A special thanks to our 2017 lecture speakers and sponsors

The list of renowned invited guest speakers continues to amaze me every year. These outstanding speakers are much sought after academic professionals including top surgeons and researchers from around the globe. These lecturers’ brief visits to Nashville expand our collaborative relationships that will advance surgical care and improve our understanding and treatment of a wide array of diseases. Their experience-sharing lectures in our weekly Grand Rounds inspire our faculty, spark invention in students and trainees, and continue the bond of learning, teaching and healing.

We are deeply appreciative of the benefactors who have made these lectures possible.

Some guest speakers and families are highlighted here. We are grateful for their gifts and continued support.

2017 LECTURE SERIES

Scott Society Lecture
Kenneth Sharp, MD, FACS
January 20, 2017

McCleery Lecture
Ara Vaporciyan, MD
May 12, 2017

Thuss Lecture
Joseph Serletti, MD, FACS
April 14, 2017

Dale Lecture
Carlos Timaran, MD
April 21, 2017

Hall Lecture
Alberto Garcia-Perla, MD, PhD
April 22, 2017

Holcomb Lecture
Anthony Sandler, MD
October 27, 2017

Daniel Lecture
Marshall Jacobs, MD
November 17, 2017

Section Lectures Link

FALL/WINTER Newsletter 2017 is also available on the Section of Surgical Sciences website
www.vumc.org/surgical-sciences, click on the News tab and click on the (Section Newsletter) link
To celebrate the release of her first children’s album, “I Believe in You,” legendary country music singer-songwriter Dolly Parton visited Monroe Carell Jr. Children’s Hospital at Vanderbilt on Friday, October 13, and performed songs from the album for patients, their families and hospital staff.

Parton specifically wrote the song “Chemo Hero” to honor one of her nieces, Hannah Dennison, who was treated for leukemia at Children’s Hospital for four years, beginning in 1993.

“My first ever children’s album is coming out today, and so I thought it would be nice to surround myself with children on a day like this and to hear some of the stories of these little kids,” said Parton. “My niece Hannah was treated for leukemia here when she was 4. She’s 29 now. She’s a picture of hope, and she’s my little Chemo Hero, which is one of the songs on the album I wrote for her. It was just a special day to be here at Vanderbilt because everybody took such good care of her when she was here.”

During a visit to the hospital’s Chemo Infusion Clinic where young cancer patients receive chemotherapy infusions and treatments for other diseases, Parton’s niece was reunited with three of the nurses who cared for her during her illness: Ann Simons, RN, Allison Duffey, RN, and Becky Manes, RN.

After leading the crowd in a sing-along performance of “Chemo Hero,” Parton surprised the crowd by announcing a $1 million pledged gift to the Children’s Hospital “in honor of my niece Hannah, my sister Rachel, Hannah’s dad, Richard, and Dr. Naji Abumrad (Parton’s Vanderbilt physician).”

A study from Vanderbilt University Medical Center by Justin Gregg, MD, and colleagues demonstrates how a clinical protocol can help reduce unnecessary use of outpatient antibiotics.

Urologic surgeons and infectious disease specialists at VUMC wrote and implemented a protocol for the use of prophylactic antibiotics in patients undergoing cystoscopy, an outpatient procedure urologists use to examine a patient’s bladder that involves threading a thin flexible tube fitted with a miniature scope through the urethra.

Gregg was joined in the study by Roger Dmochowski, MD, MMHC, and Daniel Barocas, MD, MPH

With use of the protocol, antibiotic prescribing for cystoscopy patients decreased from 95 to 70 percent, while rates of post-cystoscopy urinary tract infection (UTI) remained unchanged at approximately 3 percent. The study will appear in an upcoming edition of the *Journal of Urology.*
Chambless and neurosurgery team treat singer Tim Rushlow who suffered from brain bleed after head trauma

Tim Rushlow, the former singer of the country group Little Texas, and current performer of big band music, was psyched to take his kids fly fishing for a few days in June.

The former lead singer of Little Texas had reinvented himself as a big band singer, and there was a small break in his schedule before a heavy fall and winter slate of shows.

Rushlow and his 15-year-old daughter, Emma, and his 11-year-old son, River, traveled about an hour away and had a blast along the Caney Fork River — until the last morning of their trip.

Rushlow started to break camp around sunrise, and as he rolled up an extension cord, he suddenly found himself on the ground staring up at the sky.

Paramedics took him to a hospital in Smithville, TN. After an assessment, doctors immediately sent him to Vanderbilt. He arrived confused, disoriented and unable to reliably follow commands, neurosurgeon Dr. Lola Chambless said.

“Dad, are you all right?” Rushlow, confused and dizzy, saw his daughter’s face peering over him.

Paramedics arrived, and Rushlow shooed them away, hoping to calm his children. But he was back on the ground five minutes later.

His daughter again called 911, while her father came in and out of consciousness. A small brain bleed caused a total of seven seizures.

In the next few days, Rushlow, his wife and business manager wondered if he would survive. If so, would he be paralyzed on one side? Would he be able to walk and talk? Would Rushlow ever sing again?

Gillaspie is part of Lung Cancer Survivors Day

Lung cancer survivors and their caregivers were invited to attend a free educational evening at VUMC in November at the University Club.

The program titled “Lung Cancer: A Celebration of Progress,” was co-sponsored by VUMC and Vanderbilt-Ingram Cancer Center (VICC). It was open to all survivors currently undergoing therapy or who are post-treatment no matter where they received therapy.

During the educational event and reunion, guests learned about the latest advancements in lung cancer research along with new clinical care options at VICC. The evening also gave participants an opportunity to meet and socialize with other survivors and caregivers.

Program coordinator Erin Gillaspie, MD joined the thoracic oncology running team two days later as part of the lung cancer awareness effort at the LUNGevity Run. The Breathe Deep Stache and Lash run to end lung cancer is an annual event. Representing Vanderbilt were Erin Gillaspie, Sally York, Jennifer Lewis, John Lehman, Pierre Massion, Brandon Winston, and LaDonna Atherton.

