presenting on a scholarly topic to the DoS) and more direct mentorships by faculty interested in mentoring students.
- Amplifying the work of our department within the DEI space to ensure we are communicating all the amazing work our faculty and residents are doing.
- Highlighting the contributions of diverse surgeons to academic surgery through the Diversity Grand Rounds series.
- Supporting the **West Coast Collaborative Visiting Professor Program**. This program is in partnership with UC Davis, UC San Francisco, Stanford, Oregon Health & Science University (OHSU) and UW. The program's goal is enhancing career development of URM and women early and mid-career faculty by selecting individuals from each institution to be hosted as a visiting professor at one of the partner institutions. Dr. Teresa Kim Assistant Professor, Division of General Surgery, was the 2022 recipient—she presented at OHSU.

Year 1 - 2022	Year 2 - 2023	Year 3 - 2024	Year 4 - 2025
UCD to UW	UCD to OHSU	UCD to UCSF	UCD to Stanford
UW to OHSU	UW to UCSF	UW to Stanford	UW to UCD
OHSU to UCSF	OHSU to Stanford	OHSU to UCD	OHSU to UW
UCSF to Stanford	UCSF to UCD	UCSF to UW	UCSF to OHSU
Stanford to UCD	Stanford to UW	Stanford to OHSU	Stanford to UCSF

- Providing Cultural Complications conferences at UW Medical Center-Montlake and Harborview Medical Center (HMC) to explore DEI topics that improve patient care and surgery culture within the DoS.
- Supporting the Endowed Fellowship for Diversity in Surgery-- a funding opportunity (up to \$10K per year, renewable) for URM in the DoS at all career stages (residents, fellow and faculty with preference for junior faculty) to support leadership training, research startup funds or funding gaps, advanced clinical training, education training, other research training or recruitment funds. Please keep an eye out for the formal call for application from the [Office of Healthcare Equity](#).
- Enhancing professional development, inclusion and belonging of our LGBTQIA+ trainees/ faculty, through departmental initiatives as well as participation as an institutional member of the Association of Out Surgeons and Allies (AOSA). The AOSA is an organization of LGBTQ+ Surgeons and allies which promotes acceptance, inclusion, and equity in the surgical specialties to further learner engagement, support individual clinicians and researchers, and build a thriving community of academic LGBTQ+ surgeons and leaders. Through our active partnership with AOSA, we hope to further the understanding of the LGBTQ+ experience in surgery, implement strategies that promote inclusivity at the individual, department and institutional level and provide opportunities for education, mentorship, training, and advancement of LGBTQ+ folks at all levels of career development.
- Enhancing professional development, mentorship and sponsorship of our African American trainees/faculty through our institutional membership with Society of Black Academic Surgeons. This membership allows unlimited job postings to allow for more recruitment of individuals affiliated with the organization, three complimentary annual dues payments for three residents/fellows, three complimentary meeting registrations for three residents/fellows/students at the annual meeting, among other benefits.
- Enhancing professional development, mentorship, and sponsorship of our Latinx trainees/faculty through our institutional membership with the Latino Surgical Society. We are excited to announce we will be the institutional host for the Latino Surgical Society Symposium May 17-19, 2024. Please be on the lookout for more information and ways to be involved in this effort. If you would like to assist with planning, please reach out to our council chair.

HOW TO GET INVOLVED

We welcome new thoughts, ideas, and passions to help us continue to grow the Diversity Council and the mentorship we offer our B.A.B.E.S. trainees. If you are a faculty, resident, fellow, or staff member interested in joining the Diversity Council we now have an open call for new members. Please send a **statement of interest** to Dr. Elina Quiroga, Council Chair at elinaq@uw.edu. If you would like to host a B.A.B.E.S session with a professional development topic that you feel would be useful for our residents, please reach out to Dr. Estell Williams at estellw@uw.edu.



Department of Surgery Community

To celebrate our commitment to community, the Department of Surgery’s Recognition Team coordinated the department’s annual picnic which was held in July at Magnuson Park.

This annual event brings faculty, trainees, staff, and their families together to appreciate our community by getting to know each other outside of our work sites over scrumptious food and fun activities.

This year’s picnic was catered by Dante’s Inferno Dogs that provided tasty items such as their signature “Big Dogs” and “Everything Baked Potatoes.” And what is a picnic without treats? The Recognition Team brought tasty treats including snow cones and soft drinks and set-up fun activities such as a cornhole tournament, arts and crafts, bubbles, and balloon animals for everyone to enjoy under the sun.

A sincere thank you to the department’s Recognition Team—Deci Evans, Tea Florence-Moreland, Anne Haven, and Sydney Kaser, for coordinating another spectacular picnic and to those who were able to attend making it a another special event.



WELCOME

NEW FACULTY



YONG K. KWON, MD

ASSOCIATE PROFESSOR
DIVISION OF TRANSPLANT SURGERY

Yong K. Kwon, MD, FACS, joined Seattle Children's Transplant Surgery Division in June 2023 as Surgical Director of Pediatric Liver Transplantation. Additionally, he serves as Director of Clinical Innovation in Organ Perfusion and Procurement in the Transplant Surgery Division at the UW Medical Center and Seattle Children's Hospital.

