

SURGERY

Synopsis

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Chairman’s Message



Carlos A. Pellegrini, MD,
FACS, FRCSI (Hon.)
The Henry N. Harkins
Professor & Chair

Friends & Colleagues of the Department of Surgery:

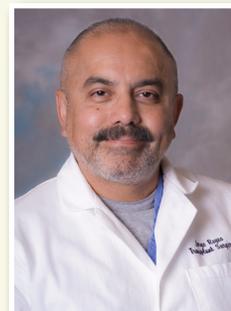
In this issue we focus on **Diversity and Inclusion**: how we define each within the School of Medicine and in our Department as well as what we have been doing for a very long time to integrate them into every aspect of our Department life.

Some recent history: In February 2010, [Dean Paul Ramsey](#) created the Diversity Strategic Planning Committee (DSPC) “to develop a new strategic plan for diversity programs in the University of Washington School of Medicine” (UW SOM). The DSPC was asked to determine how the UW SOM is positioned with regard to diversity through a broad institutional assessment and to develop a set of recommendations that would enable the UW SOM to advance and to sustain a learning environment that was welcoming to, and inclusive of individuals from all cultures. The recommendations from the DSPC were expected to emphasize excellence, equity and effectiveness in support of the UW SOM’s teaching, research and patient care programs. I was pleased to be asked to Chair this effort.

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Diversity and Inclusiveness: Critical Components of Excellence in the Department of Surgery

“Let me give you an example of why a diverse healthcare team is important for excellent patient care. We recently had a young boy come to Seattle from Alaska to have a liver transplant. The transplant surgery went well, there was no indication of organ rejection, all appeared on track for a successful recovery and long life for this young man. However, a few days went by and he was not eating, not gaining strength and generally his recovery was in some jeopardy. We could not understand why he wouldn’t eat; nothing tempted his appetite. The family was of Alaskan Native American background; while they spoke perfect English and understood medically what needed to happen with their son they seemed disconnected from his caregivers and offered no insights about the appetite issue. Frankly they seemed in culture shock, and so were we. We suspected that it was more than likely a social/ cultural issue than a medical issue, and we needed someone with insight into the Alaskan Native American culture. We located a hospital caregiver who was also an Alaskan Native American. She spent time with the patient and his family. What she discovered is the patient hated *our food*. Hamburgers, pizza or anything else we typically feed other young transplant patients just did not appeal. Our cultural interpreter said, he was used to salmon, elk, and moose meat and that was what he wanted. We immediately arranged for special meals to be prepared from food that was native to his part of Alaska. That was the secret. As soon as he had that food his appetite picked up and he recovered well. This young man is a United States citizen, spoke English, but his culture is so completely different than what we are familiar with that had we not had a diverse staff, the outcome for this young boy might not have turned out well.”



Professor, Chief of
Transplant Surgery &
Chair of Council on
Diversity and Inclusion

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Chairman's Message

Continued from page 1

From the start of the Committee's deliberations it became obvious that in order to deliver on its charge, the DSPC should define **diversity and inclusion** – two inseparable components of a multicultural organization – as they impact the world of Medicine. It should not focus on the idea that diversity and inclusion are important moral virtues that should be nurtured as a matter of social justice (though they are), but instead, on the fact that diversity and inclusion foster innovation and creativity and provide the energy to drive organizations to reach their full potential. In the case of the UW SOM diversity and inclusion make us better able to improve the health of the public.

The UW SOM has not only defined the roles of diversity and inclusion but has gone further in creating a Chief Diversity Officer (CDO) position to lead in these organizational efforts. In June 2013, I was honored to be asked by Dean Ramsey to chair the search committee for the CDO. Recently, [Leo Morales, MD, PhD](#), (pictured right) was named to this office and I look forward to working with him as we define how departments incorporate diversity and inclusion into their fundamental structures.



As you will read in the central article in this issue of *Surgery Synopsis*, the principles that focused the work of the UW SOM diversity and inclusion recommendations have carried to the departmental level. We have our own Council on Diversity and Inclusion, Chaired by [Dr. Jorge D. Reyes](#), Chief of the Division of Transplant Surgery. You will read the mission statement this group created and that has since been adopted by the Department as well as the ongoing efforts we are making to make diversity and inclusion not just projects, but the fabric of our Department.

[Dr. Sara Javid](#), general surgeon, is the featured researcher this issue. Her research focuses on healthcare disparities with the goal of improving cancer health outcomes and quality of life specifically for American Indian and Alaskan Native patients which has the worst five-year survival across cancer types among all racial/ethnic groups in the USA.

Also in this issue, say goodbye to our graduating Chief Residents and we welcome all our new residents and take particular pleasure that we are increasing the diversity in under-represented minorities (URMs) within that group.

I am so strongly convinced that much of what is right about America has had to do with its long history of diversity and inclusiveness, that I am particularly pleased to present this issue of *Surgery Synopsis*. I hope you enjoy it.

Sincerely,

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

Diversity and Inclusiveness

Continued from page 1

[Dr. Jorge D. Reyes](#), (pictured on page 1) Professor, Chief of Transplant Surgery and Chair of the Department's Council on Diversity and Inclusion (the Council) related this story and then further elaborated, "Creating a culture of diversity and inclusion in our healthcare system is a critical component of improving healthcare quality." As Dr. Reyes noted, "It is easy to believe that if we just get the 'best and the brightest' we will automatically have the best patient outcomes." While not diminishing the need for traditional measures of quality in the healthcare provider team, research and our own empirical experience (as exemplified by the story of the young transplant patient) shows that diverse caregivers enhance excellence in patient care.

While we are beginning to understand that diversity and inclusion are essential components to outstanding healthcare delivery, far too often these efforts run in parallel to core institutional processes without true integration. The goal of UW Medicine, and as reflected in the Department of Surgery's Diversity and Inclusion endeavors, is to create the environment and infrastructure for deep and sustained engagement of the mission that considers diversity and inclusion as core values, key to achieving excellence. Diversity in today's context needs to be framed as central to an academic institution's capacity to fulfill its mission. As noted in Daryl Smith's articles, embedding diversity at the center of the institution's mission creates the opportunity for vitality, for new ways of thinking, and for new kinds of knowledge.¹

With that conceptual framework, Dr. Reyes reflected on the events and actions on the road to achieving this goal. In February 2010, [Dr. Paul Ramsey](#), Chief Executive Officer of UW Medicine, Executive Vice President for Medical Affairs and Dean of the School of Medicine created the UW School of Medicine Diversity Strategic Planning Ad Hoc Committee and appointed [Dr. Carlos Pellegrini](#) as its Chair (see Chair column, page 1). Broadly, they were commissioned "to develop a new strategic plan for diversity programs in the [UW School of Medicine \(UWSOM\)](#)."²

¹Smith, Daryl, Ph.D.; "Building Institutional Capacity for Diversity and Inclusion in Academic Medicine," *Academic Medicine*, Vol. 87, No. 11 / November 2012

²From: Ad Hoc Diversity Strategic Planning Committee Recommendations; April 26, 2011 <http://www.washington.edu/diversity/files/2013/04/medicineplan.pdf>.

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Diversity and Inclusiveness

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An institutional climate survey performed in October 2010 showed that while the institution is “diversity aware,” we do not yet fully embrace a culture of inclusion in the areas of leadership, resource allocation, faculty awards and accountability. In the areas of academic planning, typical behaviors and beliefs, the survey showed that the institution was in a “transition state,” closer to embracing a culture of inclusion, but that it was not yet fully integrated into our core structure. With respect to comparison with national data from USA Medical Schools, UW SOM had significantly lower percentages of under-represented minorities (URMs) across the continuum from faculty to enrolled trainees.

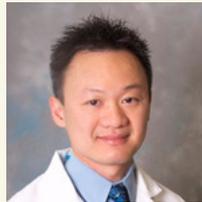
All in all, the lengthy report, recommendations and plan showed that UWSOM was not where it needed to be to reach its goals of diversity and inclusion. At the same time, the impetus for changing was great: from responsiveness within the organization to external imperatives including the local level (State of Washington and University), Washington State law, and several standards and guidelines set by the accreditation bodies for our training programs and facilities. The time for fully integrating diversity and inclusion into the beating heart of the School had come.



Wu



Quiroga



Tran



Dick



Hinojosa



Backhus

Following the acceptance and dissemination of this ambitious and multi-year plan, Departments were mandated to begin their own process of fully integrating diversity and inclusion. As mentioned, Dr. Reyes was appointed Chair of the UW Department of Surgery Council on Promotion of Diversity and Inclusion (the Council) by Dr. Pellegrini in January 2013. Presently, the Council has seven members, including Dr. Reyes. Other members include: Drs. [Peter Wu](#), Associate Professor (VA); [Elina Quiroga](#), Assistant Professor (Vascular Surgery); [Nam Tran](#), Associate Professor, (Vascular Surgery); [Andre Dick](#), Associate Professor (Transplant Surgery); [Marcelo Hinojosa](#), Assistant Professor, (General Surgery); [Leah Backhus](#), Assistant Professor (Cardiothoracic Surgery).

The Council met regularly in the first year to determine the scope of their work, specific goals and necessary steps to achieve the goals. As at the School level, their work is ambitious, multi-pronged and multi-year. The scope of their work is to:

- Work with leadership in the Department and Divisions to ensure the promotion of Diversity and Inclusion through a variety of methods;
- Review detailed data on current Department composition in faculty and teaching programs;
- Make recommendations on department faculty composition, advancement and future recruitment to the Chair and Leadership Council;
- Develop appropriate metrics for tracking Diversity inclusion (working with the Department Chair and Chief Diversity Officer of the UWSOM);
- Assist in design and modifications needed in curriculum to ensure they reflect values of diversity crucial to the development of aware and culturally competent students and residents;
- Work with Education Leadership to initiate and promote diversity and inclusion processes to broaden access to the Department of Surgery educational programs;
- Create a Department Mission Statement that reflects the value of Diversity and Inclusion;
- Plan and organize Department-sponsored activities that celebrate Diversity and Inclusion.