Complete Story Link
Breast cancer patient Mathis feels blessed to have “the best team of doctors”, including surgeons Grau and Higdon

Amanda Mathis, chief financial officer of Bridgestone Americas, was just 35 when she first felt a lump in her right breast. The young Nashville executive who describes herself as a “go-getter” immediately scheduled a mammogram but was told the shadow on the screen was just dense tissue. Six months later, follow-up tests confirmed Mathis’ suspicion that she had breast cancer, the same disease her grandmother had faced almost 40 years earlier.

“I was running marathons, I was doing yoga…and I never felt sick. So, it was shocking to hear that it was cancer,” Mathis remembered.

The Centerville, Tennessee, native and finance professional had spent years on the corporate fast track, moving to major cities before returning to Nashville to be near her close-knit family and her family farm. A bout with breast cancer was not on her career and life agenda. Mathis’ parents insisted that she seek care at VUMC, where her grandmother had been treated successfully for breast cancer.

“I was so blessed and I had the best team of doctors,” said Mathis. The team included surgical oncologist Ana Grau, MD, plastic surgeon Kent Higdon, MD, and radiation oncologist Bapsi Chakravarty, MD.

She met with VICC breast cancer specialist Vandana Abramson, MD, whom Mathis calls “one of the best doctors in the country.” Mathis said that visit was “the beginning of my road to being healthy again.”

Transplant Center reaches major milestone

2000 livers transplanted

Members of the Vanderbilt Transplant Center gathered in November to commemorate the 2,000th liver transplant performed at VUMC.

One of the largest liver transplant programs in the Southeast, VUMC is one of only 11 programs in the United States that have performed more than 2,000 liver transplants.

It’s a day the former director and founder of the liver transplant program C. Wright Pinson MBA, MD, never envisioned.

“We got pretty fired up about No. 10 and 25, 50, 75 and 100,” said Pinson, Deputy CEO and Chief Health System Officer for VUMC. “I realize it doesn’t seem like much now, but we thought it was a big deal back then. I never thought that I would see the day this would happen.”

Pinson, along with Kelly Wright Jr., MD, performed the center’s first liver transplant in 1991.

“As Tennessee’s only comprehensive transplant center, we have seen tremendous growth and extraordinary outcomes,” Pinson said.

“Since its inception, the liver transplant program has experienced continued improvement in many areas like patient outcomes, quality of life, cost reduction and research efforts garnering national recognition as a center of excellence.”
South Carolina resident Amy Binkley is used to making tough decisions for her daughter, Savannah Parks. Born with a congenital heart defect called hypoplastic left heart syndrome, which affects the normal blood flow through the heart, her daughter required a heart transplant at age 3 months. A decade later, Binkley donated a kidney to her then 11-year-old daughter. Both transplants were performed at the Monroe Carell Jr. Children’s Hospital at Vanderbilt.

Fifteen years and two transplants later, Binkley was again faced with making a lifesaving decision for her ailing child — to remain on the waiting list for a dual heart/kidney transplant or accept organs from a hepatitis C-positive donor.

Traditionally organs infected with hepatitis C, the most common blood-borne infection, would only be offered to patients who also have the disease. If the organ was not suitable for that patient population, it would be discarded. An estimated 3.5 million people in the United States are living with the chronic infection.

At the Vanderbilt Transplant Center, surgeons and physicians had already demonstrated the ability to transplant and manage both liver and hearts from a hepatitis C-positive donor into a non-positive recipient with successful outcomes.

“Because of the incredible advances in medical science, there is an antiviral therapy that cures hepatitis C,” said Ashish Shah, MD, director of Heart Transplant and Mechanical Circulatory Support at Vanderbilt and chair of the Department of Cardiac Surgery.

Pediatric patient receives heart-kidney transplant from Hepatitis C-positive donor

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Complete Story Link
Terhune and Drake named Vanderbilt University Chancellor’s Higher Education Fellows

Wonder Drake, MD, professor in the Department of Medicine and Kyla Terhune, MD, MBA, associate professor and Section vice chair for education have been named as the 2017-18 Chancellor’s Higher Education Fellows, Chancellor Nicholas S. Zeppos announced.

“This program is an investment in our people. At the same time, it charts a path forward for the university by preparing the next generation to step in to fill leadership roles,” Zeppos said. “Wonder and Kyla represent the very best of Vanderbilt and all that we stand for. I look forward to working with them throughout the year ahead.”

This marks the second year for the CHEF Program, which was established by Zeppos to foster a robust pipeline of academic leaders for Vanderbilt and higher education overall.

Complete Story Link

Cosmetic Surgery hosts Open House for VUMC employees

The Vanderbilt Center for Cosmetic Surgery hosted its inaugural Employee Open House in December. It was a huge hit!

With over 50 attendees, cosmetic surgery faculty and staff were on hand to meet patients, provide OR tours, showcase our multidisciplinary team, and provide botox injections at an employee discounted rate.

Our cosmetic surgeons include Drs. Galen Perdikis, Kye Higdon, Blair Summitt and Wesley Thayer.

Vanderbilt Cosmetic Surgery website

Retired surgical research coordinator Phillips honored at Hidden Figures event

The VUMC Office for Diversity Affairs presented “Hidden VUMC Figures,” a tribute to employees who made significant long-term contributions to the Medical Center, often behind-the-scenes. The event was organized by Andre Churchwell, MD, Chief Diversity Officer.

The four honorees were James Phillips Sr., Audrey Hall, BSN, Howard Price, and Dru Bratton-Newsom.

Phillips, who retired in 1995, was a Medical Center employee for 48 years and the longtime coordinator of Vanderbilt’s S.R. Light Laboratory Surgical Facility, where he was responsible for many successful experiments performed by surgical investigators.

