Friends & Colleagues of the Department of Surgery:

I am pleased to present the Spring 2013 edition of Surgery Synopsis.

Surgery Synopsis Redesign: You will find that Surgery Synopsis has a new look. UW Medicine has rolled out a branding identity and our new template fits well in this new brand. I want to thank our editorial team, and in particular Michael Hilleary, Communications & Media Specialist, for this makeover. I think you will find it attractive, readable and a fresh look and I would love to hear comments from our readers.

Schilling Lecture and Resident Research Presentation Day: The Schillings would have been so proud to see their legacy in the form of the Schilling Research Day and the Schilling Lecture! With the new format that we started last year under the leadership of our Vice Chair (continued on page 2)

On Friday, February 22, 2013, the Department of Surgery was proud to host Anthony Atala, MD (pictured right) as the 19th Annual Helen & John Schilling Lecturer. Dr. Atala is a practicing surgeon and researcher, and is a world renowned expert in regenerative medicine. His talk, “Regenerative Medicine: New Approaches to Healthcare,” addressed the increasing shortage of transplantable organs and discussed the history, science, and opportunities in the field of organ and tissue engineering as a solution for this crisis. As Director of the Institute for Regenerative Medicine, Dr. Atala leads an interdisciplinary team that is working to engineer more than 30 different replacement tissues and organs and develop healing cell therapies. His talk included a particularly moving success story in a patient, who as a newborn, received one of the first engineered bladders over 10 years ago. He also discussed a number of recent advances in the field, perhaps the most exciting of which is the use of 3D printers that use living cells to create transplantable organs.

Dr. Atala completed both his medical degree and residency in urology at the University of Louisville. In 1990, he went on to complete a two-year pediatric urologic surgery subspecialty training program at Children’s Hospital, Harvard Medical School in Boston, MA. He held a faculty position at Harvard Medical School from 1992-2004, after which he assumed his current position at Wake Forest School of Medicine as Professor and Chair of the Department of Urology and Director of the Institute for Regenerative Medicine. He has led or served on a number of national organizations focused on this research, including the National Institutes of Health Working Group on Cells and Developmental Biology, the National Institutes of Health Bioengineering Consortium, and the National Cancer Institute’s(continued on page 2)
Chair for Research, Dr. David Flum, including faculty presenting their research and with exciting new work by our residents and fellows the day was a total success. Dr. Anthony Atala presented “Regenerative Medicine: New Approaches to Healthcare” as his Schilling lecture is the jewel in this wonderful crown. I think you will enjoy reading about this day and again, we thank Helen Schilling and her husband John for the vision and the generosity they had for our Department and the school.

**Featured Researcher:** For this issue, we chose to feature Dr. Ben Starnes’ research. He and his team are in the midst of a clinical trial that is making enormous changes to the way AAA’s are managed by changing the way in which the stent graft is modified and implanted. They are approximately at the mid-point in the research project and the results are encouraging.

**Resident and Faculty Team Produce Burn Videos:** One of our residents, Jonathan Kohler, MD, and Dr. Tam Pham (Associate Professor in the Department of Trauma, Critical Care & Burns) teamed up some 7 years ago - on their own time - to begin a project that has just reached conclusion. With the help of Dr. Nicole Gibran, they turned a written document on the care of burns into a series of videos on burn care that is available on YouTube and iTunes U for all to view who may be interested in treating burns. Congratulations to them for their ingenuity and persistence. Read about it and then click into the videos.

**UW Montlake Tower Expansion:** In this issue we have included a story about the expansion of UW Medical Center into the Montlake Tower. It opened in October 2012. The expansion is important to care for the increasing number of patients in Oncology, Neonatal Intensive Care and Radiology and to keep the UW a full-service tertiary and quaternary care facility. The building is energy-efficient and surpasses Seattle guidelines by 30%.

There is much more within the issue, including the “Choosing Wisely” Recommendations from the Society for Thoracic Surgeons, of which Dr. Doug Wood is the President, the reinvigorated “Resident Corner,” faculty honors and awards and updates on the Department’s Research Reinvestment Fund Awards.

I hope that you enjoy this issue of Surgery Synopsis.

Sincerely,

Carlos A. Pellegrini, MD, FACS, FRCSI (Hon.)
The Henry N. Harkins Professor & Chair
Department of Surgery
University of Washington

**2013 Schilling Lecture — Continued from page 1**

Drs. David Flum and Anthony Atala.

