Friends & Colleagues of the Department of Surgery:
This column and issue of Surgery Synopsis reflect upon the “bookends” of our professional lives as surgeons, from those who are beginning residency, to those who have recently graduated and are beginning their careers, to one whose career has come to an end. In observing all these stages, I have been profoundly reminded what a privilege it is to be a surgeon; but also how stressful and out of balance this life can become if we do not pay attention to all aspects. Life’s many parts must be acknowledged and harmonized to be a life well lived.

We have an exceptional example of a life well lived that we have paused to celebrate and grieve in recent weeks. The whole Department, the School of Medicine, as well as professional organizations, family and friends grieve the passing of Dr. Alexander Clowes. Dr. Clowes passed away on July 7, 2015 of a brain glioblastoma. This is a tremendous loss for all who knew him, particularly his family, but also a very big loss for the (continued on page 2)
Chairman’s Message

Continued from page 1

Department, for the School of Medicine and academic medicine. At the young age of 68, Alec had many things he still wanted to accomplish in life. Many of them were related to medicine; but as many were his other passions in life: more time with his family, more travel, the Seattle Symphony, writing and passing on wisdom and support to the next generation of medical discoverers and musical artists.

When Alec and his wife, Susan, were first told of the diagnosis, he (and they) did not despair; rather they made every day count. While vigorously attacking the glioblastoma with the newest of therapies, he accomplished so much. He completed a book which will soon be published; The Clowes Fund, at his request, endowed a chair in surgery; he spent a lot of time with family and friends; he spent time at the Seattle Symphony; and he prepared others to take on his 30 year–funded research project in vascular biology, holding working sessions in his home with his cadre of research staff. Most importantly, he continued to be a friend to us all. You will read a longer memorial to Alec on page 1, and I invite you to watch the very moving video that has been made by the Division of Vascular Surgery honoring his life. In addition to my deep sadness at losing a friend, I am in awe of his spirit and determination to wring everything possible out of life. This too has had a profound effect upon me and our entire Department. Alec lived his life gracefully and well.

With enormous joy, mixed with some sadness at their leaving, I congratulate our graduating residents and fellows who are going out into the world to endeavor to become the next generation of “Ales.” Unsolicited reports we receive from our newly graduated residents and fellows often mention how well–prepared they feel for the next phase of their career. I am proud of this Department, the teaching faculty, and most of all our Education leaders who have contributed so greatly to their lives. Our Program Directors and Associate Program Directors are to be commended. Under the leadership of Dr. Karen Horvath, Associate Chair of Education and Director of the General Surgery Residency Program, the UW Department of Surgery general residency program is strong and remains in the top 10 residency programs in the country. She is joined by General Surgery Associate Residency Program Directors (site directors) Dr. Venu Pillarisetty at University of Washington Medical Center (UWMC), Dr. Lisa McIntyre at Harborview Medical Center (HMC), Dr. Kenneth Gow at Seattle Children’s Hospital (SCH) and Dr. Dana Lyne at the VA Puget Sound Health Care System (VA).

Our ACGME accredited specialty residency and fellowship programs are in equally strong hands: Dr. Jeff Friedrich, Program Director for the Integrated Plastic Surgery Residency Program is doing a splendid job as the Director of Plastic Surgery Education, aided by Dr. Kari Keys, Associate Program Director for the Integrated Plastic Surgery Residency Program. Dr. Niten Singh, who just completed his first year as Vascular Residency and Fellowship Director, has done a magnificent job. He is joined in this work by Associate Program Director, Elina Quiroga, Assistant Professor in the Division of Vascular Surgery. And, the Cardiothoracic Residency and Fellowship Program under the direction of Dr. Doug Wood, with the dedicated assistance of Dr. Nahush Mokadam, continues to produce some of the best CT surgeons in the country. Dr. Lester Permut at SCH continues to provide strong leadership for the Congenital Heart Fellowship Program.

I am also thrilled to meet our new residents – a great new group – and equally eager to continue teaching and assisting the residents currently here. You will read more about our graduating and new residents, as well as our residents who are taking a clinical hiatus to devote a year or two in labs to develop their research skills, on page 10.

Taking Care of Ourselves and Each Other

“Wellness,” and “well–being” are themes that have been brought up in each of our faculty groups – junior to professor – as well as in our trainee groups. This year this theme was emphasized by the passing of Alec Clowes, who was a man who understood and lived a fulfilling life.

There is always more to do, to explore, to create, and learn than there is time. It is hard to strike equipoise between giving and getting, activity and rest, responsibility and relaxation. Surgeons are notorious for being over–achievers in their professional lives, often developing that part of their lives to the detriment of family and other passions. While each person ultimately has to find well–being for themselves, in the last 5–10 years there has been much more emphasis on incorporating opportunities at the personal and system–wide level for faculty, trainees and staff to experience, learn and practice wellness and balance within their lives.
Wellness and the Trainee

The Graduate Medical Education (GME) office, under the direction of the School, recognizes that residency and fellowship years are times of particularly high stress. The GME office has made wellness an institutional priority for the graduate education years, providing help with the myriad of stressors that affect the lives of trainees and their families.

The GME Wellness Service has expanded beyond its core service of confidential counseling with a mission to support work-life balance and well-being. To that end, it offers numerous events, seminars and workshops, cheap or free tickets to athletic and cultural events, and sessions to help plan life after residency (including financial planning). A sample of what is offered to trainees can be found in the bi-weekly “Wellness Corner,” which has become a well-known and referred-to resource “Wellness Corner,” which has become a well-known and referred-to resource.

The variety and depth of programs offered are based upon regular surveys to residents with questions about what UW Medicine GME as well as their individual programs can do to support them better through these years. I have been pleased to see that an offshoot of the Wellness Service has been the establishment of University of Washington Network of Underrepresented Residents and Fellows UW NURF.

Wellness and the Faculty Member

In 2012, Dr. Ramsey realized that the UW Medicine community would be unable to achieve its mission of improving the health of the public if its own faculty and staff were not healthy themselves. He charged a UW School of Medicine Wellness Committee to perform and publicize an environmental scan to be used to guide efforts that support wellness, then further charged this group to initiate pilot projects promoting balance and mental health; to explore and potentially implement a peer support pilot; and finally make recommendations for future steps to promote a scalable and sustainable program. Dr. Norm Beauchamp, Professor and Chair of Radiology, and Dr. Claudia Finkelstein, Clinical Associate Professor of Medicine in the Division of General Internal Medicine, were asked to lead this effort.

The Wellness Committee worked to identify barriers to individual commitments to wellness and found that a substantial barrier is that many people place wellness in the discretionary category – an “optional” effort to be undertaken after they complete their daily professional work.

Since that time, a great many efforts have been launched in support of faculty wellness including inauguration of a Peer Counseling Program. I am pleased to let you know that the Department of Surgery, under the direction of Dr. Eileen Bulger and Dr. Jeff Friedrich, has launched a Peer Counseling Program. Please read the article that outlines this Department service on page 15.

Another barrier to well-being that has come up in our own Faculty Breakfasts is that it has become harder to know everyone and build community as the Department has grown bigger. To some extent this is inevitable and the reality we live with; however, esprit des corps is also important. To the extent possible, we encourage circles of interest – whether professional or personal – within the larger group to combat this barrier, whether they are organized by outside interests, by specialty or by common age groups.

We are also thinking of new ways to use our social media and this newsletter to encourage community. To that end, we are introducing a feature called “#Getting to Know DoS,” in which a faculty or staff member is asked a series of questions that allow others to find out more about that person outside of the professional environment. In this issue, we are featuring Dr. Andrew Wright from the Division of General Surgery.