C. Wright Pinson, MBA, MD, Deputy Chief Executive Officer who presented a plaque to Phillips said, “It is an honor to be able to recognize these individuals who have served and continue to serve the Medical Center with distinction, dedication and commitment. Such individuals are the lifeblood of our organization.”

Pictured above: (top) members of the Phillips family, (center) Mr. James Phillips and Dr. C. Wright Pinson, (bottom) Mr. Phillips, Dr. Pinson and Dr. Sunil Geevarghese.

Video Link
Penson named to editorial post of major cancer journal

David Penson, MD, MPH. Paul V. Hamilton, MD, and Virginia E. Howd Professor of Urologic Oncology and chair of the Department of Urologic Surgery, has been named an associate editor for the Journal of the National Cancer Institute (JNCI).

The JNCI publishes peer-reviewed original research from around the world and is internationally recognized for its up-to-date news and information from the fields of cancer research and treatment. For the past several years, the JNCI has been ranked as one of the most-cited original research cancer journals by the Institute of Scientific Information in its annual “Journal Citation Reports.”

“I am honored by the invitation to serve as an associate editor alongside the journal's highly respected editorial team,” said Penson. “The JNCI is renowned for the quality and impact of the peer-reviewed content which serves as a roadmap for cancer therapy and research.”

Penson, who also serves as director of the Center for Surgical Quality and Outcomes Research at VUMC, earned his medical degree from Boston University, followed by a fellowship in Clinical Epidemiology and Health Services Research as part of the Robert Wood Johnson Clinical Scholars Program at Yale University School of Medicine, where he also received a Master of Public Health degree.

Complete Story Link

Not all cancers need treatment right away; Penson quoted

The biopsy shows cancer, so you have to act fast, right? Not necessarily, if it’s a prostate tumor. According to a new study, men increasingly have choices if their cancer is found at an early stage, as most cases in the U.S. are. They can treat it right away or monitor with periodic tests and treat later if it worsens or causes symptoms. David Penson, MD, MPH chairman of Urologic Surgery at Vanderbilt, is quoted.

Associated Press Story Link

PSA tests aren’t great for diagnosing prostate cancer

Some better options in the works are offered in this interview with Dr. David Penson.

Los Angeles Times Story Link

Kauffmann wins the Lloyd M. Nylus Traveling Fellowship

Rondi Kauffmann, MD, MPH, assistant professor, Division of Surgical Oncology & Endocrine Surgery, recently received the Lloyd Nylus Traveling Fellowship from the US Chapter of the International Society of Surgery.

This fellowship allowed Dr. Kauffmann to attend the 47th World Congress of Surgery in Basel, Switzerland where she presented her research, and gave her the opportunity to make acquaintances and contacts with the global surgical community.

Dr. Kauffmann is actively engaged in clinical work, with major expertise in melanoma and breast cancer. She is heavily involved in resident education and her research focuses on global surgery and global cancer care.

She currently directs Vanderbilt’s General Surgery efforts in Kenya. “The Division of Surgical Oncology and I are proud to be colleagues of Dr. Kauffmann and we cannot think of a more deserving individual,” said Carmen Solórzano, MD, chief, Division of Surgical Oncology & Endocrine Surgery.

Vascular Surgery’s Brophy is part of team that published study in Scientific Reports

“Limiting Injury During Saphenous Vein Graft Preparation for Coronary Arterial Bypass Prevents Metabolic Decompensation”

Colleen Brophy, MD, professor of Surgery, is part of a team which included Charles Robb Flynn, PhD and Joyce Cheung-Flynn, PhD that published a recent study in Scientific Reports, an open access journal from the publishers of Nature.

The study revealed that using simple strategies and taking precautions can reduce the damage that saphenous vein grafts suffer when harvested and prepared for autologous coronary and peripheral arterial bypass. The findings show that damage could be avoided and preserve the graft’s conduit function and possibly improve graft patency. This work was performed with the assistance of cardiac surgeons and cardiac PA’s at Vanderbilt.

Journal Article Link
VUMC testing new system to keep donor hearts for transplant viable for a longer period of time

For decades the miracle of organ donation has relied on an ice cooler. Until now.

VUMC is one of nine centers across the United States to participate in the EXPAND Heart Pivotal Trial, which has the potential to change the way donor hearts are preserved and transported to recipients.

The trial will use a device by TransMedics called the Organ Care System (OCS) to keep the heart beating and metabolically alive during transport from the donor to the recipient. The machine is designed to keep the heart beating outside of the body (ex-vivo).

Currently, surgeons work to transplant a heart within four hours after it has been harvested from the donor’s body. OCS can extend that time frame, allowing the heart to withstand longer periods of time outside of the body.

“Traditionally, transplantation was built upon the premise that we can take an organ out, put it on ice, leave it in this metabolic quiescent state allowing you to transport that organ to the appropriate recipient,” said Ashish Shah, MD, chair of the Department of Cardiac Surgery and director of Heart Transplant and Mechanical Circulatory Support at VUMC.

“Every minute counts during cold ischemic storage, when there is no blood circulation. After three hours, the initial heart function can be compromised. It appears that the longer a heart is on ice the higher the risk that it will be impacted.

“But what if we removed the time element?” asked Shah. “The concept of leaving the organ beating, working and accessible is the next step in heart transplantation. The possibilities are wide open.”

The Organ Care System has two principal components — a portable platform and an organ-specific perfusion set. The console houses all of the necessary elements to operate the system including oxygen supply and a pump that is used to perfuse blood to the heart to keep it beating.

Complete Story Link

Chaney joins Section Finance with expertise in coding, reimbursement and quality

We hope you join us in welcoming Dominique Chaney, our new Clinical Documentation and Coding Educator for the Section of Surgical Sciences. Chaney comes to us from Houston, although she was born and raised in Memphis, Tennessee.

She is a Health Information Management and Technology professional with several years of experience specializing in tracing medical billing, coding, health insurance, anatomy and physiology, claims processing, and medical law/ethics.

We are excited to have her join our team. She will begin working with our faculty on coding and documentation to help optimize reimbursement, quality and outcomes, and other various metrics.