Advisory Board. In 2011 he was elected to the Institute of Medicine of the National Academy of Sciences.

Dr. Atala has won numerous awards for his work, including the U.S. congressionally-funded Christopher Columbus Foundation Award, bestowed on a living American who is currently working on a discovery that will significantly affect society; the Samuel D. Gross Prize, awarded every 5 years to a national leading surgical researcher by the Philadelphia Academy of Surgery; and the Innovation Award from the Society of Manufacturing Engineers for the creation of synthetic organs. He has published over 400 peer-reviewed papers and is a highly sought-after speaker, having given nearly 400 presentations in his career. Dr. Atala is Editor-in-Chief of Current Stem Cell Research and Therapy and Therapeutic Advances in Urology, and serves in varying capacities on a number of other journals. He is also named on 43 US patents.

Dr. David Flum presenting Schilling Lecture certificate to Dr. Anthony Atala.

(continued on page 3)
Dr. Atala’s Schilling lecture was preceded by the annual Resident Research Symposium during which 21 Department of Surgery residents and fellows presented their research on a variety of basic research and health science topics. Dr. Atala helped rank the residents on the quality of their presentations, and the depth and strength of their scientific understanding and analysis. Congratulations are in order for this year’s winners:

1st place: Rebecca Plevin, MD, “The Role of LPS Structure in Monocyte Activation and Cytokine Secretion.” Dr. Plevin’s research interests developed after working in the trauma ICU and observing the varied responses patients had to infectious insults following traumatic events. Her presentation regarding lipopolysaccharide structure is one component of her larger ongoing investigation into the multiple cell pathways that are involved in the immune response.

2nd place (tie): Thurston Drake, MD, “Is Appendicitis a Ticking Time Bomb? Time to Treatment and the Risk of Perforation After Patients Reach the Hospital.” One of Dr. Drake’s primary research interests involves the challenges of diagnosing appendicitis and the reasons for wide variation in disease progression among patients. His study examined the relationship between risk of perforation and elapsed time from presentation to surgery as a means of evaluating the traditional theory that luminal obstruction leads to perforation without timely intervention.

2nd place (tie): Timo Hakkarainen, MD, “Skin Antiseptic Agents and Surgical Site Infection: a Report from Washington State’s Surgical Care and Outcomes Assessment Program.” Dr. Hakkarainen’s major research interest is in comparative effectiveness and the extent to which even small surgical interventions enhance outcomes and patient quality of life. His Schilling presentation addressed the effectiveness of chlorhexidine in isopropyl alcohol for reducing SSI in clean-contaminated procedures and the overall usefulness of expensive skin preparation agents.

3rd place: Daniel Mulloy, MD, “Ex Vivo Reconditioning of Non-Heart-Beating Donor Lungs in a Preclinical Porcine Model: Delayed Perfusion Results in Superior Lung Function.” Dr. Mulloy discussed the application of advances in mechanical circulatory support to the field of lung transplantation in an effort to improve lung graft preservation. He plans to continue to push the expansion of ex vivo lung perfusion to allow more frequent use of lungs from non-heart beating donors and greatly expand the pool of available lung grafts.

In addition to the resident research presentations, there were three talks highlighting faculty research:

Nicole Gibran, MD, “UW Medicine Burn Center Research Program.” Dr. Gibran is a Professor of Surgery and Director of the UW Medicine Regional Burn Center at Harborview Medical Center. She presented an overview of the ongoing research in the Burn Center as well as her own personal research interests.

Charles Mock, MD, PhD, MPH, “Strengthening the Prevention and Treatment of Injuries Globally.” Dr. Mock is a Professor with the Departments of Surgery and Epidemiology and also holds an adjunct appointment as Professor of Global Health. Dr. Mock presented an overview of his research in the global arena, focusing particularly on his time in Ghana and then at the World Health Organization (WHO).

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The Research Reinvestment Fund (RRF) was established to help achieve the Department of Surgery’s goal of becoming the premier home for surgical research. The second round of proposals for 2013 was recently completed with numerous faculty submissions. While all of the proposals addressed significant research questions, four were judged to be especially impressive in terms of their deliverables and potential returns on investment. Congratulations are in order to the following investigators:

**Heather Evans, MD, MS**, Assistant Professor, Trauma, Burn and Critical Care Surgery. This award provides support for development of an innovative mobile app (mPOWEr) to enable patient-directed post-discharge surveillance of surgical site infections (SSI). mPOWEr will be tested in patients at high risk for SSI to assess usability and the app data will be presented to providers to validate clinical assessment. This pilot data will establish proof of concept to conduct a comparative effectiveness trial measuring patient satisfaction and empowerment, time to diagnosis and treatment of SSI, and healthcare utilization including ER visits and readmissions.