We are making positive steps and personal wellness is vital to professional satisfaction and to achieving our mission of improving the health of the public. I would say that at whatever point you find balance and well-being, a commitment to personal wellness is time well invested.

Our featured researchers are Drs. Jeff Friedrich and Kari Keys, whose work in the areas of education and simulation in the Plastic Surgery residency program has garnered them a grant from the Center for Leadership in Medical Education (CLIME). This is innovative and impressive work.

We also continue to share newly published papers and, as always, honors and awards received by our superb faculty.

I hope you will enjoy reading this issue of Surgery Synopsis and, along with the Department, recognize the young talent coming into our system, reflect on the importance of well-being, and celebrate the splendid life of Dr. Alec Clowes.

Sincerely,

Carlos A. Pellegrini, MD, FACS, FRCSI (Hon.)
The Henry N. Harkins Professor & Chair
Department of Surgery
University of Washington
laboratory experience in Sheffield, England, during medical school (Harvard Medical School, 1972). Despite his original intention to restrict his career to research, Alec discovered profound enjoyment in patient care. He switched to concentrate on a career in academic surgery.

He obtained his general surgery training at Case Western Reserve in Cleveland, Ohio, between 1972 and 1979, and advanced training in vascular surgery with Dr. John A. Mannick at the Peter Bent Brigham Hospital in Boston (1979–1980). His thoughts never far from research, he interrupted his general surgery residency to work in the laboratory of Dr. Morris Karnovsky at Harvard Medical School. It was during this period (1974–1977) that Alec developed his life-long interest in vascular biology and arterial wound healing.

In 1980 at the conclusion of his training, Alec departed his native New England for Seattle, joined the faculty of the Department of Surgery at the University of Washington School of Medicine, and never looked back. He rose through the ranks to Professor of Surgery in 1990, Acting Chairman of the Department of Surgery in 1992–3, and Chief of the Division of Vascular Surgery from 1995 to 2007. No offers from other institutions could lure him away. He developed an intense loyalty to the University of Washington where he found a cooperative environment that nurtured innovation, research, and outstanding patient care.

Throughout his years at the UW, Alec’s focus remained on his research, the training of physicians for careers in academic vascular surgery, and the care of patients with vascular diseases. Along the way, he assumed leadership responsibilities in numerous national and international professional organizations. The National Institutes of Health funded his research for a third of a century, an astonishing record. His efforts engendered many honors and awards; most recently Alec received a Lifetime Achievement Award from the Society for Vascular Surgery. His collected scientific publications fill over six volumes.

Despite the acclaim of his peers, Alec remained a modest person. Nothing gave him more professional satisfaction than witnessing the success of his students and colleagues. A generation of young vascular surgeons and investigators consider Alec their role model as a leader who inspired with his intellect and with the warmth of his friendship and collegiality. He considered his greatest achievements to be the care he gave his patients and his mentoring of young physicians.

Alec and Susan Detweiler found great happiness together in their marriage in 2000 after Alec was widowed in 1998 (Monika Clowes). Alec delighted in the family life he shared with Susan’s children, Aaron and Amanda, as he experienced their college and graduate school years, family vacations and, later, their marriages. Being a grandfather to Aaron’s daughters, Charlotte and Claire, and Amanda’s daughter, Alice, he said, was “the joy of my life.”

As the Clowes family patriarch and president of The Clowes Fund since 2001, Alec provided leadership for his family’s collaboration in philanthropy in Seattle, Indiana and New England. Alec wrote a biography (forthcoming 2016, Indiana University Press) of his paternal grandfather, George Henry Alexander Clowes, who played a pivotal role in the early history of insulin and established the Fund.

A long-time member of the Board of Trustees of the Seattle Symphony, Alec was particularly proud to have been involved in the building of Benaroya Hall and, more recently, the recruitment of the Symphony’s new music director, Ludovic Morlot. Alec, who considered music essential to life, contributed his energy to furthering music education in under-served schools through The Clowes Fund.

(continued on page 5)
Admired by his family and friends for his elegant mind, truly kind nature and generous spirit, Alec leaves a hole in the universe impossible to fill.

Alec is survived by his wife, Susan Detweiler, her children Aaron Patterson (Erin) and Amanda Lovelace (Blake), and granddaughters Charlotte, Claire, and Alice; by his mother Margaret Jackson Clowes; by his sisters Margaret Bowles (Frank) and Edith Clowes (Craig Huneke), and his brother Jonathan Clowes (Evelyn); and by ten nieces and nephews. Alec’s brother Thomas Clowes (Markie) died in 2010. This diverse tribe love Alec dearly and will miss him forever.

A memorial celebration of Alec’s life was held on Tuesday, July 28, 2015, at Benaroya Hall. The Hall was filled to overflowing with Alec’s many friends, colleagues and family. Several family members eulogized Dr. Clowes as did Dr. Pellegrini, who was asked to speak for all of his colleagues.

Reprinted with permission by Dr. Alexander Clowe’s wife, Susan Detweiler, and originally printed in The Seattle Times Sunday, July 12, 2015.

For those who may wish to give a gift in memory of Alec Clowes, the Clowes family has asked that gifts be designated to either:

* University of Washington: indicate that the donation is to be applied to the Alexander Whitehill Clowes Endowed Chair, Department of Surgery
By mail: UW Medicine Advancement, Box 358045, Seattle WA 98195–8045
Online: uwsurgery.org and click “Make a Gift”

* Seattle Symphony Orchestra, PO Box 21906, Seattle WA 98111–3906; please indicate that the gift is in honor of Dr. Alexander W. Clowes
Among Dr. Alexander Clowes’ lasting legacies is the creation of the Alexander W. Clowes, MD Endowed Chair in Vascular Surgery. This Endowed Chair was created by The Clowes Fund through the vision of Dr. Clowes, to “enhance the University’s ability to recruit and retain distinguished faculty in vascular surgery. Through strategic allocations, funds will support vascular surgery research, training, education and clinical care.”

The Clowes Fund foundation was established in 1952 by Dr. Clowes’ grandparents, Dr. and Mrs. George Henry Alexander Clowes, and their two sons George, Jr. and Allen. The mission of the organization is “to enhance the common good by encouraging organizations and projects that help to build a just and equitable society, create opportunities for initiative, foster creativity and the growth of knowledge, and promote appreciation of the natural environment.” The foundation supports a variety of charitable interests ranging from the arts to social services, and has been a generous supporter of UW Medicine since 1981, providing funds in support of vascular surgery research, the Medical Scientist Training Program, and the Henry N. Harkins Endowed Professorship and Chair, currently held by our Department Chair, Dr. Carlos Pellegrini.

Dr. Clowes served as a Director of The Clowes Fund for nearly 50 years, and he was President of The Clowes Fund Board for 15 years. As The Clowes Fund worked to determine the best way to honor his life and service, Dr. Clowes made the following request of the Board:

“It has been my desire for decades to endow a chair in vascular surgery at the University of Washington for career development within my department. I personally benefited greatly from a research and career development award during my early years on the UW faculty. As I have grown older, I have devoted a large portion of my time as a professor to mentoring young surgical faculty to help them launch and develop their own careers. The funds from the proposed endowed chair would be used…in part, for a research career development award, and, in part, for education and clinical innovation.”

On May 1, 2015, members of the Division of Vascular Surgery, Department of Surgery, and UW Medicine joined the Board of The Clowes Fund and 25 members of the Clowes family at a reception to celebrate the realization of this desire.