The Council has worked diligently in these many areas and is proud to note it has made substantial progress. It presented an interim report to the Leadership Council in March, 2014 at which they reviewed and displayed their progress. Paramount in that presentation was a discussion of the proposed Department Mission Statement; a mission that embraces the value we place on diversity and inclusion. Below is the Mission Statement as adopted by the Leadership Council:

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

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Diversity and Inclusiveness

Continued from page 3

In addition, the Council has completed an inventory of statistics, activities and data that support our mission of Diversity and Inclusion. Several areas worthy of mention:

- A scholarship has been set up to send residents or our young faculty to the [Society of Black Academic Surgeons' \(SBAS\)](#) annual scientific meetings. Several individuals have been sponsored to date. (A separate story in this issue of *Surgery Synopsis* discusses the benefits of this scholarship and names the individuals sponsored to date by this scholarship);
- [Dr. Andre Dick](#) received a letter of service acknowledgement letter from UW School of Medicine Dean's Standing Committee on Minority Affairs;
- [Dr. Carlos Pellegrini](#) was nominated for Mentoring of Minority Faculty Award;
- The Department of Surgery residency program matched with 14 Under-Represented Minority (URM) residents in 2014;
- Two residents attended a Diversity Leadership Course sponsored by SBAS and supported by the Department;
- Creation of a database populated with the results of a recently completed Department diversity landscape survey to further identify areas of importance, develop activities and measure progress;
- Development of a UW Department of Surgery Sub-Internship scholarship for medical students from across the US who are contemplating surgery as their specialty. The first three scholarships have been awarded with students to begin in October 2014. (A separate story in this issue of *Surgery Synopsis* enlarges on this goal).

[Dr. Reyes](#) concluded the interview about the Department's Diversity and Inclusion efforts by saying that really building a culture of diversity and inclusion isn't just one project after another, it involves time, intention and attention. "You have to look every day at what you are doing and make diversity and inclusion consciously a part of your thinking. When you are looking at applicants for faculty or trainee positions, you have to push the door open a little wider, take another look through a lens that includes factors beyond grades and MCAT scores. We have to think about cultural competency when designing syllabi, when teaching or interviewing, when conducting research, and most of all when taking care of patients. In other words, you have to make cultural diversity and inclusion intentional decisions every day until they become the fabric of our Department."

Diversity in the Department of Surgery

Creating Diversity Opportunities: The Carlos A. Pellegrini Visiting Internship Program

The Department of Surgery Council for the Promotion of Diversity and Inclusion (the Council) was created in 2013 at the direction of [Dr. Carlos A. Pellegrini](#) (pictured right) and the Department's Leadership Council. The Council functions as the liaison with the Resident Program Directors. Its objective is to increase diversity in our residency program which, among other activities, requires opportunities to be created far upstream, long before residents think about a match. The Council is pleased to announce an opportunity that is now operational.



With the authorization and appropriation of funds by Department leadership, the Council has created the *Carlos A. Pellegrini Visiting Internship Program*, which offers minority medical students from around the country a Sub-Internship (Sub-I) within our Department. The Visiting Internship Program is named for Dr. Pellegrini in recognition of his many contributions to the personal and professional development of minority medical students, residents, fellows and faculty.

The internship program is open to full-time fourth-year students who are in good standing at LCME-accredited U.S. medical schools; demonstrate academic excellence, strong leadership skills, and extra-curricular experience; and are members of a group or groups that are recognized as historically under-represented in the health and science professions, including African American, American Indian, Alaska Native, Hispanic American and Asian/Pacific Islander.¹ At present, we are able to fund three opportunities per year.

The first three Sub-Is are: **Madeline Torres**, University of Utah School of Medicine; **Tarafi Mbadiwe**, Howard University College of Medicine, Washington, D.C.; and **Jonathan Pastrana**, Ponce School of Medicine & Health Science, Ponce, Puerto Rico. This Sub-Internship provides a stipend of up to \$3000 to help cover the airfare, lodging and living expenses in Seattle during the Sub-Internship. The rotations are four weeks in duration. Our first awardees begin in October 2014.

¹For International Medical Students outside the US, our Department already offers a Certificate Program for International Medical Graduates (IMGs) which is one of very few in the country. After successful completion of the program, IMGs may then apply for a two-year preliminary position in the residency program, which serves as a springboard for obtaining a categorical position and successful completion of surgical residency training at UW and other programs around the country. To date, numerous IMGs have gone through this program including but not limited to IMGs from Argentina, Italy, Japan, Colombia, Greece, Nigeria, India, China, Korea and Mexico.

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Diversity in the Department of Surgery

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We join only a handful of similar programs in the country. Within the UW Medicine system, the Department of Pediatrics has had a similar program for several years and report their efforts have resulted in more applications from students from backgrounds historically under-represented in medicine. They have matched a number of exceptional candidates who participated in their program. We believe this effort will help attract under-represented students to our residency program, and will greatly contribute to excellence in patient care through more diverse teams.

Many people deserve credit for bringing this concept into reality. Along with the members of the Council, this project needed and received substantial support from others in the Department, something that will continue to be needed as it matures.

Special thanks to [Dr. Karen Horvath](#), Professor and Associate Chair of Education for the Department who was immediately supportive and enthusiastically offered her help and expertise. As she expressed it, “We care and are interested in the diversity of our applicants. I see that the Council can do a lot here to welcome the visiting students and connect with them, and mentor them while they’re here doing their Sub-I.”



Horvath



Tatum

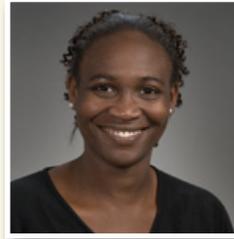
[Roger Tatum, MD](#), Associate Professor and Director of the Department’s Medical Clerkship program was also key in developing and implementing this program. Dr. Tatum and medical clerkship program specialist [Josh Powell](#) guided the Council in the process of defining the rotations and clarifying the myriad of details associated with this

program. We also extend a big thanks to the team at the [Center for Equity, Diversity and Inclusion \(CEDI\)](#) of the School of Medicine for their help and support.

The Council members describe their role as enhancing minority student awareness of the opportunities in academic surgery by creating a strong relationship with the applicants and providing them mentorship and guidance during their time with us.

More information about the Carlos A Pellegrini Visiting Internship Program can be found here: <http://uwsurgery.org/education/2014-06-03-22-25-22/diversity-internship>

Department of Surgery Building Relationships with the Society of Black Academic Surgeons (SBAS)



Oyetunji

[Dr. Lara Oyetunji](#), fourth year General Surgery resident recently attended the Annual Meeting of the [Society of Black Academic Surgeons \(SBAS\)](#) hosted by Temple University in Philadelphia Pennsylvania and reported back on her experiences over the years with SBAS. She presented *Surgery Synopsis* with the opportunity to discuss our connections and bonds with this impressive organization.

The SBAS began to address the felt need of the role of African-American surgeons in academic surgery. As late in the 20th Century as 1987, it was clear that few African-Americans were involved in academic surgery, there was no organized network of African-American academic surgeons, few young surgeons pursuing academic careers received tenure, and graduates from surgery residency programs other than Meharry or Howard could not easily identify African-American surgeon role models to inspire them to pursue academic careers. An initial group met in New Orleans, LA in 1987 and from that gathering the first SBAS meeting was planned for 1989. The goal for the meeting was to assemble as many African-American surgeons as possible and discuss the essentials of building academic careers. Subsequent annual meetings have continued to address important issues and have included strong scientific programs. To learn more about SBAS, please visit the website: <http://www.sbas.net/about/>

The UW Department of Surgery has progressively strengthened its ties with the SBAS. Dr. Carlos A. Pellegrini became an Honorary Fellow of the SBAS in 2007. In 2009, the SBAS held their annual scientific meeting at the University of Washington. Dr. Pellegrini, as the Department of Surgery Chair, was the local host for this event. That year’s meeting, as is customary, featured a number of UW Department of Surgery faculty presentations. By all accounts, it was one of the most successful meetings of the SBAS in recent years. This event helped to bring SBAS into greater prominence within the Department, generated more membership from our Department, and the SBAS Annual Scientific Conference and attendant programs became a regular part of the Department’s annual cycle of events.

[Leah Backhus, MD](#), (pictured on page 3) Assistant Professor, Cardiothoracic Surgery, has been a member of the SBAS for several years. In 2011, recognizing the importance joining this organization had made in establishing her career, Dr. Backhus hypothesized that a scholarship allowing other junior faculty

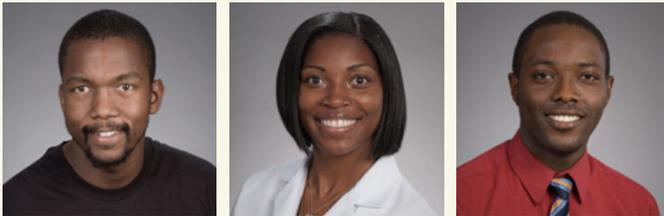
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Diversity in the Department of Surgery

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or residents to attend would be equally advantageous. She believed in this idea so strongly that she developed the concept, presented it to Dr. Pellegrini and Department leadership and received approval to establish the SBAS Annual Meeting Scholarship funded by the Department of Surgery.

