Welcome to our 2024 spring edition of Surgery Synopsis. In our winter 2023 issue of Surgery Synopsis, as the world was emerging from COVID remote work restrictions, we focused on “What Community Means to You,” asking a cross-section of our department members to describe community. The answers varied, but the theme was clear: community meant a sense of belonging to a group with shared goals and values and upon whom you can rely on for support.

This issue we are again focusing on community: looking at community through the lens of the department, our extended communities, including the global surgical community as well as the communities we serve and in which we live and work. My driving principle – one that is a cornerstone of my goal as a chair – is to foster an environment – a community – where people can realize their professional potential while having a personal life that is equally fulfilling.

As I thought about on how to talk about community in this column, I realized the breakfasts I hold with various groups in our department community spoke of our department community. Each week I have breakfast with different groups of our residents and fellows, and annually, I meet with faculty by rank, as well as staff to discuss issues of importance to the department as well as hear what is going well and what could be improved. The breakfast I held most recently was with our full professors. Most of the professors in that room had very long careers in the department — some their whole careers. There were senior staff in attendance at the breakfast as well. They too have had long careers in the department — 20, 25, even 30 years. Ours was a community they had chosen to spend a majority of or their whole career. I think people only stay long in a community where they experience a sense of belonging and fulfillment, and I was struck with appreciation for these faculty and staff who have been so important to the community of UW Surgery for several decades. Still, our department must continually grow, improve, embrace change, and challenge each other in positive ways. And even though I don’t really know what the “secret sauce” is, I have confidence that our departmental community is strong. We share a common bond and there is a sense of belonging and respect between and among us.
Chair’s Message

work collaboratively toward shared goals. In fact, at another one of my recent breakfasts, the residents noted that their closest friends, those that feel like lifelong bonds, are those with whom they shared the intern year, even across the different specialties and later training experience.

Our residents have had great success in moving to the next step in the careers – fellowships or first jobs they want and deserve. The department, and in particular, our program directors, work diligently to assure this important transition to the next stage of a successful career. Sometimes the continuing connections of UW Surgery can be a surprise. Recently I traveled to a remote area of Iceland with my wife. As an amateur photographer, I convinced her to join me for early morning sunrise photos of a famous waterfall and mountain. At 5:00am I lined up with about eight other serious photographers with tripods and long lenses, shivering in the dark and cold. As the sun rose and the shutters slowed the photographer next to me turned and questioned, “Dr. Wood?” I was standing next to Dr. Jonathan Friedstat, one of our former general surgery residents who is now a prominent reconstructive plastic surgeon at Massachusetts General Hospital. And for the rest of the morning the former trainee became the teacher; I learned more about nature photography that morning from Dr. Friedstat than I have in many sessions with professional photographers.

While they are only with us for a year or two, our preliminary residents – those who have trusted us for their initial training, but who will be moving on to other specialties to complete their training – are important to our community. Our preliminary residents take great care of patients and work alongside their categorical resident partners. Although they are not with us as long, we are honored to train them and to be mentors and advocates to assist them to getting into the program of their choice. This year’s preliminary residents are all going to great programs – heading into vascular surgery, plastic surgery, neurosurgery, and many others. We are extremely proud of this class of preliminary surgeons.
We keep in contact with our alumni — our residents and fellows — as they leave the programs. It is gratifying to hear from them and to follow their careers. We are highlighting five of them in this issue of Surgery Synopsis, each representing great careers that have had their start in the Department of Surgery: Drs. André Ibawaii – 2013; Lillian Kao – 2001, Martin Montenovo – 2012, Jane Schwabe – 1997, and Panos Vardas – 2013. I invite you to read about their current lives and careers and what their time within the Department of Surgery meant for them.

One of our greatest examples of community are those residents and fellows who have finished their training, gone to other institutions and then return to the Department of Surgery. They bring strength, experience, networks, and fresh eyes to our programs, but with the added benefit of being already known and respected colleagues. Among those who have recently returned in such a fashion are Drs. Deepika Nehra, Erika Bisgaard, Scott Brakenridge, John Scott, and Katie Liu. And sometimes we even have senior faculty return after careers elsewhere, e.g., Dr. Jay Pal returning as Chief of Heart Transplantation and Mechanical Circulatory Support and Dr. Steve Lee returning to be the Chief of the Division of Pediatric General and Thoracic Surgery.

The UW Surgery community continues to have a major impact in the larger world of surgery. Our faculty have enduring influence on behalf of our former residents and fellows through mentorship and sponsorship, maintain the UW Surgery community throughout their career even outside of UW. Former members of our community have become today’s leaders in surgery, partially because of the opportunities their faculty mentors have afforded. Dr. Lillian Kao has been hugely successful in her institutional leadership, as recent President of the Association for Academic Surgery, and as the current Chair of the Board of Governors for the American College of Surgeons (ACS). Dr. Kao is highlighted in this issue and credits mentors, Dr. Eileen Bulger (our GTKDoS feature this issue) and Dr. Carlos Pellegrini for their support, advice, and sponsorship. This is just one example among many. Over time our department has had enormous influence on the larger community of surgery.

At UW we have long prided ourselves on developing academic surgeon leaders like Dr. Kao, but we also recognize our responsibility and privilege to train surgeons who will ensure equitable access to surgical care in rural and global communities with fewer resources than our academic medical centers. One aspect of this has been the development of a rural surgery program, featured in the fall 2022 issue, led by Drs. Dana Lynge and Barclay Stewart in collaboration with Billings Clinic. Our ultimate goal is to train surgeons who are committed to working in our diverse communities in the Pacific Northwest, or in international low resource countries.

Dr. André Ibawaii, highlighted in this issue, is a great example of impact on a global scale as Technical Lead of the World Health Organization’s (WHO) Cancer Control Programme. Dr. Ben Anderson, Professor Emeritus, created and led the Breast Health Global Initiative and later reconnected with Dr. Ibawaii as he crowned his UW career working with the WHO on international breast health. Many of our faculty are committed to global surgery efforts: me in Rwanda, Dr. Suzanne Inchauste in Vietnam, Dr. Jay Pal in Nepal, Dr. Brant Oelschlager in Ethiopia, Dr. Jeff Friedrich in Bhutan and Tanzania, and Dr. Sarah Greenberg in Guatemala and Peru, along with many others. We have an enduring commitment to our local community of patients needing surgical care, and that commitment extends to global surgical patients in environments less resourced than our own.

