The Department of Surgery’s “Center for Surgical Ethics” has been in the making for some time, but now is on the cusp of launching. Two important events helped to set the stage this summer and fall: the first was a Day of Surgical Ethics added to the 30th Annual Summer Seminar in Healthcare Ethics in August; the other was a special Grand Rounds on October 26th focused on Surgical Ethics with renowned surgeon and ethicist, Alberto Ferreres, MD, Chair of Surgery, University of Buenos Aires, Argentina.

In this issue of Synopsis, I wanted to share why the Department is creating a Center for Surgical Ethics, what is driving its creation, what it is about and what we hope to accomplish.

I have long pondered, as I'm sure many have, what it takes to be a great surgeon. Beyond technical skills, I have thought a lot about questions such as: “What do my patients need? How can I best understand and meet those needs? What do my patients not know that I can help them understand so they and their families can make the best decisions for themselves? And, how do I provide information and still let them make the decision, i.e., how do I keep from putting my thumb too much on the scale?”

All of these questions have ethical dimensions. The definition of ethics put simply is the basic concepts and fundamental principles of decent human conduct, moral values, right and wrong, and standards of behavior. But, why is the study of ethics, in an organized fashion, important? Can’t we just rely on our own moral compass? I began to realize that some systematic study of ethics assists us in deciding a course of action, and how we communicate complex medical decisions. Ethical principles help us articulate the challenging options we consider for our patients, and how to help them navigate their own healthcare decisions in ways that best reflect their own values and goals.

With these questions and realizations, I began to recognize that while I had good instincts, I had no formal method, foundation or vocabulary to understand how to raise and reflect on
ethical issues or how to embed ethical decision making in a logical way into my daily professional interactions with patients and colleagues. I learned right from wrong from my parents, and I have always felt that I had a strong moral compass—these were strong foundations for an ethical life—but felt limited in the understanding of ethical principles and semantics. I determined I would benefit from improving my formal knowledge of ethics, both to give me a solid foundation for the complex decisions we make every day, but also so that I could talk about ethical issues more accurately and consciously.

When I became Chair of the Department these issues were heightened for me. It was no longer just a personal issue; now I was responsible for leading a great Department and ensuring that our faculty and our trainees not only received the best technical surgical training, but also were trained to understand how to make ethical decisions. As surgeons we are frequently faced with emergencies or immediate decisions in the operating room, and also (perhaps more importantly) to take perspective and make ethical decisions in day to day choices. I felt keenly that the ability to think and act ethically would not only set our Department apart, but would produce better trainees—trainees who could help to shape a more just healthcare system and world. I also understood it would help advance our research in ethical ways, but most of all, would enable us to better care for our patients. We would ask more frequently, “What do they need?” Not merely say “This is what I can do.”

In my own pursuit of a foundation for surgical ethics, I have been fortunate to have spent most of my career in this surgical department. My predecessor, Dr. Carlos Pellegrini, paved the way with his similar interest in surgical ethics. Before he stepped down, he had begun thinking about developing a more deliberate focus on ethics within the Department of Surgery. He had a long association with Dr. Ferreres and together they wrote an important article on surgical ethics and discussed establishing such a center in this Department. It was a confluence of interests when I became Chair and I determined to carry the vision forward, with a plan to form a formal Center for Surgical Ethics.

What is the Center and how are we creating it? Our first step in creating the Center was to discuss the goals and coordinate efforts with the UW Department of Bioethics and Humanities led by Professor Denise Dudzinski. Dr. Dudzinski has been immensely helpful and generous with her time, support and advice as we have sought to clarify the needs for a new center. There are many opportunities for our department to partner with the Department of Bioethics and Humanities in this venture. We also have developed a formal association with Dr. Alberto Ferreres who has joined our faculty as a volunteer clinical professor. Dr Ferreres is an internationally renowned surgical ethicist and has traveled to Seattle multiple times to meet with our faculty and residents, coordinate plans for the development of a Center for Surgical Ethics, create ethics curriculum for our residents, and to present at Grand Rounds and the Annual Summer Seminar in Healthcare Ethics. There is simply no one in the world better able to give us guidance than Dr. Ferreres.

The near term goal is formal recognition by the School of Medicine and developing the Center for Surgical Ethics in partnership with the Bioethics and Humanities Department. The Center will promote scholarship and train leaders in this field of study. Our long term goals include establishing a Surgical Ethics Fellowship as well as a Certificate program in Surgical Ethics for surgeons here, around the country and world-wide. We will be one of the only places in the US that has a full Surgical Ethics Center.

But, we are not waiting for formal recognition as a Center. We are already systematically elevating dialogue centered on Surgical Ethics with our own faculty and trainees – focusing on ethical issues in the day to day management of patients.

We took our initial steps in becoming a Center this past summer and fall as mentioned above. Next summer, we will have another full day of Surgical Ethics training in the 31st Annual Summer Seminar in Healthcare Ethics – we are planning that it will be a major part of the Summer Seminar. Building upon those successes, we hope to launch the Fellowship the following year and a Certificate program thereafter.

You will read more in this issue in the article by Dr. Ferreres; how he came to be interested in Surgical Ethics as well as plans for the Department’s Center for Surgical Ethics. This is exciting and challenging work. And, I believe it is more necessary now than ever.

Our patients need and deserve not only great technical care, but care that puts the patient first: body, mind and spirit.

As always, our colleagues in this Department are simply outstanding. There are a number of honors and awards I urge you to read. In particular, it is an extraordinary honor that Dr. Ron Maier is now the President-elect of the American College of Surgeons and Dr. Eileen Bulger is the Chair of the prestigious American College of Surgeons Committee on Trauma. These are big offices and they will fill them well. But, many of our faculty have done great things since Surgery Synopsis was last issued in the summer. I urge you to read it all.

Sincerely,
Douglas E. Wood, MD, FACS, FRCS Ed (ad hom)
The Henry N. Harkins Professor and Chair
Why does Surgical Ethics matter?

The short answer is that surgery is not just a purely technical discipline. Technical mastery is absolutely necessary, but it is not sufficient in and of itself to bring complete benefit or comfort to our patients.

Surgical Ethics (SE) is part of the core of surgical professionalism and as such significantly impacts the everyday life of surgeons and the care they provide to their patients. As Charles Bosk noted in *Forgive and Remember* (The University of Chicago Press, 1979), “when the patient of an internist dies, the natural question his colleagues ask is *What happened?* When the patient of a surgeon dies his colleagues ask *What did you do?* By the nature of his craft and his beliefs about it, the surgeon is more accountable than other physicians and he also has much more to account for.” The central question to surgeons has changed. It is not just *What can we do for this patient?* But today’s question is *What should we do for this patient?* And this question is the challenge of SE.

The motto for the most recent American College of Surgeons Clinical (ACS) Congress was *Do what’s right for the patient,* and this can only be achieved by also focusing on the ethical dimension of surgical care. Surgeons must be experts in the ethical dimensions of patient care, as well as experts in matters of the surgical science and art.

How did I become interested in Surgical Ethics?

