MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY

WAYNE STATE

AUGUST 2022

Inside this issue:

National Tell A Joke Day
August 16th

2022 WSSS OFFICERS

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Dr. Ashley Malach (WSUGS 2022)

A GRATEFUL PATIENT PROVIDES LONG-TERM FOLLOW-UP

The provision of care for acutely injured and acutely septic patients in an intercity acute care center provides short-term satisfaction when a patient is successfully treated after a horrendous insult. Seldom do the acute care providers have the opportunity to know how their efforts have affected a patient's long-term outcome. Recently, a grateful patient wanted to express their thanks for the care provided many years ago. The following is their communication, which they agreed can be shared with the members of the Wayne State Surgical Society.

Good Afternoon Dr. Lucas,

Absolutely, you have my permission to add my letter on your monthly circular. The purpose you stated as to why you would like to send my letter to your former/current students and colleagues is exactly why I reached out to you. Many times over the years I have reflected on that day and the subsequent weeks and how my family dutifully showed up in shifts and spent those days and nights not knowing if I was going to live or die. A Detroit homicide detective was adding to this atmosphere of inevitability that I was not going to make it. My family waited with bated breath for any update on my condition. The agonizing pace it took for the care I received and my body to respond positively had to be traumatizing for them to watch. Truthfully, I was in no pain and the round-the-clock care for me could not be appreciated by me in that state. Every step, every judgment call, every procedure mattered to my eventual outcome. Everyone that had a hand in my treatment and my supportive family had it hard. Not me. Never have I asked my family what their experience was like for fear it may bring up negative emotions. My work and the consequence of surviving that gunshot could only be considered if (1) I survived, and (2) my cognitive capacity improved and neither outcome was looking good. Where I am in my life *is* good. I was reflecting on my family's response to me in that ICU bed and those acute moments of uncertainty for them have been replaced with my accomplishments over 20 years. That exercise made me think back further to the professionals that took care of me and how I want to tell you that every sacrifice each of you have ever made is worth it! For you can save lives like mine and I feel a sense of duty to share this side, life after trauma.

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MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY
WAYNE STATE
AUGUST 2022

A GRATEFUL PATIENT PROVIDES LONG-TERM FOLLOW-UP

Thank you for preserving my anonymity and as I stated in my prior email, should you or your students have any questions, I will respond. Please take care and thank you for all you do and have done for your patients, I feel very privileged.

How amazing it was to have the opportunity to speak with you yesterday, one of the doctors that I credit with saving my life. In your line of work, I assume that it must be rare to receive feedback from a former trauma patient, so I will briefly summarize my condition when I arrived at Detroit Receiving Hospital and what my life has been like after being discharged.

In 1998, I was transported, via ambulance, to Detroit Receiving Hospital with a single GSW to my neck, an EMT was administering CPR and I was unresponsive upon arrival. The first three weeks, I was in a Glasgow 3 coma., I had bilateral chest tubes, tracheotomy, PEG tube, etc. Initially I was a C7 quadriplegic and from the significant blood loss reportedly 60% blood volume), suffered from anoxia. My time in the ICU lasted for a month and then I was transferred to the Rehabilitation Institute of Michigan (RIM) and my rehab stay was two and a half months. Unfortunately, I still required too much care and from RIM I had a long, month stay in a nursing home.

Today, I am a C7 TI incomplete SCI and I have even participated in a 36 week walking study at RIM years ago. I took me three years to sort through living independently, working really hard to discharge the guardian and conservatorships, testifying at the trial of the shooter and giving a victim impact statement at his sentencing. Once that chapter closed, I participated in educational services and after significant math tutoring I applied to a University. In 2008, I graduated with a major in Criminal Justice and a co-major in Peace & Conflict Studies (PCS). I met my spouse at the University and we celebrated our twentieth wedding anniversary this past year. Through PCS I have been giving presentations to the Ralph Bunche Summer Program on Interpersonal Violence and I was an active member of the Pioneers for Peace Program which at the time was based inside RIM.

Again, I am happy to thank you and the other professionals who helped me through this strange journey of survival to recovery. Just a note, the individual that did this to me has never accepted responsibility. While I am very cautious and private, I am good at answering questions should you have any.

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY
WAYNE STATE
AUGUST 2022

Joseph M. Fugaro, MD

Dear Dr. Lucas,


Dr. Joseph Fugaro

Thank you for keeping me updated for so many years. Your constancy has always been an admirable trademark, and I have attempted to adopt it in many ways of my life and practice.