Dr. Kwon earned his MD degree from Georgetown University School of Medicine, where he also completed his general surgery residency, followed by a transplant and hepatopancreaticobiliary fellowship.

Prior to joining Seattle Children's Transplant Surgery Division, Dr. Kwon served as a faculty member at the University of Southern California and Children's Hospital Los Angeles, one of the top pediatric and living donor liver transplant centers in the United States. In addition, he served as a surgical co-director of the living donor liver transplant program and as a quality director for the division. Dr. Kwon's expertise lies in performing segmental and split liver transplants, as well as living donor transplants. He is a passionate supporter of organ donation and actively advocates for the development of allocation policies that prioritize the welfare of children.



JOHN W. SCOTT, MD, MPH

ASSOCIATE PROFESSOR
DIVISION OF TRAUMA,
BURN & CRITICAL CARE SURGERY

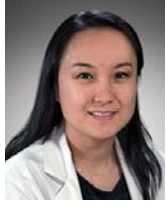
John W. Scott, MD, MPH, is a trauma surgeon, surgical intensivist, and surgeon-scientist who has returned to the University of Washington to join the

Division of Trauma, Burns, and Critical Care Surgery at Harborview Medical Center (HMC).

Dr. Scott grew up in South Carolina and attended college at Harvard University where he was a varsity letter winner in football and track. After earning his MD at Vanderbilt, he completed his general surgery residency at the Brigham and Women's Hospital in Boston, MA. While in residency, Dr. Scott obtained an MPH at the Harvard School of Public Health and completed a research fellowship at the Center for Surgery and Public Health.

Dr. Scott was fortunate to complete his fellowship in Trauma and Surgery Critical Care at HMC in 2018-2019, and after fellowship, he joined the faculty at the University of Michigan where he co-founded a statewide coalition to address unmet social health needs for surgical patients.

Dr. Scott's research focuses on healthcare policy, health services research, and patient-reported outcomes. Dr. Scott's research is being funded through the Agency for Research and Healthcare Quality (AHRQ) career development award and he was recently awarded an R-01 through National Institute of Diabetes and Digestive and Kidney (NIDDK). Dr. Scott looks forward to working at the Surgical Outcomes Research Center (SORCE) and collaborating with researchers at the Institute for Health Metrics and Evaluation to ensure all patients have timely access to high-quality, affordable surgical care. Outside of work, Dr. Scott enjoys hiking through the beautiful Pacific Northwest and watching college football.



Judy Chen-Meekin, MD

Associate Professor
Division of General Surgery

Dr. [Chen](#) practices in metabolic surgery which includes advanced, minimally invasive weight management and

metabolic operations. She is the Associate Medical Director of Clinical Resource Management, UW Medical Center; Associate Medical Director for Infection Control, UW Medical Center; and Affiliate Faculty UW Medicine Diabetes Institute. Nationally, Dr. Chen leads committees on bariatric endoscopy and state chapter leadership for the Society of American Gastrointestinal and Endoscopic Surgeons, and the American Society for Metabolic and Bariatric Surgery.

She is the Associate Clerkship Director in the medical student section of the Division of Education, which is a critical role for the SOM Surgery Clerkships, as well as serving as a Medical Student Career Counselor. She actively participates in obesity education for surgical fellows, residents, and medical students with past contributions to the UW School of Medicine (SOM) Physiology Homeostasis curriculum portion for Obesity and Weight Regulation.

Dr. Chen-Meekin serves as co-Chair of the Surgery Infection Prevention Committee, UW Perioperative Glucose Workgroup, and General Surgery QA/QI Forum which focuses on institution-wide quality improvement initiatives.



Giana Davidson, MD, MPH

Professor
Division of General Surgery

Dr. [Davidson](#) is a general surgeon and section head for Emergency General Surgery.

She is the Assistant Dean for Professional Development in the Office of Faculty Affairs in the School of Medicine and a health services researcher at [Surgical Outcomes Research Center \(SORCE\)](#). She has received funding from AHRQ, NIH, PCORI, CMS, and the Donoghue Foundation, focusing on clinical trials to improve patient-centered health outcomes focusing on the experience of those who are historically and currently minoritized in our health system.

She is an Adjunct Professor in Health Services and Population Health in the School of Public Health. She is the immediate past Chief of Staff at UW Medical Center-Montlake and has led several large initiatives, including the development of UW Medicine's Post-Acute Care Strategy and the UW Medicine Faculty Coaching Program.

She volunteers for several non-profits—recently serving on the board for Aurora Commons, where she focused on implementing harm-reduction interventions. In her free time, she is on the sidelines of her tweens' sporting events, in her pottery studio, urban farm, or escaping to the surrounding PNW mountains and Whidbey Island.