Section faculty receive the 2017 Excellence in Patient Experience Award from VUMC

- R. Daniel Beauchamp, MD
- Cynthia Blalock, RN, MSN, APRN
- Tracey DeWire, MSN, ACNP
- Mary Egger, APN, WHNP-BC, CBPN-IC
- Matthew Fusco, MD
- Ana Grau, MD
- Eric Lambright, MD
- Tonna McCutcheon, CGRN, APRN-BC, DNP
- Ingrid Meszoely, MD, MMHC
- Nicole Miller, MD
- Richard Miller, MD
- Scott Parker, MD
- John Thomas, MD
- D. Brandon Williams, MD
**Surgeon Danter performed patient Donatelli’s heart transplant, the 66th at VUMC in 2017, after surviving months with a LVAD**

Sixty-six year old Frank Donatelli knew the $39 he spent to join eHarmony was worth it.

The online dating site matched him with Evelyn. They married on November 8, 2016. Within months he was diagnosed with congestive heart failure and by the end of April he was placed in hospice care.

“He was admitted to the hospital, but five days later they sent him home with three to six months to live,” said a tearful Evelyn Donatelli.

“We had been home only 10 days and he was rapidly declining. I had to do something. I needed a second opinion. I wasn’t going to go down without it. I guess it’s the inquisitiveness in me.”

Frank smiled at his wife’s comment.

“I can tell you right now, I was not going to make it much longer at home,” Frank said. “Evelyn spent hours and hours, day and night on the computer, researching. I was circling the drain. I knew it. But she wasn’t giving up.”

After looking over at her then very frail, gaunt and pale husband, she picked up the phone to call the heart transplant center at Vanderbilt. She secured an appointment in the heart failure clinic on May 10.

Suzanne Sacks, MD, assistant professor of Medicine, saw Donatelli in clinic that day.

“He was the classic picture of advanced heart failure — he was a skeleton, malnourished and retaining fluid,” said Sacks. “The previous center turned off his ICD (implantable cardiac defibrillator) and sent him home on hospice.

“I told him his heart was failing, he was reaching the end of life and he was too sick for a heart transplant, but I thought there was a good chance he would be a candidate for an LVAD. I knew with that, both his quantity and quality of life would substantially improve.” Twelve days later he received an LVAD.

**Complete Story Link**

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**PROFILE**

**It’s all about the patient for surgical oncologist Solórzano**

Surgical oncologist Carmen Solórzano, MD, senses she has a reputation for being tough on residents. It doesn’t bother her.

You don’t get to be a professor of Surgery, chief of the Division of Surgical Oncology & Endocrine Surgery, and Director of the Vanderbilt Endocrine Surgery Center without setting exacting standards, both for yourself and those who work with you.

Solórzano comes by her tenacity honestly. She was born and raised in Managua, Nicaragua, and left the war-torn region in 1985 at age 19 to pursue a U.S. education, as her parents had.

*Tenacity, inquisitiveness and exactness are hallmarks of Carmen Solórzano, MD’s, approach to her career as a surgical oncologist.*

The instability during the Nicaraguan revolution depleted Solórzano’s parents’ savings, so she initially attended Miami Dade Community College, but as a resident alien, she was able to borrow money and secure a job, which allowed her to complete her undergraduate education at the University of Florida, from which she graduated in 1989.

“There was a lot of unrest and the country became fairly poor. I came to the U.S. and studied but then I didn’t go back to Nicaragua. I liked it here. A lot of my friends have gone back. My parents are still there,” she said, adding that while there was pressure for her to return home, she didn’t feel that medicine was as advanced there. “So, I stayed.”

**Complete Story Link**
Urologic Surgery’s Herrell is part of team developing imaging upgrade for robotic surgery

Removing part of a kidney with minimally invasive robotic surgery rather than an entire kidney when operating for smaller tumors is often best for patients from a recovery and health standpoint, but many surgeons hesitate to do so because of the complexity of the robotic partial nephrectomy procedure.

Investigators with the Vanderbilt Institute for Surgery and Engineering (VISE) hope to change that by developing an image guidance interface for robotic surgery systems. This will give doctors a three-dimensional map of subsurface tumors, delicate blood vessels and other structures before they make incisions, so that they can cut in exactly the right place.

A Vanderbilt team led by a urologic surgeon and biomedical and mechanical engineers has received a four-year National Institutes of Health (NIH) grant to develop enhanced software that will create a “surgical GPS” system to provide intraoperative guidance to surgeons performing partial kidney removal with the da Vinci robotic surgery system.

“It’s our goal to make minimally invasive partial nephrectomy the gold standard for how patients with appropriate kidney masses are cared for surgically, as clinical evidence shows it should be,” said S. Duke Herrell, MD, professor of Urologic Surgery, Biomedical and Mechanical Engineering, and director of Minimally Invasive Urologic Surgery and Robotics. “This innovation has the potential to dramatically enhance long-term outcomes and quality of life for patients by preserving kidney function and saving lives by more accurately removing masses and reducing positive tumor margin rates.”

Complete Story Link

Neurologic researcher Englot to receive the Kumar Award from the North American Neuromodulation Society

Dario Englot, MD, PhD, assistant professor of Neurological Surgery was selected by the North American Neuromodulation Society (NANS) for the 2018 Kumar New Investigator Award. This award is given to honor the legacy of Dr. Krishna Kumar and is provided by a gracious grant from Medtronic. All applications were reviewed by a committee composed of outstanding scientists who have made important contributions to science and neuromodulation. This grant was given to encourage him to conduct scientific work in the exciting arena of Neuromodulation, cover travel expenses incurred during his travel to the 2018 NANS Annual Meeting, and recognize his outstanding originality and ingenuity in the scientific manuscript that was submitted.

The award will be presented on stage during the plenary session on January 13, 2018. Englot will also make a presentation to the conference attendees.