It seems proper to extend my greetings, gratitude, and an account of my life after training at the Wayne State University Department of Surgery. In truth, my experience may not be typical, but I manage to count it all joy since the Detroit Medical Center prepared me well for my career.

My time at DMC/WSU, Sinai Grace, Oakwood, and the Detroit area are the subject of fond memories. Every day, I can hear my mentors' words echo. In the ICU, I hear your "hemp rope lecture" about crystalloid and colloid resuscitation every time albumin is ordered. Other memories spurn me to continually look at the whole patient such as the teachings from Drs. Robert Wilson (WSU/GS 1958/63), Anna Ledgerwod (WSUGS 1972), Larry Diebel (WSU/GS 1980/86), Joseph Buck (WSUGS 1987), Steven Tennenberg, Salwen, Kaplan, David Bouwman (WSUGS 1978), Donald Weaver (WSUGS 1979), Shannon Bongers (WSU/GS 1989/94), Chenicheri Balakrishnan (WSUGS 1993), Michael Wood (WSUGS 1977), Maris Kazmers (WSU/GS 1972/77), and John Barnwell. I share memories of those bedside lectures with fellow residents like Drs. Michael White (WSU/GS 1990/97), David Edelman (WSU/GS 2002/09), Keiva Bland (WSUGS 2006), John Webber (WSU/GS 1992/99), Paul Corcoran (WSUGS 2004), Sachin Shah (WSUGS 2003), Zulfikar Sharif (WSUGS 2004), and Erin Field (WSUGS 2003).

After completion of general surgery residency and a research fellowship in Thoracic Oncology at the Karmanos Institute, I found myself inspired by WSU/DMC thoracic surgeons such as Drs. Steiger, Talbert, Apostolou, Hilu, Pass, and Baciewicz. I completed the University of Missouri Cardiothoracic Residency in 2006. The program has since dissolved as predicted by Dr. James Tyburski (WSUGS 1992), "Thoracic surgery is a dying field." It turns out, Dr. Tyburski is not wrong. Nonetheless, my family and I settled in Mexico, MO where the soil is particularly rich in silica giving rise to lung nodules and a need for a thoracic surgeon. We joined a local church, and the community welcomed us with open arms. The medical staff there was extremely helpful in guiding me as a new attending physician. My practice included general thoracic surgery, general surgery, endoscopy and vascular surgery. During these formative years, the one constant advice that I received from all sources was that my profession would change and evolve. Since that time, the local hospital has gone through changes, and so have I.

My career pivoted in 2009 when I started my critical care fellowship back at the University of Missouri with Drs. Barnes and Coughenour and Mr. Robert Bell. All these men contributed to hone my skill sets and force me to critically assess my practice patterns and behaviors. Naturally, I found myself humbled during training, however, this motivated me to take on two very distinct challenges in 2010. I would embrace the tenets of critical care medicine in areas of significant impact: the long term critically ill patient, and the United States Military Medical Corps.

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Joseph M. Fugaro, MD

First, the intrigue of sepsis survival drove me to the local Long Term Acute Care (LTAC) facility in Columbia, where there was no shortage of severe infections with a systemic inflammatory response. It turns out that the same principles of sepsis treatment remain constant between the short-term and the long-term acute patient care settings. After this, I accepted the medical director position at an LTAC in Cape Girardeau, MO. Eventually, Saint Francis Medical Center (the local trauma center) saw value in having critical care trained members on their medical staff. I partnered with other Mizzou graduates to start the intensivist program at that hospital. In 2021, I followed another Mizzou graduate, Dr. Ajit Tharakan, to join the critical care team at Hillcrest Medical Center and the Oklahoma Heart Institute. Presently, I continue to work in Tulsa, OK in the Medical/Surgical, Neurological, and Cardiovascular ICUs. We are the only ECMO and VAD unit in Tulsa and we continue to grow our capability and availability.

Second, I commissioned and trained as an officer in the Missouri Air National Guard Medical Corps. My first charge was in Aerospace Medicine at Whiteman AFB just outside of Knob Noster, MO. Prior service provides, such as Dr. Christopher Steffes (WSUGS 1993) inspired me to follow an operational path of military medicine. Other training acclimated me to the altered physiology of humans at altitude or subjected to high gravitational forces such as in a banking jet aircraft. Armed with Air Force training, I became the flight surgeon to the 110th Bomber Squadron Medical Element caring for the B2 Stealth Bomber pilots. Subsequently, I transitioned to the 131st Medical Group—Critical Care Air Transport Team responsible for aeromedical evacuation of critically ill patients. As such, my team and I work as a here-person unit (physician, nurse, and respiratory therapist) to execute fixed wing air transport and continue high acuity medical care en route. My group and I returned from a successful deployment to Ali Al Salem AFT, Kuwait in May 2022 as part of Operation Inherent Resolve. There we transported and cared for multiple casualties (American, Allied, and otherwise) throughout the Middle East to higher levels of care and safety. It was an honor to represent my country and my profession abroad to so many who need the blessings that are commonplace in the USA. Upon my return, I am training multiple aeromedical assets with standard and advanced exercises such as ATLS, ACLS, PALS, and FCCS.