This scholarship allows one to two under-represented minority (URM) faculty or surgical residents to attend the annual meeting of the SBAS. This has proven to be a highly successful venture and has enhanced our efforts to foster diversity and inclusion in our faculty and trainees. Awardees since its inception have been: **Damien Carter, MD**, Chief resident, graduated in 2013; **Estell Williams, MD**, currently R-2 General Surgery Resident; and **Edo Bedzra, MD**, R-3 Cardiothoracic Resident. **Dr. Elina Quiroga**, (pictured on page 3) Assistant Professor, Division of Vascular Surgery, has recently completed the Leadership Training Institute associated with SBAS.



Carter

Williams

Bedzra

Below is an account from Dr. Oyetunji of her recent experience at the annual SBAS conference as well as photos from previous conferences that chronicle the growth of the Department's involvement with this group.

"I was at the SBAS conference in April and wanted to give you my report. As usual, it was a great conference and perhaps the only one of the last five conferences that came close to rivaling the 2009 conference that UW hosted. At that time, Dr. Andre Dick (Associate Professor, Transplant Surgery) and I were the only UW surgery minorities in attendance. (Well really, it was just Andre at that time since I had just matched into my residency here.) Six of us were present this year: simply amazing! Only the Children's Hospital of Los Angeles and Howard University topped our numbers.

We were able to promote the new sub-internship for fourth year medical students and passed out flyers about it to program directors, chairs and faculty that were in attendance.

I am also pleased to tell you that I had my first podium presentation this year and was awarded third place in the Claude Organ Resident

²Dr. Claude H. Organ, Jr. (1926-2005) was a world renowned academic surgeon, a giant in the field of surgery and medicine, and a major force in shaping and supporting the lives and careers of thousands. In 1989, Dr. Organ and several other black academic surgeons founded SBAS and held its first meeting at Duke University. Throughout his career he oversaw the training of dozens of surgeons, including several African-American women. His lifelong dedication to mentoring young surgeons and encouraging diversity in the field of surgery is represented in the annual Claude H. Organ, Jr. MD, FACS Resident's Award, which is given to residents with the best podium presentations at the SBAS annual meeting.

Delos "Toby" Cosgrove, MD, President & CEO, Cleveland Clinic, committed the Cleveland Clinic's endowment of this prestigious award. Starting in 2008 and continuing, Cleveland Clinic's sponsorship of the Dr. Claude H. Organ, Jr. Resident Award helps to ensure the success of the future generations of surgeons.

Award². I will definitely be aiming for first place next year." Following are photos from this year and representative photos over the years to show how far the UW Department has come. These photos are a testament to the unwavering support and determination to increase diversity in the Department of Surgery.



2014 SBAS Annual Scientific Meeting

From left to right: Drs. Leah M. Backhus, Edo Bedzra, Estell Williams, Andre Dick, Lara Oyetunji, Damien Carter



2010 SBAS Annual Scientific Meeting

From left to right: Drs. Andre Dick, Lara Oyetunji, Damien Carter

Researcher Profile: Sara H. Javid, MD, FACS



Dr. Sara H. Javid

Surgical intervention remains the cornerstone of curative treatment for most cancers, yet among many racial/ethnic groups there remains dramatic variation in the use, timing, and outcomes of surgery following a cancer diagnosis. Nowhere is this variation starker than among the American Indian and Alaskan Native population (AI/AN), which has the worst five-year survival across cancer types among all racial/ethnic groups in the United States.

The [Centers for Disease Control and Prevention's](#) report on cancer mortality

from 1975 to 2004 demonstrated a decline in mortality among all racial/ethnic groups except for AI/AN patients. The causes of this overwhelming disparity remain largely unknown. Compounding the issue is the lack of previous research on the AI/AN population; because this group comprises only 1.7% of the US population, it has traditionally only been evaluated as part of a broader minority cohort.

For the past four years, [Sara H. Javid, MD, FACS](#), Assistant Professor, Division of General Surgery, has been a key member of the [Collaborative to Improve Native Cancer Outcomes \(CINCO\)](#), a multi-faceted program aiming to improve cancer health outcomes and quality of life specifically for AI/AN patients. With funding from the [National Cancer Institute](#) and led by Principal Investigator [Dedra Buchwald](#), Professor of Medicine, CINCO's investigators, including Dr. Javid, have examined both macro and micro-level factors contributing to the disparities in cancer survival observed in AI/AN patients, with the ultimate goal of identifying tangible means to improve AI/AN cancer outcomes at both the individual patient-provider level and at the broader public policy level.

Dr. Javid and UW Department of Surgery colleagues, [Dr. David Flum](#) and [Dr. Tom Varghese](#), along with [Dr. Michael Porter](#) in UW Department of Urology and [Dr. Arden Morris](#) at University of Michigan, have focused their efforts on better understanding one such key factor affecting cancer outcomes: the variation in quality and timing of cancer treatment nationally among AI/AN patients. In a first-of-its-kind study published in the journal *Cancer*, Dr. Javid and colleagues utilized the SEER-Medicare database to investigate whether racial disparities exist in the receipt of national guideline-concordant cancer treatment¹. They observed that AI/AN patients were significantly less likely to undergo primary surgical therapy for the four most common cancers (breast, colon, prostate, and lung) and significantly less likely to receive guideline-concordant adjuvant therapy for breast and colon cancer compared with white patients. Not surprisingly, non-receipt of guideline-concordant care was linked to worse survival. Importantly, however, Dr. Javid and her team demonstrated that if guideline-concordant treatment was received, and cancer stage and demographics controlled for, then cancer-specific survival of AI/AN and white patients did not significantly differ. In another study recently submitted to the *American Journal of Public Health (AJPH)*, Dr. Javid and

colleagues examined delays in cancer treatment and non-treatment among AI/ANs². They found that rates of non-treatment were substantially higher in AI/ANs than in whites for breast, colon, prostate, and lung cancer. However, the timeliness of cancer treatment did not differ between AI/ANs and whites for any cancer except prostate.

Dr. Javid and the CINCO group have also reported on the micro-level factors that are believed to contribute to disparities in AI/AN cancer treatment and survival. In a systematic review published in 2013 in the *AJPH*, the authors discussed the importance of shared decision-making in minority populations³. For AI/AN patients in particular, they emphasized the need to extend the traditional patient-physician dyad model of shared decision-making to include the views of the patient's family and larger community. Dr. Javid, through CINCO, is also participating in qualitative interview studies of AI/AN patients and their surgeons to elucidate perceived barriers to the receipt of cancer treatment across WA State. The results of these studies will elucidate potential targets for intervention with the goal of improving cancer outcomes for AI/AN patients.

Through her work with CINCO and her personal experience treating patients with breast cancer, Dr. Javid has learned that, aside from survival and recurrence statistics, a highly prioritized concern among not only AI/ANs but all patients is the impact of cancer therapy on quality of life. In addition to her work with CINCO, Dr. Javid is the Principal Investigator on a pilot project funded by the [Department of Surgery Research Reinvestment Fund](#), entitled "Prioritizing Patient Reported Outcomes (PROs) in Breast Cancer Surgery". This project aims to create an adapted PROs tool to assess quality of life following breast cancer surgery that will help guide breast cancer surgical quality improvement activities. The project is a qualitative research collaboration between surgeons and breast cancer patients. Dr. Javid and her team, including members of the [Surgical Outcomes Research Center \(SORCE\)](#) and patient advisors, plan to develop a PROs tool that measures quality of life outcomes important to patients undergoing breast cancer surgery and can also serve to define new benchmarks for surgical quality in the field of patient-reported outcomes.

¹Javid SH, Varghese TK, Morris AM, Porter MP, He H, Buchwald D, Flum DR: for The Collaborative to Improve Native Cancer Outcomes (CINCO). Guideline-concordant cancer care and survival among American Indian/Alaskan Native patients. *Cancer*. 2014 Apr 7. Doi: epub 10.1002/cancr.28683. [PMID: 24711210]

²Varghese TK, Javid SH, Morris AM, Porter MP, He H, Buchwald D, and Flum DR. Delay and Failure to Initiate Conventional Cancer Treatment in American Indian and Alaska Native Patients. Submitted *Am J Public Health*, July 2014.

³Mead EL, Doorenbos AZ, Javid SH, Haozous EA, Alvord LA, Flum DR, Morris AM. Shared Decision-Making for Cancer Care Among Racial and Ethnic Minorities: A Systemic Review. *Am J Public Health*. 2013 Dec; 103(12):e15-29. [PMID: 24134353]

2014 New Faculty



[Joshua Hermsen, MD](#)

Dr. Hermsen joins the department as Assistant Professor in the Division of Cardiothoracic Surgery and the Associate Surgical Director of Adult Congenital Heart Disease. A native of Wisconsin, he grew up in South Carolina where he attended college at The Citadel, The Military College of South Carolina,

and medical school at Medical University of South Carolina (MUSC). He returned to Wisconsin for general surgery residency at the University of Wisconsin-Madison during which he completed a two year research fellowship focused on mucosal immunology as related to trauma and type/route of nutrition.

He completed an adult cardiothoracic fellowship here at University of Washington Medical Center (UWMC) in 2013 and the congenital cardiac fellowship at Seattle Children's in 2014.

His practice at UWMC will include adult cardiac disease with a focus on adult congenital heart disease in partnership with doctors Ed Verrier, Professor, Division of Cardiothoracic Surgery, Karen Stout, Eric Krieger, Tom Jones and Steve Seslar. His research interests include adult congenital heart disease, transition of congenital patients from pediatric to adult care.

In 2008, he met and married his wife, Jessica, and outside of the hospital he enjoys time with his wife, their two year old daughter, Indie, and four month old son, Asher.



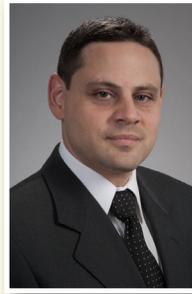
[Sam Mandell, MD](#)

Dr. Mandell, Assistant Professor, joins the Division of Trauma, Critical Care, and Burn at Harborview Medical Center. His clinical interests include burn resuscitation and rehabilitation, management of critically injured patients, and emergency surgical care.