Englot to chair task force drafting surgery recommendations for the International League Against Epilepsy

Patients with epilepsy who suffer seizures that can’t be effectively treated with medications or established surgical interventions could benefit from responsive neurostimulation, a relatively new treatment.

“This is definitely a treatment that could help that people don’t know about,” said Dario Englot, MD, PhD, assistant professor of Neurological Surgery.

The treatment, which was approved by the U.S. Food and Drug Administration in 2013, involves surgically implanting a neurostimulator under the scalp with leads that go into the brain to the source of the seizures.

Complete Story Link
American College of Surgeons lauds Vanderbilt Trauma Center

The country’s leading surgical care organization first bestowed its highest stamp of approval on the Trauma Center in 2014, and renewed this designation following a recent site visit.

While VUMC has operated for more than a quarter-century as the region’s only provider of Level 1 trauma care, verification from the ACS goes beyond state-level requirements and affirms that Vanderbilt’s Trauma Center is among the best in the country.

Veteran of the U.S. Coast Guard receives rare dual transplant of heart and liver at Vanderbilt

A veteran of the U.S. Coast Guard recently received a new heart and liver at VUMC, one of only a handful of hospitals that have performed the dual transplant surgery this year.

Michael Wilcher underwent the surgery on June 28.

“I am forever indebted,” he said. “The VA and Vanderbilt came in and stepped up to the plate just when we needed them the most.”

Wilcher, 58, of Wilmington, Del., ended up at VUMC through the Veterans Health Administration because medical centers in his network closer to his home did not have the expertise to do the procedure. Only 18 heart and liver transplants occurred at U.S. hospitals in all of 2016, according to data from the Organ Procurement and Transplantation Network (OPTN).

“We are also indebted to the family of the donor,” said his wife, Celeste Wilcher. “We appreciate them. We are grateful and we pray to God for their continued healing on the inside because they lost somebody important.”

Organ recovery teams flew from Nashville the night before the surgery to retrieve the heart and liver. They were back with the organs hours before sunrise. Wilcher had been wheeled into an operating room at 1 a.m. waiting their arrival.

“The organs arrived back by 2 a.m. or 2:30 a.m.,” said heart transplant surgeon Ashish Shah, MD, professor of Cardiac Surgery. “We started the heart transplant first. That was done by 4:30 a.m. or so. We gave him a little bit of time to make sure the heart was working okay. Then the liver team started around 6 a.m. He was done and back in ICU by 11 a.m.”

“I am forever indebted,” he said. “The VA and Vanderbilt came in and stepped up to the plate just when we needed them the most.” - Michael Wilcher

The same day as the surgery, Wilcher was up and eating breakfast and making a special request for oatmeal.

Seth Karp, MD, H. William Scott Jr. Professor of Surgery and director of the Vanderbilt Transplant Center, along with Sunil Geevarghese, MD, MSCI, associate professor of Surgery, were the liver surgeons for the dual transplant.

“This transplant was made possible by the remarkable partnership between the Veterans Affairs hospital system and Vanderbilt,” Karp said. “We are so proud to be able to provide the very best care to our veterans. In addition, the vision of leadership of Sophoclis Alexopoulos, MD, chief of Liver Transplantation at Vanderbilt, Dr. Shah and Dr. Joseph Awad, chief of transplantation at the VA (Tennessee Valley Healthcare System), allowed us to develop this program and will hopefully enable us to expand it to the growing number of patients who can benefit.”

Complete Story Link
Patient Mock, treated by bariatric surgeon Aher, benefits from new LINX surgery for gastric reflux

For three years, 79-year-old Jerry Mock didn’t fully enjoy family vacations or gatherings with friends because his gastro-esophageal reflux disease (GERD) was so debilitating that eating even a bite of food after 1 p.m. guaranteed he’d have intense burning pain in his throat and chest that night.

Now, instead of saving dinners in the refrigerator to heat up for breakfast, Mock is looking forward to seafood feasts in Florida during his Christmas vacation. He credits Chetan Aher, MD, assistant professor of Surgery, for performing the laparoscopic surgery six months ago that resolved his problem.

“Before surgery, I wasn’t living life to the fullest at all,” Mock said. “I had tried all the medications, but if I ate any later than 1 p.m., I would wake up with horrible burning in my nose and throat, and I would keep coughing up acid. I went to three different doctors who said they couldn’t do anything for me. After one doctor said he couldn’t help, my wife and I both came out of his office crying.”

Mock was referred to see Aher at Vanderbilt, a 300-mile drive from his hometown of Elizabethton, Tennessee, a journey he didn’t mind if it meant living normally again. Aher recommended minimally invasive surgery to address his GERD. Mock had developed a large hiatal hernia, and much of his stomach had actually moved up into his chest through the opening in his weakened diaphragm, the muscle separating the abdomen from the chest.

“We used a laparoscopic surgical approach using five small incisions,” Aher said. “We brought everything down, secured everything in the right place and repaired the hernia. He immediately began doing much, much better.”

Twenty to 30 percent of the U.S. population experiences chronic acid reflux or GERD. For many, the treatment includes dietary and lifestyle changes, as well as taking antacids or proton pump inhibitor (PPI) medications such as Prilosec and Nexium.
Although he was in a deep coma, Fort Campbell soldier Marshal Castillo is convinced that hearing nurses speaking his name, feeling them touching him and explaining their daily care routines was what kept him tethered, clinging to life in the intensive care unit so he could continue healing.

“Being comatose is not an absence of presence, so the nurses physically touching me, talking to me — just being there — helped me feel just a little less scared,” said Castillo, who spent 27 days in the Surgical Intensive Care Unit (SICU) at Vanderbilt University Medical Center (VUMC). “The compassion, the caring and the level you’re willing to go to for someone going through what I went through, that is invaluable. You guys get patients that are in the worst states and somehow you love them and care for them like they’re your own family.”