I have always had a keen interest in history and philosophy—after graduating as an MD, I completed my training in General Surgery and Surgical Oncology, received a PhD in Legal and Forensic Surgery, and a JD as well—but over time this interest began to develop into a major professional focus. In 2008, I attended the JJ Conley Ethics and Philosophy Lecture at the ACS Clinical Congress in San Francisco. This lectureship was established by a well-known surgeon, John J. Conley, an otolaryngologist who dedicated most of his professional life to the treatment of head and neck cancer. Dr. Conley was primarily a surgeon, not a philosopher or an ethicist, yet he believed that to provide the best care to patients with cancer, the surgeon should be trained in other areas in addition to the traditional technical aspects of surgery. To that end, in the early 1990s he founded the John J. Conley Foundation for Ethics and Philosophy in Medicine, through which he established this lectureship to provide a forum within ACS where ethical questions facing surgeons could be discussed. He once said “I consider ethics and philosophy to be in one sense, the essence of the medical profession...I am particularly interested in maintaining the highest ethical principles as a frontline for the practicing surgeon.” (Pellegrini CA. The Keystone of the Patient–Physician Relationship. JACS 2017; 224: 95–102).

The speaker at the 2008 meeting was Dr. Ira Kodner, MD, FACS, a colorectal surgeon from Washington University, St Louis. His lecture was both inspirational and ground-breaking and I was profoundly impacted by the content. I realized I had been unintentionally, yet intensely, influenced by the concepts of ethics in my everyday surgical activity, and thus I decided I needed to improve my knowledge and expertise in the field.

The following year I applied to the Program in Clinical Ethics at the MacLean Center for Medical Ethics at the University of Chicago, directed by Mark Siegler, a renowned

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Surgical Ethics
by Dr. Alberto Ferreres,
Chair of Surgery,
University of Buenos Aires, Argentina

Dr. Douglas Wood and Alberto Ferreres
Photo credit: Michael Hilleary

(continued on page 4)
and I hosted the program that framed the agenda for the conference. I presented on a topic of profound interest to me: “Surgical Innovation: Balancing Discovery & Patient Safety.” Finally, we had two outstanding panel presentations and a time set aside for small group case discussions. Panel one, comprised of Drs. Eileen Bulger, James Kirkpatrick, Nahush Mokadam, and Matthew Plourde, BSN, discussed the ethical aspects Extra Corporal Life Support (ECLS); and Panel two, comprised of Drs. Martin Montenovo, Jorge Reyes, and myself ended the day with a discussion of Transplant Ethics.

**Vision and Mission for CSE**

The Center for Surgical Ethics Workgroup has also focused on creation of a Vision and Mission Statement for the Center. Our efforts are as follows:

**Vision for CSE**

The Vision for CSE imagines a surgical healthcare delivery system in which the patient is at the core, with dedicated surgeons and other physicians actively engaged in providing more just, equitable and effective care to all patients within the UW Medicine healthcare system. The CSE will help surgeons and all those providing surgical care recognize their responsibility and accountability to solve ethical conflicts through respectful behavior, leadership and as advocates for patients, their colleagues and UW Medicine as a whole.

**The Mission of CSE**

In order to achieve this Vision, the Mission of the CSE puts the patient at the center of all activity. We embrace, enhance and instill ethical actions in all we do within the UW Surgical Departments and become the model for ethical surgical healthcare. This Mission will be accomplished within the scope of the most competent care of patients, training of new professionals and honest research.

We look forward to the formal establishment of the CSE within the coming year. We have a number of important milestones we plan to achieve in the next year, including:

- Establishing and sponsoring an annual Visiting Professor Grand Rounds that focuses on Surgical Ethics;
- As mentioned, hosting an annual Surgical Ethics Conference in partnership with the Department of Bioethics and Humanities during the Summer Seminar in Healthcare Ethics;
- Developing and delivering educational material for all levels of trainees in medical education;
- Growing Center affiliations in order to build and support cross-specialty resources, mentorship and best practices;
- Fostering peer-reviewed publications and presentations at local, regional and national meetings;
- Increasing overall awareness in Surgical Ethics and its implementation in everyday practice.

We believe that the Center will help us provide better patient care, better train the next generation of surgeons and work to make healthcare at UW the best in the world. We invite you to follow our progress.

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Ethicist. I started the summer session in July 2009 and continued my training for the next two years. I was fortunate to not only have the opportunity to nurture my interest and gain expertise in the topic, but also to develop long-standing friendships with faculty and cohort fellows.

Since my training, I have returned to the University of Chicago MacLean Center several times as a speaker at the Dorothy MacLean Fellows Conference on Clinical Medical Ethics. Some years later I was invited to sit on the ACS Committee on Ethics, and when the ACS decided to update and publish a new textbook on Surgical Ethics, I was honored to be appointed as one of the Editor-in-Chiefs. This book was released just this October during the last ACS Clinical Congress in San Diego.

**Developing a Center for Surgical Ethics at UW**

The initial foundation of this project was laid by the former Department Chair and current UW Medicine Chief Medical Officer, Dr. Carlos Pellegrini. Since his tenure has begun, Dr. Wood has considered the establishment and development of a program in Surgical Ethics a foundational goal during his leadership. He is a keen advocate of this topic and a dedicated champion of this work.

**The Center for Surgical Ethics (CSE) UW Medicine Department of Surgery**

Work to establish the Center for Surgical Ethics has begun in earnest.

A highlight of this first year was the Department of Surgery’s participation in the larger “Summer Seminar in Healthcare Ethics,” adding a day on Surgical Ethics to this week-long seminar. Drs. Douglas Wood, Dr. Denise Dudzinski and I hosted the program with many other esteemed faculty joining including Dr. Gretchen Schwarze, from the University of Wisconsin School of Medicine who presented in the morning on “Harnessing the Power of Scenario Planning for High-Stakes Decision-Making” and presented again in the afternoon on the topic of “Palliative Care in Surgery.” Dr. Pellegrini and Dr. Dudzinski presented a session on “Moral Reasoning in Clinical Settings” that framed the agenda for the conference. I presented on a topic of profound interest to me: “Surgical Innovation: Balancing Discovery & Patient Safety.” Finally, we had two outstanding panel presentations and a time set aside for small group case discussions. Panel one, comprised of Drs. Eileen Bulger, James Kirkpatrick, Nahush Mokadam, and Matthew Plourde, BSN, discussed the ethical aspects Extra Corporal Life Support (ECLS); and Panel two, comprised of Drs. Martin Montenovo, Jorge Reyes, and myself ended the day with a discussion of Transplant Ethics.
The 68th Annual Strauss Lecture was held Friday, October 13th, 2017 with invited lecturer Dr. Andrea Pusic, Professor at Cornell University and Weill–Cornell, Medical College, Director of Patient–Reported Outcomes and Surgical Experience, (PROSE), and Attending Surgeon at Memorial Sloan Kettering Cancer Center. Her lecture topic was “Patient–Reported Outcomes in Surgery: Improving Clinical Care and Quality.”

Dr. Pusic is an internationally–renowned innovator and leader in the area of Patient–Reported Outcomes (PROs) and Surgical Experience, an area of increasing importance in the current healthcare environment in terms of measuring quality, assessing value, and influencing how healthcare is funded. Her research focuses on the measurement of quality of life and patient satisfaction in surgery. The PRO instrument she developed for breast surgery, the BREAST–Q, has been widely adopted for research and clinical care, and has served as the basis for the development of other outcome measures in surgery, including the FACE–Q (for facial reconstructive and aesthetic surgery), BODY–Q (for bariatric and body–contouring patients) and most recently, the CLEFT–Q (for children and adults with cleft lips and palates).