Closer to home we have begun the West Coast Visiting Professor Collaborative – a community of departments of surgery in the Pacific Northwest. This partnership between Oregon Health & Science University (OHSU), UC San Francisco (UCSF), UC Davis, Stanford, and UW, aims to bolster faculty development, advance the careers of our junior and mid-career faculty, and strengthen our commitment to diversity, equity, and inclusion. Last year, we were well represented by Dr. Teresa Kim who was visiting professor at OHSU, and in turn, we hosted Dr. Ian Brown from UC Davis. This year we hosted Dr. Amanda Kirane from Stanford and have chosen Dr. Suzanne Inchauste who will be visiting professor at UCSF.

The Department of Surgery was well-represented at the recent American College of Surgeons (ACS) Leadership & Advocacy Summit. More than 700 surgeons — in person and virtually — were galvanized by a shared commitment to advancing leadership skills and driving impactful change within healthcare...
Chair’s Message

policy. This year’s President of the Washington Chapter of the ACS, our very own Dr. Judy Chen, committed to sending residents from each of the Washington State residency programs to the summit in Washington DC. Our group met with congressional representatives and advocated for legislation that is important to ensure access and quality care for patients with surgical disease. We believe that our department makes a difference in advancing leadership that acts for the profession and surgical patients.

Dr. Patricia Turner, ACS Executive Director and CEO, summed up what I believe about the community of surgeons in the world—“The ACS is a community of surgeons who have an incredibly diverse set of skills and expertise. The camaraderie among surgeons is real. All of us are integral to the success of the healthcare system.”

I am proud to be a surgeon, to be a member of this department. I am proud to be able to support and contribute to the community that is our department and the impact we have in the broader world of surgery. Finally, I am so extremely proud of the group of faculty, trainees and staff that comprise this great community – our Department of Surgery. I hope you will read this issue with interest and catch a glimpse of what it is to be part of UW Surgery.

Sincerely,

Douglas E. Wood, MD, FACS, FRCSEd
The Henry N. Harkins Professor & Chair
Department of Surgery
University of Washington
I lead the cancer program at the World Health Organization (WHO) and oversee the implementation of WHO cancer initiatives, which are active in more than 100 countries. Through this work, we have triggered over $1 billion USD to implement cancer programs, collaborated with 300+ international partners, and positively impacted the lives of millions of people affected by cancer.

My work in global health started in medical school when I met my wife, Shannon Barkley, a brilliant physician and leader in public health. Searching for a general surgical residency, I was told by some that such programs exist only to train American surgeons. It was UW Surgery chairman Dr. Carlos Pellegrini, program director Dr. Karen Horvath, faculty like Dr. Ben Anderson, and colleagues like Dr. Jordan Swanson, who embraced my global ambitions, provided mentorship, and inspired my future.

It is a great privilege to be trained as a highly qualified surgeon, but it is an even greater gift to be in a community that nourishes you. This was my UW experience – faculty investing abundantly in trainees while innovating in the OR and in health policy; inspiring co-trainees who went the last mile; the clinical work environment, particularly at Harborview and VA, that took pride in caring for the most vulnerable; the staff in hospitals, and the surgery program always there to provide encouragement.

I have had the humble opportunity to work in ORs in seven countries, provide remote support through Médecins Sans Frontière, and visit 30+ countries in my role at WHO. The UW community stands uniquely among them. Thank you, UW Surgery, for breathing life into dreams.
Even though I was a general surgery resident over 20 years ago at the University of Washington, it seems like just yesterday. Without a doubt, my training at UW significantly contributed to my successes. I am currently Professor and Chief of the Division of Acute Care Surgery at McGovern Medical School at UTHealth Houston. I am Vice Chair for Quality for the Department of Surgery, and I co-founded and co-direct the Center for Surgical Trials and Evidence-based Practice (C-STEP) that has trained over 30 residents in clinical research, many of whom have obtained a Master of Science degree.

First, I am thankful to all of the surgical faculty at UW who provided me with outstanding clinical training. As a result, I was able to not only have a broad-based general surgery practice, but also to pivot later on to a more focused acute care surgery practice. I still find myself repeating memorable UW faculty quotes to present day residents and emphasizing the same basic technical principles taught to me. In particular, Drs. Mika Sinanan and Kaj Johansen are always in my head when I operate. Second, I have been grateful for the lifelong mentoring and sponsorship that I have received over the last 20+ years. While there are too many faculty to name, there are a few that have been particularly impactful in my career.

Dr. Carlos Pellegrini, former Chair of the Department of Surgery and a past President of the American College of Surgeons (ACS), has been a long-standing advocate. He has given me priceless advice about leadership and has supported my involvement in ACS, including my current role as Chair of the ACS Board of Governors. More importantly, he always remembers my birthday (even though I failed to invite him to my 40th birthday party in Vegas!). Drs. Ronald Maier, Gregory (“Jerry”) Jurkovich, Avery Nathens, and Eileen Bulger have been strong supporters of my career in trauma/acute care surgery. They have provided me with many invaluable opportunities, culminating with my being the Chair of the Quality Pillar for the ACS Committee on Trauma (COT). Dr. E. Patchen Dellinger, Past President of the Surgical Infection Society (SIS), fostered my interest in surgical infections and promoted my engagement in SIS. Last but not least, Dr. David Flum, with whom I wrote one of my earliest papers, has invited me into his PCORI-funded trials network and allowed me to contribute to a broader knowledge base about how to optimize patient-centered care for common conditions.

I am proud to be part of UW’s legacy and to carry on the tradition of training the next generation of surgeons and surgeon-scientists. In particular, I hope to have the same career-long and life-long impact on others as the UW faculty have had on me.
My name is Dr. Martin Montenovo, and I am the Division Chief of Hepatobiliary Surgery and Liver Transplantation at Vanderbilt University Medical Center in Nashville, TN. As a transplant surgeon, my goal is to help people during the worst time of their lives by giving them a second chance at life. At Vanderbilt, we serve a big rural and underserved area of the country. We offer local housing and a support group to patients and families that must travel long distances to receive a high level of care.

