



JUNE 2024



Combined Meeting of the Annual Keyport Trauma Symposium and the Michigan Chapter of the American College of Surgeons



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2023 WSSS OFFICERS

President:

Larry Narkiewicz (WSU/GS 2004/09)

Vice-President:

Joseph Sfera (WSUGS 1991)

Secretary-Treasurer:

Bruce McIntosh (WSU/GS 1989/94)

Members-at-Large:

Jay Dujon (WSUGS 2011)

Anita Antoniolu (WSUGS 1998)

Resident Member:

Paige Aiello

Molly Belisle

The Trauma Symposium began on Wednesday morning, 5/1/24 and included some excellent presentations.

Dr. Jeffrey Kerby from the University of Alabama at Birmingham is the current Chairman of the American College of Surgeons Committee on Trauma. He presented an excellent summary of both American College of Surgeons activities and the University of Alabama activities as it relates to various aspects of trauma. He discussed the current concepts regarding resuscitation, the importance of having strategically located trauma centers at various levels in order to accommodate injured American citizens, and the use of the REBOA and at various locations, including the Emergency Department, EMS scene care, and in the military. There was an excellent question-and-answer session following his presentation.

Dr. Jimmy Haouilou from Ascension-St. John Hospital in Detroit provided a nice update on the current status of the treatment of vascular injuries with emphasis on the endovascular techniques. He described the various stents that are being used and the different situations where there is a combination of closed and open vascular reconstruction. This is a completely different specialty since the evolution of endovascular surgery.

There were a number of interesting cases that were then presented from various hospitals around the state, followed by an afternoon session which focused on the Michigan Trauma Quality Improvement Program (MTQIP) which was quite comprehensive and covered many different activities regarding trauma in the state of Michigan. The program was quite helpful for those involved in meeting trauma center guidelines for the state and also for the American College of Surgeons.

The MCACS Council had their meeting in the late afternoon session. Members on the council included Dr. Heather Dolman (WSU/GS 2000/06), the current Treasurer of the MCACS;



Dr. Heather Dolman

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Dr. Erin Perrone (WSU/GS 2012), the current Chairman of the Program Committee; Dr. Miguel Tobon (WSU/GS 2020), one of two young Fellows representing the Michigan Chapter to the American College of Surgeons; and Dr. David Edelman (WSU/GS 2002/09) who provided the Program Director Committee report and the Audit report. Following the Council meeting, the evening session began with a new activity which the Council had approved earlier this year.



Dr. Erin Perrone

Each year, the MCACS will select two "Living Legends. This program began with the two selected Living Legends being Dr. Charlie Lucas (WSU/GS 1962/67) and Dr. Robert Bartlett who has been the national leader in ECMO. Dr. Bartlett will receive his plaque at a later meeting. Dr. Charlie Lucas was introduced by Dr. Erin Perrone, and following reception of the plaque, he made some brief comments about how fortunate we are to live in the United States of America where the son of immigrant farmers can be so honored.



Dr. Miguel Tobon



Dr. David Edelman

This session was followed by remarkable cases from different parts of the state and concluded with a presentation by Sara Ma from WSU.

The Trauma Symposium continued onto Thursday morning, 5/2/24 when there were a series of resident competition papers from all over the state of Michigan. All of the presentations were quite good and were associated with active discussion.



Dr. Charles Lucas

This was followed by a presentation by Dr. Mark Schermerhorn regarding complex vascular repairs and the advanced imaging which are associated with these repairs.

The MCACS business meeting was held in the early afternoon, after which there were more resident presentations.



Dr. Amanda Stevens



Dr. Alison Karadjoff

The Thursday, 5/2/24 morning session of the MCACS was moderated by President Joseph Buck and included a number of resident competition papers, including, "Protection of the Endothelial Barriers Following Shock States? A Role for Estrogen," presented by Dr. Amanda Stevens (WSUGS 2027) from WSU. Another paper included, "TXA's Impact on Platelet Adhesion to the Endothelium After Shock Conditions: A Protective Effect?" presented by Dr. Alison Karadjoff (WSUGS 2024). Another presentation from WSU included, "Using Risk Stratification to Improve Outcomes in Elderly Patients With Isolated Hip Fractures" by Dr. Anna Shu. This session was followed by the "Mo" Henig Trauma Lecture, "A Charmed Life: My Serendipitous

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Path to a Career in Trauma Surgery" by Dr. Jeffrey Kerby. This was a very comprehensive lecture which described his experiences from his early medical school days through his residency training and subsequent career at the University of Alabama at Birmingham. He covered many different aspects of his trauma experiences, including the leadership that he provided in the state of Alabama and the current leadership that he has provided for the American College of Surgeons Committee on Trauma, which he chairs.

The late morning session on Thursday consisted of more resident competition papers from all over the state, followed by a luncheon session.

The afternoon on Thursday began with the MCACS business meeting at which time Dr. Erin Perrone was officially elected to the office of Presidency and will be in charge this next year.