While my career has been wonderful encouragement, my family is really what continues to spur me forward. Our home is still in the rural setting of Mexico, MO where we enjoy a peaceful slice of paradise. My eldest daughter, Cecilia, is currently an architectural engineering intern at ARCO construction of St. Louis as part of her bachelor's degree from the University of Missouri Science and Technology School. My youngest daughter, Victoria, will join her at the same University of Rolla, MO to study engineering management. My son, Antonio, is a sophomore at the University of Central Missouri in Warrensburg, where he is studying criminal justice to pursue a career in law enforcement. Meanwhile, my wife, Paula, has recently accepted a position as the principal of Kingdom Christian Academy of Fulton, MO.

While my children do not have vivid memories of our time in Detroit, the impact of Wayne State is still palpable in our family. I am immensely grateful for all that the Detroit Medical Center has done and continues to do for myself, my family, and the medical community over the years. The Department of Surgery at Wayne State

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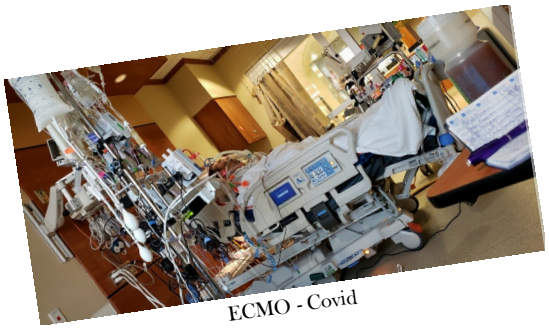
Joseph M. Fugaro, MD

University is full of noble and generous people of integrity, and with pride, I count myself fortunate to have mentors, colleagues, and friends among these individuals.

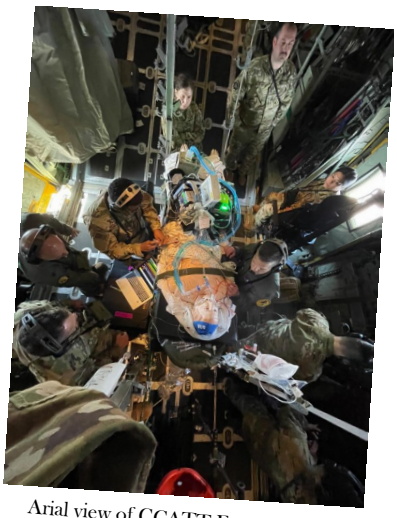
Very respectfully,
Joe Fugaro
Joseph M. Fugaro (WSUGS/TS 2004/2006)

Fugaro Family Christmas 2020
(Left to right) Victoria (17), Cecilia (20), Antonio (18), Dr. Fugaro's bride, Paula, and Dr. Joseph Fugaro

CCATT Emblem Ali Al Salem



ECMO - Covid



Arial view of CCATT Exercise 2022

CCATT Exercise, Minneapolis 2022

CCATT 131MDG 2022 Kuwait
(Left to right) MSgt Christian Guilliams, RRT, Dr. Joseph Fugaro, Lt Col Jason Wagner, MD, Capt. Jacob Reedy, RN

Discovery Cove Family Vacation 2022

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY
WAYNE STATE
AUGUST 2022

SURGICAL GRAND ROUNDS


Dr. Lester Laddaran

Dr. Lester Laddaran (WSUGS/Burn Surgery 2020/22) presented the departmental Grand Rounds on July 20, 2022 with a lecture titled, "Skin Grafting and Dermal Substitutes in Burns."

Dr. Laddaran began by summarizing the anatomy of the skin and identified all of the different functions of the skin, including the endocrine function, which some of us tend to forget. He also described the anatomic layers of the skin and the multiple types of cells within the skin that have important body functions. He described the six epidermal layers and the three dermal layers with the many cells contained within these layers, including hair follicles and sweat glands.