The Strauss Lecture is supported by the Alfred A. Strauss MD, Endowed Lectureship in Surgery, established by the estate of Mrs. Margery Friedlander, daughter of Dr. Strauss. Dr. Strauss was an honor graduate of the University of Washington in 1904 and a member of the committee which successfully advocated for the founding of the School of Medicine at UW in 1946. Dr. Strauss possessed a rare combination of skill, vision, and drive and the lectureship carries on the visons and traditions of this inspiring man.

Preceding the Strauss Lecture was the Harkins Surgical Symposium for Resident Education, a one–day educational conference for regional surgical residents which focuses on technical aspects of surgery with talks by local and national experts in their fields. Residents from the University of Washington, University of British Columbia, Swedish Medical Center, Virginia Mason Medical Center, and Madigan Army Medical Center are all invited to attend this annual event, and Department of Surgery remains committed to providing this symposium free of charge to residents, fellows, and medical students.

Each year the Harkins Society recognizes the professional achievements and humanitarian services of one of its members, and this year’s Distinguished Alumnus was Dr. Kim Lynch. Dr. Lynch was nominated by Dr. Lorrie Langdale, Professor & Chief, Section of General Surgery, VA Puget Sound Health Care System, and selected unanimously by Harkins Society leadership. Dr. Lynch also spoke at the Symposium on the topic of mentorship. Dr. Lynch received her medical degree from the University of Washington School of Medicine and also completed her surgical residency here. She is a renowned clinician for our veterans at the Boise VA Hospital and surgeon educator for our WWAMI Idaho trainees. She humbly describes herself as a “worker bee” but to her patients and students she far exceeds this description.

This year’s Harkins Symposium speakers:

Dr. Kari Keys, Assistant Professor, Division of Plastic Surgery “Clinical Pathways: What Works and What Doesn’t”

Dr. Jeffrey Friedrich, Professor, Division of Plastic Surgery “Advances in Hand Reconstruction”

Dr. Raymond Tse, Associate Professor, Division of Plastic Surgery “Contemporary Approaches to Measure Outcomes: Treatment of Cleft Lip and Palate”

(continued on page 6)
Dr. Srinivas Susarla, Assistant Professor, Division of Plastic Surgery “Mandibular Morphology in Robin Sequence”

Dr. Peter Neligan, Professor, Division of Plastic Surgery “A Smile is a Curve That Sets Everything Straight”

Dr. Farhood Farjah, Associate Professor, Division of Cardiothoracic Surgery “Management of Cervical and Thoracic Esophageal Anastomotic Leaks”

Dr. Roger Tatum, Professor and Chief of VA Division, Surgeon–in–Chief, VA Puget Sound Health Care System “How Antireflux Surgery Suppresses GERD”

Dr. Saurabh Khandelwal, Associate Professor, Division of General Surgery “Sleeves, Balloons, and Tubes – Is Gastric Bypass on Its Way Out?”

Dr. Hakim Said, Associate Professor, Division of Plastic Surgery “Stay­ing Ahead of the Curve in Breast Reconstruction”

Dr. Alexander Gougoutas, Assistant Professor, Division of Plastic Surgery “Early Cosmetic Surgery and the Evolution of American Vanity Culture”

Dr. Kim Lynch (pictured page 5), Veterans Affairs Medical Center, Boise Idaho “Harkins Distinguished Alumna Lecture on Mentorship”

Dr. Andrea Pusic (pictured page 5), Attending Surgeon, Memorial Sloan Kettering Cancer Center Director, Patient–Reported Outcomes and Surgical Experience (PROSE) Professor, Cornell University and Weill–Cornell Medical College “Surgical Outcomes from the Patient Perspective”

Dr. Sam Mandell, Assistant Professor, Division of Trauma, Burn and Critical Care Surgery “ECLS in Trauma”

Dr. Nicole Zern, Assistant Professor, Division of General Surgery “What’s New in the Management of Thyroid Nodules?”

Dr. Aaron Cheng, Associate Professor, Division of Cardiothoracic Surgery “Chest Wall Deformities: Resection and Reconstruction Considerations”

Dr. Teresa Kim, Acting Assistant Professor, Division of General Surgery “Integrating Surgery into Multimodal Management of Sarcoma”

Dr. Nahush Mokadam, Professor, Division of Cardiothoracic Surgery “Flipping the Classroom?”

Dr. Erik Van Eaton, Associate Professor, Division of Trauma, Burn and Critical Care Surgery “Are There Patient–Centered Outcomes in the Surgical ICU?”

Dr. Lena Sibulesky, Assistant Professor, Division of Transplant Surgery “Expanding the Number of Donors”

Dr. Nicole Zern, Assistant Professor, Division of General Surgery “What’s New in the Management of Thyroid Nodules?”
In October 2017, the American College of Surgeons (ACS) held their 2017 Clinical Congress in San Diego, California. The Clinical Congress provided surgeons, medical students, surgical residents, and other members of the operating room team with the opportunity to immerse themselves in a variety of educational experiences and to interact with their peers. ACS offered cutting-edge educational opportunities to address the knowledge, skills, and professional attributes necessary for delivery of surgical care of the highest quality for physicians at all stages of their careers.

The 2017 program addressed essential clinical and nonclinical content. An exciting series of Named Lectures was delivered by world-renowned experts in their respective fields. Didactic/Experiential and Surgical Skills Courses focused on acquisition of knowledge and skills through best practices in education and training methods and more than 110 Panel Sessions on relevant topics were offered. The Scientific Forum included surgical research presentations and posters. New this year, all posters were e-posters and were available for viewing throughout the entire Clinical Congress and Video-Based Education Sessions showcased surgical procedures. Meet-the-Expert Sessions and Town Hall Meetings offered a more informal learning experience.

The purpose of the Clinical Congress is to keep ACS Members and interested non-Fellow physicians abreast of the current status of the art and science of surgery. To accomplish its purpose, the Clinical Congress offers a highly diversified program of continuing education in all specialties of surgery and in important fields of science, socioeconomics, and medical education. It holds the preeminent place among all College activities designed to raise the standards of surgical practice and improve the care of the surgical patient.

The entire program presented at this meeting includes physicians drawn from various specialties. The sessions are designed to present a variety of viewpoints on matters of particular interest to those for whom the session is primarily intended and to stress the need for understanding and cooperation among the specialties.

Dr. Ron Maier Elected President-Elect of American College of Surgeons

Dr. Ron Maier, Professor & Chief in the Division of Trauma, Burn and Critical Care Surgery, was elected to serve as the next president of the ACS at the 2017 ACS Clinical Congress in October in San Diego. The ACS is the largest surgical organization in North America and represents the full spectrum of surgical specialties, and election to President is one of the highest honors that one can achieve in a surgical career. Dr. Maier will step into this role after having also served as President of the American Surgical Association (ASA), another prestigious and highly impactful surgical society. This is an incredible tribute to Dr. Maier and his career—long dedication to excellence in clinical surgery, exceptional mentorship in surgical education, and in his academic contributions. He is not just an extraordinary leader of the surgery services at Harborview Medical Center, but plays an important role in trauma and critical care organizations nationally and internationally. The Department of Surgery congratulates Dr. Maier on this incredible recognition.