Later that afternoon, Dr. David Edelman moderated the next session for the residency competition which included a paper by Dr. Michelle Coughlin (WSUGS 2025) entitled, "Factors Affecting Length of Hospital Stay for Pediatric Craniofacial Surgery Patients."



Dr. Michelle Coughlin

The Friday morning session, 5/3/24 began with the presentation of surgical posters with one of the posters being presented by Dr. David Griever, entitled "Small Bowel Obstruction Caused by Small Bowel Adenocarcinoma in a Previously Healthy 26-Year-Old Patient." Following the review of all of the posters, there was a light morning session where "Quickshots" papers were presented. These papers included a presentation by Dr. Madyson Riddell (WSUGS 2025) entitled, "A Review of Phylloides Tumor in Adolescents: Pathology and Surgical Management."



Dr. Madyson Riddell

The last session for the morning was a surgical Jeopardy round which was moderated by Dr. Donn Schroder (WSUGS 1982) and new president, Dr. Erin Perrone.



Dr. Donn Schroder

Everyone looks forward to the 2025 combined meeting of the Trauma Symposium and the Michigan Chapter.



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Dr. Erin Perrone, President of the MCACS and Dr. Charlie Lucas, recipient of the Living Legend Award pose at the meeting



(Left to right) Dr. Amanda Stevens, Dr. Anna Ledgerwood, Dr. David Edelman, Dr. Larry Diebel, Dr. Charlie Lucas, Dr. Alison Karadjoff, Dr. Michelle Coughlin, and Dr. Heather Dolman enjoying the MCACS meeting



During the Chapter meeting, residents Dr. Madyson Riddell and Dr. Michelle Coughlin made it to the Finals in the Jeopardy competition.



One of the presentations in the Jeopardy competition



Dr. Lucas receiving the Chapter Award as a "Living Legend" from president Dr. Loay Kabbani and incoming president, Dr. Erin Perrone.





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OUR GRADUATING RESIDENTS THE JOURNEY STARTS

The 2024 graduation celebration of our future surgeons who have completed their general surgery residency and those who have completed their fellowships was held on Thursday, June 13, at the Colony Club Grand Ballroom in Detroit. Dr. Donald Weaver (WSU/GS 1979), our Penberthy Professor of Surgery and Chairman of the Department of Surgery, will preside over the festivities. Below is a summary of where their future will be taking them.



GENERAL SURGERY

Dr. Paige Aiello will be heading to the Moffitt Cancer Center in Tampa, Florida to pursue a Breast Surgical Oncology Fellowship.



Dr. Molly Belisle will be staying at the DMC to begin her Minimally Invasive and Bariatric Surgery Fellowship. Afterwards, she hopes to find her future job in the state of Michigan.



Dr. Puneet Bhatti will begin a two-year Fellowship in Vascular Surgery at Rush University in Chicago, Illinois.



Dr. Anastasia Chuchulo is pursuing a Bariatric/Minimally Invasive Surgery Fellowship at McLaren Flint in August and is hoping to stay local in Michigan after completion of her fellowship.



Dr. Allison Karadjoff is heading to St. Louis to begin a Fellowship at the Washington University in Trauma/Acute Care Surgery and Surgical Critical Care.



Dr. Felix Shun is excited to start his new venture after graduation and is thankful to all his mentors and teachers throughout his residency.



Dr. Jock Thacker is also looking forward to continuing on his journey in surgery and looks forward to all that his future holds for him.



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OUR GRADUATING RESIDENTS THE JOURNEY STARTS

VASCULAR SURGERY

Dr. Sidra Bhuller will be staying in Michigan, accepting a job at the University of Michigan Sparrow Health in Lansing.



Dr. Dominic Suma reports he will be going to Albany, Georgia where he will be practicing vascular surgery at the Phoebe Putney Memorial Hospital.



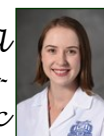
PEDIATRIC SURGERY

Dr. Christopher Marengo is a Major in the United States Army and upon graduation he and his family will moving to Oahu Hawaii where he will be stations for the next 5ive years practicing pediatric surgery at Tripler Army Medical Center.



PEDIATRIC SURGICAL CRITICAL CARE

Dr. Hollis Hutchings will be returning to the Henry Ford Hospital to complete a final two-year general surgery residency and looks forward to applying for a Cardiothoracic Surgery Fellowship this coming fall; ultimately hoping to practice general thoracic surgery in an academic setting.



SURGICAL CRITICAL CARE



Dr. Amanda Johnston has accepted a position at HSHS St. John's Hospital in Springfield, Illinois which will include surgical critical care along with trauma and emergency general surgery.



Dr. Yuchen (Kelly) Zhang will be joining the Springfield Clinic in Springfield Illinois as a trauma/acute care surgeon serving the people of Springfield and surrounding communities by taking trauma call, managing the surgical intensive care unit, and performing emergency general surgery.



MINIMALLY INVASIVE SURGERY

Dr. Alyssa Stroud is joining a private practice in Detroit where she will be practicing Minimally Invasive General and Foregut Surgery.