He next described the classification for burn injury and how each level of depth affects different cells within the epidermis, dermis, and subcutaneous tissues. He described the classic three phases of healing, which in the burn patient leads to mature granulation tissue. The burn wound allowed to heal by secondary intent seldom obtains the same look as a non-burned skin area, and he described examples of keloid formation as opposed to the hypertrophic scars that are seen in burn patients. The types of skin grafts were defined, including the thin and deep split-thickness skin graft, as opposed to the full-thickness skin graft, which is somewhat of a misnomer since the full-thickness skin graft is really a very deep split-thickness skin graft. The thicker the skin graft, the better the functional output, but the thinner skin graft leads to a higher percentage of take.

There is an interesting history regarding the different types of knives that have been developed over the past 200 years in order to get the desired thickness of a split-thickness skin graft, with the most likely desired thickness being .013 inches. The different knives allow for one to control the desired thickness of the split-thickness skin graft.

A major portion of the presentation dealt with pharmacological interventions which can augment the healing process and the successful take of skin grafts. He described Recell, which is used in conjunction with autografts and is kept on the wound for about 6-8 days before the outer dressing is removed. The use of Re ell is thought to improve the results of autografting and in controlled studies, has been defined as "non-inferior" to autografting without Recell. There was no discussion of cost.

Another commercial product is Epicel, which is a mixture of cultured epithelial cells mixed with meshed portions of patient's cells taken from a small area of unburned skin. He described how this improves the outcome in patients with large burns. The use of autografts and homografts was discussed at length with the source being fresh human cadavers or various types of biologic dressings, such as porcine or bovine grafts. Other commercial items that were discussed included Integra and ACell dressings which augment the healing of autografts and promote healthy granulation tissue. There was an active question-and-answer session related to this excellent presentation.

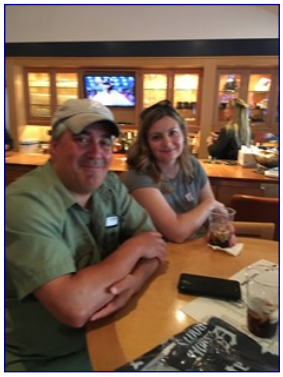
DETROIT TIGERS SWEEP THE CLEVELAND GUARDIANS

Last month's report from the department showed the accomplishments that have been made under the leadership of Dr. Donald Weaver (WSUGS 1979), supported by the Michael & Marian Ilitch Grant. The Ilitch team not only has provided monthly support for the overall development of the department but also offers an opportunity for the department's residents and faculty to attend one of the ball games in the Ilitch suite. This opportunity is provided for one game in July and one game in August. The July game was attended by many faculty members, residents, and friends and provided an opportunity to see our Tigers defeat the Guardians, and in the process, complete a four-game sweep of our Cleveland neighbors. This is the first time that the Tigers have swept the Cleveland team since 2013. A good time was had by all!

Mrs. Cindy Washell, Department Administrator, and her husband, Terry, enjoy the game

Dr. Joshua Kong (WSUGS 2023) and his fiancé

Dr. Choichi Sugawa and his bride, Natsuko, having fun at the game



Dr. David Edelman (WSU/GS 2002/09) and Dr. Samantha Tarras (WSUGS 2011)

WSU Department of Surgery residents enjoying the Ilitch Suite and the game

Dr. Larry Diebel Honored


Dr. Larry Diebel

Medical journals provide the opportunity for people in all specialties to stay current with what is happening in each of the specialties. The primary journal for trauma and acute care is the Journal of Trauma and Acute Care Surgery (JTACS), which is a very highly rated journal and has extensive influence all over the world. Dr. Raul Coimbra is the current Editor-in-chief for the JTACS, and he supervises a humongous amount of material related to the submissions that come in every week and then are distributed to members of the Editorial Board of the JTACS for review and recommendations, which help Dr. Coimbra make decisions regarding future publications. There are many reviewers on the Editorial Board of the JTACS. There are two reviewers from the WSU Department of Surgery, namely Dr. Larry Diebel (WSU/GS 1980/86) and Dr. Charlie Lucas (WSU/GS 1962/67).

Dr. Coimbra has identified Dr. Diebel as the "Reviewer of the Month for June 2022." This is a recognition of all the hard work and efficiency that Dr. Diebel implements when he carries out reviews for the JTACS. His hard work and efficiency has been greatly appreciated by Dr. Coimbra and the entire editorial team of the JTACS. Congratulations, Larry!