**Charles Mock, MD, PhD, MPH**, Professor, Trauma and Burn and Critical Care Surgery. Dr. Mock’s funding will provide support for a cutting edge strategic analysis of the barriers low income countries face in basic trauma care technologies into their healthcare systems. The project will examine issues such as equipment costs, lack of trained personnel, and stock outs of needed supplies. The pilot data he gathers will inform major funders regarding high yield areas for health systems research and future product development opportunities.

**Gale Tang, MD**, Assistant Professor, Vascular Surgery. This funding will be used to develop a better understanding of the molecular control of collateral artery development through the examination of the role that the kinase inhibitor p27Kip1 plays in collateral artery development. The project will lay the foundation for future mechanistic studies into p27Kip1’s role in arterial remodeling as well as allow for testing of possible therapeutic strategies for revascularizing critical ischemic patients.

**Tom Varghese, MD**, Associate Professor, Cardiothoracic Surgery. Tom is medical director of Strong for Surgery, a public health campaign launched in Washington state in May 2012 aimed at identifying and improving evidence-based practices for elective surgical patients in the presurgical office setting. The Department of Surgery Reinvestment fund will help in the design and development of an integrated web-based, electronic platform for the Strong for Surgery intervention to include the following four components: a personalized checklist, a results delivery mechanism to patients and providers, an automated protocol for pre-operative patient reminders, and a patient reported outcomes survey mechanism.

The total award for this quarter was $200,000, and it is anticipated that the results of these exciting projects will result in further funding from external sponsors.
Cardiothoracic Surgery—“Choosing Wisely” Recommendations

Douglas Wood, MD. UW Professor and Chief of Cardiothoracic Surgery is the newly elected Society of Thoracic Surgeons (STS) President. Below is a press release describing the Choosing Wisely campaign and its recommendations. Dr. Wood, who was an active participant in this campaign, comments on the Choosing Wisely recommendations.

The Society of Thoracic Surgeons (STS) released a list of specific tests and procedures that are commonly ordered, but not always necessary in cardiothoracic surgery. The list is part of the Choosing Wisely® campaign, an initiative of the American Board of Internal Medicine (ABIM) Foundation that identifies targeted, evidence-based recommendations that can support conversations between patients and physicians about what care is really necessary.

STS made the following five recommendations for cardiothoracic surgery:

- Patients who have no cardiac history and good functional status do not require preoperative stress testing before noncardiac thoracic surgery;
- Do not initiate routine evaluation of carotid artery disease before cardiac surgery in the absence of symptoms or other high-risk criteria;
- Do not perform a routine predischarge echocardiogram after cardiac valve replacement surgery;
- Patients with suspected or biopsy proven stage I non-small cell lung cancer do not require brain imaging before definitive care in the absence of neurologic symptoms; and
- Before cardiac surgery, there is no need for pulmonary function testing in the absence of respiratory symptoms.

All five recommendations and the process of selecting the final list are outlined in a Special Report in the March 2013 issue of The Annals of Thoracic Surgery.

“The STS has long been a leader in data-driven and patient-centered health care,” wrote STS President Douglas E. Wood, MD, (pictured above) Chief of the Division of Cardiothoracic Surgery and Vice-Chair of the Department of Surgery at the University of Washington and colleagues. “Choosing Wisely allows the STS to continue that leadership alongside like-minded specialty societies to empower the physician-patient dialogue and to avoid unnecessary procedures that may harm patients while driving up health care costs.”

By releasing the Choosing Wisely list, the Society hopes to challenge common practice - practice that may be imbedded in tradition, routine, or defensive medicine, but may not have good justification, according to Dr. Wood. The list is not meant to be rigid or constraining; the goal is for open communication between surgeons and patients to empower the two together to make better decisions about health care choices.

Sharing in this goal and releasing lists along with STS at a Washington, DC, press conference were 16 other organizations representing more than 350,000 physicians, nurses, pathologists, radiologists, and other health care professionals. To view the full listing, visit www.choosingwisely.org/doctor-patient-lists/.

To date, more than 130 tests and procedures to question have been released as part of the Choosing Wisely campaign, and the specialty societies responsible for these recommendations are now undertaking considerable efforts to share them with their collective memberships of more than 725,000 physicians.