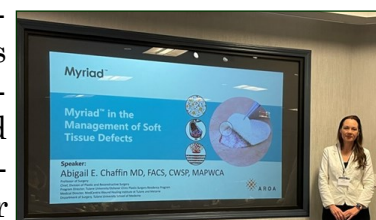
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SURGICAL GRAND ROUNDS

Surgical Grand Rounds on May 1, 2024, was educational with back to back presentations by Dr. Gregory Bohn MD, president of the American Board of Wound Healing, and Dr. Abigail Chaffin MD, professor and Chief of Tulane Division of Plastic Surgery. Dr. Bohn presented on the importance of the presence, timing, and amount of matrix metalloproteinases (MMPs) in building the scaffolding of the extracellular matrix. He discussed how collagen dressings can be utilized to “mop up” excess MMPs, which prevents the premature plateau of wound healing. The optimal time for use of these collagen dressings is at 30 days of healing when patients are eligible for coverage through their insurance, however waiting longer can actually slightly decrease the rate of healing. Dr. Bohn shared a number of case reports regarding the use of collagen matrix for wound healing including with skin grafts (in combination with wound vacs or xeroform bolsters), necrosis from chemo extravasation, calciphylaxis, diabetic foot wounds, and basal cell excision sites of extremities and scalp. He also shared some more unique uses of collagen dressings such as splenic repair with Ovine collagen matrix for capsular hematoma (wrapped around to achieve hemostasis), and packing the liver in a trauma case involving laceration through GB fossa down to IVC after tractor accident.

Dr. Bohn also shared some case reports and publications pertaining to surgical and biofilm management of various types of wounds including pilonidal cysts, pyoderma gangrenosum, hidradenitis, calciphylaxis, and even an impressive 196lb panniculectomy.

Dr. Abigail Chaffin(WSUGS 2006) followed Dr. Bohn with a discussion about management of biofilms in chronic wounds, which requires multimodal management including sharp debridement, irrigation solution against biofilms (pHA), antimicrobial dressing selection, and targeted antimicrobial management. She provided a detailed discussion of complicated plastic surgical reconstruction. She discussed her practice of using hypochlorous acid, which is a component of the innate immune response in the neutrophil oxidative burst, during operative debridement for irrigation. A solution of hypochlorous acid with a pH of 3.5-5.5 is used with 5-8 minute contact time to treat 90-95% of biofilm organisms.

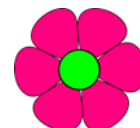


Dr. Abigail Chaffin

After Dr. Chaffin completed her Plastic Surgery Fellowship at Tulane University in New Orleans, she stayed in the south land and progressed clinically and academically. She is now the Chief of the Plastic Surgery Division and heads up the program for complicated plastic surgical reconstruction. She attained her full Professorship in Surgery more than two years ago. She is also the Director of the Wound Center at Tulane and is the director of their Plastic Surgery

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SURGICAL GRAND ROUNDS

A photograph of three women smiling and posing for a photo in a hallway. The woman on the left has dark hair and is wearing a blue patterned top. The woman in the middle has dark hair and is wearing a black top. The woman on the right has blonde hair and is wearing a pink patterned top. They are standing in a hallway with white walls and a blue door in the background.

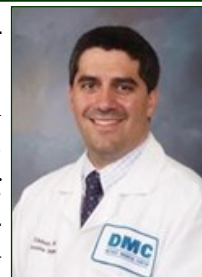
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SURGICAL GRAND ROUNDS

The **Surgical Grand Rounds for Wednesday, 5/8/24** was dedicated to the annual evaluation of the surgical residency program in compliance with the Residency Review Committee. This was led by our Program Director, Dr. David Edelman (WSU/GS 2002/09), and involved presentations by many of the surgical residents who were leaders of their team. A number of topics were discussed, including work hours with the importance of compliance with the 80-hour week, the inappropriate provision of hospital services provided by surgical residents when they really fall under the category of hospital responsibilities, such as discontinuing Foley catheters, inserting nasogastric tubes, and physically transporting patients to receive imaging studies when the Transport services are unavailable, evaluations of faculty by residents and the evaluation of residency by faculty, the completing of operative evaluations on the new SIMPL system in order to help with concurrent assessment of resident performance by faculty, the provision of such simple things in life, such as a proper place to sleep and provision of proper food when on call for 24 hours, the comparison of the WSU program to national programs as it relates to all of these evaluations, and the opportunity for resident involvement in research or creative activities.



Dr. David Edelman

All of these issues were discussed in detail with the hope that each year, there will be improvement in the overall performance of the Department of Surgery residency program and the successful training of residents in a pleasant environment so that they can be appropriately prepared for their future careers.

TITLE: GRAND ROUNDS: ALEXANDER J. WALT ENDOWED LECTURE

Dr. Rondi Kauffmann, a Professor of Surgery at the Vanderbilt University, presented the **Surgery Grand Rounds on 5/15/24**. The title of her presentation was, "Global Surgical Education: A Stamp in the Passport to Academic Pursuit." Dr. Kauffmann pointed out that all of us are global surgeons, but some of us work only in our own cities. She emphasized the importance of expanding surgical care to the less privileged portions of our globe.