Dr. Paul Ramsey, CEO of UW Medicine and Dean of the School of Medicine, spoke at the event and noted its significance: “Tonight we celebrate the Alexander Whitehill Clowes, M.D. Endowed Chair in Vascular Surgery, made possible by The Clowes Fund. This endowed chair is truly special because it honors someone we all know and respect, someone we all admire...Alec has been an important figure to us all – he has had impact not only as a clinician, medical investigator, a mentor, a teacher,
husband, and friend, but as an expert and leader in the field of vascular surgery.”

Dr. Benjamin Starnes, Professor and Chief of the Division of Vascular Surgery (pictured right), was recently confirmed as the inaugural holder of the Clowes Endowed Chair. A close personal friend of Dr. Clowes’, he spoke movingly about his astounding legacy as well as his unflinching bravery in the face of his diagnosis. Dr. Starnes noted that Dr. Clowes strove to make the most of his time, and worked tirelessly to complete two very personal projects: a biography of his grandfather, Dr. George Henry Alexander Clowes, the first research director at Eli Lilly and Company, and the endowment of a Chair in Vascular Surgery in the Department of Surgery.

Dr. Starnes, at the conclusion of his remarks and acceptance as the first recipient of the endowed chair, presented Dr. Clowes with a six-volume, leather bound collection of his own published works for his personal library and noted that a duplicate copy was now on display in the Clowes Library in the Vascular Surgery Division.

After the crowd gave a sustained standing ovation at the conclusion of endowment investiture, Dr. Clowes took the microphone and remarked at how humbled and overwhelmed he was by the number of people who were in attendance. He spoke of knowing that he was leaving the vascular division in “magnificent hands that will guide it through the 21st century,” and his tremendous gratitude for all the opportunities he has had through his tenure at UW.

The Department of Surgery is grateful for this tremendous gift from The Clowes Fund. The proceeds from the endowment will be used to further the aims and dreams of Dr. Clowes for this Vascular Surgery Division to be a world-leader in research, clinical care and education.

Clowes Celebration
Continued from page 6

2015 Faculty Promotions

Dr. Edgar Figueredo
Promoted to Associate Professor

Dr. Figueredo practices at the VA Puget Sound Health Care System (VA), providing care in the areas of general surgery, minimally invasive laparoscopic surgery, and surgical critical care. He completed his general surgery residency at University of Washington in 2005 after first having trained in general surgery in his native Colombia, then stayed on to complete a fellowship with the Center for Videoendoscopic Surgery, followed by a fellowship in surgical critical care at Harborview Medical Center. Dr. Figueredo has a particular interest in the education of students, residents, and fellows. Shortly after joining the faculty, he implemented a series of lectures on trauma care for medical students rotating at the VA, which he repeats every six weeks for each new group. He also gives regular lectures on critical care topics to the VA Surgical Intensive Care Unit (SICU) resident team, and conducts daily teaching rounds in the SICU when on duty for that service. Additionally, he regularly works with residents one-on-one or in small groups in UW ISIS teaching open and laparoscopic surgery skills. In addition to this work, Dr. Figueredo is an active member on multiple committees at the VA, including the Discharge Planning Committee, the Robotic Surgery Steering Committee, and the Simulation Committee. At the Department level, he is a member of the Surgical Education Workgroup, and represents the Department of Surgery on the University of Washington Diversity in Medicine Committee. He also represents UW on the Global Affairs Committee for the Society of American Gastrointestinal and Endoscopic Surgeons.

Dr. Kenneth W. Gow
Promoted to Professor

Dr. Gow completed his general surgery residency and pediatric general surgery fellowship at the University of British Columbia. He then completed a second fellowship in pediatric surgical oncology at St. Jude Children’s Research Hospital. Dr. Gow has a strong interest in the optimization of delivery of surgical care for children with cancer, and is an active participant in both regional and national efforts. At Seattle Children’s Hospital he is the Surgical Principal Investigator for the Children’s Oncology Group (COG). Areas of clinical
investigation include renal tumors through the COG Renal Tumors Committee. At the national level, he is the Surgical Liaison for the American College of Surgeons Commission on Cancer and chairs a subcommittee focused on optimizing data gathered for childhood cancers in order to provide standards of care and improve overall care nationwide. Dr. Gow is also interested in resident education and serves as the Associate Program Director for the General Surgery Residency Program. In this role, he is analyzing two decades of ACGME data on resident operative experience to characterize changes in resident experiences resulting from programmatic changes over this time period. He is also interested in improving delivery of education to residents through the creation of novel educational tools using images and a website for resident education (pedsurged.com).

Dr. Richard A. Hopper
Promoted to Professor

Dr. Hopper is the Chief of the Division of Plastic Surgery at Seattle Children’s Hospital (SCH) and the Surgical Director of the Craniofacial Center, a 40 member interdisciplinary team dedicated to craniofacial care. Dr. Hopper completed his plastic surgery residency and Master of Sciences thesis at the University of Toronto, and his craniofacial fellowship at New York University Medical Center under Dr. Joseph McCarthy. He has been on faculty at the University of Washington since 2001 with a clinical practice at SCH that focuses on the surgical treatment of cleft lip and palate, craniosynostosis, rare and severe birth deformities of the bones and soft tissues of the face. He also has a busy practice at Harborview Medical Center managing acute craniofacial trauma and secondary congenital deformities in adult patients. His research interests include image-based outcome studies for complex craniofacial procedures as well as device design for cleft and craniofacial care. Dr. Hopper completed his plastic surgery residency and Master of Sciences thesis at the University of Toronto, and his craniofacial fellowship at New York University Medical Center under Dr. Joseph McCarthy. He has been on faculty at the University of Washington since 2001 with a clinical practice at SCH that focuses on the surgical treatment of cleft lip and palate, craniosynostosis, rare and severe birth deformities of the bones and soft tissues of the face. He also has a busy practice at Harborview Medical Center managing acute craniofacial trauma and secondary congenital deformities in adult patients. His research interests include image-based outcome studies for complex craniofacial procedures as well as device design for cleft and craniofacial care. Dr. Hopper is the current President of the American Society for Craniofacial Surgery (ASCFS), and past President of the Northwest Society of Plastic Surgeons (NWSPS) and Washington Society of Plastic Surgeons (WSPP). He is co-sponsor of the Partners in African Cleft Team Training (PACT) program that has worked with African cleft teams in Ghana, Nigeria and Ethiopia since 2008 to increase Sub-Saharan capacity for sustainable care of patients with cleft lip and palate.

Dr. Sara H. Javid
Promoted to Associate Professor

Dr. Javid received her medical degree from Harvard University and completed her residency at Brigham and Women’s Hospital. She then completed a fellowship in breast surgical oncology at the Massachusetts General Hospital/Dana Farber Cancer Institute. Since joining the faculty in 2008, Dr. Javid has been active in health services research and quality improvement in breast cancer care. She began her research career as an investigator with the Collaborative to Improve Native Cancer Outcomes (CINCO), a National Cancer Institute-funded program aiming to improve cancer health outcomes for American Indian/Alaska Native (AI/AN) patients. In this role she examined disparities in the receipt of cancer treatment and screening at state and national levels. More recently, Dr. Javid’s research has focused on patient-centered care and patient-reported outcomes with the aim of developing new quality-of-care metrics. In 2014, she received the Athena Endowed Award for Excellence in Breast Cancer Research. In addition, she was recently awarded entry into the National Cancer Institute Cancer Research Network (CRN) Scholars Program, a 26-month research training program through which she will use CRN resources to conduct population-based, multi-site studies focusing on individualized treatment decision-making for patients diagnosed with ductal carcinoma in situ (DCIS). In her clinical practice, Dr. Javid treats patients with breast cancer, patients at elevated risk of breast cancer, and patients with benign breast conditions. She has won top doctor awards in her specialty from Seattle Magazine and/or Seattle Met Magazine in 2011, 2012, 2014, and 2015.