My path to this leadership role at one of the biggest transplant centers of the country started in 2006 at the University of Washington Department of Surgery, when Drs. Brant Oelschlager and Carlos Pellegrini opened the doors of this country to me by allowing me to work in their lab for two years before repeating my surgery training. After finishing my residency, Dr. Jorge Reyes took me under his wing and taught me so many lessons “in and out” of the OR that I still carry with me today. I always like to say that I got the “golden ticket in life” by having the opportunity to train in a world class surgical program. The University of Washington is my hometown. It’s the place where I raised my family, built a wonderful community of great friends and colleagues, and was mentored and sponsored by many faculty members.

I was very fortunate to have the opportunity to be present at the last Schilling Lecture, and I listened to all these of the young, new leaders of surgery give outstanding and provocative talks. Needless to say, it was wonderful to see old friends—many of which were my interns years ago and are now shining as members of the UW faculty. I feel great pride in being a product of this Department of Surgery now led by Dr. Douglas Wood, a giant of thoracic surgery.
The concept of ‘giving back’ was ingrained in me from early childhood. My parents were great examples of Servant Leadership – no job or role was beneath them. Everyone pitched in to get things done, and this was how I approached every job I had—from McDonalds to Cardiac Surgery. During my time at UW, I was fortunate to work with many people who shared these values; we were a team, and it took all of the team to get the job done. Drs. Douglas Wood and Ed Verrier were particularly supportive and continue to support me to this day.

After leaving training in 1997, I went into practice in a small town in Nebraska. During that first year my mother needed heart surgery. Now she had every risk factor there is, yet she was dumbfounded she had heart disease. I figured if my own mother was not truly “health literate,” many others were in the same boat. That was the impetus to begin a journey of community education and health advocacy that continues to this day. I was initially quite intimidated by public speaking, but faced that demon and managed to actually enjoy it.

I moved to Missouri in 2001 to a larger, yet still relatively small, town of 70,000. Its smoking rates were the highest in the nation, obesity (especially in children) was rampant, and high school graduation rates were lower than I was accustomed to. With a group of similarly minded folks, we created a program for 4th grade students that taught the importance of health, exercise, and nutrition, called the 4th Grade Challenge. It was a very fun program in which we went to physical education classes of all the grade schools to promote health in very tangible ways. It has been going strong since 2008, with a temporary respite during the COVID years. It has truly made an impact on students’ lives and helped bend the needle in our local health trends.

Unlike surrounding states, Missouri has no clean air act. This leaves it to each city to have, or not have, policies and laws about smoking in public. We created a citizens committee to try and pass a law to go smoke free in public places of employment. As I watched Dr. Doug Wood take on lung screening on a national level, I was inspired to try and make a difference in my community. In 2014, we managed to get a policy on the ballot and it passed. You can now go out to eat and not breathe your neighbor’s smoke! I believe that win also marked my retirement from politics!

As I raised my children, I have tried to instill in them the concept ‘To whom much is given, much is expected.’ Everyone can give back; everyone has something to contribute. It does not need to be big, just start by making one person’s load a little lighter and go from there.
I am honored to be recognized as a notable alumnus of the University of Washington (UW), an institution that has profoundly shaped my career and life. Currently, I serve as a cardiac surgeon at the University of Alabama at Birmingham, where I hold dual roles as the Assistant Program Director for the Cardiothoracic Surgery Residency Program and the Medical Director for the Cardiac Intensive Care. My clinical practice focuses on the entire spectrum of cardiac surgery, with a particular interest in mitral valve reconstructive surgery and robotic-assisted cardiac procedures.

My surgical journey began at the UW, where I trained in the Department of Surgery for two years. These formative years were crucial in developing my surgical mindset, mastering basic surgical principles, and understanding the intricacies of patient care. The environment fostered teamwork and excellence, enabling outstanding patient outcomes. The University of Washington was also where I forged lasting friendships and met mentors who profoundly influenced my career. Dr. Carlos Pellegrini’s leadership was instrumental, but my path to becoming a cardiac surgeon was significantly shaped by Dr. Douglas Wood. His mentorship was pivotal, not only in guiding me through residency training in thoracic surgery, but also in encouraging me to contribute to the future of our specialty. Dr. Wood’s support and personal sponsorship were the catalysts for my decision to pursue an academic career in cardiac surgery in the United States, a decision for which I am eternally grateful. The UW instilled in me a commitment to excellence, evidence-based care, and service. As I continue to advance in my career, I remain proud to be an alumnus of such a distinguished program, dedicated to producing the next generation of academic surgeons.
Dear Harkins Alumni,

I hope you are enjoying this special edition of Surgery Synopsis, dedicated to the amazing things UW Department of Surgery (DoS) alumni are doing around the country and around the world. Today, with over 153 faculty, 121 staff, and 131 residents/fellows, the UW (DoS) is almost unrecognizable compared to its origins in the early 1950s. Similarly, the Harkins Society has evolved with the department over time to build community amongst current and former trainees.

In 1955, UW DoS residents created a spoof surgical society named The Society of the Golden Pouch to honor the department’s first Chairman, Dr. Henry N. Harkins, during a dinner celebrating his 50th birthday. As it was formed as a joke, the residents did not intend for the “society” to continue past that evening. Over the years, the department and its alumni numbers continued to grow, and the society was increasingly tasked to connect members after they left training. The Harkins Society, as it was renamed, became the official alumni society of the UW DoS and in 1963 was incorporated as an independent tax-exempt organization in order to facilitate fundraising and philanthropic support of current trainees.

Over time, society events developed into program mainstays like the Oyster Fry, New-Intern BBQ, and Annual Harkins Alumni Dinner. In 2023 the independent tax-exempt organization was rolled into the DoS to enhance fundraising, event coordination, and strengthen relationships between faculty, residents, and alumni. Graduates from all department training programs (general, plastic, vascular, thoracic surgery, etc.) become members of the Harkins Society upon graduation and are encouraged to participate in society events. The society currently has over 600 members representing UW DoS across the world, impacting the field of surgery at the highest levels.

Thank you for your engagement and support of the Harkins Society. We look forward to having you join us for the Annual Harkins Alumni Dinner on November 1st, 2024, in Seattle!