Castillo, who had just returned from a deployment with his Fort Campbell-based military unit when he became ill, has since been diagnosed with Ehlers-Danlos syndrome type IV. The genetic vascular-connective tissue disorder caused a life-threatening perforation of his small intestine. He and other former patients of the SICU and the Trauma Intensive Care Unit (TICU) at VUMC recently returned to the adult hospital to share their continued recoveries and their gratitude with those they credit with saving their lives.

The genetic vascular-connective tissue disorder caused a life-threatening perforation of his small intestine. He and other former patients of the SICU and the Trauma Intensive Care Unit (TICU) at VUMC recently returned to the adult hospital to share their continued recoveries and their gratitude with those they credit with saving their lives.

Castillo’s story, as well as the stories of other patients who have recovered from critical illness or trauma, are featured on a Great Saves display along a SICU hallway.

Chung’s pediatric trauma team raced to save patient who suffered freak injury at her school gym

Macie Glover sprinted across the gym floor at school earlier this year, tripped and crashed into a wall. In a bizarre sequence of events, she hit her head and arm and scraped her knees as the force of the crash propelled her whole body arching backward into a crescent shape.

“I hit the ground. I couldn’t breathe. Whenever people asked what was hurting me, I said it was my stomach and my elbow. Everyone was worried about my head. My head never hurt, even to this day,” said Macie, a 13-year-old freshman at Lawrence County High School.

CT scans of her head at a local hospital were clear. After persistent pain in her abdomen in the hours that followed, doctors performed another CT, this time of her stomach. The images revealed her pancreas had split in half.

Macie was a ticking time bomb. What the Glover family thought would be an ambulance trip to Monroe Carell Jr. Children’s Hospital at Vanderbilt quickly turned into a helicopter ride.

“The clock was ticking. Her pancreas was completely torn in half,” said Dai Chung, MD, professor and chair of the Department of Pediatric Surgery.
Terhune inspires resident Carter and biomedical engineering student to develop laparoscopic abdomen simulator

George Washington University biomedical engineering student Sydney Bailes spent her summer carefully creating silicone layers of precise consistencies, and she hopes to spend winter break continuing work on the project that can one day help junior surgical trainees practice a critical skill — inserting surgical instruments for abdominal surgeries.

Understanding the abdomen’s anatomy is crucial to safely inserting a trocar, a long, hollow metal surgical instrument used during laparoscopic surgery, and Bailes was tasked with creating a lifelike abdominal model, complete with every layer: skin, fat, muscle, fascia, pre-peritoneal fat and the peritoneum. The model is intended to give medical trainees practice entering the abdomen with an open technique, as well as experience inserting a trocar through layers that mimic the resistance of actual tissue.

Bailes was assigned the summer internship project by Kyla Terhune, MD, MBA, associate professor of Surgery and director of the General Surgery residency program at Vanderbilt University School of Medicine, and she worked with Nick Carter, MD, a Surgery resident with a special interest in education.

Complete Story Link

RESIDENT FEATURE - Mary Austin, Resident Class of 2007

A surgeon’s secret: As she operated on babies’ birth defects, a doctor hid her own diagnosis

HOUSTON — For many years, Dr. Mary Austin could count on one hand the people who knew.

There was her close friend through middle school, who helped her pee by pushing on her lower abdomen. Years later, during her surgical training at Vanderbilt University, she confided in a mentor. Her husband knew, of course. But until now, she hadn’t told even some of her close colleagues — or her patients.

Sometimes these patients are pregnant women, wrestling with a daunting decision: Whether to consent to a delicate surgery on their babies, in utero, to try to close a hole around the fetus’ spinal cord.

The birth defect is called spina bifida. Untreated, it can cause a range of disabilities, from incontinence to learning difficulties to an inability to walk. But the surgery carries some risks, too; it can send the mothers into premature labor, months before their due dates — and there’s no guarantee it will prevent physical disabilities in the baby.

Austin, a pediatric surgeon, helps counsel couples through that agonizing decision. She walks them through the potential risks and benefits. She describes each step in the hours-long surgery, from slicing open the uterus to closing the gap around the spinal cord with tiny stitches through developing fetal tissue so fragile, it’s almost “like tissue paper,” she said, vulnerable to tearing.

What she doesn’t tell them: She herself has spina bifida.

Complete Story Link
Terhune nominated to the Executive Leadership in Academic Medicine Program

Kyla Terhune, MD, MBA, associate professor of Surgery and Section vice chair for Education, has been selected as one of two Vanderbilt candidates eligible to apply to the 2018-2019 Drexel University College of Medicine Executive Leadership in Academic Medicine (ELAM) Program for Women. If she is chosen for participation, Dr. Terhune will gain knowledge in strategic finance, personal and professional leadership effectiveness, and academic organizational dynamics.

Established in 1995, the prestigious Hedwig van Ameringen ELAM program offers an intensive one-year fellowship of leadership training with extensive coaching, networking and mentoring opportunities aimed at expanding the national pool of qualified women candidates for leadership in academic medicine, dentistry and public health.

Despite the greater numbers of women matriculating at our nation’s medical, dental and public health schools, women are still significantly underrepresented within the topmost administrative ranks of academic health centers (AHCs), even though there is a widely acknowledged need to diversify leadership and improve cultural and gender sensitivity in health care training and delivery.

Vanderbilt doctors explain devastating damage of gunshot wounds; Guillamondegui interviewed

In the wake of the Las Vegas mass shooting, reporters wanted to ask VUMC experts about the preparations to deal with so many victims.

News organizations working on such stories included The Tennessean, WebMD, Healthline, WSMV News 4, WKRN News 2, and MedPage Today. Those interviewed included Oscar Guillamondegui, MD, professor of Surgery; Corey Slovis, MD, professor and chair of Emergency Medicine; Alex Jahangir, MD, medical director of the Vanderbilt Center for Trauma, Burn, and Emergency Surgery; and Jeff Mangrum, director of Emergency Preparedness. In addition, Jon Ebert, PsyD, associate professor of Clinical Psychiatry and Behavioral Sciences, spoke to WKRN News 2 about how parents can discuss traumatic events in the news with their children.