Dr. Daniel J. Ledbetter
Promoted to Professor

Dr. Ledbetter is a pediatric surgeon at Seattle Children’s Hospital (SCH) with expertise in newborns with gastroschisis, omphalocoele, congenital diaphragmatic hernia (CDH), anorectal malformations, and congenital anomalies of the lung. He received both his bachelor’s and medical degree from the University of Florida, and completed his general surgery residency and two fellowships at University of Washington. At SCH he is the surgical director of the Neonatal Intensive Care Unit. He is also the surgical director of the Surgery Pulmonary (continued on page 9)
Follow-up clinic, which provides long-term follow-up care for children with CDH, one of the first such clinics in the country. Dr. Ledbetter is a national leader in surgical education and currently serves on the American Pediatric Surgical Association (APSA) committee that produces the Pediatric Surgery Self-Assessment Program and American Board of Surgery committees responsible for writing examination questions for the Pediatric Surgery In-Training Exam and the General Surgery certifying exam. In his free time, he enjoys spending time with his family, following college sports, and cycling.

Dr. Venu Pillarisetty
Promoted to Associate Professor

Dr. Pillarisetty is a surgical oncologist practicing at the University of Washington Medical Center (UWMC). He received his medical degree from the Columbia University College of Physicians and Surgeons and completed his general surgery residency at the University of Massachusetts. He undertook advanced training in both immunology and surgical oncology at Memorial Sloan Kettering Cancer Center. Since arriving at University of Washington in 2009, Dr. Pillarisetty has focused his clinical and research work on pancreatic surgery and pancreatic cancer. He has been instrumental in the growth of the multidisciplinary Pancreatic Cancer Clinic at the Seattle Cancer Care Alliance (SCCA). He has an active translational laboratory effort studying the immune response to pancreatic cancer and other gastrointestinal malignancies, with the goal of developing new methods of treatment. Dr. Pillarisetty also works closely with the sarcoma program at SCCA, in both the clinical and research realms. Having been a devoted and notably excellent teacher of residents, he was recently selected to be the Associate Program Director for the general surgery residency at the UWMC site. In addition, he is a member of the UWMC Medical Leadership Council and the UWMC Medical Staff Administrative Council.

Dr. Gale Tang
Promoted to Associate Professor

Dr. Tang is a vascular surgeon at the VA Puget Sound Health Care System. She received her medical degree from the University of Michigan Medical School and completed her general surgery residency at University of California San Francisco. Dr. Tang then completed a fellowship in vascular surgery at Northwestern University. She practices general vascular surgery, with a special focus on arterial imaging, endovascular management of aortic disease, and critical limb ischemia. In addition to her clinical work, Dr. Tang conducts basic science research on the genetic and molecular mechanisms controlling collateralization using rodent models of hindlimb ischemia, and is currently examining the role of cyclin-dependent kinase inhibitor p27 in collateral artery development in a study funded by the American Heart Association. She serves as a member of the Research and Education Committee for the Society for Vascular Surgery, the Research Committee for the Association for VA Surgeons, and the Publications Committee for the Association for Academic Surgeons. She is also the VA site director and assistant program director for the Integrated Vascular Surgery Residency and Vascular Surgery Fellowship, and is interested in surgical education and didactic curriculum development.

Dr. Raymond Tse
Promoted to Associate Professor

Dr. Tse is a pediatric plastic and reconstructive surgeon at Seattle Children’s Hospital (SCH). He completed his plastic surgery residency at the University of Western Ontario then went on to complete an orthopedic hand surgery fellowship at Stanford University and a fellowship in pediatric plastic surgery at the Toronto Hospital for Sick Kids. As a provider with the SCH Craniofacial Center, Dr. Tse focuses on clinical care for children with cleft lip and palate. He has developed clinical standard work pathways for cleft lip, palate, and recently collaborated with the UW Department of Computer Science and Engineering to develop automated processes for assessing facial deformities using 3D imaging. Dr. Tse is also a member of Americleft, a surgeons’ group examining comparative outcomes between centers. Dr. Tse’s other area of expertise is pediatric upper extremity. He established and is medical director of the SCH Brachial Plexus Program, the only program in the Pacific Northwest providing specialized care for children with neonatal brachial plexus palsy as well as older children with traumatic brachial plexus palsy. Dr. Tse is also part of the SCH Hand Program, providing surgical reconstruction for children with congenital hand differences. He is the president of the Washington Society of Plastic Surgeons and is faculty for the annual Canadian Chief Resident Review course.
Welcome 2015/16 New Surgery Residents

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

“I fell in love with the UW Plastic Surgery program during my sub–internship. The program offers incredible training with the friendliest and happiest residents and faculty I have met. I was inspired every day to learn more, work harder, and be better.”

“I was very impressed with the level of thought that went into formulating the rotations for each individual intern. Dr. Horvath’s explanation of which rotations she would have me do, as someone going into interventional radiology, made me confident that UW had my education at the forefront of their agenda.”

“The first thing that attracted me to UW was the unparalleled trauma experience provided at Harborview Medical Center. I also wanted the opportunity to learn from surgeons who are pioneers in their respective fields. After rotating through the program, I was drawn by the camaraderie demonstrated by the residents, and I left with the impression that UW was the perfect fit for me.”

“When I started applying for residency, I knew I wanted a strong academic program with a history of productive research time for their residents and mentors who were interested in surgical education. UW provides exactly that along an unparalleled breadth of training at university, county, VA, and private practice hospitals. I know I will become a technically skilled and competent clinician after my years in surgical residency here. Seattle also offers all the benefits of a major, progressive city with the benefits of being so close to amazing hiking and other outdoor activities. My fiancé and I are so excited to be moving out to the Pacific Northwest and becoming part of the UW family.”

“I chose the University of Washington program because of its sustained excellence in clinical training and research mentorship. I was very impressed with the breadth and depth of experiences offered here, and liked the supportive and encouraging atmosphere I noticed amongst the faculty, residents, and staff during my visit.”

(continued on page 11)
Welcome 2015/16 New Surgery Residents
Continued from page 10

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

"UW’s dedication to high quality surgical education, research in global surgery, support for residents by the program director and department, and camaraderie of fellow residents made UW the perfect choice."

"Of the many reasons I chose to do my residency training at the University of Washington, I was most impressed by the leadership I experienced during my visiting rotation. An institution centered around academic excellence, driven by patient centered care of Orthopaedic injury, in an environment surrounded by a willingness to teach and to serve, the UW seemed a perfect fit."

"Fortunately, it happens to be that the best residency program in the country is located in the beautiful Pacific Northwest. I am thrilled to live among all the beauty that nature has to offer, the home of great coffee, and an eclectic population."

"I truly am blessed by the opportunity I have been given when the University of Washington chose me. I could not be more grateful to train here in Seattle, along such a talented group of residents, under the guidance of its exceptional faculty, and along side a most exemplary staff."

"I chose UW for a combination of the people, pathology and location. After completing a month long rotation at UW as a student it was clear that residents were confident, well trained and very happy at UW."
New Research Residents

Chris Burke, MD

Dr. Burke will spend a year as a fellow in ExtraCorporeal Life Support (ECLS) at Seattle Children’s Hospital (SCH) under fellowship director Dr. Michael McMullan, Associate Professor in the Division of Cardiothoracic Surgery. The field of ECLS heavily influences all aspects of cardiothoracic surgery, and this program will help Dr. Burke learn the clinical application of ECLS and develop understanding regarding the transformation of clinical needs into devices that improve patient outcomes. The fellowship has both clinical and research components: Dr. Burke will participate in the initiation and maintenance of ECLS at SCH, as well as oversee related research projects in collaboration with Dr. McMullan.