August 5th

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY
WAYNE STATE
AUGUST 2022

PRODUCTIVITY


Dr. Jonathan Saxe

Dr. Jonathan Saxe (WSUGS 1990) published a paper in this month's American Journal of Surgery entitled, "colonic Stenting for Malignant Obstructions—A Review of Current Indications in Outcomes." The paper came from Indianapolis, Kentucky, and Sacramento. His co-authors were Amelie Lueders, Gabie Ong, Peter Davis, and Jonathan Weyerbacher. The manuscript discussed the increasingly popular technique of colonic stenting as a palliative treatment for left-sided malignant obstruction. Much of the literature suggests that this technique shortens hospital stay, decreases cost, and decreases the likelihood of a permanent stoma. They analyzed the recommendations made by the American and European Society of Gastroenterology and Colorectal Surgery.

The authors described how the use of the self-expanding metal stents as a bridge to surgery has become more popular. When everything works perfectly, the expandable stent will allow for the obstructed colon to open up so that there can be full evacuation of the proximal fecal material with elimination of the obstruction and distension. Theoretically, this allows for a definitive operation to be performed with removal of the obstructing cancer and primary reconstruction without proximal diversion. This approach would then eliminate the performance of an emergency proximal colostomy in preparation for a second operation when the obstructing cancer is removed. In order to have the optimal results with this planned technique, the authors described the procedure itself, including type of anesthesia and patient positioning and the specific endoscopic techniques, including judicious air insufflation and passage of the stent over a guidewire which has been placed through the obstructed lumen into the proximal dilated colon. They reported on literature which demonstrates clearly that the incidence of having a temporary or permanent stoma is reduced with this technique, although the data on long-term survival shows that when tumors reach this state of growth causing obstruction, the cure rate is compromised.

They also emphasized that there are many complications reported with this technique, with the worst complication being colonic perforation, which may result in extravasation of cancer cells into the peritoneal cavity, which thus compromises long-term cure. They concluded, however, that this technique has become a well-established way to provide palliation and avoid lifelong stoma formation and suggested that with continued experience, the incidence of complications would be reduced and that utilization of this technique will increase.

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY

WAYNE STATE

"EXCERPTS FROM LOG BOOK" - DOWN MEMORY LANE

Anna M. Ledgerwood, MD

Dr. Anna Ledgerwood

3/14/71:

Chief Resident: Dr. Edgar Romont

Staff: Dr. W. Friend

1. JR: Respiratory distress due to multi-nodular goiter treated with placement of endotracheal tube.
2. RL: Multiple GSW neck and base of skull, face, and shoulder with stroke. A carotid arteriogram showed occlusion middle cerebral artery treated with tracheostomy, control of pharyngeal bleeding, and suture of the palate. This was a combined admission to Emergency Surgery, Neurosurgery, ENT, and Oral Surgery.

3/15/71:

Staff: Dr. A. Arbulu

1. CW: Intestinal obstruction with the findings of negative abdominal exploration at laparotomy.
2. ER: SGW to back, negative abdominal exploration.
3. AF: Blunt trauma to the abdomen with laceration small bowel, treated with repair of laceration.
4. HN: Stab wound to abdomen, negative exploratory lap.
5. MM: Stab wound to abdomen, left lower quadrant with laceration small bowel mesentery, treated with suture of laceration.
6. JS: Second-degree burns face, mouth, and shoulder with respiratory distress, treated with tracheostomy.

3/16/71:

Staff: Dr. A. Kambouris

1. GB: Lacerated wrist with laceration ulnar artery, nerve, flexor carpi ulnaris, and superficial tendons of the fourth and fifth fingers, treated with repair of tendons, nerve, and ligation of the artery.
2. HG: Acute appendicitis, treated with appendectomy.
3. RH: GSW left superficial femoral artery, treated with resection of 2 cm and end-to-end anastomosis.

3/17/71:

Staff: Dr. J. Bassett

1. LG: Abscess right hand, treated with I&D of abscess.
2. MH: GSW right abdomen and left chest with laceration stomach, spleen, pancreas, splenic vein and artery, and left lung with hemothorax, treated with left thoracotomy and exploratory lap (two teams working at same time). Patient had cardiac arrest while being prepped. Left thoracotomy for cardiac resuscitation. Exploratory lap was a splenectomy, and the patient did not recover from his arrest and expired on the table.

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MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY

WAYNE STATE

DOWN MEMORY LANE — Anna M. Ledgerwood, MD

3/18/71:

Staff: Dr. R. Allaben

1. WG: GSW left groin with hematoma, treated with exploration of iliac vessels.
2. GR: Post removal of chest tube, pneumothorax, treated with insertion of new chest tube.
3. DE: GSW left flank with laceration of retroperitoneal descending colon, treated with descending colostomy.