Farhood Farjah, MD, MPH

Professor
Division of Cardiothoracic Surgery

Dr. [Farjah](#) is currently an Endowed Chair in Lung Cancer Research, Associate Medical

Director for the Surgical Outcomes Research Center (SORCE), and the Director of the Thoracic Surgery Rotation at the Montlake campus. His clinical focus is thoracic oncology and minimally invasive surgery. Dr. Farjah teaches and mentors cardiothoracic and general surgery residents and mentors post-doctoral research fellows at SORCE. His research interests include comparative-effectiveness, quality improvement, and risk-prediction in thoracic oncology—all with an eye towards improving patient outcomes and care delivery and increasing the value of care.



Rebecca Maine, MD, MPH

Associate Professor
Division of Trauma, Burn & Critical Care Surgery

Dr. [Maine](#) is a general surgeon who specializes in

trauma surgery and surgical intensive care. She serves as a core faculty member at the [Harborview Injury Prevention and Research Center \(HIPRC\)](#) and the UW [Program for Rural and Global Surgery \(PROGRESS\)](#).

This year she became the Associate Program Director for the DoS General Surgery residency program at Harborview Medical Center, splitting responsibilities with Dr. Lisa McIntyre, Professor, Division of Trauma, Burn & Critical Care Surgery.

Dr. Maine is active in our regional trauma education program, including serving as instructor and course director for our Advanced Trauma Life Support program, as well as Director of the Department of Surgery's Wellness Committee.

Dr. Maine's research focuses on trauma system development both within the U.S. and globally. Her global research efforts in Rwanda and South Africa focus on improving access to quality emergency surgical care in these environments.



Deborah Marquardt, MD

Associate Professor
VA Puget Sound Health Care System

Dr. [Marquardt](#) provides surgical care to veteran patients

at the VA Puget Sound Health Care System (VAPSHCS), with particular expertise in critical care, minimally invasive and robotic surgery, and endocrine surgery. She directs quality initiatives including the enhanced recovery after surgery (ERAS) program in colorectal surgery and the Strong for Surgery program. She is the lead physician consultant for clinical nutrition for the VAPSHCS. She has provided consultation nationally as a member of the VA National Surgery Office General Surgery Advisory Board for the past four years.

Dr. Marquardt has a strong focus on education as an associate program director for the DoS General and Preliminary Surgery residency programs. She chairs the DoS Grand Rounds Program, is the Surgery lead instructor for the SOM's Transition to Residency course, and director of the SOM Surgery Boot camp. She also participates in monthly student lectures for surgery and anesthesia residents rotating on the VA SICU service. She teaches UW Surgery Residency Surgical Science courses, and resident Surgical Skills labs.

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Deepika Nehra, MD

Associate Professor
Division of Trauma,
Burn & Critical Care Surgery

Dr. [Nehra](#) specializes in Trauma, General Surgery and Surgical Critical Care.

She also has specific expertise in complex hernia repair and supports the spine service with anterior exposure of the spine. She is the Program Director of the Surgical Critical Care Fellowship at the University of Washington and Medical Director of the Trauma Surgical Intensive Care Unit at Harborview.

She developed Harborview's first Violence Intervention and Prevention Program, which is a collaborative effort with several community partners and it is now funded by the state of Washington. This program includes several professionals working to support individuals and families impacted by gun violence with the goal of improving long-term outcomes, decreasing repeat injury, and changing life trajectories.

She is active in the regional trauma education program, including being course director for Advanced Trauma Life Support (ATLS) and organizing and teaching the Advanced Surgical Skills for Exposure in Trauma (ASSET) program in collaboration with Madigan Army Medical Center.

Dr. Nehra's research focuses on long-term outcomes, recovery of injured patients, and strategies to address health disparities and support violence prevention for at-risk youth.



Samuel Rice-Townsend, MD

Associate Professor
Division of Pediatric
General Surgery

Dr. [Rice-Townsend's](#) clinical practice includes the

breadth of pediatric general and thoracic surgery with areas of focus in colorectal, critical care and chest wall malformations. He has a subspecialty focus in congenital colorectal and pelvic disorders including anorectal malformations, cloaca and Hirschsprung disease. In this specialty, he serves as an integral part of the high volume

multidisciplinary Reconstructive Pelvic Medicine program at Seattle Children's Hospital and as a leader and researcher at a national level through the Pediatric Colorectal and Pelvic Learning Consortium.

Dr. Rice-Townsend is additionally boarded in surgical critical care and serves in various leadership roles related to this focus, including acting as surgical representative to the ICUs for the Seattle Children's Hospital and as director of ECMO (Extracorporeal Membrane Oxygenator) for the division of pediatric general surgery.

Dr. Rice-Townsend contributes to the development of programs to improve the education of our pediatric general surgery fellows. He supervises Harborview Surgical Critical Care fellows as they rotate at Seattle Children's and was invited as an external expert for the University of Rwanda, School of Medicine to help develop the curricula for a new pediatric surgical fellowship.

He is a core member of the specialty Congenital Diaphragmatic Hernia team and participates in a multidisciplinary research effort aimed at improving care for this complex patient population. He also has an interest and active practice in the care of patients with chest wall malformations, particularly pectus excavatum.