Cameron Gaskill, MD

Dr. Gaskill will spend his first year as a research fellow in the Surgical Outcomes Research Center (SORCE) under the direction of Dr. David Flum, Professor of Surgery in the Division of General Surgery, and Dr. Grant O’Keefe, Professor of Surgery in the Division of Trauma, Burn, and Critical Care Surgery. He will also be completing a Master of Public Health in the University of Washington Department of Global Health. Dr. Gaskill’s research will be focused on addressing appropriateness of surgical care and decision-making in surgery, including focused work on indications, trends, and outcomes in surgery in rural Washington State. The following year he will serve as an NIH-funded Northern/Pacific 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, and Dr. Joseph Zunt, Professor in the Department of Global Health. Dr. Gaskill will focus on enhancing surgical care of trauma and oncology patients in health facilities in Ghana through systematic assessment of resource need, characterization of disease burden, and modeling the effect of strategic interventions. In addition, he is studying surgical epidemiology in complex humanitarian emergencies and from population-based studies of surgical need and injury burden in Sierra Leone and Pakistan. Dr. Gaskill wishes to pursue a career in trauma surgery with attention on LMICs.

Andrew Ludwig, MD

Dr. Ludwig is a research fellow under the direction of faculty mentors Dr. James Park, Associate Professor in the Division of General Surgery, and Dr. Alessandro Fichera, Professor in the Department of Surgery and Chief of the Section of Gastrointestinal Surgery. Under the mentorship of Dr. Park, he is investigating novel antibody-directed positron emission tomography (PET) imaging and radiation-based therapies for hepatocellular carcinoma (HCC). This research builds on previous work by General Surgery resident Dr. Jonathan Sham, who developed a liver cancer-specific PET imaging probe. Dr. Ludwig’s goal is to develop and refine targeted therapies for liver cancer, leading to earlier detection and more effective treatment with reduced side effects for a disease the represents the second most lethal malignancy worldwide. When not in the laboratory, Dr. Ludwig will perform clinical research on wound healing after colectomy and surgical approaches to rectal adenocarcinoma under the guidance of Dr. Fichera. Dr. Ludwig plans to use this experience to pursue an academic career in colorectal surgery.

Lucas Thornblade, MD

Dr. Thornblade is a trainee in the NIDDK-funded T32 fellowship in Gastrointestinal Surgical Outcomes Research at the Surgical Outcomes Research Center (SORCE). Under the direction of Dr. David Flum, Professor in the Division of General Surgery, he plans to carry forward ongoing work in diverticulitis outcomes under a newly funded R01 grant through the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK). This grant will look at patient reported outcomes of elective colon resection in diverticulitis. Working with Dr. Farhood Farjah, Assistant Professor in the Division of Cardiothoracic Surgery, Dr. Thornblade plans to study process of care and clinical effectiveness in thoracic and hepatobiliary cancer. Additionally, while pursuing a Masters of Public Health in the Department of Global Health, Dr. Thornblade plans to continue his ongoing work in surgical education in Vietnam under the direction of Dr. Charles Mock, Professor of Surgery, Epidemiology and Global Health.

(continued on page 13)
New Research Residents
Continued from page 12

Cordelie Witt, MD

Dr. Witt is a fellow in the NICHD–funded T32 Pediatric Injury Research Training Program under faculty mentor Dr. Frederick Rivara, Professor in the Department of Pediatrics. She will work within the Harborview Injury Prevention and Research Center, with a focus on traumatic injuries in children. Her research will focus on how intrinsic patient factors influence injury patterns and outcomes, and how to improve patient outcomes through large-scale clinical interventions. In addition, Dr. Witt will be completing her Master of Public Health in Epidemiology through the University Of Washington School of Public Health. She hopes to ultimately use this training to pursue an academic surgical career aimed at improving patient care via population-based analyses and interventions.

2015 Chief Residents’ Dinner

The 2015 Department of Surgery Chief Residents’ Dinner was held at the Bell Harbor International Conference Center on Friday, June 19th and was emceed by Dr. Dana Lynge, Associate Professor of General Surgery and Deputy Chief of Surgery, VA Puget Sound Health Care System.

One of the traditions of this annual dinner is presenting awards in the following categories:

Harkins Society Introduction
Introduction by Dr. Giana Davidson, President, Henry Harkin’s Surgical Society/Assistant Professor, Division of General Surgery

Henry Harkins Award
Awardee—Dr. Dara Horn, Surgery Resident
Presented by Dr. Roger Tatum, Surgeon-in-Chief, Associate Professor, General Surgery, VA Puget Sound Health Care System

UW Department of Surgery Student Research Award
Awardee—Dr. Ariel Knight, UW School of Medicine graduate
Presented by Dr. Roger Tatum, Surgeon-in-Chief, Associate Professor, General Surgery, VA Puget Sound Health Care System

Stevenson’s Faculty Teaching Award
Awardee—Dr. Saurabh Khandelwal, Assistant Professor, Division of General Surgery
Presented by Dr. Jarod McAteer, Surgery Resident

Nurse of the Year Award
Awardee—Valerie Forbes, RN
Presented by Dr. Analisa Armstrong, Surgery Resident

Resident Recognition Award for Medical Student Teaching
Awardee—Dr. Swaroop Bommareddi, Surgery Resident
Presented by Dr. Karen Horvath, Professor, Division of General Surgery, Director of the Residency Training Program and Associate Chair for Education

The David Tapper Resident Teaching & Leadership Award
Awardee—Dr. Amelia Simpson, Surgery Resident
Presented by Dr. Karen Horvath, Professor, Division of General Surgery, Director of the Residency Training Program and Associate Chair for Education

Fellows Finishing June 2015

Shahram Aarabi, MD, MPH/Trauma & Surgical Critical Care
Darren Bowe, MD/Trauma & Surgical Critical Care
Deepika Nehra, MD/Trauma & Surgical Critical Care
Samantha Quade, MD/Trauma & Surgical Critical Care
Imran Javed, MD/Transplant Surgery
Damien Carter, MD/Burn Surgery
Lyndsay Deeter, MD/Burn Surgery
Christina Tragos, MD/Craniofacial Surgery
Sophia Hom, MD/Congenital Cardiac Surgery
Marie-Pascale Tremlay-Champagne, MD/Microsurgery
Edward Chan, MD/Cardiothoracic Surgery
Fawwaz Shaw, MD/Cardiothoracic Surgery
Rebecca Stark, MD/Pediatric Surgery
Joshua Mourot, MD/Center for Videoendoscopic Surgery
Allison Porter, MD/Center for Videoendoscopic Surgery
Robert Yates, MD/Center for Videoendoscopic Surgery
Derek Nathan, MD/Vascular Surgery
Ronson Madathil, MD/Cardiothoracic Surgical Critical Care

(continued on page 14)
Chief Residents Finishing June 2015

Vascular Surgery Program

Brandon (Ty) Garland, MD
Private Practice
Denver, CO

Plastic Surgery Program

Sam Lien, MD
Private Practice
Denver, CO

Suzette Miranda, MD
Aesthetic Surgery Fellowship
Atlanta, GA

Janelle Sousa, MD
Microsurgical Fellowship
The Royal Melbourne Hospital

General Surgery Program

Greta Bernier, MD
Colorectal Surgery Fellowship
University of South Florida, Tampa