To learn more about Choosing Wisely and to view the complete lists, with additional detail about the recommendations and evidence supporting them, visit www.ChoosingWisely.org.
A recent alumnus, Heather Wheeler, MD, shared her career and family news and reflected upon her time as a general surgery resident (2007-2012) at the University of Washington. Many of you will know Dr. Wheeler.

“Hello from exotic Renton, WA! I started my job as a general surgeon at Valley Medical Center in September, and things are going very well so far. I get to do quite a broad range of cases, including some thoracic. I am even starting to go through training to do robotic cases. Thanks again to Gary Mann and Jim Park for giving me a chance to experience the robot when I was a resident. I am really enjoying myself, and I’m so glad I decided to go into general surgery community practice.

My husband Eric and I got married in December on the beach in Puerto Rico. He also recently started a new job with eBay. We are official East Siders now, as we bought a new house in Renton and moved in about two weeks before our wedding. Our lives are quite different from a year ago!

For those residents who are thinking about going into community or private practice, I want you to know that we are well trained.

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Honors, Awards and Publications

Ben Anderson, MD, received the National Consortium of Breast Centers’ Inspiration Award during the 2013 National Interdisciplinary Breast Conference. This award is given annually to the individual who embodies the spirit of selfless leadership and provides the inspiration for all other providers of breast health care.

Patch Dellinger, MD, received the UWMC Service Award for his 35 years of service.

Andre Dick, MD, was appointed to The American Society of Transplant Surgeons’ (ASTS) Fellowship Training Committee through 2016. The American Society of Transplant Surgeons is dedicated to fostering and advancing the practice and science of transplantation for the benefit of patients and society.

Jason Ko, MD, was awarded funding from the Musculoskeletal Transplant Foundation (MTF) for his proposal entitled “Vascularized Composite Allotransplantation (VCA) of the Elbow: A Study of Vascular Perfusion and Technical Feasibility.”

James Perkins, MD, was appointed as a representative to the Association of American Medical Colleges Council of Faculty and Academic Societies (CFAS).

The purpose of the Council of Faculty and Academic Societies (CFAS) is to serve as a forum reflecting the diversity of medical school faculties represented by the Association of American Medical Colleges. Its members are drawn directly from the faculty rosters of each individual school as well as the academic professional societies that are populated with faculty from many schools. As such, the CFAS will identify critical issues facing faculty members of medical schools, provide a voice for faculty about those issues to the AAMC as they relate to creation and implementation of the AAMC’s programs, services, and policies, and serve as a communications conduit with faculty regarding matters related to the core missions of academic medicine.

Edward Verrier, MD, has been selected as the American Heart Association’s (AHA) “Golden Heart Honoree.” Each year, the AHA selects an individual that epitomizes the goals of the AHA and this year Dr. Verrier has stood out among his peers for all of his work in the community. These goals include: advancement of scientific knowledge, either basic or clinical research, which relates directly to clinical cardiology; teaching of cardiology at undergraduate, graduate or postgraduate levels; improvement in the practice of cardiology; and service to the mission of the AHA.

John Waldhausen, MD, was elected to the pediatric surgery board of the American Board of Surgery (ABS) as the American Pediatric Surgical Association’s (APSA) representative. He will begin his term of office in June 2013 through 2019.

Douglas Wood, MD, was elected by the Society of Thoracic Surgeons’ (STS) membership to serve as the Society’s 2013-2014 President.

Residents

Callie M. Thompson, MD, has been awarded a grant from the Washington State Council of Fire Fighters (WSCFF) Burn Foundation for her proposal entitled “The Potential Early Biomarkers for Prediction of the Development of Hypertrophic Scars.”
Physician-Modified Endovascular Graft (PMEG) outcomes are dramatically improving results for patients with inoperable Abdominal Aortic Aneurysms (AAAs). Now in its third year, an important clinical trial studying PMEG implementation headed by PI, Dr. Benjamin Starnes, UW Professor and Chief of Vascular Surgery, Department of Surgery, is changing the way many inoperable AAAs may be treated in the future. AAAs have long been one of the most challenging and dangerous of conditions for vascular surgeons to treat. Open aneurysm repair was the main intervention for AAA's from the 1950's until endovascular aneurysm repair (EVAR) became practical in the 1990s. While not a suitable solution for every patient, EVAR holds many improvements over the traditional open method which requires large incisions and the need for the aorta to be clamped off during the repair (which can cause a host of complications). EVAR is less invasive, meaning less time in the hospital and less overall recovery time.