Caitlin Smith, MD

Associate Professor
Division of Pediatric
General Surgery

Dr. [Smith's](#) primary clinical interests focus on pediatric colorectal problems. She

is the Clinical Director of the Reconstructive Pelvic Medicine (RPM) program, which is a multi-disciplinary program and was one of the first in the country to function as a multi-disciplinary unit. Her other clinical interests include oncology, achalasia, chest wall reconstruction, and inflammatory bowel disease.

Dr. Smith is Associate Program Director for the Pediatric Fellowship and Associate Program Director for the General Surgery Residency at Seattle Children's Hospital. She created new medical student rotations in pediatric general surgery, as well as a resident

and student elective rotation in pediatric general surgery specifically directed toward underrepresented minorities. She has mentored research residents as well clinical residents and fellows, successfully guiding them towards podium presentations and submission of manuscripts.

Dr. Smith established a research program in the reconstructive pelvic medicine clinic. Dr. Smith is also the Chair of the Quality Sub Committee of the Pediatric Colorectal and Pelvic Learning Consortium (PCPLC) and recently was elected Chair of the Executive Committee of the PCPLC.



Matthew Sweet, MD, MS

Professor & Section Chief
Division of Vascular Surgery

Dr. [Sweet's](#) clinical interests include thoraco-abdominal and arch aneurysms. Operations performed to treat

these aneurysms are high risk, and helping patients navigate the decision-making about what to do for these aneurysms is something on which he is very focused.

Dr. Sweet is the co-director of the Multidisciplinary Thoracic Aortic Program at UW Medical Center-Montlake, a multi-disciplinary team focused on the comprehensive care of patients with these complex aneurysms. This team is unique in our region and has helped establish UW as a referral center of excellence for advanced treatment of aortic disease.

Dr. Sweet's research interests include the morphology and natural history of thoraco-abdominal aneurysms, as well as improving treatment decision-making for these high-risk aortic conditions. He runs a Physician Sponsored Investigational Device Exemption study utilizing custom made branched and fenestrated stent grafts for the endovascular treatment of thoraco-abdominal aneurysms. He is also the site lead investigator for industry sponsored clinical trials of branched endografts designed for treatment of both thoraco-abdominal and aortic arch aneurysms.

GETTING To Know DoS

SAURABH KHANDELWAL, MD

Associate Professor, Division of General Surgery

Associate Program Director, Education



In your medical education journey, did you always want to be a surgeon? How did you end up in this specialty?

No, at first, I thought I'd be an English professor. A couple of people counseled me about job prospects and such, but I still maintain my love of literature! When I was in medical school in Chicago as a medical student, I had a hard time choosing between surgery and medicine. I initially went the other direction into internal medicine (which is not common for surgeons) and entered my first internship.

I recognized I didn't make the right decision so when I finished my internship, I re-applied and started again in the second internship in surgery, then carried that forward through residency and into my career.

Why did you choose to work for the Department of Surgery?

I was at Northwestern University, in Chicago, for my residency and relocated here to do the esophageal fellowship—the minimally invasive fellowship with Drs. [Brant Oelschlager](#) and [Carlos Pellegrini](#), who was the chair at that time.

I was impressed with the department's culture, and it was in a part of the country I'd never stepped foot in—I was blown away. Everything here is green and blue versus flat, brown, and gray in the mid-west during the fall in the winter months, which are a large part of our seasons. Seattle is close to nature, a very progressive city, and the faculty had relationships with one another I didn't experience in Chicago, or certainly not the professional relationships I was hoping to experience. So, I was really impressed with the culture.

My wife, who is a GI oncologist, and I were both applying for UW Medicine (UWM) jobs at the same time. With Dr. Pellegrini's guidance and mentorship, we were able to get jobs in our respective fields here at UW.

What sparked your interest in metabolic disorders?

In part, it was practical. I didn't think I was going to be a bariatric surgeon. I did the training here to do benign esophageal work—things like anti-reflex operations, diaphragmatic hernias, etc.

I had very meaningful conversations with Drs. Pellegrini and Oelschlager. I'll never forget, I was on the roof of the Moscone Center in San Francisco for the American College of Surgeons meeting, and they said they had a job for me in bariatric surgery. They knew it wasn't what I thought I'd be doing, but they had an opportunity for me here at UWM, where I could eventually take a leadership position in that area of surgery. It was a

great opportunity for us to stay here and eventually take a clinical leadership role as well as develop and grow a program. We took a chance on it, and it paid off.

What are your goals as Education Associate Program Director?

Our goals are to significantly improve the educational offerings in the department and help steer and guide the culture to a better place. I think it's safe to say everyone in medicine feels burned out, and you know, if faculty are burned out, the trainees working with us feel that way too. I know that to be the fact here in our residency programs. We are looking to steer the ship in a different direction, and not only continue to create great surgeons, which we've done for decades, but hopefully make this a more humane process along the way which focuses as much as it can on education. We need to shift the narrative of training so all of us recognize that residents work 'with us' as part of a team – not 'for us.'



Dr. Khandelwal with other DoS surgeons and trainees at a Mariners game.