F. Thurston Drake, MD, MPH
Endocrine Surgery Fellowship
University of California, San Francisco

Colleen O’Kelly Priddy, MD
Breast Surgical Oncology Fellowship
University of Southern California, Los Angeles

Sabrina Sanchez, MD, MPH
Critical Care Fellowship
University of Michigan, Ann Arbor

Amelia Simpson, MD
Trauma/Critical Care Fellowship
University of California, San Diego

Callie Thompson, MD
Burn/Trauma/Critical Care Fellowship
Harborview Medical Center, Seattle

Nicole Zern, MD
Endocrine Surgery Fellowship
Royal North Shore Hospital, Australia

The Department of Surgery wishes the very best to the departing residents and welcomes the new, incoming residents for 2015–16.
Dr. Kevin P. Lally

The 14th Annual David Tapper Endowed Lecture, presented by Seattle Children’s Hospital Division of General & Thoracic Surgery, was held on Thursday, May 7, 2015. This year’s guest lecturer was Dr. Kevin P. Lally, A.G. McNeese Chair in Pediatric Surgery, Richard Andrassy Distinguished Professor, and Professor and Chairman of the Department of Pediatric Surgery at University of Texas.

Dr. Lally completed his Pediatric Surgery Training at the Children’s Hospital of Los Angeles and is board certified in surgery, critical care and pediatric surgery. He is one of the world’s leading experts in congenital diaphragmatic hernias (CDH). He developed and runs the CDH Registry, which is an international consortium that has prospectively collected data on over 6,000 infants with this rare anomaly.

Dr. Lally is actively involved in student and resident education and the Center for Clinical Trials and Evidence Based Surgery. He has been principal investigator or co-investigator on several clinical trials.

There are many factors, both job-related and personal, that can make the practice of medicine, and specifically a surgery practice, a stressful endeavor. Clinical and medico-legal issues can obviously be distressing, but personal relationship and home life expectations may also make it difficult to put patients’ welfare first. In a large, diverse Department like our own, it is important to provide surgeons with all types of support, including emotional support, so that patients can obtain the best care possible, and surgeons can lead balanced lives.

Under the direction of Dr. Claudia Finkelstein, the Department of Medicine at University of Washington began to commit resources to peer support efforts here in Seattle, and, based on her work, the Department of Surgery (DOS) has now followed suit. Under the leadership of Drs. Eileen Bulger, Professor in the Division of Trauma, Burn, and Critical Care Surgery, and Jeff Friedrich, Associate Professor in the Division of Plastic Surgery, the DOS program is the first in the School of Medicine to use an in-house network of volunteers who are available to meet with surgeons of any specialty and discuss concerns about practice or personal issues in a confidential setting. All volunteers have undergone a two-hour training with Dr. Finkelstein, and because they are in-house, they understand the pressures associated with a surgical practice and can provide critical perspective and support.

To access the DOS Peer Support Program, please call 206-685-0675. This line is answered during the day with voicemail available after hours. All interactions with the Peer Support Program are confidential and no written records are maintained. It is simply there to help.
Researcher Profiles: Drs. Jeffrey Friedrich and Kari Keys

Department of Surgery faculty members have widely varied clinical practices and research interests. This diversity of professional focus is one of the attributes that make the Department exceptional among its peers. However, there is one aspect that is common to every faculty member: the training of the next generation of surgeons is the common denominator, and, as with other aspects of the surgical profession, there are many exciting research efforts happening in resident education. Drs. Jeffrey Friedrich, Associate Professor and Residency Program Director in the Division of Plastic Surgery, and Kari Keys, Assistant Professor in the Division of Plastic Surgery and Associate Program Director of Plastic Surgery Residency, both have a strong interest in surgical education – not only in the actual teaching of residents, but also in investigating the many ways resident education can be enriched for the benefit of faculty, trainees, and patients.

Many resident education studies take the form of surveys and are often done in collaboration with national surgical education societies, including the Association for Surgical Education and the American Council of Academic Plastic Surgeons (ACAPS). These surveys have helped reveal important information about resident performance and plastic surgeon minimum competencies in subspecialties. Both Drs. Friedrich and Keys are active participants in these investigations. The results from these studies have enabled numerous improvements to be undertaken at the local programs within the Department of Surgery, including the creation of the ACAPS Microsurgery 101 Taskforce for which Dr. Keys was recently appointed co–chair. The goal of this task force is the creation of a comprehensive online national microsurgery curriculum, which will enable standardization of microsurgical training.

Beginning two years ago, the American Council for Graduate Medical Education (ACGME) enacted a seismic shift in the manner that resident trainees and residency programs are evaluated and accredited. This new program was entitled the Next Accreditation System (NAS), and one of the cornerstones of this effort is the specialty–specific Milestones. The Milestones are an expansion of the extant six core competencies and provide specific actions and tasks upon which residents are evaluated.

Dr. Friedrich has found this to be a fruitful area of research. He is using this transition as an opportunity to gather data about the Milestones and to study how residents evaluate their own progress relative to faculty members’ evaluations of them. Self–assessment has been used in other industries for decades, but medical education programs have not used this methodology as widely. It is anticipated that data from this study will enable surgeon–educators to use Milestones to their fullest capacity, and to improve how resident competency mastery is evaluated and tracked.

Another exciting area of education research is the use of simulation in surgical education. Unlike the Milestones, the use of simulation is not new and its utility in surgical education is not in doubt. Microsurgery is an essential component of plastic surgery training, and one that requires a considerable amount of practice. The ability to practice in a simulated setting allows trainees to achieve a more sophisticated microsurgical skill set by the time they need to use these techniques in the clinical setting.

Drs. Keys and Friedrich have invested considerable effort into incorporating more simulation training into the Plastic Surgery residency program. They recently obtained a grant from the Center for Leadership in Medical Education (CLIME) to develop a simulation–based microsurgery education module, which will enable residents to more readily develop nimble and skillful microsurgical techniques, making them much more expert when they begin performing these procedures in the clinical realm. This winter, Drs. Keys and Friedrich will apply for a Plastic Surgery Foundation (PSF)/ACAPS Combined Pilot Research Grant to take the microsurgery simulation curriculum to the national level with validation of simulation tasks leading to the development of a standard national microsurgery simulation curriculum similar to what the Fundamentals of Laparoscopic Surgery (FLS) has done for general surgery.

In the last year, Dr. Keys, with resident Erin Miller, MD, has also developed a low–cost breast reduction simulator that delivers hands–on practice with breast marking and shaping. These two elements of breast reduction are most often performed by a faculty member since the patient is awake at the time and the markings are critical to final breast size and shape. Prior to the simulator, the skill could typically only be learned by observation. This year, Dr. Keys and her team will be determining the effectiveness of this simulator in resident education.

Resident education research is a multifaceted component of an academic surgical program, and is vital to a program’s continued ability to not only keep pace with new techniques, but also produce high–quality graduates who can safely practice the most complex surgical techniques. The development of skilled and ethical surgeons is the ultimate goal of any surgical training program, and education research is necessary to continually improve the quality of surgeons entering the workforce.
SS: What was the last book you read?

AW: Last night I just finished *Armada* by Ernest Cline. It’s a near-future, science fiction book that’s filled with pop culture references from the 1980s and ‘90s.

SS: What is the next book you’re planning to read?

AW: Aspirationally, I’ve been wanting to re-read Dickens, and I actually have *A Tale of Two Cities* on my bedside table. Realistically, my next book will probably be *Seveneves* by a local author named Neal Stephenson. It’s another science fiction book. My love for technology extends into what I read outside of work.