Dr. Mandell graduated from Brown University with an AB in Late Antique Cultures as well as Biology. He went on to earn his medical degree from the University of Massachusetts Medical School. Following medical school he moved to Seattle and the University of Washington where he completed his general surgery residency, fellowship in burn surgery, and fellowship in critical care. During residency, he also completed a trauma research fellowship and earned a Masters in Public Health from the University of Washington School of Public Health and Community Medicine.

During his research fellowship, Dr. Mandell developed an interest in injury prevention, specifically looking at motor vehicle crash outcomes. He plans to continue this work, as well as pursue projects to refine burn resuscitation, examine

long-term outcomes in burn survivors, and improve clinical outcomes in the intensive care unit.



[Martin Montenovo, MD](#)

Dr. Montenovo, Assistant Professor, joins the Division of Transplant at UW Medical Center. Born in Argentina, he received his Medical Degree at the Universidad Nacional de Rosario in Argentina and completed his first surgical residency in one of the top hospitals in Buenos Aires. After completing his general surgery residency, he came in to the University of Washington Swallowing Center as a Research Fellow. After two years in the lab, he was offered a spot in our general surgery residency program and after completion of his residency he stayed here to do his Abdominal Transplant Surgery Fellowship.

Dr. Montenovo's main research interest is identifying genomic patterns of hepatocellular carcinoma that will help to predict recurrence following liver transplantation. He will also invest research time in looking at outcomes in living donor liver transplantation and development of immunotolerance protocols for liver transplant recipients.

Personally, he enjoys spending time with his wife Flor and his two kids Lola and Benito.



[Susanna Shin, MD](#)

Dr. Susanna Shin, Assistant Professor in the Division of Vascular Surgery, joined the Department of Surgery in July 2014. She was most recently an Assistant Professor of Surgery at Georgetown University Hospital in Washington, DC.

She earned her medical degree from Eastern Virginia Medical School in Norfolk, Virginia, where she stayed for her residency in general surgery in order to train under her mentor, Dr. L.D. Britt. She completed her two year fellowship in Vascular and Endovascular Surgery at the University of Pittsburgh Medical Center.

Clinically, Dr. Shin has expertise in the treatment of all vascular pathology but has a special interest in peripheral arterial disease and limb salvage and complex venous disease. Her clinical practice will focus on further developing the UW vascular program at Valley Medical Center but she will also be clinically active at UWMC and Harborview.

Dr. Shin has a special interest in surgical education and will be site director of the new core surgical rotation at Valley Medical Center.

2014 Faculty Promotions



[Andre Dick, MD, MPH](#)

Promoted to Associate Professor

After completing his general surgery residency at Penn State, Dr. Dick moved to Seattle to pursue a fellowship in Abdominal Transplantation. His clinical interests are in pediatric abdominal transplantation and adult liver transplantation. He completed his MPH at the Harvard School of Public Health and has an interest in Global Surgery, health disparities research and research aimed at improving abdominal transplantation outcomes. Andre also has a significant interest in education and was recently appointed to the [American Society of Transplant Surgeons \(ASTS\) Fellowship Training Committee](#) for a four year term. Other responsibilities with the ASTS include serving on the annual fellow symposium committee, which he will then chair in two years, as well as being appointed to the exam working group whose goal is to create a certifying exam for graduating fellows. André also served a four year term as the region six representative on the pediatric transplant committee. The goal of this committee is to create policies that improve access to transplantation and outcomes for the pediatric population. He enjoys spending time with his family and friends, playing soccer and cooking.



[Heather Evans, MD, MS, FACS](#)

Promoted to Associate Professor

Dr. Evans is primarily based at Harborview Medical Center where she serves as a trauma/critical care and general surgeon specializing in minimally invasive hernia repair and endocrine surgery. With support from the [Agency for Healthcare Research and Quality \(AHRQ\) K12 Career Development Award](#) and the UW Department of Surgery Research Reinvestment fund, Dr. Evans built a unique multidisciplinary research team with co-investigators from Biomedical Health Informatics, the School of Nursing and the Information School to design and develop mPOWER, a mobile health solution for surgical post-discharge wound monitoring and facilitated communication. Subsequent work is now supported by the Commercialization Gap Fund from [UW Center for Commercialization \(C4C\)](#), an [Institute for Translational Health Sciences \(ITHS\)](#) small pilot grant and the Junior Faculty Fellowship from the Surgical Infection Society. mPOWER has been featured in [UW NewsBeat](#), [The Daily of the University of Washington](#), and on [Aljazeera America's The Stream broadcast](#). Dr. Evans is a member of the [American College of Surgeons \(ACS\)](#) Committee on Informatics and has increasingly been recognized as a surgeon innovator in wearable technology, appearing in a recent feature article in the [Bulletin](#)

[of the American College of Surgeons](#) describing her experience as a Google Glass explorer. This summer, along with Drs. [Tam Pham](#), Assistant Professor and [Sara Kim](#), Research Professor, she will expand the use of Google Glass at Harborview through two pilot projects in burn wound evaluation and surgical education.



[Patrick Javid, MD](#)

Promoted to Associate Professor

Dr. Patrick Javid is a pediatric general surgeon at Seattle Children's Hospital. Dr. Javid received his MD from the University of Michigan Medical School and completed his residency at Brigham and Women's Hospital at Harvard Medical School and a fellowship at Children's Hospital at Boston Children's Hospital.

Dr. Javid has continued to foster his clinical and academic interest in pediatric short bowel syndrome and intestinal failure. He currently serves as the lead surgeon in the [Seattle Children's Intestinal Care Program](#), and they have had excellent results from operative bowel lengthening. In many children with short bowel anatomy, they are able to successfully rehabilitate the intestine and wean these children completely from parenteral nutrition.

His research interests revolve around long-term outcomes in pediatric intestinal failure. Due to several medical and surgical advances over the past decade, children with intestinal failure can now survive well into school age and beyond, even if they remain completely dependent on parenteral nutrition. In this way, pediatric intestinal failure has transitioned into a chronic disease – and the question is not *if* a child will survive, but *how* they survive. His laboratory studies long-term neurodevelopmental outcomes and quality of life in these children in addition to clinical outcomes using clinical and translational research methods. They recently completed a vaccine intervention trial showing that rotavirus vaccine is safe and immunologic in this cohort of children.



[Otway Louie, MD](#)

Promoted to Associate Professor

Dr. Louie completed his general surgery residency at Cornell followed by a plastic surgery residency at New York University. He then went on to complete a microsurgery fellowship at University of California, Los Angeles. Dr. Louie's clinical practice consists of breast reconstruction, focusing on perforator-

(continued on page 10)

2014 Faculty Promotions

Continued from page 9

based flaps. He also does a significant amount of complex abdominal wall and pelvic reconstructions. Dr. Louie's research interests parallel his clinical practice, focusing on improving clinical outcomes in microsurgical breast and abdominal wall reconstruction. He enjoys teaching both residents and students, and was recently honored with a teaching award from his residents. He is currently the medical student clerkship director for the plastic surgery division. In his free time, Dr. Louie enjoys spending time with his family and participating in outdoor activities such as snowboarding and surfing.



Erik Van Eaton, MD, FACS

Promoted to Associate Professor

Dr. Van Eaton conducts research in information transfer, communications practices, and information systems design to translate research into practice. A trained medical informatics scientist, Dr. Van Eaton builds collaborative relationships among successful clinical informatics projects at the University

of Washington to bring high-performance clinical information management to bedside decisions. This work led to a spin-out healthcare information technology company from the University of Washington in 2011 called [TransformativeMed, Inc.](#), for which he currently works as a Clinical Design Strategist, helping the company commercialize licensed biomedical informatics technology developed at the University of Washington.

Projects underway by Dr. Van Eaton's research group at the University of Washington include: an NIH-funded project to enhance trauma patient outcomes from mental health comorbidity using workflow-integrated electronic medical records tools; a UW Patient Safety Innovation Fund project to develop a clinical informatics system for better capture of near misses and adverse events by clinical teams on rounds, with combined educational feedback and training; a UW Patient Safety Innovation Fund project to bring clinically actionable protocols to the bedside on clinician smartphones and tablets; and participation in an AHRQ-funded project to leverage electronic medical records for comparative effectiveness research as part of the SCOAP CERTAIN (www.scoap.org) project.

Honors and Awards

Faculty



Dr. Kenneth Gow, Associate Professor, Pediatric Surgery division, was presented The New Member Award by the [Pacific Coast Surgical Association \(PCSA\)](#) for his presentation of ACGME *Case Logs: A National Review of the Rise of Minimally Invasive Surgery Over Two Decades of General Surgery Resident Training*. Dr. Gow is a member of the Washington/British Columbia/Alaska Caucus and was awarded with complimentary registration to the 2015 meeting. This award is presented to a member who joined PCSA within the last 3 years.



Dr. David Flum, Professor of General Surgery and Associate Chair for Research, was selected by the [Brookings Institution](#) to be a member of the [National Medical Device Postmarket Surveillance System Planning Board](#).

The board's goal is to create a robust tracking system, ensure the safety and effectiveness of millions of medical devices, and enhance the quality of patient outcomes. The 22-member group is composed of a broad range of medical device, industry and regulatory experts, 16 of whom are from the private sector, along with five representatives from federal agencies.

The group will focus on three areas of designing an integrated system: governance; practices, policies, and procedures; and business models. Key considerations include system design, legal and privacy policies, infrastructure stability and flexibility, mechanisms to support the use and sharing of patient data, communication policies, and system financing.