Sincerely,

Jonathan G. Sham, MD, MBEE
President, Henry N. Harkins Surgical Society
The Comparison of Surgery and Medicine on the Impact of Diverticulitis (COSMID)

Enrollment Progress: to date, 182 out of the target of 250 participants have been enrolled.
Enrollment Goal: 250 participants by October 1, 2025.

WE NEED YOUR HELP TO REACH OUR GOAL
Refer Patients: If you know patients with a history of left-sided diverticulitis who might benefit from participating in the study, please talk to them about the COSMID trial.
Contact Information: Send referrals to our research team via email at cosmid@uw.edu.

“Through data from COSMID, we will not only determine if surgery or medicine is the better treatment, but also identify which treatment is best for each individual patient,” said Dr. Hantouli. “This nuanced understanding will allow us to customize treatment options based on each patient’s unique characteristics and needs, a truly patient-centered approach. I’m really excited to continue this important work with all of you.”

COSMID TRIAL INFORMATION
Funding Agency: Patient-Centered Outcomes Research Institute (PCORI)
Principal Investigator: Dr. Dave Flum, Vice Chair for Research
Key partners in the UW Department of Surgery: Drs. Giana Davidson, Mukta Krane, Mariam Hantouli, Estell Williams, Sarah Atkinson, Zoe Parr, Dan Kim, Joy Chen, Alison Perrin, Nicole White, Lawrence Cetrulo, Colette Inaba, Rebecca Petersen, Andrew Wright.

Dr. Hantouli concludes, “We extend our heartfelt thanks to all of our partners involved in this important study. Your collaboration is essential to the success of COSMID and to advancing the evidence needed to guide patient-centered diverticulitis care in the future.”
Dr. Thais Calderon, plastic surgery resident, was honored as the inaugural recipient of the Douglas Wood Fellowship for Diversity in Surgical Education and Leadership. This prestigious award funded her trip to Saint Louis, Missouri, for the Third Annual Plastic Surgery Research, Education, and Preparation Promoting Equity and Diversity (PREPPED) Conference. PREPPED targets third-year medical students under-represented in medicine (URiM), including those from low socio-economic backgrounds, racial minorities, LGBTQ+ community, or those without a home plastic surgery program.

The program bridges geographic and institutional barriers by bringing program directors and residents together from across the nation to lead sessions, participate in panels, and assist students with suturing and exam skills. Supported by the Plastic Surgery Foundation (PSF) and partnering with the American Council of Educators in Plastic Surgery (ACEPS), PREPPED provides financial support for students to attend the ACEP’s winter conference and engage with educators and leaders in the field.

Part of Dr. Calderon’s award is also allocated to research projects examining the impact of faculty diversity on applicant rank list creation. These research initiatives include assessing equity in virtual versus in-person interviews and policies regarding work hours for pregnant residents across several universities.

“This opportunity meant so much to me as it allowed me to physically meet faculty whom I consider mentors, and role models, and mentees whom I’ve known for over two years through the Diversity, Inclusion, Mentorship, and Equity within Plastic Surgery (DIME) Program which longitudinally pairs resident mentors with medical students. I am proud to say I am the resident leader for the University of Washington and for the past two years our division has provided the largest number of resident mentors than any other institution,” Dr. Calderon shared.

I was able to represent the University of Washington and the values we have regarding the importance of diversity within our programs,” she added, highlighting the significance of her role.

Dr. Calderon emphasized, “I cannot stress the importance of representation enough. As an immigrant and a woman of color, I felt so empowered leaving that meeting knowing I am a symbol of possibility for young trainees seeking mentors who look and grew up like them.”

She concluded with heartfelt gratitude: “I cannot thank you enough for supporting initiatives like the Douglas Wood Fellowship for Diversity in Surgical Education and Leadership, as it has left a tremendous impact on myself, the academic career I hope to achieve, and the diverse community I hope to mentor and empower.”
In your medical education journey did you always know you wanted to be a surgeon? How did you pick your specialty?

I went to medical school after working as a paramedic, so I thought I would do Emergency Medicine. In medical school you do all of the different rotations, and that was my first exposure to surgery and I fell in love with it. At the medical school I was in there was a fourth-year sub internship specifically for trauma surgery that was in a pretty rough part of New York City. This early exposure to trauma surgery sparked my interest to become a trauma surgeon. When I applied to residency, I looked at programs around the country that had strong trauma surgery programs, one being the University of Washington, but never thought I would move all the way across the country. When I came to visit, I really fell in love with the University of Washington (UW) so I ranked it at the top of my list and was fortunate to match here. I came here with the intent of doing trauma as a specialty and haven’t veered from that.

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

I can think of two examples. If you go all the way back to when I was in medical school, it was to go after every rotation like it was what you were going to do for the rest of your life. I continue to give that advice to medical students today. They might think they are not going to be a surgeon, but they should jump into their surgery rotation as if they were going to be a surgeon because then they will get the most out of it and they’ll figure out if it’s the right field for them.

The second piece of advice is when you get further along in your career, and that is to figure out what you’re passionate about and pursue it as your academic interest. Whether it’s a clinical problem that really bothers you or a particular thing you’re interested in studying, it helps to study something that you’re really passionate about.

After you came you stayed. How did that work out?

I didn’t anticipate that either. Both my husband’s family and my family are on the east coast. We got married during my fourth year of medical school, then moved out here to the Pacific Northwest as a grand adventure, fully expecting to go back after my training. But I stayed around for quite a while—I did a T32 research fellowship in the middle of my residency in Dr. Ron Maier’s lab, and then at the end of my residency I completed the Trauma Critical Care fellowship at Harborview Medical Center (HMC). After all those years here, we really loved the place, and loved the mission of HMC, so when I was offered a job, I jumped at it. It just worked out, and it’s been a phenomenal place to grow in my career.

That’s a nice transition into what is your area or research and how did you get interested in that area?

I think the journey we take in research is interesting. I mentioned I started in Dr. Maier’s lab doing basic science immunology research and really loved that. I thought I would be a basic scientist and have a lab, but as my career advanced I started getting involved in clinical trials. I found clinical trials interesting and challenging as we were trying to figure out how to study the

Left to right - Daughters Kelsey and Natalie Bulger, husband Doug Bulger, Eileen Bulger, and brother Scott Metzger and wife Becky

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therapies we give in an environment where it hard to do research because everything is an emergency. I was able to bridge those two for a while—I did clinical trials, then collected blood samples from the patients to study their immunology in the lab. Over time, there was more funding for clinical trials than there was for the lab, so my focus evolved. The nice thing about clinical trials is it gives you the opportunity to take on other disease states that challenge you. At Harborview, we see a huge number of necrotizing soft tissue infections from all over the region. This is a terrible, life-threatening, and very morbid disease. I was very bothered by the patient outcomes, and because I was a clinical trialist, I had the opportunity to work with a company and lead a large, multi-center study on a novel drug for necrotizing soft tissue infections. So, your research focus evolves over time as you follow your passions.