SS: Is there a TV series you enjoy watching?

AW: My daughters and I love watching “The Amazing Race.” I would love to be on that show. I have twin daughters and they argue about which one of them would get to go with me. Another more embarrassing TV show that I have an inordinate fondness for is “Dancing With the Stars.” I’d love to go on that show, too. When my wife and I were young and cool we used to do a lot of swing and rockabilly dancing. We even had a rockabilly band at our wedding.

SS: What is the one phone app you can’t live without?

AW: Twitter. I’ve found it to be the one of the best tools for professional development that I’ve ever encountered. I use it daily to keep up with literature and engage with other surgeons around the world. Recently, I helped start an online journal club on Twitter called “The International General Surgery Journal Club.” We routinely have a couple hundred comments and we usually have one of the authors of the paper participate. And of course I use it to follow the Seattle Sounders. I’m a Sounders fanatic. [SS note: Follow Dr. Wright at @andrewswright or join the journal club at @igsjc.]

SS: If you could be any fictional character, who would it be?

AW: I’d be a Jedi Knight. I’m a huge Star Wars fan.

SS: What is your favorite Seattle restaurant?

AW: There are so many! I love Rain City Burgers — they make good milkshakes — and another favorite is Westward. Tonight I will be trying a new restaurant, Salare, which I’m really excited about.

SS: What is one of your guilty pleasures?

AW: Video games. I have an Xbox One — I’m a Seattleite here to represent Microsoft! My favorite all-time video game is *Mass Effect*.

SS: Do you have a favorite memory or personal accomplishment from the last year?

AW: Taking my daughters to Tintagel which is the legendary birthplace of King Arthur. It’s a fantastic spot on the cliffs of Cornwall overlooking the water — it’s unbelievable. My daughters really loved it.

SS: Do you have a personal goal for this year?

AW: I have two: my perpetual, personal goal is to be able to do a handstand in yoga. I can do a headstand, but haven’t yet mastered the balance needed for a handstand. My other goal is to teach my daughters to drive.

SS: Finally, what would you do if you weren’t a surgeon?

AW: I’d be an architect or a woodworker. I do all of my own home improvement and I love building furniture — bookcases, desks, tables. I’ve replaced all the plumbing in my house, all of the electrical, and remodeled the bathrooms. The only thing I don’t do myself is drywall.
Dr. David Flum, Professor in the Division of General Surgery, was awarded $2,445,560 from the Agency for Healthcare Research and Quality (AHRQ) for his project “Developing Design Principles to Integrate PROs into clinical practice through HIT: Data, user experience, and workflow requirements for PRO Dashboards.” Effectively integrating patient-reported outcome (PRO) information into clinical care through health information technology (HIT) has the potential to improve care delivery and quality, yet many healthcare practitioners have little experience interpreting PROs or incorporating them into healthcare activities. Utilizing systems engineering methods, human-centered design, and mixed-method approaches, this study will assess healthcare practitioner (physicians, physician assistants, advanced practice providers, nurses, and allied health professionals) perspectives and workflow needs to inform design principles for the meaningful integration of PROs into clinical practice through HIT platforms. Dr. Flum is joined on the project by Danielle Lavallee, PharmD, PhD, Research Assistant Professor in the Division of General Surgery, as well as co-investigators from the Department of Urology, The Information School, and others.

Dr. Flum was also awarded $2,774,603 from the National Institutes of Health (NIH) for his project “Practice Patterns and Impact of Operative and Non-operative Management of Diverticulitis.” Half of all Americans over the age of 60 have diverticulosis of the colon, and 20–25% are expected to develop acute diverticulitis. While most acute episodes resolve with antibiotics alone, 10–20% will need an emergency colectomy/colostomy at their initial presentation, and all patients remain at lifetime risk for recurrent episodes. Given the uncertainty of when a recurrent episode will occur and the looming risk of colostomy, surgeons have been trained to recommend elective, “prophylactic” colectomy after two episodes, and as a result diverticulitis is now one of the leading reasons for elective colectomy. Several professional societies now recommend delaying elective resection and have called for research to determine its value, yet over the last decade the use of elective resection has increased more than 50%, much faster than the incidence of diverticulitis and coinciding with the widespread adoption of laparoscopy. Given this trend, it is important to assess the patterns of practice related to early or delayed resection, factors driving decision making, and the impact of the disease on those who do and do not have an elective resection. To address these issues, Dr. Flum and his multidisciplinary team, including co-investigators Giana Davidson, MD, MPH, Assistant Professor in the Division of General Surgery, and Danielle Lavallee, PharmD, PhD, Research Assistant Professor in the Division of General Surgery, will undertake three related, but independent studies that describe treatment patterns after recovery from an episode of

(continued on page 19)
Honors and Awards

Continued from page 18

acute diverticulitis, the factors associated with early and delayed elective surgery, and outcomes and impact of the disease. Together these studies will determine if the observed, dramatic increase in the use of elective surgery for diverticulitis is consistent with recommendations about delayed intervention, provide better understanding about the factors associated with decisions for elective surgery and provide critical information about the impact of diverticulitis.

Anne Hocking, PhD, Research Associate Professor in the Division of Trauma, Burn, and Critical Care Surgery, was awarded $35,000 from the University of Washington Royalty Research Fund for her project “Mapping wound metabolism in a mouse model of type 2 diabetes.” Chronic non–healing wounds are a common and debilitating complication of diabetes mellitus, and an estimated 25% of patients will develop a non–healing foot ulcer. Of these, 12% will require a lower extremity amputation. Given that the World Health Organization estimates that 347 million people worldwide have diabetes mellitus, the prevalence and incidence of non–healing foot ulcers constitutes a global healthcare crisis. Currently, there is a lack of reliable therapies for treatment of wounds that are slow to heal; consequently there is an urgent need for basic research into fundamental mechanisms of wound repair. The goal of Dr. Hocking’s study is the generation of a “road map” of cellular metabolism in a cutaneous wound. While cellular metabolism is known to play a central role in regulating cell signaling pathways critical for cell survival, and proliferation in cancer, less is known about its role in wound healing. In her study, Dr. Hocking will use targeted metabolomics to measure metabolites in diabetic and non–diabetic murine wounds. She will also determine when and where metabolic enzymes are expressed during wound repair. Together these studies will determine whether distinct metabolic programs are associated with different phases of wound repair, and whether wounds with impaired healing are associated with different metabolic programs than wounds with normal healing. Metabonomic studies such as these have the potential to identify novel biomarkers and therapeutic targets for improved wound healing outcomes.

Dr. Carlos Pellegrini, The Henry N. Harkins Professor & Chair, was named Contributing Foreign Member by the Royal Academy of Medicine–Spain.

Dr. Sherene Shallhub, Assistant Professor in the Division of Vascular Surgery, received the UW Medicine PRAISE award for the period of July–December, 2014. PRAISE stands for Patient Reported Assessment In Satisfaction and Excellence. The awards are given out semi–annually to clinicians who have received at least 15 patient satisfaction surveys in the past 6 months and achieve a ranking for communication in the 80th percentile or better. Clinicians with this ranking are among the top in the nation for their listening and communication skills.

Residents

Research residents Drs. Lacey LaGrone and Brodie Parent will lead a $50,000 project funded by the Patient Safety Innovations Program (PSIP). The project, “Standardized Verbal Hand–off in the ICU: Decreasing Patient Care Errors through Communication Optimization,” will be overseen by Principal Investigators Drs. Joseph Cuschieri, Professor in the Division of Trauma, Burn, and Critical Care Surgery, and Patricia Kritek, Associate Professor in the Department of Medicine. In response to unacceptably high numbers of adverse events attributable to communication, and in particular handoff failures, the ACGME and the Joint Commission now require use of standardized handoff procedures. I–PASS stands for Illness severity; Patient summary; Action list; Situation awareness and contingency planning; and Synthesis or read–back.