Dr. Rondi Kaufmann

She described the experiences of Ms. Ashley Judd who was injured in the Congo and sustained a femur fracture. She was on the ground for some time before help arrived and carried her on a six hour walk to the closest village. She was then transported to the nearest open area

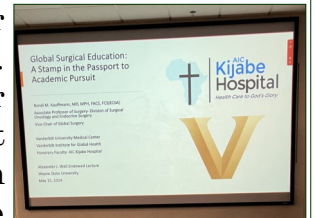
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SURGICAL GRAND ROUNDS

where a designated plane was able to land and take her to South Africa for stabilization and finally to the United States for completion of her care. This experience stimulated her to become involved in facilitating earlier care in various parts of the world. She described the creation of the Lancet Commission on Global Surgery in 2015. Part of this effort was publicized in the Lancet Journal. The goals of this Commission were to arrange for care to be provided to remote areas and to impoverished world citizens.



She emphasized that over 5 billion world citizens have inadequate access to care which, worldwide, represents 90% of poor people. She pointed out that health care can be very expensive and that untreated injury leads to lost wages and financial suffering.

This lack of access to good care applies not only to surgery but to simple things like vaccines where people living in remote areas do not have access to measles vaccine or HIV vaccine. Administration of these preventive vaccines would result in a tremendous financial savings. Likewise, finding appropriate surgical care is cost effective and allows for many world citizens to work in order to contribute to society and receive compensation. This improvement is well documented but is hampered by the fact that receiving such care often varies with patient income. The worst example of this phenomenon occurs in Africa, particularly in southeast Africa, where there is a tremendous need for improved and available surgical care.

Dr. Kauffmann pointed out that even in the wealthy United States, there is a great need for more surgeons, particularly in rural areas. This need is even worse in those parts of America which are populated primarily by minorities. There has been a rise in Global Surgery, but this trend needs to continue. She described the old fish story where if you give a man a fish, he will be able to eat that day, but if you give him the necessary training to become a fisherman, he will be well fed for the rest of his life. Consequently, it is important to teach the citizens in these remote areas how to increase their own expertise in order to provide care throughout these remote rural areas.

Part of this education in remote areas includes the training of local citizens to become skilled in surgical care. This can be facilitated by having USA university surgical programs provide one month rotations of their surgical residents in these remote areas so that the USA residents are trained in the same programs where local citizens are receiving surgical training.

Dr. Kauffmann described the Vanderbilt University experience where the surgical residents rotate at the Kijabe Hospital in Nairobi which is in Kenya. The two official languages in Nairobi are English and Swahili, which facilitates communication between the USA residents and the Kijabe residents. There is a Pan African Academy of Christian Surgeons that was created

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in 1980, and Vanderbilt University is actively involved in this program. Dr. Kauffmann has published in the World Journal of Surgery, identifying the fact that more than 50 local citizens have become trained in surgery and that some of these trainees come from other nearby countries besides Kenya. The Vanderbilt residents spend a four week rotation at Kijabe Hospital, and about one-quarter of these residents continue to be involved in Global Surgery after they complete their training. Both the Vanderbilt University residents and the host country residents have a good relationship and are pleased with their training. One of the interesting challenges that has to be met is “cultural humility,” since the USA residents tend to be a little bit over confident which may intimidate the local residents from the host country. A number of the USA residents and the host residents have become close friends with the result that there has been some marriages and families produced by parents with two different cultures.

Dr. Kauffmann described the Vanderbilt Collaboration for Global Surgery Equity which continues to sponsor these relationships. Currently, essentially all of the surgical specialties are incorporated into this process, and they have obtained grant support in order to facilitate ongoing research among multiple countries and multiple specialties. The American College of Surgeons has developed an African Partnership which covers many areas, including trauma. The Advanced Trauma Life Support (ATLS) system has been introduced into these African programs where the local surgeons have been certified as Instructors in the ATLS program in order to continue this type of trauma education for their community. Similar programs are being developed by all of the different surgical specialties.

There was an active question-and-answer session following this excellent presentation.

The **Surgical Grand Rounds on 5/29/24** was presented by Dr. Paige Aiello (WSUGS 2024), entitled, “Surgery As Sport: What Sports Can Teach Us About Surgery.” Dr. Aiello described how training for an athletic event and for surgical skill have a lot of factors in common. She described different types of sports where repetitive training, such as rowing and ballet dancing, require the same disciplines that are seen in the development of surgical skills; this applies not only to open surgical procedures but also to endoscopic procedures.



Dr. Paige Aiello

Some prospective randomized controlled studies that have been implemented by surgical educators have shown that Deliberative Practice (DP) facilitates the learning of better control of instruments and that this improvement continues throughout the first 50 hours of practice, by

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SURGICAL GRAND ROUNDS

which time a plateau of surgical skills has developed. Continued DP allows for the surgeon to develop expertise with continued practice, facilitating maintenance of these skills, whereas the lapse of continued practice allows the skills to diminish. This reminded the editor of the frequent comments made by Dr. Fred Arcari, a pediatric surgeon who was actively involved in the teaching of the general surgeons at the Detroit Receiving Hospital and later the pediatric surgeons at the William Beaumont Hospital. Fred would say that he never wanted to go on a vacation for more than one week for fear that he would have lost his technical skills after a two-week absence from the operating room.