3/19/71:

Staff: Dr. Baker

Chief Resident: J. Watts

1. ES: GSW left flank, treated with laparotomy with findings of retroperitoneal hematoma and a normal intravenous pyelogram and non-expanding, so not explored.
2. GD: GSW right upper quadrant abdomen with thru-and-thru perforation right lobe of liver with entrance measuring 5 cm and exit measuring 3 cm, not actively bleeding and included in liver study and treated with choledochostomy and Penrose drain.
3. WH: Stab abdomen with thru-and-thru stomach and small laceration tail of pancreas, treated with laparotomy, repair stomach, and drainage of pancreas.
4. LR: Stab neck, negative exploration.
5. EM: Stab of abdomen, negative exploration.

(There was a team of residents who covered the Emergency Surgery service at night and worked from 6 pm until 7 am. The chief resident made rounds with the day team, starting at 6 am. Each of the residents on the night team got one night off a week. The chief resident or the fifth-year resident was always off on Saturdays when a visiting chief resident would cover the service. That visiting resident was from another service.)

3/20/71:

Staff: Dr. C. Lucas

1. VM: Stab wound abdomen, negative exploratory laparotomy.
2. GSW abdomen, exploratory laparotomy showed small bowel perforation x4 treated with primary closure.
3. KM: Laceration left thumb and tendon with operation being repair of tendon.

3/21/71:

Staff: Dr. R. Krome

1. DG: GSW neck with perforation of hypopharynx on right and left, treated with bilateral exploration of the neck and closure of both perforations and drainage.

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY

WAYNE STATE

WSU MONTLY CONFERENCES 2022

Death & Complications Conference
Every Wednesday from 7-8

Didactic Lectures — 8 am
Kresge Auditorium

The weblink for the New WebEx Room:
https://davidedelman.my.webex.com/meet/dedelman

Wednesday, August 3
Death & Complications Conference
"Surgical Management of Esophageal Cancer"
Zane Hammoud, MD
WSU Michael & Marian Ilitch Department of Surgery

Wednesday, August 10
Death & Complications Conference
"Preoperative Cardiac Testing"
Michael L. Schostak, MD, MBA
Corporate Medical Director
WSU Michael & Marian Ilitch Department of Surgery

Wednesday, August 17
Death & Complications Conference
"Updates of Gastroparesis Management"
Kellie McFarlin, MD
WSU Michael & Marian Ilitch Department of Surgery

Wednesday, August 24
Death & Complications Conference
"Mechanical Ventilation: Status 2022"
James Tyburski, MD
WSU Michael & Marian Ilitch Department of Surgery

Wednesday, August 31
Death & Complications Conference
To Be Determined
Jessica McGee, MD
WSU Michael & Marian Ilitch Department of Surgery

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY

WAYNE STATE

Wayne State Surgical Society
2022 Donation

Name:

Address:

City/State/Zip:

Service Description Amount

2021 Dues Payment _____$200 _____

My contribution for "An Operation A Year for WSU" _____

*Charter Life Member _____$1000 _____

Total Paid_____

Payment by Credit Card

Include your credit card information below and mail it or fax it to 313-993-7729.

Credit Card Number:_____

Type: MasterCard Visa Expiration Date: (MM/YY)_____ Code____

Name as it appears on card:_____

Signature:_____

Billing address of card (if different from above):

Street Address_____

City_____ State_____ Zip Code_____

*I want to commit to becoming a charter life member with payment of $1000 per year for the next ten (10) years.

Send check made payable to ***Wayne State Surgical Society*** to:

Charles Lucas, MD
Department of Surgery
Detroit Receiving Hospital, Room 2V
4201 St. Antoine Street
Detroit, Michigan 48201

MARK YOUR CALENDARS

81st Annual Meeting of the AAST & Clinical Congress of Acute Care Surgery
September 21-24, 2022
Chicago, IL

108th American College of Surgeons Clinical Congress
October 16-20, 2022
San Diego, CA

Western Surgical Association 130th Scientific Session Meeting
November 5-8. 2-22
The Ritz-Carlton Bacara
Santa Barbara, CA

Please Update Your Information

The WSUSOM Department of Surgery wants to stay in touch. Please email Charles Lucas at clucas@med.wayne.edu to update your contact information.

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY

WAYNE STATE

Missing Emails

Over the years the WSU Department of Surgery has lost touch with many of its alumni. If you know the email, address, or phone number of the following WSU Department of Surgery Residency Program graduates please email us at clucas@med.wayne.edu with their information so that we can get them on the distribution list for the WSU Department of Surgery Alumni Monthly Email Report.