Sara Kim, PhD, Research Professor and Director of Educational Innovations and Strategic Programs at the [Institute for Simulation and Interprofessional Studies \(ISIS\)](#) was named Director of the [Center Leadership & Innovation in Medical Education \(CLIME\)](#), formerly the Center for Medical Education.

CLIME was created to advance and support educational excellence at the UW School of Medicine and throughout the WWAMI region. It promotes an integrated continuum of medical, graduate and lifelong education, and strives to foster interprofessional collaborations across health professions. CLIME is committed to supporting the curriculum renewal

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Honors and Awards

Continued from page 10

underway at the UW School of Medicine through faculty development and programs to promote scholarship around medical education best practices.



Danielle Lavalley, PharmD, PhD, Research Assistant Professor in the Division of General Surgery, was awarded \$945,000 from the [Patient-Centered Outcomes Research Institute \(PCORI\)](#) for her three-year project, “Comparing Engagement Techniques for Incorporating Patient Input in Research Prioritization.” The overarching goal of this study is to inform researchers on how surveys, focus groups, and online

methods compare for involving patients 65 years and older in research prioritization activities. Dr. Lavalley will be supported by her co-investigator, Dr. Jeffrey Jarvik, Professor of Radiology and Neurosurgery, and the staff at the [Surgical Outcomes Research Center \(SORCE\)](#). This award is especially exciting in that it is the first PCORI-sponsored award in the Department of Surgery. Established in 2010 as part of the Patient Protection and Affordable Care Act, PCORI is authorized by Congress to fund and disseminate research that will provide information about the best available evidence to help patients and their healthcare providers make more informed decisions. PCORI’s research is intended to give patients a better understanding of the prevention, treatment, and care options available, and the science that supports those options.

Read the project abstract: <http://pfaawards.pcori.org/research-results/2014/comparing-engagement-techniques-incorporating-patient-input-research>



Dr. Nahush Mokadam, Associate Professor, Cardiothoracic division, was awarded [Western Thoracic Surgery Association’s \(WTSA\)](#) 2014 Donald B. Doty Educational Award.

Through a generous grant from [Medtronic](#), the WTSA has established the Donald B. Doty Educational Award with the first award in 2005 of \$10,000 being accorded to a group at the University of Utah, Salt Lake City.

The purpose of this award is:

- To foster innovative educational initiatives in cardiothoracic surgery by WTSA members, and
- To provide an opportunity for the dissemination of this information to other training centers and academic institutions.

Monica Morrison, PA-C, Physician Assistant, Transplant division, received UWMC’s Spring 2014 UW Medicine Cares Award. This award is based on UW Medicine’s Service Culture Guidelines, which are: respect privacy and confidentiality; communicate effectively; conduct myself professionally; be accountable; be committed to my colleagues and to UW Medicine.

A selection from Monica’s nomination reads:

“Monica is one of the best care givers I know because she listens to patient complaints and concerns, works with her team of physicians and nurses in the development of comprehensive care, and makes sure that our patients receive the best care. She is the first one to work and the last to leave. If all we can do for a patient is to provide comfort, then that is where you will find Monica. She is a healer.”



Monica Morrison (pictured middle) was presented her award by Dr. Jorge Reyes, Chief of Transplant Surgery (left), and Geoff Austin, Associate Administrator (right).



Dr. Mike Mulligan, Professor, Cardiothoracic division was elected president of the [Western Thoracic Surgical Association \(WTSA\)](#) at their 2014 annual meeting.

“This is a great honor and recognition from his peers demonstrating the remarkable esteem, respect, and credibility Mike has as an academic cardiothoracic surgeon. Few surgeons are fortunate to have this honor and I know that we are all very proud of Mike. There is no one more deserving or more capable of leading the WTSA, and I am sure he will make as big an impact on the association as he does here at UW every day. He will serve in this position over the next year, culminating in his presidential meeting at Whistler, British Columbia this time next year.” – **Dr. Doug Wood**, Professor and Chief, Division of Cardiothoracic Surgery, Endowed Chair in Lung Cancer Research, University of Washington.

This is well deserved as Dr. Mulligan has had multiple roles in the WTSA (Vice President, Program Committee,

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Honors and Awards

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Council, winner of 3 Samson Resident Paper Awards) and is highly regarded by our peers for his leadership and stature in cardiothoracic surgery.



Dr. Carlos A. Pellegrini, *The Henry N. Harkins Professor & Chair*, was recently elected to the Board of Commissioners of the Joint Commission.

The Joint Commission (TJC) is an independent, not-for-profit organization that accredits and certifies more than 20,500 health care organizations and programs in the United States. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

The Board of Commissioners is The Joint Commission's governing body, providing policy leadership and oversight. Board members govern The Joint Commission with a dedication to its mission to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. The full board meets three times a year, with an additional retreat focused on The Joint Commission's strategic direction.

Congratulations to Dr. Pellegrini upon this important appointment.

Residents

Dr. Jonathan Sham received first place for his oral presentation entitled "Novel Antibody-Targeted Zirconium-89 Pet Imaging of Hepatocellular Carcinoma" at the 2nd Annual [UW Medicine GME Research Day](#) on May 3, 2014.



Dr. Jonathan Sham accepts his award for First Place Oral Presentation from [Dr. Byron Joyner](#), Associate Dean for Graduate Medical Education



Dr. Meera Kotagal accepts the award for Poster Session People's Choice from [Dr. Byron Joyner](#), Associate Dean for Graduate Medical Education. Not pictured: Co-presenter and winner, Dr. Morgan Richards

Drs. Meera Kotagal and Morgan Richards received the People's Choice Award for their poster presentation entitled "CT or Ultrasound" Diagnostic Imaging in Pediatric Appendicitis" at the 2nd Annual UW Medicine GME Research Day on May 3, 2014.

The [UW Medicine GME Research Day](#), hosted by [Dr. Samuel Browd](#), Associate Professor of neurological surgery, was designed to provide residents and fellows an opportunity and venue to showcase their research, receive expert feedback from faculty judges, network with colleagues from other specialties, and learn more about the path to a successful research career while practicing medicine. Trainees from multiple clinical departments submitted over 60 outstanding abstracts. The UW GME Research Review Committee identified the top 10 abstracts for oral presentations. The remaining abstracts were identified for poster presentations. Judges for both the oral presentations and the poster presentations were faculty, representing multiple clinical specialties across the UW School of Medicine.



Estell Williams, MD

Dr. Williams was elected to membership in the University of Washington chapter of the Gold Humanism Honor Society.

Founded in the late 1980s by Dr. and Mrs. Arnold Gold, the Gold Humanism Honor Society (GHHS) honors medical students, residents, role-model physician teachers and other exemplars recognized for "demonstrated excellence in clinical care, leadership, compassion and dedication to service." The Society is committed to working within and beyond medical education to inspire, nurture and sustain lifelong advocates and activists for patient-centered medical care.

Maier Receives UW Medicine's Award for Excellence in Mentoring Women



Dr. Ron Maier, Professor and Chief of Surgery at Harborview Medical Center, has been named a recipient of the 2014 UW Medicine Award for Excellence in Mentoring Women. As director of a premier surgical trauma fellowship, Dr. Maier has supported and mentored women in a field previously dominated by men; 35 percent of the fellows in this program have been women. His successful mentees include 3 professors and an associate professor, as well as several junior faculty and surgeons in private practice.

Nomination comments included:

"He probed our aspirations and plans for the future and went out of his way to enable us to achieve our best potential."

"Dr. Maier is an outstanding mentor. He provides honest and fair feedback such that you always know where you stand and where you can improve. He is a role model in providing high quality and compassionate care to patients and advocating for trauma systems both within Washington State and around the world. He is constantly seeking opportunities to promote his faculty and fellows on the national stage and has personally provided opportunities for me to enhance my research collaborations and network with leaders in our field."

"Dr. Maier combines his clinical acumen with the capacity to discern the "big picture" with respect to his patients, as well as an admirable facility to stand up for what he believes is best for their care. Both in the intensive care unit and in the operating room, Dr. Maier has provided me with the freedom to build my own skills and confidence as a clinician, while at the same time maintaining a supportive presence."

"His guidance in the arena of research was invaluable as he was able to help develop any project through his practical methods, vast experience, and enormous fund of knowledge. Above all else, his support for everyone around him was unwavering as he was always available to lend an ear, give advice, or work through a tough problem, whether it was personal or professional."

"Emphasis on personal and professional balance seemed to be an afterthought during residence. However, by his example as well as by his guidance, he taught me that professional achievement is often better when partnered with personal success and I should not completely sacrifice life outside my career. It is daunting to think about Dr. Maier's time commitments to the hospital, university, national and international organizations. However, despite all his commitments, he always found time to mentor me early in my research career."

"His encouragement, and even more so, his challenge to meet a high standard of excellence in academic surgery, have been key to my development."

Global Surgery Interest Group (GSIG)

General surgery residents within the Department of Surgery have begun a "Global Surgery Interest Group" (GSIG) that is open to all residents who are interested, thinking about pursuing, or actively engaged in global surgery research and clinical work. We are fortunate to have several of our experienced faculty serving as mentors this group, including [Charlie Mock, MD, MPH](#), Professor, Trauma, Critical Care & Burn Division and associated with the [World Health Organization \(WHO\)](#). [Dr. Carlos A. Pellegrini](#) and [Dr. Karen Horvath](#) are both whole-heartedly behind this resident-led initiative, as are other of our faculty who have made presentations to the group and hosted them in their homes.



Mock



Pellegrini



Horvath

The GSIG organizers are: **Drs. Meera Kotagal** (R-4); **Lacey LaGrone**, (R-3; beginning her first research year); **Barclay Stewart**, (R-3, beginning his first research year); **Katy Flynn-O'Brien**, (R-2, currently in her second research year); **Matthew Bartek**, (R-2); and **Surbhi Mathur** (R-2). This group of residents has taken GSIG engagement to new levels in the past year and has proposed some additional actions designed to involve other residency programs. We appreciate and congratulate this group of motivated residents. Dr. Kotagal, on behalf of the group, recently submitted this review of GSIG activities during the past academic year and provided an overview of plans for the upcoming year.