Dr. Ron Maier’s acceptance speech >>

Dr. Eileen Bulger Named New Chair of American College of Surgeons’ Committee on Trauma

Dr. Eileen Bulger, Professor and Chief of Trauma in the Division of Trauma, Burn and Critical Care Surgery, was named the new chair of the ACS Committee on Trauma (COT) at the ACS Clinical Congress. This committee strives to improve the care of injured patients before, during, and after hospitalization through activities aimed at education, advocacy, professional development, standards of care, and assessment of outcomes. Dr. Bulger is a national leader in trauma and her appointment as committee chair is an acknowledgement of the regard and respect that she has in the trauma community and amongst her surgeon peers.

We asked Dr. Bulger to give us her thoughts on being named Chair of the ACS COT:

“Traumatic injury is the leading cause of death under the age of 44 and therefore the most important public health problem for our children and armed services personnel. The ACS COT (continued on page 8)
Dr. Eileen Bulger Named New Chair of ACS’s Committee on Trauma

is a multidisciplinary group of surgeons working to improve injury care around the globe, with 86 members on the committee overseeing a field force of more than 3,500 Fellows working to develop and implement meaningful programs for trauma care in local, regional, national, and international arenas. The committee strives to improve the care of injured patients before, during, and after hospitalization. These activities—aimed at education, advocacy, professional development, standards of care, and assessment of outcomes and quality improvement—are disseminated through a variety of programs and subcommittees. Examples include Advanced Trauma Life Support (ATLS®), Trauma Quality Improvement Program (TQIP®), trauma systems consultation, trauma center verification, injury prevention, and the Stop the Bleed campaign.

I am sincerely honored to be asked to serve as the Chair of this committee for the next four years. This is an incredible opportunity to continue to advance the care of the injured patient with our goal of eliminating preventable death and disability after injury. In addition to all of the programs described above, we have several active initiatives. We are working with several professional organizations and government partners on implementing the recommendations from the National Academies of Science, Engineering, and Medicine report on developing a National trauma Care System with enhanced military and civilian integration. We are also working on a goal to train every US citizen in the basics skills of bleeding control and to make bleeding control equipment available in public places to enhance our response to mass casualties and mass shootings. We are focused on building consensus on a public health approach to reducing firearm injury and violence in our society. Finally, we are working on developing a better understanding of the long term functional outcome of patients after severe injury.

Challenges in the Management of Breast and Thoracic Malignancies Symposium

A two–and–a–half–day symposium held in Seattle, Washington, in October 2017 provided up–to–date scientific information to clinicians involved in the care of patients with breast or thoracic cancers. Speakers were nationally and internationally renowned clinicians and researchers who shared their expertise and fostered discussion of the most recent multidisciplinary advances in screening, pathology, surgery, radiology, medical oncology, chemotherapy, novel targeted therapies, immunotherapies, genetics, and palliative care. Far–ranging areas of consensus and controversy were presented and discussed with the goal that audience members leave with the state–of–the–art knowledge needed to maximize success in treating their patients’ breast and thoracic malignancies.

Dr. Douglas Wood, The Henry N. Harkins Professor and Chair and Dr. Kristine Calhoun, Associate Professor, Division of General Surgery, were co–chairs for the symposium’s thoracic and breast oncological courses. The thoracic portion covered a variety of topics including the role for standard radiation and protons for thoracic malignancies disease; new options for small cell lung cancer; advances in multimodality therapy for pleural mesothelioma; and value–based health care and the impact of payment reform.

The breast portion of the symposium included topics such as therapeutic modalities available for advanced breast cancer, and neoadjuvant therapies in particular; evidence–based recommendations for supportive care and survivorship; cancer outcomes variations in different populations and potential causes; and navigating and interpreting the plethora of available genetic tests and possible results.

Department of Surgery faculty presenters included: Drs. Ben Anderson, Professor, Division of General Surgery; Kathleen Berfield, Assistant Professor, Division of Cardiothoracic Surgery; David Byrd, Professor, Division of General Surgery; Farhood Farjah, Associate Professor, Division of Cardiothoracic Surgery; Sara Javid, Associate Professor, Division of General Surgery; Mike Mulligan, Professor and Chief, Division of Cardiothoracic Surgery, Section Chief, Thoracic Surgery; Hakim Said, Associate Professor, Division of Plastic Surgery; and Janelle Sousa, Assistant Professor, Division of Plastic Surgery.
4th Annual Full Spectrum of Heart Failure Therapy: Managing the Trajectory

The University of Washington Division of Cardiothoracic Surgery, in collaboration with the Department of Medicine Division of Cardiology, held their 4th Annual Full Spectrum of Heart Failure Therapy: Managing the Trajectory in Seattle in October 2017. With nearly 200 attendees, this conference was chaired by Drs. Nahush Mokadam and Claudius Mahr, DO (Cardiology), as well as Jennifer Beckman, ARNP (Cardiology), and Jason Bjelkengren, RN (Regional Heart Center). This year, the conference was honored to have two internationally known Keynote Speakers: Drs. Eugene Braunwald (Brigham and Women’s Hospital) and Shashank Desai (Inova Heart and Vascular Institute). Other distinguished faculty from the Division of Cardiothoracic Surgery included Drs. Jason Smith and Kevin Koomalsingh as well as other members of the medical center and a host of guest faculty from the region. Over the course of one and a half days, the speakers and audience interacted in lectures, case discussions, small groups, and debates. The organizing committee looks forward to another successful event next year.

Dr. Carlos Pellegrini Grand Rounds Presentation and Portrait Unveiling

The Department of Surgery commissioned an official portrait of Dr. Carlos Pellegrini, Chief Medical Officer, UW Medicine and Vice President for Medical Affairs, University of Washington, which was unveiled at the end of his Grand Rounds presentation in October 2017. The portrait commemorates Dr. Pellegrini’s quarter century of service to UW Medicine, and 23 years as Chair of the Department of Surgery. The portrait, painted by local artist Aron Hart, is now on display in the hallway outside of the Department of Surgery main administrative office. Hart is an award-winning artist and instructor and specializes in oil painting and drawing.

Save the Dates

DEPARTMENT OF SURGERY RESEARCH SYMPOSIUM & 24TH ANNUAL HELEN AND JOHN SCHILLING LECTURE
Friday, February 16, 2018
Department of Surgery Research Symposium
7:00am—2:30pm, UW Tower Auditorium
24th Annual Helen and John Schilling Lecture
3:00pm, UW Tower Auditorium

DEPARTMENT OF SURGERY GRAND ROUNDS
See monthly Grand Rounds schedule under Upcoming Special Events on our website.
2017 New Faculty

**Broadus Atkins, MD, Associate Professor, Division of Cardiothoracic Surgery**

Dr. Atkins is an Associate Professor in the Division of Cardiothoracic Surgery, specializing in adult cardiothoracic surgery. He is a member of the Association of VA Surgeons and is Chief of Cardiac Surgery at VA Puget Sound Health Care System (VA). Dr. Atkins received his medical degree from Duke University School of Medicine, where he also completed surgical residency programs in general and thoracic surgery. He served 14 years active duty in the US Air Force, achieving the rank of Colonel. Dr. Atkins is certified by the American Board of Thoracic Surgery and his primary clinical interests include surgery for heart failure including transplantation, implantation of cardiac assist devices, and other complex cardiac procedures. He also has a special interest in minimally invasive approaches to cardiac valve repair and replacement, especially those addressing mitral valve pathologies. Dr. Atkins is an avid sports fan and is excited to be a new resident of the Great Northwest!