Repetitive movements that enhance surgical skills are similar to those seen with athletes in training but that failure at obtaining these skills is handled differently in the coach/athlete relationship vs. the teacher/resident relationship. Failure is generally ignored in the athletic environment, whereas failure is harped upon at the Morbidity and Mortality conference in the surgical environment. It is important not to have failures, but a stronger positive relationship between surgical teacher and surgical resident enhances the learning process. The surgical coach has to focus on cognitive teaching, physiology teaching, and psychomotor teaching. The human-to-human relationship is very important in the evolution of surgical teaching.

The use of video techniques as part of the coaching process is helpful and appears to increase the retained skills of the surgical resident. She cited a number of controlled studies showing that the surgical resident, following video teaching in various cadaver models, develops much better technical skills when doing gastrointestinal surgery. Also, the mental relationship between surgical coach and teacher is very important. Many of the residents who have finished a surgical program will comment that when they get into a difficult situation, they can actually hear their surgeon/teacher's voice from years ago telling them how to stay out of trouble. Likewise, the surgical teacher has to develop knowledge with minimal stress in order that the teaching principles can be better received.

There are also physical stresses involved with being a surgeon, and it is important that surgical skills are facilitated by routine exercises highlighting the different unnatural positions that a surgeon is in while doing very complicated operations. The routine surgical exercises should include maintenance of those muscles which are supporting the body at unusual angles, particularly when working in the pelvis for the abdominal surgeon, but stressing of different muscle groups is present in all surgical specialties, necessitating that the surgeon be physically capable of doing an operation.

Finally, the importance of a strong mental relationship between the surgeon/teacher and surgeon/resident was emphasized in order to minimize fear and increase confidence as part of close teamwork.



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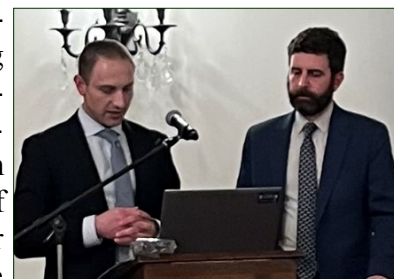
COMBINED MEETING OF THE DETROIT SURGICAL ASSOCIATION and THE ACADEMY OF SURGERY OF DETROIT



The Academy of Surgery of Detroit (ASD) was organized during the years when Dr. Angus McLean was Chairman of the WSU Department of Surgery. He gathered some of the leaders in surgery in Detroit at the time, and they began their monthly meetings during the academic calendar year by having external surgical experts present, usually at the Detroit Athletic Club. During the early years, the Academy members would visit various other medical centers each February and would frequently have lecturers from the University of Michigan present during one of the Spring months.

The Detroit Surgical Association (DSA) was initiated in 1947 by Dr. Charlie Johnston, the Chairman of the WSU Department of Surgery, who organized the southeast Michigan surgeons to have a monthly educational meeting for the practicing surgeons and surgical residents. Each Spring, there would be an annual lectureship which commemorated Dr. Theodore McGraw who was the first Chairman of Surgery in 1968 in the new WSU School of Medicine. During the monthly meetings, three residents from southeast Michigan surgical programs would present papers.

The combined meeting of the ASD and the DSA began in 1981, and the visiting speaker represents both organizations. This year the combined meeting took place at The Colony Club on 5/9/24. Dr. Eric Pauli, the David L. Nahrwold Professor of Surgery at the Penn State University Hershey Medical Center, was the visiting speaker. Dr. Pauli gave an excellent presentation on "Endoscopic Management of GI Tract Defects." He began by praising one of our alumni, Dr. Choichi Sugawa, who was recognized as an international leader in the use of the endoscope to treat various problems, particularly as they relate to upper and lower GI bleeding. Dr. Pauli described the 21st century techniques that are being used by the skilled endoscopists, including the treatment of GI



Dr. Eric Pauli (right) receives the McGraw Medal which is presented to the annual lecturer.

fistulas, colovesical fistulas, enterocutaneous fistulas, and complicated intra-abdominal abscesses. His presentation was clearly 21st century and led to a very active question-and-answer period.



(Left to right) Dr. Anna Ledgerwood (WSUGS 1972), Dr. [Name obscured]; Dr. Al Baylor (WSUGS 2005), and Dr. Eliza Beal at the ASA/DSA meeting.



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REPORTS FROM THE OUTFIELD

Below is a recent email sent by Dr. Bhavik Patel (WSUGS 2004):

First off thanks to you and Dr. Ledgerwood for making me the surgeon I am today. I am a cardiothoracic and vascular surgeon in Waterloo, IA. I am hospital employed in a solo practice. I do over 200 open heart surgeries a year and about 500 cases total per year. The practice includes all types of cardiac surgery as well as lobectomies, carotid surgery, endovascular and open AAA repair, etc. This is my fourth job in 16 years of practice. I am currently at Allen Hospital since 2018.