Drolet study published in JAMA questions fees of medical specialty boards against the expense

Physicians have been objecting to the high cost of the certification fees of the American Board of Medical Specialties (ABMS) member boards for many years, and a research letter published recently by the Journal of the American Medical Association (JAMA) shows that the revenue of these boards greatly exceeded expenditures in 2013.

When Brian Drolet, MD, an assistant professor in the Department of Plastic Surgery at Vanderbilt, and Vickram Tandon, MD, a Plastic Surgery resident at University of Michigan, Ann Arbor, investigated fees charged to physicians for certification examinations and the finances of the 24 ABMS member boards, they discovered those boards had a combined surplus of $24 million in fiscal year 2013, the most recent year of publicly available records.
The Vanderbilt Task Force for Empowerment and Well-Being 16 member committee co-chaired by Thompson

A new VUMC Task Force for Empowerment and Well-being, a 16-member multidisciplinary group formed earlier this year to develop a deeper understanding of the nationwide problem of physician burnout and suggest solutions at VUMC, has made its initial recommendations.

Acknowledging that physician burnout is an issue at all medical centers, the task force seeks to identify ways to improve physician well-being through sustainable change. Across the U.S. physicians are under increasing stress through longer work hours, a continually changing health care landscape, increasing governmental and regulatory mandates and other factors that erode their ability to spend quality time with patients.

A 2016 analysis conducted by the American Medical Association and the Mayo Clinic of 6,880 physicians evaluated the prevalence of burnout and satisfaction with work-life balance relative to the general U.S. population in years 2011 and 2014. The 2014 follow-up survey found a nearly 10 percent increase of at least one sign of burnout, and varying degrees of burnout among specialties.

The task force was appointed by Jeff Balser, M.D., Ph.D., President and CEO of VUMC and Dean of the School of Medicine, and C. Wright Pinson, MBA, M.D., Deputy CEO and Chief Health System Officer, and is co-chaired by Reid Thompson, M.D., William F. Meacham Professor of Neurological Surgery, and Mary Yarbrough, M.D., MPH, associate professor of Clinical Medicine and executive director of Faculty and Staff Health and Wellness.

Other members of the Task Force include: Bruce Beyer, M.D., Charlene Dewey, M.D., Cristina Estrada, M.D., Jaco Hamman, Ph.D., Katherine Hartmann, M.D., Ph.D., Sarah Krantz, M.D., Robert Labadie, M.D., Ph.D., Fred Lamb, M.D., Ph.D., Steve Meranze, M.D., Richard Miller, M.D., Paula Smith, M.D., Kyla Terhune, M.D., Liza Weavind, MBCh, and Beth Ann Yakes, M.D.

Danter part of surgical team performing concurrent cesarean section and cardiac repair

As people in Middle Tennessee were experiencing the remnants of Hurricane Harvey during the early hours of Sept. 1, Catherine Hurt was battling another storm of her own.

At 33-weeks pregnant, Hurt was told she had an aortic dissection, a diagnosis that had taken the lives of her mother and younger brother.

Acute type A aortic dissection is a tear that begins in the ascending aorta and progresses throughout the vessel, often extending as far as the arteries in the leg and requires emergency intervention to prevent death from stroke, heart attack, congestive heart failure or bleeding.

Hurt, from Ohio County, Kentucky, needed immediate, life-saving surgery that her local hospital was unable to provide. With the clock ticking, physicians at Vanderbilt University Medical Center began preparing for Hurt and her unborn child’s arrival.

“Aortic dissection is a deadly disease with few options for successful outcome save urgent surgery,” said Joshua Beckman, MD, MSc, director of Vanderbilt’s Section of Vascular Medicine. “To have this occur during the third-trimester of pregnancy only increases the risk.

“The cardiac surgical, high-risk obstetrics and neonatal team demonstrated why Vanderbilt is a special place, ready to care for our patients who walk in to the facility and for those for whom we are the last line of hope,” said Beckman.

While J. Newton, MD, assistant professor of Maternal-Fetal Medicine and director of Labor and Delivery, performed the cesarean section to save the baby, Matthew Danter, MD, assistant professor of Cardiac Surgery, repaired the aortic dissection.

The concurrent emergency surgeries required a collaborative effort, said Newton.
Kolobova led a new study based on findings from a 1999 study conducted by Goldenring

Because of its essential role in the cell cycle, microtubule assembly is the target of essential anti-cancer chemotherapies (paclitaxel, for example), which stop out-of-control cell division by destabilizing microtubules. Now, Vanderbilt researchers have shed light on the role that a large, enigmatic protein plays in assembling microtubules, paving the way for better treatments. The results of the research are published in the Dec. 15 issue of the *Journal of Biological Chemistry*. **Elena Kolobova**, PhD, research instructor in surgery, led the new study that was based on findings from a 1999 study conducted by **James Goldenring**, MD, PhD, Paul W. Sanger Professor of Experimental Surgery.

Other authors collaborating on the paper were: **Joseph Roland**, PhD and **Lynne Lapierre**, PhD.

[Complete Story Link](#)

[Journal Article Link](#)

Meszoely contributes to breast cancer study identifying “potentially druggable” changes

Thanks to advances in treatment, the relative five-year survival rate from all combined subtypes of breast cancer now exceeds 90 percent and yet the disease remains the third leading cause of cancer deaths in the United States after lung and colorectal cancers.

More than 40,000 American women will die from breast cancer this year – approximately 80 percent of them because their tumors are resistant to anti-estrogen therapy and have metastasized, or spread to other parts of their bodies.

Now researchers at Vanderbilt have used tumor genomic profiling to identify “potentially druggable” changes in breast cancers that are positive for the estrogen receptor (ER) following short-term estrogen suppression.