EVAR uses stent grafts to repair the AAA. Stent grafts are marvels of science: fabric-and-metal tubes crimped tightly enough to be threaded through an artery, then expanded and wedged in place to re-establish optimal blood flow. These stents, however, are not optimal for an aneurysm that is not in the “usual place” but is perhaps near the superior mesenteric or renal arteries. These grafts need customization to correct the aneurysm. Modifying stent grafts to handle these abnormally presenting AAAs has been possible for several years, but until recently only the stent manufacturer could provide such modifications and the process could take up to three months. For patients unable to undergo open surgery, the lag time until a customized stent graft could be manufactured often meant a poor outcome for the patient.

Dr. Starnes faced this issue with many of his own patients and was determined to find other options. Dr. Starnes, who came to the Department of Surgery in 2007 from the US Army, is known for his technical skill, his enthusiasm and ingenuity. And, he doesn’t take “no” for an answer. He concluded that by using leading-edge software which reconstructs a patient’s anatomy in vivid 3D from CT and MRI scans, he could preoperatively modify the stent graft implant with fenestrations (i.e., windows), to permit continued blood flow from the aorta into the adjoining superior mesenteric and renal arteries. He could also fit those arteries with stents and join them to the main graft for greater anchorage.

Using this new technique, Dr. Starnes performed the procedure dozens of times when patients had no other options, and the vast majority of the patients had remarkably successful outcomes. However, it was determined by the Centers for Medicare & Medicaid Services (CMS) that this was an “off-label” use of a device and needed approval of the Food and Drug Administration (FDA) to be used/modified in such a procedure. CMS declined to reimburse either the hospital or professional services for this procedure until approval could be issued from the FDA.

Noridian (the Medicare third-party carrier for UW), suggested that Dr. Starnes submit an investigational device exemption request to the FDA. An objective, external review of all cases done to date was conducted by a third party. They pronounced the results of the cases done to that point, “phenomenal” and the application to the FDA was prepared.

Dr. Starnes, with the expert help from research nurse, Ms. Billi Tatum (pictured right), submitted a proposal that described the protocol, rationale and outcomes evidence. In January 2011, the University won unconditional approval from the FDA to conduct a 150 patient trial of PMEGs for juxtarenal aortic aneurysms. At this point, UW Medicine is the only US provider permitted by the FDA and CMS to offer this uniquely promising procedure.

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In October 2012 UW Medical Center inaugurated the Montlake Tower, a gleaming new wing on its south side. The $215 million project immediately increased patient capacity in three important areas and boasts leading-edge technology whose use was just approved in June 2012 by the FDA.

Construction of the new eight-story building started in April 2009. This phase of the project includes increased capacity for oncology and neonatal intensive care unit patients, as well as more space for leading-edge digital imaging technology. Two floors will house administration and three floors are shelled for future expansion.

Here are some features of the new building:

Oncology Services expansion on the eighth floor includes 30 single rooms for patients with blood diseases; two isolation rooms for greater infection control; and a comfortable family lounge with household amenities, including bath and shower, comfortable sitting spaces, washer/dryer and kitchenette. The staff conference room has interactive white boards and videoconferencing capability to promote medical education among staff and distance learners.

Neonatal Intensive Care Unit expansion on the fourth floor can accommodate 47 infants in 39 single rooms and four rooms for twins, making it one of the largest neonatal ICUs in the Pacific Northwest. The new neonatal ICU includes an infant operating room, a pediatric pharmacy, a family lounge with household amenities, and an advanced security system. The floor also provides “front porch” benches along the corridor to foster conversation and community among family members. A centrally located rounds area offers a shared work space for multidisciplinary team.

Radiology expansion on the second floor includes leading-edge digital imaging technology for diagnosing and treating brain tumors and neurovascular and vascular diseases. The new space includes four CT scanners, two magnetic resonance scanners and four angiography suites. The interventional radiology suite is custom-designed by Philips so that, if necessary, patients can have all three types of treatment in one session.

The tower is among the first facilities to employ recommendations of an energy-reduction study published in 2010 by the UW’s Integrated Design Lab and a consortium of architects, engineers and builders. The structure’s energy efficiency surpasses Seattle’s guidelines by 30 percent, says Duncan Griffin, a senior architect at NBBJ, the tower’s design firm. Reduced power requirements brought by LED lighting, solar shading and other advantages are projected to save upward of $276,000 annually.