Congratulations on getting Stop the Bleed Legislation passed in Washington State. How did you get involved in this work?

Over time, my career has also evolved into advocacy and health policy, including Stop the Bleed and other injury prevention work focused on violence prevention and firearm injury prevention. There is a huge opportunity to move some of these things forward both at the state and national levels in partnership with the American College of Surgeons (ACS). In my leadership roles with the ACS Committee on Trauma (COT), I have had the opportunity to work on a number of those things. The legislation you referenced is a Washington State bill we were successful in passing this year that provides support for school systems for bleeding control equipment as well as ensuring there are campus staff that are trained for bleeding control. It’s a movement that is growing across the country and there are many states now with this type of legislation. There is also federal legislation we’re trying to get passed that would provide additional funding to states to support the growth of those programs.

What have you found most challenging in your surgical career?

I think we are challenged as a profession with ensuring we provide adequate support for our faculty and staff who work in really challenging environments, as well as addressing burnout and stress among the team members. To me, I think our biggest challenge right now is making sure we’re thinking about minimizing factors that lead to burnout. As a leader in the division, that’s one of the things I’m really focused on.

Several years ago I took care of a little girl who was accidentally shot at her school and had a life-threatening injury, and everything just worked exactly the way it was supposed to. The hospital system, the flight service, getting her to the OR quickly, blood availability, the whole team rallying — it worked amazingly well and she survived, not without long term issues, but it was touch and go for a long time. You come out of that and think, “Wow, we really made a difference. Look at this amazing team.” I counted the number of healthcare workers that were involved in her care in the first four hours and there were 45 people. It gives you a sense of what it takes to do that. But there are times when things don’t work as well as you’d like, and I think that’s when things are frustrating for people. When somebody’s life is on the line, it’s really stressful when one piece of the puzzle doesn’t perfectly fit. It’s also stressful when patients come in that we can’t save, even with everything going right. The national numbers say the rates of burnout are higher for our specialty than others, and we need to be sensitive to that. We have to think about how we design our work environment so people have time off and ensure the team works to its highest capability as much as possible.

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

Last year I was President of the American Association for the Surgery of Trauma, which is one of our large national organizations, and my goal for the year was to establish a leadership academy specifically targeting mid-career faculty in trauma surgery. We launched the academy last September and it went extremely well. It’s continuing to grow, so I would say over the last year that is my biggest accomplishment.

Dr. Eileen Bulger became president of AAST at the 81st Annual Meeting of AAST & Clinical Congress of Acute Care Surgery in 2022.

Photo Credit: Saman Arbabi, MD
What are you known for professionally or personally?

Personally, I am known as a quilter. That’s a passion of mine outside of surgery but I have leveraged it to support my career as well. I make quilts for the auctions for the trauma societies. In 2022, my last year as ACS COT chair, we hosted a celebration for our 100th anniversary. I made a Centennial quilt for the event that represents all the contributions of the COT to advancing trauma care. It is now on display at the ACS headquarters in Chicago.

I also am blessed to work with a group of incredible women who are mostly retired or active healthcare workers, who run a program called Comfort Care Quilts. We make quilts to support patients who are at the end of life at Harborview, Montlake and Northwest. When someone makes the decision to go on comfort care, the team helps them pick out a quilt that represents their loved one. It makes the hospital feel a little homier in a tough time, it supports the family, and the family will often take it home with them as a memory of their loved one. That’s been a really rewarding program and a lot of incredible people to work with.

What is your personal motto?

I don’t have a motto, but I would adopt the motto that the ACS COT has taken which is to keep the patient at the center of everything you do. If you keep the patient at the center, that’s your true North, then whatever you are trying to do is improve the outcome for that patient.

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UW Medicine ECMO Team Performs First Off-Site Cannulation

On April 18, 2024, UW Medicine’s Extracorporeal Life Support (ECMO) transport team performed their first off-site cannulation for a patient with severe respiratory failure who was too unstable to transport from Valley Medical Center. Once the patient was on ECMO, they were successfully transported to Harborview Medical Center.

ABOUT UW MEDICINE’S ECMO PROGRAM

Located in Seattle, Washington, UW Medicine’s ECMO program provides life support via a heart and lung (ECMO) machine in adult patients whose heart and lungs have failed or are not working properly.

The EMCO team consists of specially trained ICU nurses, respiratory therapists (ECMO specialists), and clinical perfusionists, who work in conjunction with ECMO-trained critical care doctors and their teams in the cardiothoracic, medical, and trauma/surgical intensive care units across UW Medicine. We primarily serve as a resource and referral center for patients throughout the PNW region including Washington, Wyoming, Alaska, Montana, and Idaho.

What is the last book you read?
I like Ken Follett and I just finished one of his trilogies. I read a lot of his work - it’s all historical fiction. I read on airplanes, so how much I read really depends on how much I travel.

What TV show are you currently watching?
Reruns of Law and Order.

Where did you travel on your most memorable vacation?
Last year I had the opportunity to go to New Zealand. It is truly a spectacular place. It’s beautiful.

What is your go-to snack?
My first choice would be Moose Tracks ice cream. It has these little, tiny peanut butter cups in it.

What is your favorite guilty pleasure?
I don’t know if I have a guilty pleasure, but I guess I would say jig saw puzzles. I try to get really difficult, large puzzles. Right now I’m working on this 3,000 piece puzzle that takes up my whole dining room table. It’s pictures of a whole lot of Polaroid pictures overlapping. It’s very challenging.

Who is your inspiration and why?
I’ve been blessed with some really awesome mentors. I’d have to say my primary mentor is Dr. Maier, who has been a huge support for me throughout my career, ever since I was a resident hanging around his lab. From a career perspective, he’s been my lead role model and mentor. I’m doing his job now so I’m trying to follow in his footsteps.