Dr. Bhavik Patel and his twins

One case comes to mind. I remember once we had GSW to the chest at DRH and I did an ER thoracotomy with Dr. Tyburski. We opened the pericardium and had return of vitals but the patient eventually died. Dr. Tyburski said at the time that he had not ever saved anyone with a GSW to the heart. Fast forward to about 2013. I was in Ogden, Utah. A guy comes in with multiple GSW, one wound to the chest but no hemothorax or bullet still in chest. He was taken to the OR for ex-lap. Pressure was low but there was a bullet near spine and they thought maybe it was spinal shock. I got a call from radiology saying there was blood in the pericardial sack. I went to the OR and the general surgeon was closing the belly. BP was still a little low. I scrubbed in and decided to do a pericardial window through their incision. I open it and red blood squirts out. I assume it is just the heart pushing it out. Then the BP starts to drop. I have them quick prep the chest and open it from the bottom up. I lift the heart up and sure enough there is a hole in the left ventricle. I placed two pledgeted prolene stitches in to repair it. A TEE showed a VSD which cardiology later plugged. The guy eventually walked out of the hospital. I was not in the heart room so when I finished everyone's jaw was on the ground. Nobody said a word except a nursing student that turned to me and said "good job". Tell Tyburski I got one on him. Dr. Patel has twins aged 12.

The cardiothoracic surgery world really needs good surgeons for the future. There is a severe shortage currently that is likely to last. I myself may need a partner in 5-10 years. If you have residents interested in CT surgery I am happy to speak to them (319)331-5143.

Sincerely,
Bhavik Patel (WSUGS 2004)

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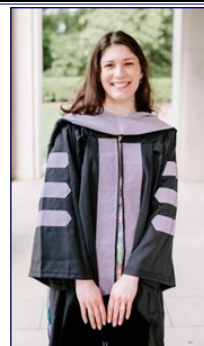


REPORTS FROM THE OUTFIELD



The expanded McGuire Clan (left to right): Dr. Timothy McGuire, daughter, Margaret, his bride, Cheryl, and Margaret's husband.

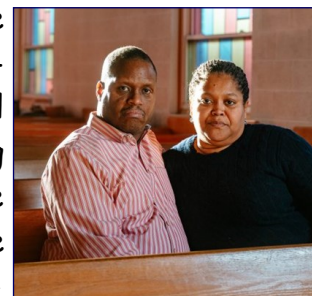
Dr. Timothy McGuire (WSU/GS 2003) and his bride Cheryl celebrated the graduation of their daughter Margaret from the University of North Carolina dental school. Tim is proud that his beautiful offspring is going to be using her hands in order to provide relief of pain in her patients. All of us wish her a successful career.



Dr. Margaret McGuire



The Reverends Al Baylor III (WSUGS 2005) and Michelle Baylor were featured in Hour Detroit magazine in the April 2024 edition as they described the "once-in-a-century" flood that occurred in their Immanuel Grace AME church in the Jefferson-Chalmers area, which is a low lying neighborhood along the old Conner Creek near the Detroit River. The Reverend Al Baylor described the terrible floods that occurred in June of 2021 when the church basement was totally flooded and the road leading to the church was basically a river. The flood water was so high in the church that it almost reached the first floor so that the basement was flooded by at least ten feet of water. Although this area has long been prone to flooding, this was an extreme in everyone's memory. They described how the Great Lakes Water Authority had systems in place that were designed to last almost 100 years but that now, the system has reached that time period, and one can anticipate more flooding in the future. This Jefferson-Chalmers area and a portion of the Grosse Pointes are in the lower areas of the Conner Creek distribution. Although some retention treatment of the underlying basin had been put in place, it was not sufficient to contain the excess water load in 2021. The Reverends Al and Michelle Baylor will call upon their congregation to use prayer to augment the retention devices.



Pastors Al and Michelle Baylor's Immanuel Grace AME Church of Jefferson Chalmers flooded on June 25.



EXCERPTS FROM THE LOG BOOK DOWN MEMORY LANE

3/27/72 - Staff: Dr. William Harrity; Chief Resident: Dr. A. Ledgerwood

1. CB: Dressing change for SGW to thigh.
2. EW: Dressing change leg.
3. RB: 26yo with GSW left shoulder with thru-and-thru injury to cephalic vein and junction axillary and subclavian vein and subclavian artery. Treated with exploration left axillary vessels with left thoracotomy and transverse sternotomy, resection artery with end-to-end anastomosis, and ligation vein.



Dr. Anna Ledgerwood

3/28/72 - Staff: Dr. J. Hartzel

1. CB: Dressing change.
2. EW: Dressing change.
3. OM: 53yo GSW RUQ. Had laparotomy with thru-and-thru liver wound with entrance 6x8 cm and stellate exit was 8x10cm. Shattered right adrenal gland and tangential laceration of IVC. IVC repaired, liver wounds packed, and bleeding seemed to stop. Received 16 transfusions, taken to Recovery Room, required eight more transfusions, had massive abdominal distention, was taken back to O.R. and found to have bleeding from IVC and adrenal gland; unable to control and patient expired in O.R.