Story sources UWMC Online News and UW Environmental Stewardship & Sustainability
Photos by Clare McClean/UWMC
Department of Surgery Grant Activity Report

In the fourth quarter of 2012 our department’s researchers received 10 awards totaling $1.8 million, three of which were new and competing renewals:

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<tr>
<th>Principal Investigator</th>
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<th>Sponsor</th>
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<tr>
<td>Nicole Gibran, MD</td>
<td>Northwest Regional Burn Model System Center</td>
<td>US Department of Education</td>
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<tr>
<td>Nicole Gibran, MD</td>
<td>A prospective, open, non-controlled clinical investigation to evaluate the adequacy of a new donor site dressing in surgical burn patients</td>
<td>Molnlycke Health Care AB</td>
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<tr>
<td>Nam Tran, MD</td>
<td>A Prospective, Single-blind, Randomized, Phase III Study to Evaluate the Safety and Efficacy of Fibrin Sealant Grifols as an Adjunct to Hemostasis during Peripheral Vascular Surgery</td>
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In the first quarter of 2013, there were an impressive 19 new and competing renewal applications from our department. We will continue to provide the department’s grant awards in future newsletter publications.

Congratulations to these investigators for their continued efforts and successes in an ever more difficult funding environment.

Other News in the Department of Surgery...

- Monica Morrison, PA-C, Transplant Physician Assistant was recently nominated for the Maria Hall Award for excellence in patient and family centered care. This award recognizes staff and volunteers who put patient and family centered care values into action.

- Hear the word “Haborview” and what do you think? The trauma center for the area’s most critical cases. You’re right. It’s that – but it’s so much more. Read the Bellevue Reporter article on Harborview Medical Center.

2013 Schilling Lecture — Continued from page 3

Thomas Varghese, MD, MS, “Strong for Surgery: Changing Clinical Practice.” Dr. Varghese is an Associate Professor in the Division of Cardiothoracic Surgery and Director of Thoracic Surgery at Harborview Medical Center. He is the Medical Director of the Strong for Surgery program, a novel, patient-centered approach in Washington State focused on improving outcomes by engaging patients in the pre-surgical clinic to modify surgical risk factors. Dr. Varghese presented details of the program as well as future directions.

The Helen and John Schilling Endowed Lectureship was established by the late Helen Schilling to bring distinguished scholars to the Department of Surgery 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 in honor of her husband, John.

Alumni Corner — Continued from page 6

and prepared to do that. We get excellent clinical exposure and technical training at UW, and I rely on that training every day; it has served me well. If any of you have questions about general surgery community practice or if you’d like to spend some time with me in my practice, I encourage you to contact me. My email address is heatherkalani@gmail.com.

I hope everyone enjoys the end of the academic year, and I hope our paths cross in the future!”

Clinical Trial: Physician-Modified Endovascular Grafts — Continued from page 8

are proving that the modifications to the device are very effective. The study results will be submitted for product approval to the FDA and the governing agencies of other countries.

Dr. Starnes has recruited Dr. Matthew Sweet (Assistant Professor in the Division of Vascular Surgery) into the research study and others of his team are learning to do modifications to the stents as well. Dr. Starnes is thus far thrilled with the outcomes and with his team. He states that the team makes all the difference; without his co-investigators and the expert assistance of his Research Nurse Coordinator, Ms. Billi Tatum, along with the administrative support of the Department of Surgery, this life-saving device and technique might never have won approval.
HARKINS SYMPOSIUM AND 
64TH ANNUAL 
ALFRED A. STRAUSS LECTURE 
Friday, October 18, 2013 

Annual Harkins Symposium 
Lyceum Auditorium, First Floor UW HUB 
7:15am – 2:30pm 

64th Annual Alfred A. Strauss Lecture 
Thomas Russell, MD 
Clinical Professor of Surgery 
University of California at San Francisco 
And Past Executive Director 
American College of Surgeons 
Hogness Auditorum, Room, A-420, 4:00pm 
Magnuson Health Sciences Bldg. 

HARKINS SOCIETY ANNUAL MEETING 
AND BANQUET 
Friday, October 18, 2013 
Location and details TBA 

20TH ANNUAL SCHILLING RESEARCH 
SYMPOSIUM & LECTURE 
Friday, January 31, 2014 
Timothy R. Billiar, MD 
George Vance Foster Professor & Chair 
Department of Surgery 
University of Pittsburg 
Location and details TBA
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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