**Warren Chow, MD, Assistant Professor, Division of Vascular Surgery**

Dr. Chow is an Assistant Professor in the Division of Vascular Surgery and is primarily based at the VA. He practices both open vascular surgery and endovascular techniques for the treatment of aortic, cerebrovascular, visceral, lower extremity arterial diseases as well as venous disorders and dialysis access. He earned his bachelor’s degree from the Massachusetts Institute of Technology and his master’s degree from the University of California, Berkeley in mechanical engineering. He received his medical degree from the University of California, Los Angeles, where he also completed his general surgery residency and vascular surgery fellowship. During his training, he also earned a second master’s degree in health services from Northwestern University. His research interests include bioengineering and surgical outcomes in elderly patients. In his free time, he enjoys spending time with family and friends, traveling, cooking, and running.

**Teresa Kim, MD, Acting Assistant Professor, Division of General Surgery**

Dr. Kim is an Acting Assistant Professor and Surgical Oncologist in the Division of General Surgery with expertise in the surgical management of sarcomas, melanomas, and other cancers of the soft tissue, skin, and gastrointestinal tract. Her primary sites of practice are the University of Washington Medical Center, where she operates, and the Seattle Cancer Care Alliance (SCCA), where she sees patients in clinic. She is also an Affiliate Investigator at the Fred Hutchinson Cancer Research Center (FHCRC), where she is conducting translational sarcoma immunology research. Dr. Kim earned her bachelor’s degree in biology from the Massachusetts Institute of Technology and her MD from Harvard Medical School in Boston. She then completed general surgery residency at Massachusetts General Hospital in Boston, as well as a research postdoctoral fellowship in tumor immunology at Memorial Sloan Kettering Cancer Center in New York. She subsequently completed specialty training in Complex General Surgical Oncology at Memorial Sloan Kettering, after which she was recruited to join the faculty at University of Washington. She is board certified by the American Board of Surgery and is an active member of the American College of Surgeons, Society of Surgical Oncology, and American Society of Clinical Oncology.

**Francisco Gensini, MD, FACS, Clinical Associate Professor, Division of Cardiothoracic Surgery**

Dr. Gensini is a Clinical Associate Professor in the Division of Cardiothoracic Surgery and specializes in congenital cardiac surgery. He is based primarily at the University of Washington Medical Center. Dr. Gensini received his degree in Medicine and Surgery, followed by general surgery residency training from Universidad del Valle in Cali, Colombia and a degree in cardiovascular surgery from the Universidad Pontificia Bolivariana in Medellin, Colombia. He then completed a two–year fellowship in pediatric cardiothoracic surgery.

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surgery at Great Ormond Street Hospital for Children in London, United Kingdom, followed by an ECMO fellowship in the Department of Pediatric Cardiac Intensive Care. After coming to the United States, Dr. Gensini joined the General Surgery residency program at University of Washington and completed fellowships in cardiothoracic surgery and pediatric cardiac surgery, also at UW. Board certified by the American Board of Thoracic Surgery in 2010, Dr. Gensini practiced congenital cardiac surgery at the University of Rochester for the last eight years before joining the Department of Surgery as faculty. Dr. Gensini is a member of several professional organizations including the Society of Thoracic Surgeons and the American College of Surgeons.

**Caitlin Smith, MD, Assistant Professor, Division of Pediatric General Surgery**

Dr. Smith is an Assistant Professor in the Division of Pediatric General and Thoracic Surgery at Seattle Children's Hospital (SCH). She is dedicated to the surgical treatment of colorectal anomalies in the pediatric patient population and is part of the Reconstructive Pelvic Medicine Program at SCH. She is board certified by the American Board of Surgery in General Surgery and is currently board eligible in Pediatric General Surgery. Dr. Smith earned her medical degree from Albany Medical College and completed her general surgery residency at University of California, Davis. She then completed a pediatric surgery fellowship at SCH where she now sees patients as well as at SCH clinics in Bellevue and Federal Way locations. Dr. Smith is happy to be permanently located in Seattle and in her free time she enjoys spending time with family, friends and creative projects such as photography.

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Dr. **Judy Chen**, Assistant Professor, Division of General Surgery

“Long–term weight–loss seen with gastric bypass”

Dr. **Patch Dellinger**, Professor, Division of General Surgery

“The naked truth about OR garb”

Dr. **Andre Dick**, Associate Professor, Division of Transplant Surgery

“A healthy future after kidney failure”

“Super hero’ home from Afghanistan donates liver to nephew”

Dr. **Jorge Reyes**, Professor & Chief, Division of Transplant Surgery

“Test transport device creates hope for liver transplants”

“Surgeons perform region’s 1st ‘liver in a box’ transplant”

Dr. **Kimberly Riehle**, Associate Professor, Pediatric General Surgery

“A doctor’s artistic touch eases the pain of surgery – home team heroes”

Drs. **Benjamin Starnes**, Professor & Chief, Division of Vascular Surgery, and **Niten Singh**, Professor & Associate Chief, Division of Vascular Surgery

“From Iraq to Harborview: Drs. Benjamin Starnes & Niten Singh”

Dr. **Douglas Wood**, The Henry N. Harkins Professor and Chair of the Department of Surgery

“Behind the Knife: The Surgery Podcast”
Since joining the Department of Surgery in 2012, Dr. Danielle Lavallee’s work has focused on advancing methods to incorporate the patient perspective into both clinical care and research activities through the capture of patient-reported outcomes (PROs) and active patient engagement.

Dr. Lavallee’s interests stem from her experience practicing as a pharmacist while obtaining her PhD at the University of Maryland. “I constantly fielded questions from people that were framed in such a manner that existing evidence couldn’t answer them. Either they wanted to know how disparate therapies compared – often a medication to a more holistic treatment approach – or how a certain treatment would affect outcomes not captured in traditional research, such as quality of life or time away from work.”

PRO measures provide insight on experienced symptoms, function, health status, quality of life, and mental well-being, and are an important first step in addressing these types of patient concerns. Since joining the faculty, Dr. Lavallee has supported the efforts of the Comparative Effectiveness Research Translation Network (CERTAIN) to capture data directly from patients to support quality improvement and research initiatives, including the development of CERTAIN Hub – a web-based portal supporting real-time capture and reporting of PRO data to both patients and providers.

Patient-centered outcomes research (PCOR), as defined, helps patients and their caregivers better communicate and make informed and individualized healthcare decisions, allowing the patient voice to be heard in assessing the value of healthcare options. This is predicated on the availability of evidence that reflects data relevant to patients and their healthcare team when making decisions about healthcare. To achieve this ideal state, it is critical that we build community and infrastructure for collaborating with patients and healthcare stakeholders to advance PCOR, as well as methods for transforming healthcare through leveraging new streams of data that come directly from patients, such as patient-reported and patient-generated health data.