3/29/72 - Staff: Dr. G. Baker

1. EW: Dressing change.
2. CB: Dressing change.
3. AC: STSG back wound.
4. EE: I&D perirectal abscess.
5. LJ: STSG to fasciotomy wounds from a previous GSW popliteal artery.
6. TJT: 24yo with acute appendicitis treated with appendectomy.
7. LW: I&D abscess right middle finger.

3/30/72 - Staff: Dr. J. Ingold

1. CB: Dressing change.
2. EW: Dressing change.
3. WB: Resection fibula with fasciotomy for SGW to calf.
4. UL: GSW abdomen with thru-and-thru wound sigmoid colon and psoas muscle, treated with a colostomy and mucous fistula.
5. DR: 16yo with stab to left hand, repaired flexor tendon left ring finger.

Continue page 17



"EXCERPTS FROM LOG BOOK" - DOWN MEMORY LANE, cont...

6. TS: GSW abdomen and shock on admission, resuscitated, taken to O.R., no BP after induction of anesthesia. Abdomen opened, patient arrested as tamponade released and fibrillated. Patient was defibrillated, thru-and-thru laceration left internal iliac artery and left external iliac vein; ligated vein. Patient again fibrillated but could not be resuscitated. Expired in O.R.

3/31/72 - Staff: Dr. R. Krome

1. AD: Stab of abdomen, perforation posterior wall of stomach which was repaired.
2. TP: Replaced large bowel in abdomen, previous exteriorization of colon repair.
3. CT: GSW abdomen thru-and-thru right lobe of liver and left lobe, exit hole measured 8x10 cm, perforation right diaphragm treated with closure diaphragm and right chest tube.
4. EH: GSW abdomen, two holes small bowel closed.
5. JA: SGW right calf, treated with debridement.
6. HB: GSW left chest (44yo, self-inflicted because has angina and can't stand pain any longer). Left thoracotomy, resection lingula and debridement and hemostasis left upper and left lower lobes, came without pulse or BP, had one respiratory gasp.

4/1/72 - Staff: Dr. C. Lucas

1. HF: GSW right cheek with bullet left shoulder, exploration left neck with closure of perforations of trachea and esophagus, tracheostomy.
2. CB: STSG to left groin.
3. EW: Dressing change.
4. WG: Stab abdomen, perforated stomach and abrasion of stomach, stomach was closed.
5. CC: I&D abscess finger.
6. AW: Stab abdomen with perforation left diaphragm and anterior and posterior stomach, treated with closure stomach, diaphragm, and placement left chest tube.

4/2/72 - Staff: Dr. Y. Silva

MD: SGW right thigh with fracture femur, avulsion superficial femoral artery and deep and superficial veins. Had extensive debridement, saphenous vein bypass graft, bilateral fasciotomies, and placement of tibial K-wire.

RJ: GSW right shoulder, thru-and-thru right axillary artery, treated with repair and end-to-end anastomosis.

CT: Tracheostomy for respiratory distress.



WSU MONTHLY CONFERENCES

2024

Death & Complications Conference
Every Wednesday from 7-8



Didactic Lectures — 8 am
Kresge Auditorium

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

Wednesday, June 5

Death & Complications Conference

“The Past, Present, and Future of Wellness in Surgery”

Molly Belisle, MD

Graduating Surgery Resident
DMC/WSU School of Medicine

Wednesday, June 12

Death & Complications Conference

“My Most Memorable Case”

Paige Aiello, MD; Molly Belisle, MD; Puneet Bhatti, DO; Anastasya Chuchulo, MD;

Alison Karadjoff, DO; Felix Shun, MD; Jock Thacker, MD

DMC/WSU School of Medicine

Wednesday, June 19

Death & Complications Conference

Felix Shun, MD

DMC/WSU School of Medicine

KRESGE AUDITORIUM – SECOND FLOOR WEBBER BLDG

HARPER UNIVERSITY HOSPITAL, 3990 JOHN R.

7:00 Conference: Approved for 1 Hour – Category 1 Credit

8:00 Conference: Approved for 1 Hour – Category 1 Credit

For further information call (313) 993-2745

The Wayne State University School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The Wayne State University School of Medicine designates this live activity for a maximum of 2 hours **AMA PRA Category 1 Credit(s)**[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.”

EVALUATIONS

Surgical Death and Complications Rounds #2024321125, Jan-April 2024 CME Reflective Evaluation:

<https://www.surveymonkey.com/r/MJMJNVV>

Surgery Grand Rounds #2024321064, Jan-April 2024 CME Reflective Evaluation:

<https://www.surveymonkey.com/r/MJWT2XF>



Wayne State Surgical Society 2024 Donation

Name: _____

Address: _____

City/State/Zip: _____

Service Description	Amount
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2024 Dues Payment _____	\$200	_____
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My contribution for "An Operation A Year for WSU" _____	_____
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*Charter Life Member _____	\$1000	_____
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Include your credit card information below and mail it or fax it to
313-993-7729.