Rapid Fire
Surgeon Advocacy: Making a Difference Beyond the Operating Room

The Washington Chapter of the American College of Surgeons voted to sponsor and award travel grants to residents from five Washington residency programs to attend the Leadership and Advocacy ACS conference in Washington, D.C. The grantees were Drs. Blake Murphy, Megan Lenihan, Annie Yang, Jonathan Isley, Erik Domas, and Luke Pumiglia. They attended educational sessions about the importance of becoming a surgeon advocate, participated in leadership and advocacy efforts, and learned how legislatures directly affect medical practice. Conference attendees also met with Washington’s United States senators and representatives to advocate for important healthcare priorities. ACS Board of Regents member, Dr. Douglas Wood, ACS Governor Dr. Cate Straub, and current ACS Washington Chapter President Dr. Judy Chen-Meekin also met with the residents during their visit to D.C.

Department of Surgery Faculty Help Pass "Stop the Bleed" Legislation in WA State

On March 29th, 2024, Washington State Governor Jay Inslee signed into law Senate Bill 5790 which mandates that schools in the State of Washington maintain bleeding control equipment on campus and provide education to help students and school staff respond to bleeding emergencies. This legislation is the result of years of advocacy and collaboration from multiple groups and organizations across the state, including UW Department of Surgery faculty members, the American College of Surgeons, emergency medicine personnel and nurses, and students and educators from school districts across the state. UW Department of Surgery faculty members Drs. Bryce Robinson, Scott Brakenridge and Judy Chen joined student advocates and bill sponsor WA State Senator Manka Dhingra for Governor Inslee’s signing of the bill on campus at the University of Washington.

Beginning in the 2026-27 school year, SB 5790 mandates that schools in the State of Washington maintain easily accessible bleeding control kits with equipment such as compression bandages and tourniquets on each school campus for use in case of traumatic injuries involving life-threatening blood loss. Schools must also ensure that a minimum of two employees receive training in bleeding control techniques such as those taught by the American College of Surgeons “Stop the Bleed” course.

In signing the law, Washington joins 13 other states that have enacted similar bills to increase access to life-saving tools and education that can help people recognize and respond to bleeding emergencies. “Trauma and bleeding are the leading cause of death for children and young adults in the State of Washington,” said Dr. Brakenridge. “The passing of this legislation empowers students, school staff and other members of the community to take action and save lives. It was an honor and privilege to work alongside the UW and high school students who really put in the ‘grass roots’ efforts and testimony that made this initiative a success.”
Department of Surgery Hosts the Annual Latino Surgical Society Meeting

The Department of Surgery (DoS) had the privilege of hosting the annual meeting of the Latino Surgical Society (LSS) from May 17th – 19th. The events kicked off on Friday with a community service initiative, Doctor For A Day, held at WISH-Harborview. K-12 students learned suturing, completed “Stop the Bleed” training, and developed laparoscopic skills.

DoS welcomed over 100 surgeons, residents, and students to a robust scientific program, featuring three keynote lectures and valuable networking opportunities aimed at supporting the recruitment and development of a diverse workforce in surgery. A heartfelt thank you goes to Drs. Elina Quiroga and Estell Williams, who led and coordinated the UW side of the meeting, ensuring its success.

Former chair of the DoS, Dr. Carlos Pellegrini, delivered the keynote lecture, “Reflections of an Immigrant Leader,” sharing his personal journey and essential rules for leadership and professional satisfaction. In his honor, the LSS announced that future keynote lectures will be named the Carlos A. Pellegrini Lecture, recognizing his leadership and support of the organization. The Department of Surgery is proud to support events like the LSS annual meeting, reinforcing our commitment to fostering diversity, equity, and inclusion within the surgical community.

Surgery Center Excellence: Seattle Children’s Again Receives Level 1 Children’s Surgery Center Designation

The American College of Surgeons again awarded Seattle Children’s Hospital the Level I Children’s Surgery Center designation. Seattle Children’s is the only children’s hospital in Washington, and one of only 55 in the nation, to achieve this highest level of certification for pediatric hospital surgical programs.

Level I designation recognizes surgery centers whose quality improvement programs have measurably improved pediatric surgical quality, prevented complications, reduced costs and saved lives. Level I centers have specialty trained children’s surgeons in every discipline, with pediatric anesthesiologists and dedicated operating rooms for children available 24 hours a day. They also train future leaders in education and research and participate in community outreach.
Seattle Met magazine announced their 2023 Top Doctors and we are pleased to share this recognition of selected Department of Surgery faculty. These providers practice at Harborview Medical Center, UW Medical Center—Montlake, Veterans Administration, VA Puget Sound Health Care System, Fred Hutch Cancer Center, Seattle Children’s Hospital, and UW Medical Center—Northwest.

Top Doctors is one manner of recognition by the medical community and shows they hold our surgeons in high esteem. Although this is a list of individuals, all of our surgeons approach their practice in team effort.

Congratulations to our faculty—the department is honored by your mention. Below is a listing of our faculty recognized this year by their specialty:

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Names</th>
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<tbody>
<tr>
<td>BARIATRIC SURGERY</td>
<td>Judy Y. Chen</td>
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<td></td>
<td>Saurabh Khandelwal</td>
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<td>BREAST SURGERY</td>
<td>Claire L. Buchanan</td>
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<td>Kristine E. Calhoun</td>
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<td>Meghan R. Flanagan</td>
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<td>Sara H. Javid</td>
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<td>Emily Palmquist</td>
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<td>CANCER SURGERY</td>
<td>David R. Byrd</td>
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<td>Harveshp D. Mogal</td>
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<td>James O. Park</td>
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<td>Venu G. Pillarisetty</td>
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<td>Jonathan Sham</td>
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<td>Jeremy Sharib</td>
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<td>Raymond S. W. Yeung</td>
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<td>CARDIAC SURGERY</td>
<td>Gabriel S. Aldea</td>
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<td>Christopher R. Burke</td>
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<td>Scott DeRoo</td>
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<td>Jay Pal</td>
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<td>COLON/RECTAL SURGERY</td>
<td>Sarah J. Atkinson</td>
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<td>Joy C. Chen</td>
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<td>Mukta K. Krane</td>
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<td>GENERAL SURGERY</td>
<td>Giana H. Davidson</td>
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<td>Daniel F. Kim</td>
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<td>Brant K. Oelschlager</td>
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<td>Zoe E. Parr</td>
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<td>Alison L. Perrin</td>
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<td>Rebecca P. Petersen</td>
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<td>Nicole B. White</td>
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<td>Estell J. Williams</td>
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<td>Andrew S. Wright</td>
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<td>HAND SURGERY</td>
<td>Jeffrey B. Friedrich</td>
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<td>Erin Miller</td>
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<td></td>
<td>Nicholas B. Vedder</td>
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<td>PLASTIC AND RECONSTRUCTIVE SURGERY</td>
<td>Shannon M. Colohan</td>
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<td>Sarah R. Goldsberry-Long</td>
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<td>Suzanne Inchauste</td>
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<td>Rachel Lentz</td>
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<td>Otway Louie</td>
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<td>Isaac C. Stein</td>
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<td>Duane Wang</td>
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<td>SKIN CANCER</td>
<td>David R. Byrd</td>
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<td>THORACIC SURGERY</td>
<td>Kathleen K. Berfield</td>
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<td>Aaron M. Cheng</td>
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<td>Farhood Farjah</td>
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<td>Michael S. Mulligan</td>
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<td>Douglas E. Wood</td>
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<td>VASCULAR SURGERY</td>
<td>Elina Quiroga</td>
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<td>Niten Singh</td>
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<td>Benjamin W. Starnes</td>
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<td>Matthew P. Sweet</td>
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<td>Nam T. Tran</td>
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<td>Sara Zettervall</td>
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<td>ADVANCED PRACTICE PROVIDERS</td>
<td>Christina F. Blanchette (PA) - Breast Surgery</td>
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<td>Anne Chapin (PA) - Plastic and Reconstructive Surgery</td>
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<td>Rebekah Kooy (PA) - General Surgery</td>
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<td>Tamar Solomon (PA) - Cancer Surgery</td>
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<td></td>
<td>Shirley Taylor (ARNP) - Plastic and Reconstructive Surgery</td>
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<td></td>
<td>Natalie Williams (ARNP) - Cancer Surgery</td>
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The Helen and John Schilling Endowed Lectureship was established by the late Helen Schilling to bring distinguished scholars to the Department of Surgery (DoS) at the University of Washington, and to enhance the Department’s commitment to the highest standards of patient care, teaching, research and scholarship. It was Mrs. Schilling’s wish that the lectureship be named in honor of her husband, John. This year the DoS had the honor to host Dr. Fiemu Nwariaku, 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, as special guest lecturer for the 29th Annual Helen & John Schilling Lectureship held on Friday, March 15th, where Dr. Nwariaku presented “Academic Health Systems: A Pillar for Strengthening Global Health and Reducing Disease Burden.” The Schilling Lecture concludes the Annual Research Symposium, an event that recognizes the quality, breadth, and depth of the research performed by the Department of Surgery’s research residents and fellows. This year’s symposium included 18 presentations on a wide variety of basic and clinical research topics. These presentations were ranked by DoS research leadership on scientific merit and validity, presentation skills, and preparedness for questions and audience comments. Congratulations to all participants for their hard work. Read the entire Schilling booklet.

Dr. Susarla New Chief of Craniofacial and Pediatric Plastic Surgery and Surgical Director of the Craniofacial Center

Dr. Srinivas Susarla has been announced as the new Chief of the Division of Craniofacial and Pediatric Plastic Surgery and Surgical Director of the Craniofacial Center. Dr. Susarla is also the Division Chief of Pediatric Oral and Maxillofacial Surgery at Seattle Children’s.

“The Division of Craniofacial and Pediatric Plastic Surgery is one of the premier reconstructive programs in the nation. We have an exceptionally talented group of surgeons who are recognized internationally for their expertise with complex cases, cutting-edge techniques, rigorous assessment of clinical outcomes, and constant work to provide equitable and accessible care. As a Division, we are dedicated to ensuring that our patients receive the right interventions at the right time by an experienced team and cultivating an environment that provides equitable, ethical, evidence-based, and culturally sensitive care.”

Dr. Susarla’s clinical practice focuses on pediatric and adult craniofacial reconstructive surgery, including management of craniosynostosis, cleft lip and palate, dentofacial deformities, maxillofacial pathology, and primary and secondary reconstruction following facial trauma. He is one of the few craniofacial surgeons in the country who is board certified in both plastic surgery and oral/maxillofacial surgery.
Dr. Thomas Hatsukami Receives 2024 Schilling Distinguished Faculty Award

Dr. Thomas Hatsukami was born in Portland, Oregon, and raised in Eureka, Oregon. He was awarded a scholarship to attend Stanford University for his undergraduate education and subsequently enrolled at University of California, Los Angeles for medical school. He embarked on his post-graduate training at the University of Washington (UW) as a general surgery resident. During the early years of his residency, Dr. Schilling was Chair of the Department of Surgery. Dr. Hatsukami subsequently completed his vascular surgery fellowship and research fellowship at the UW. He has clinically practiced at the VA Puget Sound Health Care System and Harborview Medical Center, and in 2016 he was awarded the V. Paul Gavora and Helen S. and John A. Schilling Endowed Chair in Vascular Surgery.

During his time as a trainee at UW, Dr. Hatsukami was fortunate to work with excellent mentors such as Drs. Eugene Strandness, Alec Clowes, and Stephen Schwartz. Dr. Hatsukami has been the co-director of the UW Vascular Imaging Lab (UW-VIL) since 1995 with his longtime colleague Dr. Chun Yuan, who is internationally recognized as a pioneer and thought leader in the field of vessel wall imaging with MRI and is currently Vice Chair for Research at the University of Utah. Their work in the field of vascular imaging along with Marina Ferguson, who was Director of Histology in their lab, led to UW being recognized as the preeminent institution for characterization of the vulnerable vascular plaque. Dr. Hatsukami has been involved as PI, multi-PI or co-investigator in 16 completed and two active NIH-funded clinical studies, as well as 13 other funded trials. One of the issues that has plagued vascular surgery is solely using the degree of stenosis to characterize carotid pathology and intervention. It has been well described that some plaques with similar degree of stenosis remain stable over time and others lead to a stroke. Earlier work by the team of investigators at UW-VIL studied the role of the neovasculature within an atherosclerotic plaque and the likely association of infiltration of inflammatory cells that could lead to plaque instability. Using dynamic contrast-enhanced MRI, UW-VIL was able to non-invasively study the extent of neovasculature and provide a link to plaque instability. Another significant finding from UW-VIL was utilizing MRI to monitor plaque progression, and they were one of the first to demonstrate that intraplaque hemorrhage (IPH), identified by MRI, was associated with more rapid carotid plaque progression and with an increased risk for subsequent transient ischemic attack or stroke. Recently there has been a movement for nonoperative therapy for asymptomatic carotid stenosis and Dr. Hatsukami’s work has identified areas which can assist in further classifying which patients warrant intervention. The UW-VIL continues to study plaques in other vascular beds as well.