Funding from the Patient-Centered Outcomes Research Institute (PCORI) and Agency for Health Research and Quality (AHRQ) has played an integral role in helping her advance efforts to keep the patient voice central to research and healthcare. In 2014, Dr. Lavallee became the Department of Surgery’s first faculty member to receive funding from PCORI for a project comparing different engagement techniques for involving patients in research prioritization. This methods study responded to the 2013 PCORI Methodology Committee recommendation to support empirical research to assess and improve research prioritization methods for use by PCORI, recognizing that limited evidence existed on important processes leveraged in the conduct of research. The study assesses how different methods perform in generating reproducible research prioritization lists, and perhaps more importantly, in participants’ perception of the quality of the engagement experience. The study leverages traditional engagement techniques such as focus groups and survey methods as well as novel engagement techniques such as crowd-voting and crowd-sourcing. Such comparative studies are rare but important in providing valuable information about involving patients in research.

In addition to advancing evidence on how we involve patients, Dr. Lavallee is working to develop infrastructure to support patient-researcher partnerships. In 2014, she received a PCORI Eugene Washington Engagement Award providing funding support for the INitiate to Support Patient Involvement in REsearch (INSPIRE) (watch video). This project gathered information on the experiences and needs of patients and researchers actively partnering on research projects across the Pacific Northwest and resulted in the creation of a web-based portal providing open-access training and resources to both patients and researchers interested in collaborating on research projects. Since launching in May 2017, the portal has attracted over 1,000 unique visitors and gained international recognition in the PCOR community.
Dr. Lavallee’s work has highlighted for her the importance of ensuring that outcomes important to patients are captured not only in research, but in healthcare as well. PROs, taken together with other data sources such as clinical measurements, provide support for shared decision-making to meet the needs of each patient to optimize outcomes. In 2017, Dr. Lavallee was named UW Medicine Medical Director for Patient-Reported Outcomes and Patient-Generated Health Data, and in this role she will bring her experience implementing this health IT-enabled practice model to the larger UW Medicine system in order to facilitate PRO data collection and reporting for surgical care and quality improvement efforts system-wide. Through this work, Dr. Lavallee and her team will help to design a sustainable model for capturing the patient’s voice to facilitate more collaborative healthcare decision-making and achieve improved patient outcomes.

#GettingToKnowDOS—Dr. Martin Montenovo

In this issue, Surgery Synopsis staff interviewed Dr. Martin Montenovo, Assistant Professor, Surgical Director Living Donor Liver Transplant Program, Division of Transplant Surgery.

SS: What was the last book you read?  
MM: The last book I read is called “Make Your Bed: Little Things That Can Change Your Life...And Maybe the World” by William H. McRaven. McRaven is a retired United States Navy admiral and he extrapolated both big and small lessons he learned in the navy that he believes can make real, significant changes in your life as well as in the world. He has a great YouTube video clip where he says “If you want to change the world, start off by making your bed.” He says if you make your bed every morning, then you’ve accomplished the first task of the day. That gives you a sense of pride and encourages you to do another task, another, and so on. SS: So what are you doing differently after having read the book? MM: [laughs] I make my bed! Even before reading the book I have always had a regimented routine which included making my bed every morning. But there are other little things I have picked up that I apply to my life. For instance, when things happen to you during the day and you believe they are a big deal but at the end of the day you realize it wasn’t really that big of a deal and it’s something you can just let go. I really enjoy reading books and articles by people in the military because of their outlook on leadership, working within groups and resilience.

SS: What is your favorite movie? MM: I just love “Forrest Gump.” His fighting against adversity is so inspiring. I think I’ve watched this movie about 20 times—I never get tired of it. Another movie I really like is “Brooklyn.” It’s about a young woman who emigrates from Ireland to the United States and it depicts her life in 1950s Brooklyn, New York.

SS: Do you have any favorite or least favorite genres? MM: I cannot stand anything science fiction. I will tell you a funny story. In 2001, I was in residency in Argentina and working many, many hours a week, and that was the year I started dating my wife. My wife was a student at the time so she was not as tired as I was from all of the long hours. One time she suggested we go see the first “Lord of the Rings” film. I thought to myself, “This is perfect! This is a three hour movie and I will get a chance to catch up on my sleep because I had no intention of watching it!” It was ideal—my girlfriend was totally engrossed in the movie and I got three hours of uninterrupted sleep!

SS: Do you collect anything? MM: No, I do not. I’m very organized and collections can become clutter and clutter can easily lead to garbage. I drive my kids crazy because if I see toys they don’t play with then they are donated to charity.

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**SS:** What is an interesting fact about you that many people don’t know? **MM:** I used to be a relatively good piano player. I started learning to play when I was about seven years old and played until I was about 18. I even played keyboard in a band in the town where I grew up in my early teens. We were good enough to play at parties and make money. I’d like to start playing again but it always comes down to time.

**SS:** Do you have any upcoming travel plans you’re excited about? **MM:** I love to travel but travelling with two kids can be challenging. I would really like to go to Europe next, but one of my children is four years old and going through museums and taking long walks is tough with children at that age, so right now I focus on destinations with swimming pools and a beach. Maui is a nice destination for that kind of thing. **SS:** What’s been your favorite travel destination? **MM:** So far, my favorite travel experience has been Asia. I’ve been to Seoul and Hong Kong, both for work. I was in Seoul for two months and really came to love that city. I was in Hong Kong for one week and it was incredible—it is the definition of a big city. The mix of culture and the food! The flavors of the foods are unlike you can find anywhere in the world.

**SS:** Do you have a personal motto? **MM:** Be yourself all the time. Whether I’m with friends, my boss, or strangers, I am crystal clear—I have nothing to hide. Another guiding belief is pursue your dreams. Don’t use excuses, go forward and follow your dreams.

**SS:** Would you share with us one of your guilty pleasures? **MM:** I like to eat—a lot! And because I’m from Argentina, I love to eat meat! [laughs] I go to a butcher who knows me very well and ask them to cut meat the way I’m used to having it in Argentina. They always know exactly what I want. I also really love ice cream. Every Friday I take my family for ice cream at Ben and Jerry’s. I’ll eat just about any flavor except mint.

**SS:** What is your favorite childhood memory? **MM:** Being at my grandparents’ farm when I was a child. I grew up in a very small town and my grandparents lived on a farm close by. I remember riding my bike to the farm, sometimes by myself, sometimes with friends. We’d milk cows and ride horses—such beautiful memories. I was lucky to have had a wonderful childhood. I always joke with my wife because she’s from Buenos Aires and grew up in the big city and lived in busy downtown areas and doesn’t know what it’s like living in a rural area. Every time we visit Argentina we go to the small town where I grew up and she just loves to go there because it’s so different for her.