Kotagal



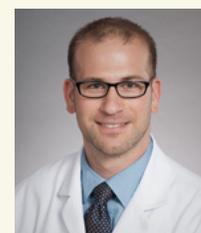
LaGrone



Stewart



Flynn-O'Brien



Bartek



Mathur

(continued on page 14)

Global Surgery Interest Group (GSIG)

Continued from page 13

"The resident leadership of the Global Surgery Interest Group (GSIG) in the department met to debrief on the group's work this past year and to talk about our plans for the coming year, and we wanted to write and send you (Drs. Pellegrini and Horvath) an update.

Over the past academic year we hosted four events:

- A Friday conference with Dr. Abebe (from Ethiopia);
- A dinner session with Dr. Crook (from the Thai Burma Border Initiative) at Dr. Ted Kohler's house;
- A global surgery journal club at Dr. Eileen Bulger's house;
- A skills session on management of orthopedic trauma (with orthopedics' Chief Residents Drs. Haquebord and Sousa).

In addition, we developed a listserv and have grown this list of residents and faculty interested in global surgery.

This coming academic year we plan to host five events:

- A community building event for incoming interns and residents/faculty to get to know others interested in global surgery;
- A skills session on management of obstetric emergencies;
- A journal club meeting;
- A couple of events (format TBD) to hear from residents and faculty involved in global surgery about their experiences and work.

We also plan to provide those interested in global surgery with more educational content over the course of the year. To help implement this goal, we plan to send a structured email to the list every month identifying a key piece of knowledge: an update on events happening in global surgery (e.g. Lancet Commission report release or DCP3 release) or a key article in the field focused either on burden/outcomes or methodologies in global health (e.g. needs assessment). Each update will be accompanied by a "Cliff's-type notes" summary.

Finally, we want to make this multi-disciplinary by expanding to others in different surgical specialties, as well as to residents in Anesthesia and Emergency Medicine. We want to provide them opportunities to participate in the GSIG's work. We are reaching out to each of those communities to invite them to join our email listserv, invite them to events and to generally participate to whatever extent they would like.

We are excited about the plans for the coming year and our growing global surgery community. We want to thank the Department and the [General Surgery Residency](#) program for their continued support and encouragement of global surgery at UW Medicine."

Editor's note: For more information on the GSIG, you may contact Dr. Meera Kotagal mkotagal@uw.edu or any of the other leaders of this group listed above.

2014 Graduating Chief Residents' & Fellows' Dinner

The Department of Surgery held its 2014 Graduating Chief Residents' & Fellows' Dinner on Saturday, June 21, 2014 at the Bell Harbor International Conference Center. [Dr. Roger P. Tatum](#), (pictured right), Surgeon-in-Chief and Associate Professor, practicing general surgery at the Veteran's Affairs Puget Sound Health Care System (VA), was this year's Master of Ceremonies.



This annual dinner reception honors the Department's graduating residents and fellows as well as provides an opportunity for presentation of special awards and recognitions.



Among the awards this year was the 2014 Stevenson's Faculty Teaching Award, given to [Dr. Grant O'Keefe](#), (pictured left), Professor, Trauma and Burn and presented by incoming Chief Resident, [Dr. Callie Thompson](#). This award, established in 1989, is in memory of former faculty member Dr. John K. Stevenson and salutes teaching excellence and dedication to resident education.

Other awards presented that evening:

Henry Harkins Award

Recipient [Dr. Eriberto Michel](#)

Nurse of the Year Award

Recipient [Pam Turner, RN](#)

Resident Recognition Award

Recipient [Dr. Angelo Lipira](#)

David Tapper Teaching & Leadership Award

Recipient [Dr. Darren Bowe](#)

UW Department of Surgery Student Research Award

Recipient [Dr. Daniel Bushyhead](#)

2013-14 Harborview Medical Center Annual Housestaff Award for Outstanding Humanitarianism and Excellence in Clinical Care

(Harborview Medical Center Sponsored Award)

Recipient [Dr. Joshua Mourot](#)

2014 Graduating Chief Residents

Plastic Surgery Program

[Dr. Martin Paukert](#) – entering private practice in Santa Rosa, CA

[Dr. Stephanie Peng](#) – entering private practice in Chicago, IL

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2014 Graduating Chief Residents' & Fellows' Dinner

Continued from page 14

Dr. Brent Schultz – entering hand fellowship in Pittsburgh, PA

Dr. Jordan Swanson – entering craniofacial fellowship in Philadelphia, PA

General Surgery Program

Dr. Darren Bowe – entering the Trauma Critical Care Fellowship at Harborview Medical Center, Seattle, WA

Dr. David Brown – entering the Plastic & Reconstructive Surgery Residency at Duke University

Dr. Damien Carter – entering the Burns/Critical Care Fellowship at Harborview Medical Center, Seattle, WA

Dr. Steve Kwon – entering the Surgical Oncology Fellowship at Memorial Sloan-Kettering Cancer Center in New York, NY

Dr. Joshua Mourot – entering the Minimally Invasive Surgery Fellowship at University of Washington

Dr. Daniel Mulloy – entering the Cardiothoracic Surgery Fellowship at the University of Virginia

Dr. Patrick Phelan – entering the Vascular Surgery Fellowship at University of Wisconsin

2014 Finishing Fellows

Trauma and Surgical Critical Care

Drs. Matthew Delano, Samuel Mandell, Julie Ottosen and Courtney Sommer

Transplant Surgery

[Dr. Martin Montenovo](#)

Burn Surgery

Drs. Nicole Kopari and Ed Rivera

Craniofacial Surgery

Dr. Clint Morrison

Congenital Cardiac Surgery Fellow

[Dr. Josh Hermsen](#)

Microsurgery Surgery

Dr. Manish Champaneria

Cardiothoracic Surgery

Drs. Jamil Borgi and Nathan Molberg

Pediatric Surgery

Dr. Jessica Roybal

Center for Video Endoscopic Surgery

Drs. Oscar (Max) Crespín, Katherine Moreno and Ellen Morrow

The Department of Surgery congratulates all of the graduating residents and fellows on this important milestone and wishes them well in their new endeavors.



2014 Graduating Chief Residents

Left to right: Drs. Steve Kwon, Damien Carter, Carlos A. Pellegrini, Karen Horvath, Joshua Mourot, David Brown, Darren Bowe, Daniel Mulloy & Patrick Phelan

2014 Graduating Chief Residents Singing "Happy Birthday" to Dr. Carlos A. Pellegrini

Left to right: Drs. Steve Kwon,
Joshua Mourot, Patrick Phelan,
Darren Bowe, Daniel Mulloy, David
Brown & Jarod McAteer (R-4)

Not pictured: Dr. Damien Carter



2014–15 New Surgery Residents



Ryan Abbaszadeh, MD
General Surgery



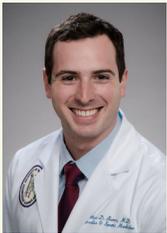
Kate Accardo, MD
Plastic Surgery



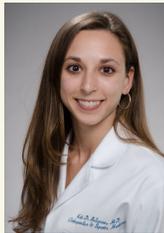
Zahab Ahsan, MD
Orthopaedics



Jeffrey Anderson, MD
General Surgery



Matthew Baron, MD
Orthopaedics



Kate Bellevue, MD
Orthopaedics



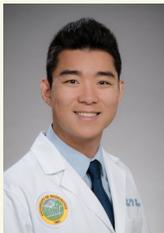
David Bluhm, MD
General Surgery



S. Bommareddi, MD
Cardiothoracic Surgery



Natasha Carter, MD
General Surgery



Tony Chen, MD
Urology



C. Christman-Skieller, MD
Orthopaedics



Jessica Dai, MD
Urology



Travis Edmiston, MD
General Surgery



Elizabeth Hahn, MD
Otolaryngology



T. Hiremath, MD
General Surgery



T. Hoyos Gomez, MD
General Surgery



Sebastian Jara, MD
Otolaryngology



Amit Kainth, MD
General Surgery



Jonathan Kark, MD
Orthopaedics



Sarah Kolnik, MD
General Surgery

Why I Chose Residency at University of Washington Department of Surgery...

"The chance to come back home to the Pacific Northwest and undergo training at one of the best surgical training programs in the world!"

"UW offers robust and well supported research opportunities as well as outstanding clinical training at several renowned institutions. But it's really the intangibles of the program, like the support of the program for its residents and the collegiality amongst the residents themselves, that really set it apart. UW embodies excellence in the entire package of a training program."

"The renowned research opportunities, the commitment of faculty and residents to academics, and the beautiful city of Seattle!"

"UW was one of the best-organized interview days I attended, and it was clear that the program was not only one of the top surgical programs in the country, but also incredibly dedicated to training its residents. I could easily envision myself working alongside the residents that I met, and the continuing sense of innovation and forward-thinking truly excited me."

"Excellent curriculum, the faculty, the program commitment to excellence and to superb resident education."

"A lot of factors came together to make it feel like a perfect fit: I had my most memorable interview at UW, clicked with the residents right away at the dinner, was intrigued by a lot of the collaborative research taking place here, and felt that Seattle would be an amazing city to be in."

"The incredible residents and faculty, the family culture of the program, the unparalleled clinical volume, and the wonderful city."

"Academic institution and location."