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GETTING To Know DoS

SAURABH KHANDELWAL, MD

Associate Professor, Division of General Surgery
Associate Program Director, Education



What do you consider to be the most important (or impactful) goal?

Residency education is something that hasn't changed considerably for decades, and that older style of training is less and less compatible with what people need and want to be in society today. There is a need for wellness, and a time for oneself to grow outside of the hospital, but still understand you can be a great physician but also have a life outside of work—whether they be family, hobbies, whatever motivates and interests people. We need to figure out how we calibrate the way we educate people and design our careers to try to accommodate those things. That doesn't take away from the fact that surgical training is rigorous and long and being a surgeon requires considerable dedication and some sacrifice.

What is the best career advice you've ever received?

Kind of tongue in cheek—I've heard a lot of people say ask for forgiveness rather than permission. In some ways, it is better to try to push things along in areas where you think you have a considerable chance of creating positive impact without many negative repercussions—without necessarily asking for explicit permission. Change is hard and initial responses by most people is to say “No” but if someone trusts you with leadership opportunities, I think you ought to take them and try to make changes that are what you think are necessary to move the needle.

Tell us about your most memorable patient/surgery.

Quite a few years ago, we had a gentleman who was quite ill and needed a transplantation. He had class four heart failures and weighed too much to be listed for transplant, so, we were taking care of a very high-risk individual. We were asked to consider performing a metabolic operation to get his BMI down. We were able to perform a safe

operation with careful coordination and planning with UW's heart failure team. He not only made it safely through surgery, but succeeded with weight loss he was eventually listed and received his heart transplant. He was able to get to that next major therapeutic goal he needed to not only save his life, but to extend it. That's one example of gratification that comes to mind in terms of our patients and what metabolic surgery can help with.

What is something you've accomplished this past year you're most proud of?

I would say, as one of the residency Associate Program Directors working with Dr. [Rebecca Petersen](#) who is the Program Director for General and Preliminary Surgery. We have instituted several major changes which I think were long overdue. Just recently we kicked off the first new installment of a completely changed didactic and educational paradigm. This is a process we worked collaboratively with our residents. We gathered data determining the best way to educate residents. For example, what are the best methods and formats to train residents? This was a considerable cultural change for the faculty and

required their input and some sacrifices. Now nearly every resident in the program is available Wednesday mornings for two hours so they can attend this. We looked at where their educational needs were and realized the old way of doing things just really didn't apply to how modern learners build coalitions and listen to people. Change is hard, but you know, we got the faculty and the leadership to buy into this, and it's probably one of the most exciting things that's happened in residency programs in 20 years.

It's a paradigm shift in how we do our didactics. It took a lot of work over the last eight to nine months to get to this point. Getting the right stakeholders involved, getting buy-in from leadership to get this over the finish line. We implemented the new sessions for the first time at the beginning of this new academic year. This is something people said would take us two and a half years to complete and I think, with the residents and Dr. Petersen's leadership, we completed it in about nine months.

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The Khandelwals in Hawaii

GETTING To Know DoS

SAURABH KHANDELWAL, MD

Associate Professor, Division of General Surgery

Associate Program Director, Education



What have you found most challenging in your surgical career?

The area that I struggle with the most is once you come into an official leadership role, for instance my role in the residency program, you have that opportunity where you can kind of “pop the hood.” You see how things work, learning the bureaucracy, the different governing bodies, and you recognize it was easy enough when you’re an outsider to say, “well, that seems like an obvious change that ought to be made in a program, why don’t they just do it?” When you actually are involved in an official capacity, and you actually start to understand how complex it is to even make one change, and it could be as simple as moving one resident from Montlake Hospital to Harborview, or vice versa, or the like, it’s really eye opening, and you really feel the weight of the system. But you also understand the regulatory framework that exists around graduate medical education—a lot of it is necessary but at the same time it’s cumbersome. It’s complicated and learning to navigate through it takes time.

Where did you travel on your most memorable vacation?

I’d say it was a family trip to Spain. Our favorite areas were Seville and Costa del Sol. They were beautiful—great culture, great food, and great weather.

What are you known for professionally or personally?

Professionally, I’m known as one of the bariatric surgeons as there are only two of us in the entire system. At some point we interface with a lot of medical specialties when they send us referrals. I think we’ve solidified a fairly well-known existence within UWM as the metabolic surgery team which includes Dr. [Judy Chen](#), Associate Professor, Division of General Surgery. I think I’m also known for being someone who is collegial and willing to help out colleagues.

Personally, I love a good laugh—I don’t take things too seriously. I think if you take everything too seriously there’s too much to be injured and insulted by in the world around us.

RAPID FIRE

What’s your motto?

Enjoy the ride. I think there’s so much deferment in gratification in medicine. You go 10-20 years educating yourself post high school and put things off. I’m almost 47 years old and I’m at that point in my life where I see friends and colleagues with deteriorating health. You know you’re not as robust as you used to be, so you’ve got to enjoy the ride because you never know when that ride is going to end.

What is the last book you read?

The Red Pony, by John Steinbeck. I read it with my 5th grade son.

What TV show are you watching?