**SS:** Any special memories from your time at UW? **MM:** Oh yes. The first time I came to the United States, it was to the University of Washington Medical Center. In 2004, I was a surgical resident...
培训在阿根廷并作为临床观察员在心脏胸外科工作。Georgia Barroso，当时在CT管理处工作，做了一些特别的事让我永生难忘。我到达的一天是周六上午，我几乎不懂英语，毫无预料，Georgia在西雅图机场接我，用我的名字做了个牌子！她带我吃午饭，带我参观了学校和其它附近景点，然后把我送到我住的宿舍。我记得我们去到后备箱，打开一看，装满了足够我花一个月的食品！我简直不敢相信，我被深深打动了。她真是个杰出的人，她永远在我的心中占据着特殊的位置。

SS：什么是你最珍贵的礼物？
MM：没有什么是物质的——那是来自孩子和我妻子的欢笑。

SS：你在空闲时间做些什么？
MM：我并没有多少空闲时间，但空下来的时候我和我妻子真的很喜欢邀请朋友到我们家里来。我喜欢做饭，并喜欢尝试我喜欢的新食谱。甚至当我在回家后从手术中疲惫不堪时，我发现做意大利面、肉馅意大利面或其它类似的食物很放松。与朋友分享，这是非常特殊的。

SS：你有什么菜做得特别好或者你被人熟知的？
MM：我做得很好的是 Mascarpone 奶酪蛋糕。部门的很多人品尝过，他们都很喜欢！

训练在阿根廷并作为临床观察员在心脏胸外科工作。Georgia Barroso，当时在CT管理处工作，做了一些特别的事让我永生难忘。我到达的一天是周六上午，我几乎不懂英语，毫无预料，Georgia在西雅图机场接我，用我的名字做了个牌子！她带我吃午饭，带我参观了学校和其它附近景点，然后把我送到我住的宿舍。我记得我们去到后备箱，打开一看，装满了足够我花一个月的食品！我简直不敢相信，我被深深打动了。她真是个杰出的人，她永远在我的心中占据着特殊的位置。

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Susan G. Komen 是 BHGI 的创始人之一，自 2002 年以来连续提供支持。几年前，当地研究人员包括 Mary–Claire King 和 Nora Disis 带动 Komen 在华盛顿州的机构总研究投资达到 $11,630,427 以来。

在 Dr. David Byrd 的领导下，美国癌症联合委员会 (AJCC) 将在 2018 年 1 月发布第 8 版《AJCC 舞动系统》。首次发展病情指数系统将首次将解剖学系统扩展到生物框架。Dr. Byrd 是腹部外科学教授，长期以来一直提倡这一发展，之前已经对血液学恶性肿瘤进行了这项发展。
Dr. Heather Evans, Associate Professor, Department of Surgery, Division of Trauma, Burn, and Critical Care Surgery, and mPOWER co–Prinicpal Investigator Dr. Bill Lober, Professor in the Departments of Global Health and Biobehavioral Nursing and Health Informatics, have been awarded a $600K two–year contract to perform a Health Technology Assessment under the Center for Disease Control and Prevention's Safe Healthcare, Epidemiology, and Prevention Research Development (SHEPheRD) Program. The SHEPheRD program is a broad initiative of the Division of Healthcare Quality Promotion (DHQP) to provide healthcare epidemiology prevention research, implementation, evaluation, surveillance and medication safety studies. The work is driven by the need to provide more effective guidance for the selective and appropriate use of antibiotic therapy in an era of infections that are increasingly resistant to drug treatment.

Drs. Lober and Evans will oversee the conduct of a health technology assessment to evaluate the use of patient generated health data (PGHD) and mobile devices for surgical site infection (SSI) clinical decision making and surveillance, and then develop and disseminate recommendations for PGHD in SSI. The project is engaging researchers from multiple institutions including the University of Washington, University of Virginia, Western Michigan University, University of California San Francisco, and Emory University. mPOWER article >>

Dr. Farhood Farjah, Associate Professor, Division of Cardiothoracic Surgery, was named holder of the Endowed Chair in Lung Cancer Research by the UW Board of Regents effective October 2017. The Endowed Chair in Lung Cancer Research was established by anonymous donors in 1999 to attract and retain distinguished faculty. The Chair includes special emphasis on clinical research directed toward identifying new approaches to the diagnosis and treatment of patients with lung cancer.

Dr. Ron Maier, The Jane and Donald D. Trunkey Professor of Trauma Surgery, Vice Chair of Department of Surgery, University of Washington, and Surgeon–in–Chief, Harborview Medical Center, presented the 43rd William T. Fitts, Jr, MD, Lecture at the 76th Annual Meeting of American Association for the Surgery of Trauma (AAST) and Clinical Congress of Acute Care Surgery in September 2017.

Dr. Maier’s lecture, “Patients Are First,” was a call to arms for incorporating Palliative Care into Trauma Surgery, Emergency General Surgery and Surgical Critical Care. He described the magnitude of the problem of caring for the seriously ill and injured, showing disappointing statistics for mortality and the poor quality of life of survivors.

Dr. Sherene Shalhub, Assistant Professor, Division of Vascular Surgery, received a PCORI Tier A Pipeline to Proposal award for her project entitled “Vascular Ehlers–Danlos Syndrome (VEDS) Research Agenda Collaboration.” This one–year project started in October 2017 and provides $50,000 to form a team that will include patients with Vascular Ehlers–Danlos Syndrome (VEDS), clinicians, and researchers with a commitment to developing a patient–centered research proposal. They will develop the infrastructure and create channels for communication among patients, researchers, and stakeholders who are focused on VEDS. To this end Dr. Shalhub plans to create a formal community, which will include assessing the current information resources available, reaching out to members of the community, developing a communication strategy for stakeholder engagement and communicating with stakeholders via webinars, Twitter chats, and Google Hangouts, creating a REDCap survey network, and finally, setting up a website with infrastructure to support all of these activities. She will also set up a Research Consortium meeting for all stakeholders to discuss the current state of knowledge, assessment, and treatment for VEDS.

Honors, Awards & Publications
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Honors, Awards & Publications
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Dr. Douglas Wood, The Henry N. Harkins Professor and Chair, was elected as new American College of Surgeons (ACS) Board of Regents member.

Dr. Wood has been a Fellow of the College since 1995 and has played an active role on the Advisory Council for Cardiothoracic Surgery (2007–2013) and the Commission on Cancer (CoC), including serving on the CoC Accreditation Committee (2010–2016). Dr. Wood has been involved in the leadership of several cardiothoracic surgery professional organizations, previously serving as president of the Society of Thoracic Surgeons and president of the Western Thoracic Surgical Association. He has served as director of the American Board of Thoracic Surgery and chair of the Accreditation Council for Graduate Medical Education Residency Review Committee for Thoracic Surgery. Dr. Wood is currently president of the Thoracic Surgery Foundation, president of the Cardiothoracic Surgery Network (CTSNet), and vice–chair of the American Cancer Society National Lung Cancer Roundtable.

Recent Publications by Our Residents


ACGME BacktoBedside Initiative

Drs. Kate Stadeli (pictured above right) and Jay Zhu (pictured above left), research residents in the Division of General Surgery, have been selected for Accreditation Council for Graduate Medical Education (ACGME) BacktoBedside Initiative Funding. The ACGME Council of Review Committee Residents (CRCR) designed the “BacktoBedside” initiative to empower residents and fellows to develop transformative projects that combat burnout by fostering meaning in their learning environments and engaging on a deeper level with what is at the heart of medicine: their patients.

The application process was highly competitive with the ACGME receiving over 200 proposals and awarding 30 grants at various funding levels. Proposals focused on ideas such as creating opportunities for more time engaged in direct, meaningful patient care; developing shared sense of teamwork and respect among colleagues; decreasing effort spent on non–clinical, administrative responsibilities; and increasing patient satisfaction through more meaningful time with their care delivery team.

Drs. Stadeli’s and Zhu’s project, titled “Standardizing Evening Bedside Huddles To Promote Patient–Centered Care and Inter–Disciplinary Teamwork,” focused on night float rotations, which can be very difficult and isolating experiences for residents. A recent study of internal medicine residents at Duke University indicated that residents on night float rotations reported the

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Residents Win 2nd Prize in the ACS Surgical History Group’s Annual Poster Competition

Necrotizing soft tissue infections (NSTI), known at the time as “Hospital Gangrene,” were common and devastating infections suffered by wounded soldiers on both sides of the American Civil War.