(continued on page 17)

2014–15 New Surgery Residents

Continued from page 16



Tommy Liu, MD
Plastic Surgery



Erik Magnusson, MD
Orthopaedics



Jamil Matthews, MD
Vascular Surgery



R. McCoppin, MD
General Surgery



Craig Miller, MD
Otolaryngology



John Monu, MD
General Surgery



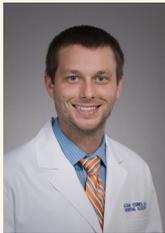
Shane Morrison, MD
Plastic Surgery



Trenton Morton, MD
Plastic Surgery



Harish Narayanan, MD
General Surgery



Adam O'Brien, MD
Orthopaedics



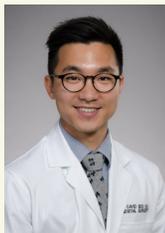
Ifeanyi Opoku, MD
General Surgery



Pearl Quartey, MD
General Surgery



M. Rajo Andrade, MD
General Surgery



Dave Seo, MD
General Surgery



Trey Sertich, MD
General Surgery



Kathryn Stadel, MD
General Surgery



Kevin Sullivan, MD
General Surgery



Christopher Sweat, MD
General Surgery



Mary Kate Thayer, MD
Orthopaedics

Not pictured: Saneel Rajanahally, MD, Urology

Why I Chose Residency at University of Washington Department of Surgery...

"The people. When I interviewed at UW, the atmosphere and camaraderie were unlike that of any other program, which I believe comes from the great people who comprise all facets of the program."

"The University of Washington offers a unique blend of superb clinical experience with outstanding faculty members and residents that foster a very collegial and professional learning environment. Additionally, UW is in the beautiful city of Seattle, where the food is excellent and outdoor activities are abundant!"

"The wealth of resources available that allow UW to be a pioneer in patient care and the culture of striving to improve health on all levels. The natural beauty of the northwest and its people. Last but not least, the fact that it's the place my family calls home."

"The robust research program with the attending support. The mentality of the research is also focused on innovation which is more rare than the traditional mentality toward research investigation and the roll of research in medicine. I was impressed by the attending involvement with projects that are somewhat removed from the more traditional research directions as well. They each had an ambition that diverted from strictly outcomes research or the more common background in molecular biology. It's also impossible to deny that they are well surgically trained with a varied and substantial clinical case load."

"UW carries a great reputation and offers a diversity of experience. Seattle is wonderful city in an amazing part of the country."

"I love the Pacific Northwest. In addition to having great clinical programs, UW is also a world class research institution."

"Awesome city, instant connection with faculty, renowned training, supportive and fun co-residents."

"Seattle and Harborview Medical Center!"

2014–16 Research Residents

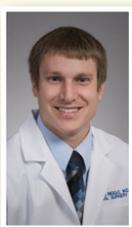
The [Accreditation Council for Graduate Medical Education \(ACGME\)](#) strongly encourages residents to engage in laboratory and/or clinical research during their training, and the Department of Surgery is proud to be able to accommodate all residents interested in committing two years to a research fellowship position. Research experiences during residency offer added value to surgical education through increased skills in critical reading, patient advocacy, and the ability to understand and keep abreast with advances in technology and clinical care. Further, research during residency provides a critical education in grantsmanship and collaboration for the many residents who will ultimately pursue academic careers. Five residents began their two-year research fellowships on July 1:



Lacey N. LaGrone, MD

Dr. LaGrone will spend her first year in research completing trauma quality improvement research at the [Harborview Injury Prevention and Research Center](#) with faculty mentors [Dr. Charles Mock](#), Professor in the Division of Trauma, Burn, and Critical Care Surgery; Dr. Frederick Rivara, Professor in the Department of Pediatrics; [Dr. Ronald Maier](#),

Professor and Chief in the Division of Trauma, Burn, and Critical Care Surgery; and Dr. Lisa McIntyre, Associate Professor in the Division of Trauma, Burn, and Critical Care Surgery. Dr. LaGrone will also complete the curriculum for a Master in Public Health in the Department of Global Health. The following year she will conduct trauma quality improvement research in Peru as a Fogarty International Clinical Research Fellow under the mentorship of Dr. Mock and Dr. Joseph Zunt, Professor in the Department of Global Health. Dr. LaGrone is interested in defining barriers to implementation of basic gold-standard measures in trauma care, and identifying resource-specific interventions to address those deficiencies. She ultimately plans to work at an academic trauma center conducting local and global quality improvement research.



Kevin M. Riggle, MD

Dr. Riggle is a research fellow under faculty mentors [Dr. Kimberly Riehle](#), Assistant Professor in the Division of Pediatric General Surgery, and [Dr. Raymond Yeung](#), Professor in the Division of General Surgery. As a part of the Northwest Liver Research Program (NLRP) he will focus primarily on studying fibrolamellar hepatocellular carcinoma

(FLC). Dr. Riggle's goal is to further characterize and understand the potential pathologic role of a recently discovered genetic mutation found in FLC. The group hopes to then identify potential therapeutic targets for treating FLC. Dr. Riggle seeks to further develop a foundation in research methodology and molecular biology techniques. He plans to use this experience to pursue an academic career in pediatric surgery.



Barclay T. Stewart, MD

Dr. Stewart is a National Institute of Health Fogarty Global Health Fellow working to improve surgical care in low- and middle-income countries (LMICs) under mentors [Dr. Charles Mock](#), Professor in the Division of Trauma, Burn, and Critical Care Surgery; Dr. Joseph Zunt, Professor in the Department of Global Health; and Dr. Peter

Donkor, Professor of Oral and Maxillofacial Surgery at the Kwame Nkrumah University of Science and Technology (KNUST) in Ghana. His research is focused on pragmatic solutions to enhance care of the injured, burned and those in need of emergency surgery in health facilities in Ghana. In addition, he is studying surgical epidemiology in complex humanitarian emergencies and from population-based studies of surgical need and injury burden in Nepal, Sierra Leone and Iraq. Dr. Stewart wishes to pursue a career in trauma, burns and acute care surgery with attention on LMICs. Ultimately, he will bring evidence-based decision making to humanitarian aid and surgical capacity development in LMIC health-systems.



Brodie Parent, MD

Dr. Parent works as a T32 research trainee under the mentorship of [Dr. Grant O'Keefe](#), Professor in the Division of Trauma, Burn, and Critical Care Surgery, and [Dr. Eileen Bulger](#), Professor in the Division of Trauma, Burn, and Critical Care Surgery. He is engaged in translational research related to the field of metabolomics. Dr. Parent plans

to explore various metabolic byproducts present in trauma patients, and assess the diagnostic utility of these markers in conditions like malnutrition, sepsis, and compartment syndrome. In particular, he will characterize the metabolic profile of critically-ill pediatric trauma patients in the context of supplemental nutrition. He will also perform clinical research related to the radiographic and laboratory evaluation of the pediatric trauma patient. As part of the T32 fellowship, Dr. Parent will also be pursuing a Master of Science in Epidemiology from the University of Washington School of Public Health.



Anne E. Pugel, MD

Dr. Pugel is a T32 research trainee under the direction of [Dr. David Flum](#), Professor of Surgery in the Division of General Surgery. Her primary focus will be in the realm of Decision Science. She is interested in learning more about the drivers of decision-making for both patients and providers, and will build upon previous research done in the

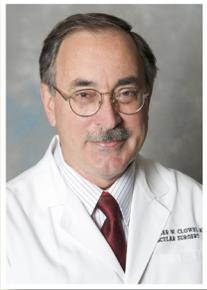
field of appendicitis to help elucidate and understand these drivers. Much of this work will be carried out in a multi-disciplinary fashion with investigators from various other fields. In addition, Dr. Pugel is enrolled in the University of Washington Master of Public Health program to help grow her knowledge of research methods and data analysis. She eventually plans to pursue a fellowship in Minimally Invasive Surgery with a career in academic surgery.

Department of Surgery Accepts the Obliteride Challenge

Obliteride 2014 gained momentum in its second year as cancer survivors, researchers and others determined to end cancer cycled on August 8th-10th to raise money for [Fred Hutchinson Cancer Research Center](#). In its inaugural year, Obliteride 2013 raised nearly \$2 million for lifesaving cancer research at Fred Hutch, and with the community's help, organizers hope to collect even more in 2014.

Participating cyclists choose their ride distance ([25 mile](#), [50 mile](#), [100 mile](#) or [150 mile](#)), register for a small fee, and then raise the money or fund themselves (each distance corresponds to a different minimum fundraising amount). The 25 mile route is a beautiful ride along Lake Washington and is perfect for beginners, while the other three routes offer options for more experienced riders.

This year, several Department of Surgery faculty and staff participated in Obliteride and were excited to share their experiences.



Dr. Alexander W. Clowes

Drs. [Benjamin Starnes](#), Professor and Chief, Vascular Surgery Division and [Matthew Sweet](#), Assistant Professor, Vascular Surgery Division, along with [Danielle Slota](#), Administrative Specialist, Vascular Surgery Division and her husband Kevin, cycled the 50 mile route in a team Dr. Starnes titled "UW Vascular for Alec Clowes." The Vascular Surgery Division and Department of Surgery recently learned that one of our faculty surgeons, long-time mentor and close friend, [Dr. Alexander W. Clowes](#) has

been diagnosed with glioblastoma. Dr. Clowes has devoted his professional life to vascular surgery and research in the field of vascular biology, contributing greatly to our understanding of vascular graft stenosis/restenosis, for which he is world renowned. He has helped train hundreds of residents and fellows, and treated countless patients.