It is a verbal handoff curriculum which, in previous studies, has resulted in a 23% decrease in adverse events. For their project, the team will roll out the I–PASS curriculum to UWMC and HMC ICUs in a step–wedge, randomized controlled design. Outcomes to be examined include subjective measures of provider perception of handoff quality, and several objective measures of patient quality care including medication errors, length of stay, return to ICU, and mortality. The team anticipates that implementation of the I–PASS curriculum will be sustainable through existing continuing education measures and will improve patient safety and quality care through reduction in medical errors.
**Department of Surgery Grant Activity Report**

In the 4th quarter of FY15, Department of Surgery Principal Investigators received 17 awards totaling $2.3 million!*
Of these awards, the following were new awards or competitive renewals:

<table>
<thead>
<tr>
<th>Principal Investigator</th>
<th>Sponsor</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heather Evans, MD, MS</td>
<td>Surgical Infection Society (SIS)</td>
<td>mPOWEr: Mobile Post-operative Wound Evaluator</td>
</tr>
<tr>
<td>Heather Evans, MD, MS</td>
<td>UW Patient Safety Innovations Program (PSIP)</td>
<td>mPOWEr: piloting a mobile health app for post-discharge surgical site monitoring</td>
</tr>
<tr>
<td>David Flum, MD, MPH</td>
<td>Cleveland Clinical Foundation</td>
<td>Alliance of Randomized trials of Medicine vs. Metabolic Surgery in Type 2 Diabetes (ARMMS-T2D) Covidien</td>
</tr>
<tr>
<td>David Flum, MD, MPH</td>
<td>National Institutes of Health (NIH)</td>
<td>Practice Patterns and Impact of Operative and Non-operative Management of Diverticulitis</td>
</tr>
<tr>
<td>David Flum, MD, MPH</td>
<td>Agency for Healthcare Research and Quality (AHRQ)</td>
<td>Developing Design Principles to Integrate PROs into clinical practice through HIT: Data, user experience, and workflow requirements for PRO Dashboards</td>
</tr>
<tr>
<td>Nicole Gibran, MD</td>
<td>Cytori Therapeutics, Inc.</td>
<td>Feasibility of Obtaining Adipose Derived Regenerative Cells (ADRCs) from Celution® processed Discarded Thermal Burn Eschar Tissue for Autologous Investigational Treatment of Thermal Burn Injury</td>
</tr>
<tr>
<td>Anne Hocking, PhD</td>
<td>ECM Technologies, LLC</td>
<td>Designer Collagen Therapeutics for Chronic Wounds</td>
</tr>
<tr>
<td>Anne Hocking, PhD</td>
<td>UW Royalty Research Fund (RRF)</td>
<td>Mapping wound metabolism in a mouse model of type 2 diabetes</td>
</tr>
<tr>
<td>Jason Ko, MD</td>
<td>Plastic Surgery Foundation</td>
<td>Finger Replantation and Amputation Challenges in Assessing Impairment Satisfaction and Effectiveness Study (the “FRANCHISE Study”)</td>
</tr>
<tr>
<td>Jason Ko, MD</td>
<td>Axogen Inc.</td>
<td>A Multicenter, Prospective, Randomized, Subject and Evaluator Blinded Comparative Study of Nerve Cuffs and Avance Nerve Graft Evaluating Recovery Outcomes for the Repair of Nerve Discontinuities (RECON).</td>
</tr>
<tr>
<td>Ronald Maier, MD</td>
<td>University of Florida</td>
<td>Validation of a Genomics Based Prognostic in Severe Trauma</td>
</tr>
<tr>
<td>Nahush Mokadam, MD</td>
<td>HeartWare, Inc.</td>
<td>A Prospective, Single Arm, Multi-Center Clinical Study in Collaboration with the InterAgency Registry for Mechanically Assisted Circulatory Support to Evaluate the Thoracotomy Implant Technique of the HeartWare HVAD System in Patients with Advanced Heart</td>
</tr>
<tr>
<td>Gale Tang, MD</td>
<td>Society for Vascular Surgery Foundation (SVS)</td>
<td>Role of MMP2 in p27 Knockout Vascular Smooth Muscle Cell Migration</td>
</tr>
<tr>
<td>Gale Tang, MD</td>
<td>Society for Vascular Surgery Foundation (SVS)</td>
<td>Effect of hypoxia on p27 knockout vascular smooth muscle cell phenotypes</td>
</tr>
<tr>
<td>Andrew Wright, MD</td>
<td>Foundation for Surgical Fellowships</td>
<td>Foundation for Surgical Fellowships</td>
</tr>
</tbody>
</table>

*In keeping with Office of Research reporting conventions, the total award for the quarter reflects actual funding received and may exclude anticipated funding for future project periods. Awards for future periods will be reported as they are received.*


(continued on page 22)


Below are comments we received from readers regarding our Spring 2015 issue:

“Thank you for putting together such a nice overview of our division. It was very nicely written and represented our group well.”

Dr. Jay Pal, Assistant Professor, Division of Cardiothoracic Surgery University of Washington

“I think that the Breakfast with Chair approach should be a universal management strategy. Very productive, I’m sure, and all members feel appreciated. I wish that more administrative chiefs would use that approach!

I have attached a photo of the UW ISIS representatives who came to our Boise VA sim lab open house. We also had an open video connection to the UW lab so that we could watch the respective classes at both sites and our administration got to speak with folks at the ISIS lab. There was a large turnout for the open house, and we have been very appreciative of the UW ISIS support.”

Dr. Paula Carvalho, Academic Section Head, Pulmonary and Critical Care Medicine, VA Medical Center, Boise, ID, and Professor of Medicine, University of Washington

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.
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.

Surgery Synopsis Editorial Team

Carlos A. Pellegrini, MD, Chairman
Kristine E. Calhoun, MD, Associate Professor
Heather L. Evans, MD, Assistant Professor
Lorrie A. Langdale, MD, Professor
Daniel J. Ledbetter, MD, Associate Professor
Erik Van Eaton, MD, Assistant Professor
Susan Marx, MBA, Director
Judith Rapp, Administrator
Kate Rimmer, MBA, Research Manager
Michael Hilleary, Communications & Media Specialist

Co–Chief Editors:
Heather L. Evans, MD, Assistant Professor
Erik Van Eaton, MD, Assistant Professor

Contributing Writers:
Eileen M. Bulger, MD, Professor
Jeffrey B. Friedrich, MD, Associate Professor
Kari A. Keys, MD Assistant Professor
Kate Rimmer, MBA, Research Manager
Jennie Paxson, Executive Assistant

Managing Editor:
Judith Rapp, Administrator

Assistant Managing Editor & Layout/Publication:
Michael Hilleary, Communications & Media Specialist

Photo credits:
UW Creative (portraits)
Clare McLean/UW Medicine (back cover top photo)
Richard Kenagy, PhD (back cover bottom photo)

University of Washington
Box 356410
Seattle, WA 98195–6410
206–543–3680
206-685-6912 – FAX
surgeditors@uw.edu
WWW.UWSURGERY.ORG
FACEBOOK.COM/UWDOS
TWITTER.COM/UWSURGERY
YOUTUBE.COM/UWDEPTSURGERY
© 2015 University of Washington—Department of Surgery. All rights reserved.