I am trying to get caught up on season two of *Ted Lasso*—I’m a little behind.

What is your go-to snack?

Dulce de Leche ice cream

What is your favorite guilty pleasure?

I love buying guitars—Paul Reed Smith, Gibsons, and Taylor.

Who is your inspiration? And why?

Dr. Carlos Pelligrini—he was our former chair and is now retired. He’s an example of someone who has extraordinary emotional intelligence, knew how to connect with almost anyone, and the way he led people was unlike anything I’d ever seen. Training under him had a profound effect on the values we share in our department. I respect him for many, many things in many areas in his life.

Dr. Pellegrini achieved the absolute, highest echelon of international surgery. He was President of the American College of Surgery—an internationally recognized position. When he’s speaking with you, whether you are a medical student or a chair in another department, you have his undivided attention. That’s a rare quality and certainly in leaders. It was extraordinary to see how he approached issues and work and learn with him.

If a movie was made about your life, who would play you?

I don’t know...Tom Hanks? In some ways I feel like Forrest Gump. Sometimes I feel like a lot of things have gone my way, whether that’s luck or being at the right place at the right time. It’s a bit of a running joke with my wife.



Dr. Deepika Nehra Receives Renewed and Increased Washington State Department of Commerce Office of Firearm Safety and Violence Prevention Grant

Dr. [Deepika Nehra](#), Associate Professor, Division of Trauma, Burn & Critical Care Surgery, was awarded renewed and increased grant funding to support the Harborview Violence Intervention and Prevention Program. This state funding from the Washington State Department of Commerce Office of Firearm Safety and Violence Prevention (OFSVP) will support Dr. Nehra's multidisciplinary efforts to build a Harborview Medical Center-based team dedicated to providing wraparound support services for patients and families impacted by gun violence, in close collaboration with several community partner organizations. The team has received funding in the amount of \$1.6M to support and grow the program over the next two years. This funding will support a growing team that now includes peer support specialists, social workers, resource navigators and mental health specialists dedicated to helping individuals and families impacted by gun violence. The goals of the program are to support individuals and families impacted by gun violence in a holistic and patient-centered way.



Dr. Hannah Wild Represents UW Department of Surgery at United Nations 26th International Meeting of Mine Action National Directors and the Antipersonnel Mine Ban Convention Intersessional Meetings

From June 21-23, Dr. [Hannah Wild](#) represented the University of Washington at the United Nations in Geneva during the 26th International Meeting of Mine Action National Directors and the Antipersonnel Mine Ban Convention (APMBC) Intersessional Meetings. Mine action is the area of humanitarian response under the Global Protection Cluster that works to eliminate landmines, explosive ordnance, and other explosive

hazards such as improvised explosive devices (IEDs.) Demining teams are often the highest level of medical capability in the low-resource conflict settings where they work, and yet have little overlap with the care of civilian casualties. Wild's work addresses this gap through a framework for coordination between the mine action sector and the emergency health response to civilian casualties of explosive weapons. During the proceedings in Geneva, she presented this framework in a plenary session on support for victims of explosive weapons alongside the UN Special Representative for Persons with Disabilities. She also led a side event on implementation of the Oslo Action Plan focusing on emergency medical services with panelists from the World Health Organization (WHO), International Committee of the Red Cross, and delegates from APMBC member states Austria and Uganda. In October, she will travel to Cambodia as an expert panelist on an EU-sponsored delegation to the APMBC Global Victim Assistance Conference to present this collaboration, which will also be highlighted in a forthcoming Lancet correspondence. In the next phase of this project, Dr. Wild will partner with mine action operators and multilateral health organizations, including the International Federation of the Red Cross and WHO, to pilot implementation of layperson first responder trainings for communities affected by explosive weapons in conflict-affected regions of the Sahel.



UW Medical Center Performs First-in-the-World Cath Lab Procedure

On April 27th, [David Elison](#), MD, Division of Cardiology, [James McCabe](#), MD, Professor, Division of Cardiology, [Gabriel Aldea](#), MD, Professor, Division of Cardiothoracic Surgery, and [Elizabeth Bailey](#), MSN, ARNP, UW Medicine Cardiac Clinic, performed a procedure that had never been done before in the world. The procedure included an Electrosurgical Detachment and removal of an implanted Mitraclip, a Transcatheter Mitral Valve Replacement and a Perivalvular Leak repair and ASD Closure.

(continued on page 31)



Dr. Gabriel Aldea

For patients with severe mitral regurgitation, which is a common but also morbid and mortal heart valve condition, the only non-operative solution to date has been a mitralclip, a technology where the anterior and posterior mitral valve leaflets are permanently attached to one another (using a ‘clip’) to occupy the leaky area. Mitralclipping can be extremely effective, but there are certain anatomic scenarios where this technology is not an optimal choice.

Recently, transcatheter mitral valve replacement (TMVR) technologies have come about to address anatomy where a mitralclip is not a good fit. Unfortunately, for patients who have already received a mitralclip but still have severe regurgitation or now have mitral stenosis from their mitralclip (e.g., had a failed procedure), transcatheter mitral valve replacement is no longer an option because the mitralclip is “in the way” across the valve. Open heart surgery can remove a mitralclip but is not a viable option for many older and sicker patients.