Other Vanderbilt faculty members who contributed were **Justin Balko**, PharmD, PhD, **Ingrid Meszoely**, MD, **Yu Shyr**, PhD, **Vandana Abramson**, MD, **Ingrid Mayer**, MD, MSCI, and **Melinda Sanders**, MD.

[Complete Story Link](#)

[Journal Article Link](#)

Stomach cells change identity to drive precancerous state

**The Scientist:** A study suggests that “chief” cells in the stomach act as reserve stem cells that are activated by tissue damage and may be the long-sought source of gastric cancer. Related research by **James Goldenring**, MD, PhD, vice chair of Surgical Research, is referenced.

[Complete Story Link](#)

Chung leads study on boosting Ewing sarcoma cell death with colleagues Rellinger, Padmanabhan and Beauchamp

Ewing sarcomas – rare, aggressive childhood cancers – are derived from mesenchymal cells in bone and soft tissues, and children with metastatic disease have poor survival.

In a search for new therapeutic options for Ewing sarcoma, **Dai Chung**, MD, and colleagues tested a compound previously identified at Vanderbilt, ML327, that induces the expression of the cell adhesion protein E-cadherin. E-cadherin, a hallmark of epithelial cells, is often lost as cancer cells become invasive. Its re-expression in epithelial cancers blocks cell invasiveness.

Now, the investigators have demonstrated in Ewing sarcoma cells that ML327 increases E-cadherin and alters the expression of other proteins, consistent with a mesenchymal-to-epithelial transition in the cells. ML327 also increased cell death, and had additive effects with a cell death-inducing ligand called TRAIL that has been tested for Ewing sarcoma.

The findings, reported in the Sept. 16 issue of *Biochemical and Biophysical Research Communications*, support further study of ML327, both alone and in combination with TRAIL-based strategies, in the treatment of sarcomas.

This research was supported by grants from the National Institutes of Health (DK061470), American College of Surgeons Resident Research Scholarship, and Rally Foundation for Cancer Research.

Other authors collaborating on the paper were: **Eric Rellinger**, MD, **Sekhar Padmanabhan**, MD and **Dan Beauchamp**, MD.

[Complete Story Link](#)

[Journal Article Link](#)
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DEPARTMENT OF UROLOGIC SURGERY
Assistant in Urologic Surgery
Taylor Winkler, PA-C

For its annual community service project, VUMC’s Section of Surgical Sciences collected travel-size toiletries to make 200 care packets for guests of the Hospital Hospitality House (HHH) of Nashville. Accepting the donation were Robin Morris, director of HHH Volunteer and Outreach Services (second from left), and Bailey Poage, guest service coordinator (far right). Section staff members Dan Ott, MHA, CPC (far left), and Yvonne Snyder (second from right), coordinated the project.
Dear Colleagues,

A few changes will be made for the upcoming MMI conference going forward. We want to give you plenty of notice before the next MMI conference on Friday, March 2, 2018.

1. Attendance/CME credit will only be documented via the text-in option. Please follow the instructions provided to quickly set up an account.
2. Seating will be moved to the lower section of the auditorium only.
3. The conference will begin promptly at 6:25 am.
4. We will no longer provide coffee.

Thank you for your compliance with the new changes.

Sincerely, Oscar

Major changes at the MM&I quarterly conferences process of documenting faculty and staff attendance

Attendance will no longer be taken via badge readers. Attendance and CME credit will be documented using the text-in option. In order to use the text-in option, everyone MUST create a CME account before the March 2nd event.

Here’s how to set up your accounts

Create your CME account and profile (for VUMC users)

1. Visit https://cme.mc.vanderbilt.edu/
2. Log in with your VUnetID and password
3. Enter your profile information
4. Provide your mobile phone number
5. Confirm your mobile phone number
6. Save the SMS text number on your phone as: VCME Attendance 855-776-6263

Create your CME account and profile (for non-VUMC users)

Below are the steps for a non-VUMC user to create an account in Vanderbilt CME. The user will log in with their work email address rather than their VUnetID. To log in once the account has been created, visit https://cme.mc.vanderbilt.edu, click Login and select Non-VUnetID Login.

1. Visit https://cme.mc.vanderbilt.edu/user/register
2. Enter your email address and a password (mobile number is optional)
3. Click Create a New Account.
4. On the following page, enter your information and click Save
5. You may now access the Vanderbilt CME system

SCHEDULE FOR 2018 - 2019

- June 1, 2018
- September 7, 2018
- December 7, 2018
- March 1, 2019
- June 7, 2019
Visit and engage with the new Section Twitter account @VUMCSurgery

We are continually striving to keep communications open and active between all members of the Section faculty and staff.

Welcome to the new Section Twitter account. We will gladly post any broadly newsworthy items and photos that are deemed relevant to our audience. You are welcome to “Like”, comment, and follow us and we will retweet your posts as well.

Departmental/Divisional accounts can be requested online by going to this website and following directions for request: Vanderbilt.edu/socialmediatoolkit.

@VUMCSurgery Link

Annual Lectures 2018 for Section Departments and Divisions

Gavin Lectureship
Division of Trauma and SCC
February 2, 2018, Mitchell J. Cohen, MD

Scott Society Lecture
Department of Surgery
March 2, 2018, Fred A. Weaver, MD, MMM

Dale Lecture
Division of Vascular Surgery
April 6, 2018, Jeffrey H. Lawson, MD, PhD

Hall Lecture
Department of Oral & Maxillofacial Surgery
April 14, 2018, John R. Zuniga, DMD, MS, PhD

McCleery Lecture
Department of Surgery
May 11, 2018, Jo Shapiro, MD, FACS

Thuss Lecture
Department Plastic Surgery
May 25, 2018, Tim Marten, MD

L.W. Edwards Lecture
Department of Surgery
October 12, 2018, Nita Ahuja, MD, MBA

Holcomb Lecture
Department of Pediatric Surgery
Date and Speaker TBD

Rollin Daniels Lecture
Alternate years Division of Adult and Pediatric Cardiac Surgery and the Department of Thoracic Surgery
Date and Speaker TBD