Mohammad Ali (1973)
David B. Allen (1992)
Tayful R. Ayalp (1979)
Juan C. Aletta (1982)
Kuan-Cheng Chen (1976)
Elizabeth Colaiuta (2001)
Fernando I. Colon (1991)
David Davis (1984)
Teoman Demir (1996)
Judy A. Emanuele (1997)
Lawrence J. Goldstein (1993)
David M. Gordon (1993)
Raghuram Gorti (2002)
Karin Haji (1973)
Morteza Hariri (1970)
Harrison, Vincent L. (2009)
Abdul A. Hassan (1971)
Rose L. Jumah (2006)
R. Kambhampati (2003)
Aftab Khan (1973)
Samuel D. Lyons (1988)
Dean R. Marson (1997)
Syed A. Mehmood (2007)
Toby Meltzer (1987)
Roberto Mendez (1997)
Mark D. Morasch (1998)
Daniel J. Olson (1993)
David Packer (1998)
Y. Park (1972)
Bhavik G. Patel (2004)
Ami Raafat (1998)
Kevin Radecki (2001)
Sudarshan R. Reddy (1984)
Renato G. Ruggiero (1994)
Parvid Sadjadi (1971)
Samson P. Samuel (1996)
Knavery D. Scaff (2003)
Steven C. Schueller (1974)
Anand G. Shah (2005)
Anil Shetty (2008)
Chanderdeep Singh (2002)
David G. Tse (1997)
Christopher N. Vashi (2007)
Larry A. Wolk (1984)
Peter Y. Wong (2002)
Shane Yamane (2005)
Chungie Yang (2005)
Hossein A. Yazdy (1970)

Wayne State Surgical Society

The Wayne State Surgical Society (WSSS) was established during the tenure of Dr. Alexander J. Walt as the Chairman of the Department of Surgery. WSSS was designed to create closer contact between the current faculty and residents with the former resident members in order to create a living family of all of the WSU Department of Surgery. The WSSS also supports department activities. Charter/Life Membership in the WSSS is attained by a donation of $1,000 per year for ten years or $10,000 prior to ten years. Annual membership is attained by a donation of $200 per year. WSSS supports a visiting lecturer each fall and co-sponsors the annual reception of the department at the annual meeting of the American College of Surgeons. Dr. Scott Davidson (WSU/GS 1990/96) will pass the baton of presidency to Dr. Larry Narkiewicz (WSU/GS 2004/09) at the WSSS gathering during the American College of Surgeons meeting in October 2022. Members of the WSSS are listed on the next page. Dr. Davidson continues in the hope that all former residents will become lifetime members of the WSSS and participate in the annual sponsored lectureship and the annual reunion at the American College of Surgeons meeting.

MICHAEL & MARIAN ILITCH DEPARTMENT OF SURGERY

WAYNE STATE

Members of the Wayne State Surgical Society
Charter Life Members

Ahn, Dean
Albaran, Renato G
Allaben, Robert D. (Deceased)
Ames, Elliot L.
Amirikia, Kathryn C.
Anslow, Richard D.
Antoniolli, Anita L.
Auer, George
Babel, James B.
Bassett, Joseph
Baylor, Alfred
Bouwman, David
Bradley, Jennifer
Cirocco, William C.
Clink, Douglas
Chmielewski, Gary W.
Colon, Fernando I.
Conway, William Charles
Davidson, Scott B.
Dente, Christopher
Dujon, Jay
Edelman, David A.
Francis, Wesley
Flynn, Lisa M.
Fromm, Stefan H.
Fromm, David G
Galpin, Peter A.
Gayer, Christopher P.
Gerrick Stanley
Grifka Thomas J. (Deceased)
Gutowski, Tomasz D.
Herman, Mark A.
Hinshaw, Keith A.
Holmes, Robert J.
Huebl, Herbert C.
Johnson, Jeffrey R.
Johnson, Pamela D.
Kline, Gary
Kovalik, Simon G.
Lange, William (Deceased)
Lau, David
Ledgerwood, Anna M.
Lim, John J.
Lucas, Charles E.
Malian, Michael S.
Martin, Donald J., Jr.
Maxwell, Nicholas
McGuire, Timothy
McIntosh, Bruce
Missavage, Anne
Montenegro, Carlos E.
Narkiewicz, Lawrence
Nicholas, Jeffrey M.
Novakovic, Rachel L.
Perrone, Erin
Porter, Donald
Ramnauth, Subhash
Rector, Frederick
Rose, Alexander
Rosenberg, Jerry C.
Sankaran, Surya
Sarin, Susan
Sferra, Joseph
Shapiro, Brian
Silbergleit, Allen
Smith, Daniel
Smith, Randall W.
Stassinopoulos, Jerry
Sullivan, Daniel M.
Sugawa, Choichi
Tuma, Martin
vonBerg, Vollrad J. (Deceased)
Washington, Bruce C.
Walt, Alexander (Deceased)
Weaver, Donald
Whittle, Thomas J.
Williams, Mallory
Wills, Hale
Wilson, Robert F.
Wood, Michael H.
Zahriya, Karim