For the first time in the world, UW Physicians at UW Medical Center were able to percutaneously dissect out and remove a many years-old mitralclip via the femoral vein and then implant a new transcatheter mitral valve replacement in a gentleman who had no other options and had experienced years of persistent severe mitral regurgitation following a mitralclip performed elsewhere.

This amazing procedure, performed by our extremely talented Cardiovascular Team, provided care that this patient required to live a productive life.

Cynthia Dold, MPP, MPH
*Interim President | UW Medicine Hospitals & Clinics
 Interim Vice President for Medical Affairs
 University of Washington*

Dr. Gabriel Aldea Receives Mitral Foundation–American Heart Association® Mitral Valve Repair Reference Center Award

Dr. [Gabriel Aldea](#), Professor of Cardiothoracic Surgery, Section Chief for Adult Cardiac Surgery, received the prestigious Mitral Foundation–American Heart Association® Mitral Valve Repair Reference Center Award, which recognizes the nation’s best hospitals and surgeons for mitral valve repair surgery. This award acknowledges UW Medicine’s surgical mitral faculty specialist team, which includes Drs. Gabriel Aldea (as lead surgeon), and [Lara Oyetunji](#), Assistant Professor, Division of Cardiothoracic Surgery.

Alongside the UW Medical Center’s surgical mitral specialist team, all valve patients are seen by multiple heart specialists in the joint valve clinic, which includes cardiologists, imaging specialists, and cardiac surgeons. Dr. Aldea is co-leader of the joint valve clinic along with Dr. [James McCabe](#), Director of the Catheterization laboratory, Section chief of Interventional Cardiology in the Division of Cardiology, that leads both repairs and replacement catheter-based mitral valve therapies in the joint valve clinic.

The UW Medicine mitral faculty specialist team’s mitral valve repair rates are 98.6% for all pathologies (The Mitral Foundation and Guideline threshold are 95%), and two-thirds of their patients are for complex pathologies. All of these patients had less than trace MR post repair. In addition, over 50% of patients had concomitant procedures (tricuspid valve repair, AF ablation, LA appendage clip, CABG, etc.) with zero mortality for the past two decades.

UW Medicine Center’s surgical mitral faculty specialist team was certified by the Mitral Foundation in 2022. This is a re-certification, as the award must be re-earned annually based on specific auditable volumes and outcomes. Based on volumes and outcomes, UW Medicine Center’s mitral faculty specialist team was awarded the Mitral Foundation Reference Center Award for the past two years. The foundation currently uses guidelines authored by Dr. [Catherine Otto](#), J. Ward Kennedy-Hamilton Endowed Chair in Cardiology, Director, Heart Valve Clinic, Division of Cardiology, a basis for Mitral

Foundation–American Heart Association® Mitral Valve Repair Reference Center Award criteria.

UW Medicine is the only site in WWAMI region with this certification; other recognized sites on the west coast include Stanford, University of California-Los Angeles, and Cedars-Sinai Medical Center.

Vascular Surgery Summer Scholars Program

On August 25, 2023, the Division of Vascular Surgery celebrated the graduation of the second class of Vascular Surgery Summer Scholars. Six medical students from University of Washington, as well as two visiting students from around the country, participated in this 10 week research and clinical experience. Drs. [Sara Zettervall](#), Assistant Professor, and [Kirsten Dansey](#), Assistant Professor, directed the program which included additional mentorship from Drs. [Elina Quiroga](#), Associate Professor, and [Matthew Sweet](#), Professor. Students graduated with a completed research analysis which was presented to the division, with abstracts planned for submission to regional and national meetings. In addition to their research success, students participated in weekly division conferences, resident education, hands-on clinical skills training, and shadowed faculty from around the division at multiple University of Washington sites, in both the operating room and clinic.



Left to right: Dr. Benjamin Starnes, Emerald Toth, Jacob Bahnmler, Martin Bunker, Jasleen Bains, Anna Gillan, Sydney Wong, Rahul Ghosh, Gerald Anderson, Dr. Sara Zettervall, and Dr. Kirsten Dansey

publications



"Evaluation of a Multilevel Laboratory Stewardship Intervention Targeted to Cardiac and Thoracic Surgical Services at an Academic Medical Center"

Archives of Pathology & Laboratory Medicine August 2023

"When There Are No Differences on Average and One Size Does Not Fit All"

The Annals of Thoracic Surgery April 2023

Dr. **Farhood Farjah**
Endowed Chair in Lung Cancer Research
Professor of Surgery
Associate Medical Director
Surgical Outcomes Research Center
Division of Cardiothoracic Surgery



"Association of Community Vulnerability and State Gun Laws With Firearm Deaths in Children and Adolescents Aged 10 to 19 Years"

JAMA Network Open May 2023

Dr. **Deepika Nehra**
Associate Professor
Division of Trauma, Burn & Critical Care Surgery



Dr. **Samuel E. Rice-Townsend**
Associate Professor
Division of Pediatric Surgery