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Billing address of card (if different from above):

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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

*Midwest Surgical Association Annual Meeting**August 4-6, 2024**Grand Hotel**Mackinac Island, Michigan*

*83rd Annual Meeting of the American Association for
the Surgery of Trauma/Clinical Congress of Acute
Care Surgery*

*September 11-24, 2024**Las Vegas, Nevada*

*American College of Surgeons Clinical Congress
Annual Meeting*

*October 19-22, 2024**San Francisco, California*

Please Update Your Information

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



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)

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)

Lawrence S. Zachary (1985)

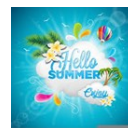
Wayne State Surgical Society

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) passed 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. Narkiewicz 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.



Members of the Wayne State Surgical Society Charter Life Members

Ahn, Dean	Clink, Douglas	Gerrick Stanley	Lucas, Charles E.	Ramnauth, Subhash	vonBerg, Volirad J. (Deceased)
Albaran, Renato G	Chmielewski, Gary W.	Grifka Thomas J. (Deceased 2022)	Malian, Michael S.	Rector, Frederick	Washington, Bruce C.
Allaben, Robert D. (Deceased)	Colon, Fernando I.	Gutowski, Tomasz D.	Marquez, JoFrances	Rose, Alexander	Walt, Alexander (Deceased)
Ames, Elliot L.	Conway, William Charles	Herman, Mark A.	Martin, Donald J., Jr.	Rosenberg, Jerry C.	Weaver, Donald
Amirikia, Kathryn C.	Davidson, Scott B.	Hinshaw, Keith A.	Maxwell, Nicholas	Sankaran, Surya	Whittle, Thomas J.
Anslow, Richard D.	Dente, Christopher	Holmes, Robert J.	McGuire, Timothy	Sarin, Susan	Williams, Mallory
Antonioli, Anita L.	Dujon, Jay	Huebl, Herbert C.	McIntosh, Bruce	Sferra, Joseph	Wills, Hale
Auer, George	Edelman, David A.	Johnson, Jeffrey R.	Missavage, Anne	Shapiro, Brian	Wilson, Robert F.
Babel, James B.	Engwall, Sandra	Johnson, Pamela D.	Montenegro, Carlos E.	Silbergleit, Allen (Deceased)	Wood, Michael H.
Bassett, Joseph (Deceased)	Francis, Wesley	Kline, Gary	Narkiewicz, Lawrence	Smith, Daniel	Zahriya, Karim
Baylor, Alfred	Flynn, Lisa M.	Kovalik, Simon G.	Nicholas, Jeffrey M.	Smith, Randall W.	
Bouwman, David	Fromm, Stefan H.	Lange, William (Deceased)	Novakovic, Rachel L.	Stassinopoulos, Jerry	
Bradley, Jennifer	Fromm, David G	Lau, David	Perrone, Erin	Sullivan, Daniel M.	
Busuito, Christina	Galpin, Peter A.	Ledgerwood, Anna M.	Porter, Donald	Sugawa, Choichi	
Crocco, William C.	Gayer, Christopher P.	Lim, John J.	Prendergast, Michael	Tuma, Martin	



Members of the Wayne State Surgical Society—2023-24 Dues

Alpendre, Cristiano V.	Goltz, Christopher J.	Marquez, JoFrances	Siegel, Thomas S.
Bambach, Gregory A.	Gutowski, Tomasz	Martin, Jonathon	Tarras, Samantha
Carlin, Arthur	Hall, Jeffrey	McGee, Jessica D.	Taylor, Michael G.
Chmielewski, Gary	Hollenbeck, Andrew	Mostafa, Gamal	Tennenberg, Steven
Dawson, Konrad L.	Joseph, Anthony	Nevonen, Marvin G.	Thoms, Norman W.
Dolman, Heather	Klein, Michael D.	Paley, Daniel S.	Vasquez, Julio
Dulchavsky, Scott A.	Kline, Gary	Park, David	Ziegler, Daniel W.
Fernandez-Gerena, Jose	Kosir, Mary Ann	Porterfield, Lee	
Field, Erin	Lloyd, Larry	Shanti, Christina	



June 16th

Operation-A-Year January 1—December 31, 2024



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 your 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.	Dittinbir, Mark	Holmes, Robert J.	McGuire, Timothy	Sullivan, Daniel M.
Antonioli, Anita L.	Engwall, Sandra	Johnson, Jeffrey R.	McIntosh, Bruce	Wood, Michael H.
Bambach, Gregory A.	Fernandez-Gerena, Jose	Johnson, Pamela D.	Porter, Donald	Ziegler, Daniel
Bradley, Jennifer	Gutowski, Tomasz	Joseph, Anthony	Prendergast, Michael	
Busuito, Christina	Gayer, Christopher P.	Lim, John J.	Siegel, Thomas S.	
Chmielewski, Gary W.	Herman, Mark A.	Malian, Michael	Smith, Daniel	
Dente, Christopher	Hinshaw, Keith A.	Marquez, JoFrances	Smith, Randall	



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.