Although the predominant risk factors for this disease in the modern era have changed since the time of the devastating musket, rifle, and bayonet wounds of the Civil War, these infections are still frequently treated by the surgical services at Harborview Medical Center (HMC), Seattle, Washington.

Inspired by their HMC experience, Drs. David Drouillard (pictured above right) and Kevin Labadie (pictured above left), 2nd year general surgery residents, traveled to the 2017 American College of Surgeons (ACS) Clinical Congress to present a poster on one of the pioneers of NSTI treatment, Dr. Joseph Jones. Dr. Jones was a Confederate surgeon–scientist whose authoritative research during the Civil War, published in an expansive 400 page surgical memoir, established the core principles for treatment of NSTI which include aggressive surgical debridement, diligent wound care, and systemic medical therapy.

For their poster, which links this historical perspective with modern innovations in NSTI care at Harborview such as “skin–sparing” incisions and immunomodulator therapy, Drs. Labadie and Drouillard won the second prize in the ACS Surgical History Group’s annual poster competition.

highest levels of burnout among any group. This is a multifactorial problem and is likely influenced by less interaction with other staff, breakdowns in paging communication between night nurses and night residents, and fewer patient interactions. To help combat this, Drs. Stadeli and Zhu plan to institute a standardized evening huddle between surgical night float residents and charge nurses on the acute care surgical floors. The purpose of these huddles will be to go to the bedside of selected patients previously identified as acutely ill and use the standardized IPASS handoff tool to ensure that all members of the care team, as well as the patient, are updated on the patient’s status and that a reasonable, appropriate plan is in place. Following this, nurses will also have an opportunity to discuss non–urgent issues or concerns with the night float resident in person at the nursing station.

Through standardization of these nightly huddles, they aim to develop a paradigm of night float residents as integrated members of the physician care team whereby they are engaged in an interdisciplinary care model that promotes meaningful patient interactions. Drs. Stadeli and Zhu believe that this will enrich the night float work environment by fostering relationships between residents and nurses, creating a setting for night float residents to spend face–to–face time with patients, and improving the efficiency and quality of communication between nurses and trainees.

PROJECT TEAM

Resident Leads
Jay Zhu, MD – PGY5 in General Surgery
Kathryn Stadeli, MD – PGY4 in General Surgery

Additional Team Members

Jamie Oh, MD – PGY2, General Surgery
Kathryn Harris, ARNP – Advanced Practice Provider, General Surgery Division
Tracy Kwan, ARNP – Advanced Practice Provider, General Surgery Division
Jennifer Zech, MS – Research Coordinator, Department of Medicine
Patricia Kritek, MD, EdM – Professor, Division of Pulmonary Critical Care and Sleep Medicine, and UWMC GME Director of Quality & Patient Safety

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Honors, Awards & Publications
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2017 American Society of Plastic Surgeons “Resident Bowl”

Chief residents in the Division of Plastic Surgery prevailed against all nationwide plastic surgery residency programs in the 2017 American Society of Plastic Surgeons (ASPS) “Resident Bowl” competition. The competition is similar to a debate team or group “Jeopardy” in which residents answer questions from the review materials for in–service exams and other curriculum in their training. Winning team members included Drs. Erin Miller, Elise Min, Eugene Oh, and Tamara Kemp (pictured right).

The Harkins’ Corner

Dear UW surgical community,

The Harkins Society and our community have had an incredible start to the academic year! The year was kicked off by another very successful Harkins Symposium for resident education. We were honored to be joined by Dr. Andrea Pusic as our 68th Annual Alfred A. Strauss lecturer (page 5). Dr. Pusic is professor of plastic surgery at Memorial Sloan–Kettering with a focus on breast cancer reconstruction. Her work on patient–reported outcomes and surgical experience (PROSE) has translated to our care of all surgical patients and our understanding of their experience. This is truly exceptional work and we were fortunate to welcome her as our guest lecturer.

The symposium was followed by our Annual Harkins Society Dinner at Ivar’s Salmon House. At this event we were honored to name Dr. Maureen Kim Lynch as our distinguished alumnus. She was nominated by our colleague Dr. Lorrie Langdale, and was unanimously selected by our society leadership (page 5). Dr. Lynch is a master surgeon educator and has won countless awards for her education of our medical students in Idaho. This includes an award created for her—the Idaho WWAMI Teacher Superior in Perpetuity Award. She is a graduate of both the University Of Washington School Of Medicine as well as our General Surgery residency and now serves our veterans at the Idaho VA. Dr. Lynch humbly describes herself as a “worker bee” but to her patients and students she far exceeds this description. She is well respected by her peers and trainees and is described as “one of the best teachers and physicians I have ever worked with.” Many congratulations to Dr. Lynch for this well–deserved award.

Importantly, at our annual Harkins Society dinner we inducted our newest members of the society:

Edo Bedzra
Christopher Burke
Joshua Corsa
Dustin Cummings
Eleanor Curtis
Sarasi Desikan
Anne Ehlers
Katherine Flynn O’Brien
Chinenye Iwuchukwu
Tamara Kemp
Lacey LaGrone
Grace Lopez

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Most recently we were able to connect with our national and international UW surgical community at the American College of Surgeons Clinical Congress in San Diego. We celebrated together at our annual reception at the San Diego Wine and Culinary Event Center, during which we sang happy birthday to our beloved Dr. Ron Maier, who was named the 2017–2018 President–Elect of the American College of Surgeons (page 7). We were also fortunate to celebrate Dr. Eileen Bulger’s appointment as the chair of the ACS Committee on Trauma (page 7). Congratulations to both!

We look forward to the rest of the year and the continued impact of our Harkins members on our surgical community.

Sincerely,

Dr. Heather Evans, Associate Professor, Department of Surgery, Division of Trauma, Burn, and Critical Care Surgery
Dr. Broadus Atkins, Associate Professor, Division of Cardiothoracic Surgery
Dr. Greta Bernier, Assistant Professor, Division of General Surgery
Dr. Eileen Bulger, Professor and Chief of Trauma in the Division of Trauma, Burn and Critical Care Surgery
Dr. Warren Chow, Assistant Professor, Division of Vascular Surgery
Dr. Farhood Farjah, Associate Professor, Division of Cardiothoracic Surgery
Dr. Alberto Ferreres, Chair of Surgery, University of Buenos Aires, Argentina
Dr. Francisco Gensini, Clinical Associate Professor, Division of Cardiothoracic Surgery
Dr. Teresa Kim, Acting Assistant Professor, Division of General Surgery
Dr. Danielle Lavallee, Research Associate Professor
Dr. Caitlin Smith, Assistant Professor, Division of Pediatric General Surgery
Dr. Kate Stadeli, Surgery Research Resident
Dr. Jay Zhu, Surgery Research Resident
Dr. Nicole Zern, Assistant Professor, Division of General Surgery
Mark Cumpston, Administrator
Sarah Jones, Administrator, Surgical Outcomes Research Center (SORCE)
Nadia Gavrilenko, Program Education Manager, Division of Plastic Surgery
Megan Sherman, Associate Director, WISH Operations