Dr. Hatsukami completed an endovascular fellowship in 2009 and moved his clinical practice to Harborview Medical Center until 2013. While focused on research and being an expert open vascular surgeon, he took the time to learn new endovascular skills and become an expert in this area as well.

Dr. Hatsukami’s career has taken him all over the world as a visiting professor and named lecturer at prestigious institutes as well as the recipient of numerous travelling fellowships. He has over 200 combined publications and has co-mentored 37 research fellows, 22 vascular surgery fellows, and nine graduate students. Dr. Hatsukami is most proud of the teamwork and collaboration in the UW-VIL. As he stated, “I want to thank all the members of the Vascular Imaging Lab over the years who spent countless hours in the lab, many who have carried on and established successful research careers at their home institution.” He is humble and generous, and has been a leader in research, education, and clinical care—a bright light in the University of Washington Department of Surgery.

Contributed by Niten Singh, MD, FACS
Professor & Interim Chief
Director of Limb Preservation Services
Division of Vascular Surgery
University of Washington
publications

“Intensive Care Unit Readmission in Injured Older Adults: Modifiable Risk Factors and Implications”

_The Journal of Trauma and Acute Care Surgery_

May 2024

**Dr. Lauren Agoubi**
Research Resident

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

**Dr. Kathleen O’Connell**
Assistant Professor
Division of Trauma, Burn & Critical Care Surgery

**Dr. Ronald Maier**
Professor
Division of Trauma, Burn & Critical Care Surgery

**Dr. Lisa McIntyre**
Professor
Division of Trauma, Burn & Critical Care Surgery

“Long-term Outcomes of the Kono-S Anastomosis: A Multicenter Study”

_Diseases of the Colon & Rectum_

March 2024

**Dr. Daniella Rebollo Salazar**
R4 General Surgery-Categorical

**Dr. Mukta Krane**
Associate Professor & Section Chief, Colorectal Surgery
Division of General Surgery

“Making a Statement: Positions of Professional Medical Organizations Towards Gener-Affirming Care”

_Annals of Surgery_

May 2024

**Dr. Danielle Eble**
R4 Plastic Surgery

**Dr. Russell Ettinger**
Assistant Professor
Division of Plastic Surgery

**Dr. Shane Morrison**
Assistant Professor
Division of Plastic Surgery
**In the Media**

*Listen*

**May 22, 2024**

"Update on UW Medicine's Robotic Surgery System"

**Dr. Jim Park**

Professor, HPB Surgical Oncology  
Medical Director, Liver Tumor Clinic  
Chair, Robotic Steering Committee  
Department of Surgery—UW Medicine

**May 1, 2024**

"Current Status of ECMO"

**Dr. Jay Pal**

Professor of Surgery  
Section Chief, Cardiac Surgery  
Vice Chair, Quality and Safety  
Department of Surgery - UW Medicine

**April 3, 2024**

"Cured Into Destitution: Understanding Financial Toxicity After Trauma and Emergency Surgery"

**Dr. John Scott**

Assistant Professor of Surgery  
Division Trauma, Burn, & Critical Care  
Department of Surgery–UW Medicine  
Adjunct Associate Professor  
Department of Health Metrics Sciences

**March 6, 2024**

"Surgical Impact of the Evolving Landscape of Immunotherapeutics"

**Dr. Amanda Kirane**

Assistant Professor of Surgery  
John and Marva Warnock Faculty Scholar  
Director, Cutaneous Surgical Oncology  
Stanford University School of Medicine

**February 7, 2024**

2024 DR. WALTER SCOTT BROWN DIVERSITY GRAND ROUNDS

"Enhancing Ethnic Diversity of the Academic Surgery Workforce: RECLAIMING the Narrative"

**Dr. Paris Butler**

Associate Professor  
Vice Chair of Diversity, Equity, and Inclusion  
Division of Plastic Surgery  
Department of Surgery  
Yale University Health System

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**"Clinical Challenges in Surgical Palliative Care: Communication Skills for Difficult Conversations"**

*Behind the Knife Podcast - Episode #747*

May 6, 2024

Dr. **Kathleen O’Connell**, Assistant Professor  
*Division of Trauma, Burn & Critical Care Surgery*

Dr. **Ali Haruta**, Palliative Care Fellow

Dr. **Lindsay Dickerson**, Research Resident

Dr. **Virginia Wang**, General Surgery Resident

**"Stop the Falls"**

*AAST Turnover Time*

March 20, 2024

Dr. **Erika Bisgaard**, Assistant Professor  
*Division of Trauma, Burn & Critical Care Surgery*
Mark Your Calendar

2024 Department of Surgery
Chief Residents’ Graduation Dinner
Saturday, June 15, 2024
5:30pm-9:30pm
Bell Harbor International Conference Center
Check email for event details.

2024 Harkins Symposium &
75th Annual Dr. Alfred A. Strauss Lecture
Friday, November 1, 2024
7:00am-4:00pm
Patricia L. Turner, MD, MBA, FACS
Executive Director & Chief Executive Officer,
American College of Surgeons
More details to be announced.

2024 Harkins Alumni Dinner
Friday, November 1, 2024
6:00pm-9:00pm
Ivar’s Acres of Clams
More details to be announced.

2025 Research Symposium &
30th Annual Helen & John Schilling Lecture
Friday, March 1, 2025
More details to be announced.
Contact dosadmin@uw.edu / 206-543-3680 for information.

Surgery Synopsis is an in-house newsletter published on a quarterly basis to highlight the clinical, 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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