Drs. Starnes and Sweet came in first place for the 50 mile race, completing the route in three hours and three minutes (a route



Drs. Benjamin Starnes and Matthew Sweet for team "UW Vascular for Alec Clowes"



Drs. Benjamin Starnes and Matthew Sweet riding the 50 mile Obliteride route

that is over 3,000 feet elevation and estimated five hours to complete). The *UW Vascular for Alec Clowes* team has raised over \$10,500 to date. Read the *UW Vascular for Alec Clowes* teams' respective Obliterate web pages: [Dr. Benjamin Starnes](#) – [Dr. Matthew Sweet](#) – [Danielle Slota](#) – [Kevin Slota](#)



Danielle and Kevin Slota for team "UW Vascular for Alec Clowes"

On another team titled "Mothers and Daughters", [Dr. Heather Evans](#), Associate Professor, Trauma, Critical Care and Burn Division, participated in the 50 mile race with her mother, Nancy Evans. Dr. Evans shared a personal story as to why the Obliteride event is special to her:

"My mom, Nancy Evans, is a cancer survivor. Shortly after she moved to Seattle a few years ago, she was diagnosed with Mantle Cell Lymphoma. Fortunately, her particular type of lymphoma is rather indolent, and she did not need to undergo chemotherapy, but she benefited tremendously from the knowledge and expertise at [Seattle Cancer Care Alliance](#)

(continued on page 20)

Obliteride Challenge

Continued from page 19



Dr. Heather Evans and Nancy Evans for team "Mothers and Daughters"

(SCCA). She actually rode 50 miles in the inaugural Obliteride last year just after she turned 73, celebrating not only her experience, but also the survival of my dad and her dad from other forms of cancer, and remembering the lives of other friends and family members who unfortunately passed away after their battles with cancer. When she finished, she challenged me to ride with her this year. I couldn't say no to my mom, but I had to train to be able to keep up with her! We had a wonderful ride together, and thanks to our dear friends and family who donated, as the "Mothers and Daughters" team we raised almost \$5,000. As you can read on our

respective Obliteride web pages ([Dr. Heather Evans](#) – [Nancy Evans](#)), we both feel like this is a fantastic event, as 100% of the funds raised go directly to cancer research. My dad worked as a tumor biologist at the [National Cancer Institute](#) for almost 25 years, and as a clinical researcher myself, I know how precious the funding streams can be. It felt really good to be part of the community yesterday, riding as a doctor, a daughter and a friend and doing something about it!

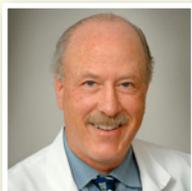


Dr. Heather Evans taking a "selfie" in front of the Obliteride Team Board



About 5 weeks ago, my mother had a bike accident on the Myrtle Edwards trail trying to avoid some pedestrians and sustained a tripod fracture (left zygoma, lateral wall of maxillary sinus, floor of orbit). [Dr. Kari Keys](#), (pictured left), Assistant Professor, Division of Plastic Surgery,

saw her in the emergency room and was just so wonderful. Dr. Keys answered all our questions and led us through the CT scan findings. A week later, while I was out of town in Virginia, mom called to say she was having surgery the next day. [Dr. Joe Gruss](#), (pictured right), Professor,



Plastic Surgery Division, did his magic and plated her fractures - thanks to him, Drs. [Janelle Sousa](#), Chief Resident, Plastic Surgery Division, and [Mitch Pet](#), Resident, Plastic Surgery Division, she was able to recover in time to ride yesterday! It was hard to be out of town while she had surgery, but everyone was just so wonderful to her. Mom just can't stop raving about Harborview."

Please join us and donate to the Obliteride teams, *UW Vascular for Alec Clowes* and *Mothers and Daughters*, before the event's donation window closes on September 30th, 2014. Visit Obliteride's [Donation page](#) (http://getinvolved.fhccr.org/site/TR?fr_id=1340&pg=pfind), click on the "Teams" tab, enter the team name *UW Vascular for Alec Clowes* and/or *Mothers and Daughters*, click "Donate", then complete the online Gift Information form.

Our faculty contributed more than \$10,000 towards this year's Obliteride event. We want to congratulate Drs. Evans, Starnes and Sweet as well as Nancy Evans, and Danielle and Kevin Slota and let them and those who contributed know how happy and how extraordinarily proud we are of their participation and efforts in this important event!

Harkins Society Distinguished Alumnus Award Nominations

The Harkins Society is accepting nominations for the 2014 Harkins Society Distinguished Alumnus Award. To submit a nomination, please send an email to UWHarkins@gmail.com. The only requirement is that the awardee completed their surgical training at the UW Department of Surgery, as a resident or fellow. **The deadline for submission is September 14, 2014.** To nominate a colleague, please include:

- Your name and contact information
- The Nominee's name and contact information and year(s) of training, if known.
- The criteria for selection include professional or humanitarian contributions that have enhanced the surgical profession, improved the welfare of the general public, or brought distinction to the Department. These contributions may have been made either over a long period of time or may be a single outstanding achievement. Both academic and non-academic achievements will be considered.

The winner will be announced and honored at the Harkins Society Annual Banquet on **Friday, November 21, 2014, 6:30 pm at the Seattle Yacht Club.**

Department of Surgery Grant Activity Report

In the 4th quarter of FY 2014, 10 Department of Surgery Principal Investigators received 12 awards totaling \$2.7 million! Of these awards, 10 were new awards or competing renewals. Congratulations to the following faculty members:

Principal Investigator	Sponsor Name	Title
Eileen Bulger, MD	National Highway Traffic Safety Administration (NHTSA)	Crash Injury Research and Engineering Network
E. Patchen Dellinger, MD	Tetraphase Pharmaceuticals, Inc.	A Phase 3, Randomized, Double-Blind, Double-Dummy, Multicenter, Prospective Study to Assess the Efficacy and Safety of Eravacycline Compared with Ertapenem in Complicated Intra-abdominal Infections
David Flum, MD, MPH	Agency for Healthcare Research and Quality (AHRQ)	Individualized Risk Assessment in Patients with Multiple, Chronic Conditions
Danielle Lavallee, PharmD, PhD	Patient-Centered Outcomes Research Institute (PCORI)	Comparing Engagement Techniques for Incorporating Patient Input in Research Prioritization
Ronald Maier, MD	University of Florida	Validation of a Genomics Based Prognostic in Severe Trauma
Ronald Maier, MD	University Medical Center Utrecht	Trauma system differentiation to optimise care for the severely injured. An international comparison study
Brant Oelschlager, MD	Foundation for Surgical Fellowships	Foundation for Surgical Fellowships
Niten Singh, MD	Mercator MedSystems, Inc.	Delivery of Dexamethasone to the Adventitia to eNhanse Clinical Efficacy after Femoropopliteal Revascularization
Thomas Varghese, MD, MS	Pacira Pharmaceuticals	Opiod Minimization Quality Initiative
Douglas Wood, MD	SPIRATION, Inc.	A prospective post-approval study with the IBV Valve

Surgery Synopsis Reader Feedback

Below are comments we received from readers regarding our [Spring 2014 issue](#):

“I am hoping you can mention Barclay Stewart and Lacey LaGrone in your next *Surgery Synopsis* - both were awarded NIH Global Health Fellowships to spend one year involved in global health clinical research (Barclay in Ghana, Lacey in Peru). I direct one of the five US consortia that direct this program Our Consortium will send 25 trainees overseas this year alone. I aspire to develop a strong flow of global health surgery trainees in the future (Matt Bartek is one of my prior trainees as well and hopes to return to Peru as a fellow).”

Joseph R. Zunt, MD, MPH

*Professor, Depts. of Neurology
and Global Health*

*Adjunct Professor, Depts. of Medicine
(Infectious Diseases) and Epidemiology
Harborview Medical Center*

“Thank you Carlos for sharing—a very nice story on our Plastics program.”

*Stephen P. Zieniewicz, FACHE
Executive Director*

University of Washington Medical Center

[Plastic Surgery:
Rebuilding Lives Story >>](#)

We welcome feedback from our readers. Please submit your comments to surgeditors@uw.edu.

NOTE: The newsletter editorial team will decide in its discretion whether to publish submitted comments in this column, and may edit the comments for publication.

Save the Dates

AMERICAN COLLEGE
OF SURGEONS (ACS)
CLINICAL CONGRESS
Sunday, October 26, 2014
San Francisco, CA

65TH ANNUAL
STRAUSS LECTURE
Friday, November 21, 2014
Dr. Marco Patti
Professor of Surgery and
Director of the Center
for Esophageal Diseases
University of Chicago
Pritzker School of Medicine

HARKINS SYMPOSIUM
Friday, November 21, 2014
7:30am–2:00pm
Alder Hall
Speakers TBA

HARKINS SOCIETY
ANNUAL BANQUET
Friday, November 21, 2014
6:30pm
Seattle Yacht Club

DOS ANNUAL
HOLIDAY BRUNCH
Saturday, December 20, 2014
10:30am–1:00pm
UW Club

SEATTLE SURGICAL SOCIETY
ANNUAL MEETING
Friday, January 23, 2015
Hyatt Olive 8 Hotel
Seattle, WA

21ST ANNUAL
HELEN & JOHN
SCHILLING LECTURE
&
DOS RESEARCH SYMPOSIUM
Friday, February 27, 2015
Lecture Begins 3:00pm
Walter J. Pories, MD
Professor of Surgery
Brody School of Medicine
East Carolina University
Lecture Title: TBA
UW Tower Auditorium

2015 ANNUAL
CHIEF RESIDENTS' DINNER
Friday, June 19, 2015
Bell Harbor International
Conference Center

Please see the
Department of Surgery's
monthly Grand Rounds
schedule under
[Special Events](#) on our website:
www.uwsurgery.org

ATTENTION ALUMNI!

Let us know what
you are up to now!

If you would like to share news about your career and family or reflect upon your residency experience in UW Department of Surgery, we want to hear about it to publish in *Surgery Synopsis*.

Please send your updates and photos to surgeditors@uw.edu.

UW Medicine

DEPARTMENT OF SURGERY

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

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