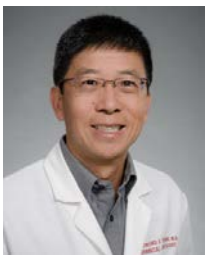


Dr. **Lauren L. Agoubi**
Research Resident
Division of General Surgery

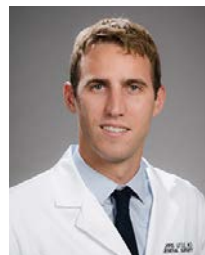


Dr. **Ali Rowhani-Rahbar**
Professor
Department of Epidemiology

honors & awards



Dr. **Raymond Yeung**, Professor, Section Chief, HPB Surgery, Division of General Surgery, received the Life Science Start-Up and Development Award. This award supports researchers to translate promising research into the development of tools, devices, or therapeutics related to cancer. This grant seeks proposals for the research or development of innovative ideas that have the potential to address important needs related to cancer prevention, screening, detection, and treatment to advance cancer care, lessen the burden of cancer, and improve health outcomes.



Dr. **Chris Little**, General Surgery R4, received the AASLD Foundation's 2023 Emerging Liver Advanced Practice Provider (ELAPP) award. Awardees received grants covering travel, housing, and meeting expenses. In addition to attending the meeting with an AASLD member/mentor from their institution, the ELAPP attendees will have the opportunity to attend special events specifically suited to their current and future academic needs.

Department of Surgery

in the media read



[“To save a young mom, Seattle transplant doctors became pioneers”](#)

The Seattle Times
August 27, 2023

Dr. [Jay Pal](#), Professor
Division of Cardiothoracic Surgery



[“In historic procedure, donor liver protects heart transplant”](#)

UW Medicine Newsroom
July 12, 2023

Dr. [Mark Sturdevant](#), Associate Professor & Interim Chief
Division of Transplant Surgery



Dr. [Ramasamy Bakthavatsalam](#), Professor
Division of Transplant Surgery



Dr. [Jay Pal](#), Professor
Division of Cardiothoracic Surgery



[“Relief for a Rare and Often Misunderstood Condition: MALS”](#)

UW Medicine - The Huddle
July 5, 2023

Dr. [Benjamin Starnes](#), The Alexander W. Clowes Endowed
Chair, Professor & Chief
Division of Vascular Surgery



[“Hear from Current and Incoming Trainees”](#)

UW Medicine - The Huddle
June 21, 2023

Dr. [Fei Wang](#), Plastic Surgery R1



Dr. [Samantha King](#), Plastic Surgery R1



Dr. [Nikhitha \(Nikki\) Thrikutam](#), Plastic Surgery R5



[“How Old Is to Old to Practice”](#)

MDLinx
June 7, 2023

Dr. [Patch Dellinger](#), Professor Emeritus



[“Reanimated hearts donated after death work just as well for transplants, study finds”](#)

STAT
June 7, 2023

Dr. [Maziar Khorsandi](#), Assistant Professor
Division of Cardiothoracic Surgery



[“Youth Firearm Deaths Up in Socially Vulnerable Areas, Gun Laws Having Little Impact”](#)

KEPR CBS Television Affiliate
May 27, 2023

[“Community vulnerability affects youth gun deaths”](#)

UW Medicine Newsroom
May 26, 2023

[“Study: Gun Laws Alone Won’t Stop Firearm Deaths”](#)

US News & World Report
May 24, 2023

Dr. [Deepika Nehra](#), Associate Professor
Division of Trauma, Burn & Critical Care Surgery



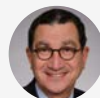
[“How To Catch Lung Cancer Early and Why It’s Important”](#)

UW Medicine Right as Rain
August 28, 2023

[“Wood honored for role in developing cancer guidelines”](#)

UW Medicine Newsroom
May 18, 2023

Dr. [Douglas Wood](#), The Henry N. Harkins Professor and Chair
Division of Cardiothoracic Surgery



[“Prowess, persistence yield first-anywhere heart procedure”](#)

UW Medicine Newsroom
May 12, 2023

Dr. [Gabriel Aldea](#), Professor & Section Chief,
Adult Cardiac Surgery
Division of Cardiothoracic Surgery



[“Did You Know You Can Save a Life with Part of Your Liver?”](#)

UW Medicine Advancement

Dr. [Mark Sturdevant](#), Associate Professor & Interim Chief



Dr. [Jorge Reyes](#), Professor

Division of Transplant Surgery

listen



Wright



White



Cetrulo



Herman



Vierra

[“Journal Review in Minimally Invasive Surgery: Robotic Emergency General Surgery”](#)

Behind the Knife: The Surgery Podcast Series
July 10, 2023

Dr. [Andrew Wright](#), Professor

Dr. [Nicole White](#), Clinical Associate Professor,
Section Chief, NW General Surgery

Dr. [Nick Cetrulo](#), Clinical Assistant Professor

Dr. [Paul Herman](#), General Surgery R3

Dr. [Benjamin Vierra](#), General Surgery R2
Division of General Surgery