Members of the Wayne State Surgical Society—2022 Dues

Alpendre, Cristiano V.
Asfaw, Ingida
Babel, James
Bambach, Gregory A.
Barnwell, John
Baylor, Alfred
Bloch, Robert
Bucci, Lorenzo
Camero, Luis
Carlin, Arthur
Dawson, Konrad L.
Dittinbir, Mark
Dolman, Heather
Dulchavsky, Scott A.
Edwards, Ryan
Fernandez-Gerena, Jose
Field, Erin
Gallick, Harold
Goltz, Christopher J.
Hall, Jeffrey
Hamamdjian, Khatch
Hilu, John
Hollenbeck, Andrew
Holmes, Robert
Jeffries, Christopher
Joseph, Anthony
Kaderabek, Douglas J.
Klein, Michael D.
Kosir, Mary Ann
Larson, Sarah
Liebold, Walter
Lloyd, Larry
Lopez, Peter
Malian, Michael S.
Marquez, Jofrances
Mayuiers, Matt
McGee, Jessica D.
Meade, Peter C.
Mueller, Michael J.
Noorily, Michael
Paley, Daniel S.
Phillips, Linda G.
Porterfield, Lee
Robinson, Steven
Schwarz, Karl W.
Shaheen, Kenneth W.
Shanti, Christina
Siegel, Thomas S.
Spencer, Amy
Taylor, Michael G.
Tennenberg, Steven
Thomas, Gregory A.
Thoms, Norman W.
Vasquez, Julio
Ziegler, Daniel W.
Zoellner, Steven M.

Book Lovers Day
August 9th

Operation-A-Year
January 1—December 31, 2022

The WSU department of Surgery has instituted a new group of alumni who are remembering their training by donating the proceeds of one operation a year to the department. Those who join this new effort will be recognized herein as annual contributors. We hope that all of you will remember the department by donating one operation, regardless of difficulty or reimbursement, to the department to help train your replacements. Please send you donation to the Wayne State Surgical Society in care of Dr. Charles E. Lucas at Detroit Receiving Hospital, 4201 St. Antoine Street (Room 2V), Detroit, MI, 48201.

Albaran, Renato G.
Anslow, Richard D.
Antoniolli, Anita L.
Anthony, Joseph
Bambach, Gregory A.
Bradley, Jennifer
Cirocco, William C.
Chmielewski, Gary W.
Conway, William Charles
Davidson, Scott
Dente, Christopher
Dujon, Jay
Edelman, David A.
Francis, Wesley
Gallick, Harold
Gayer, Christopher P.
Gutowski, Tomasz D.
Hamamdjian, Khatch
Herman, Mark A.
Hinshaw, Keith A.
Holmes, Robert J.
Huebel, Hubert C.
Johnson, Jeffrey R.
Johnson, Pamela D.
Joseph, Anthony
Ledgerwood Anna M.
Lim, John J.
Lopez, Peter
Malian, Michael
Marquez, Jofrances
Martin, Donald J.
Maxwell, Nicholas
McGuire, Timothy
McIntosh, Bruce
Missavage, Anne
Nicholas, Jeffrey
Novakovic, Rachel L.
Perrone, Erin
Porter, Donald
Sankaran, Surya
Sferra, Joseph
Siegel, Thomas S.
Silbergleit, Allen
Smith, Randall W.
Sugawa, Choichi
Sullivan, Daniel M.
Tuma, Martin
Whittle, Thomas J.
Williams, Mallory
Wills, Hale
Wood, Michael H.
Ziegler, Daniel

WSU SOM ENDOWMENT

The Wayne State University School of Medicine provides an opportunity for alumni to create endowments in support of their institution and also support the WSSS. For example, if Dr. John Smith wished to create the "Dr. John Smith Endowment Fund", he could donate $25,000 to the WSU SOM and those funds would be left untouched but, by their present, help with attracting other donations. The interest at the rate of 4% per year ($1000) could be directed to the WSSS on an annual basis to help the WSSS continue its commitment to improving the education of surgical residents. Anyone who desires to have this type of named endowment established with the interest of that endowment supporting the WSSS should contact Ms. Lori Robitaille at the WSU SOM> She can be reached by email at *lrobitai@med.wayne.edu*.