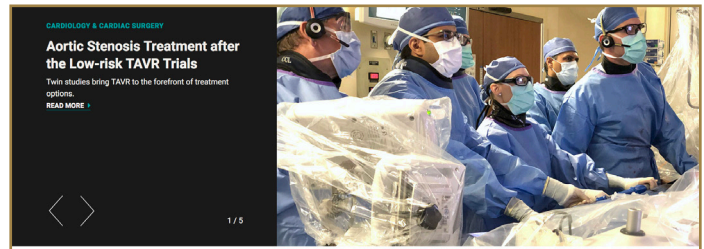
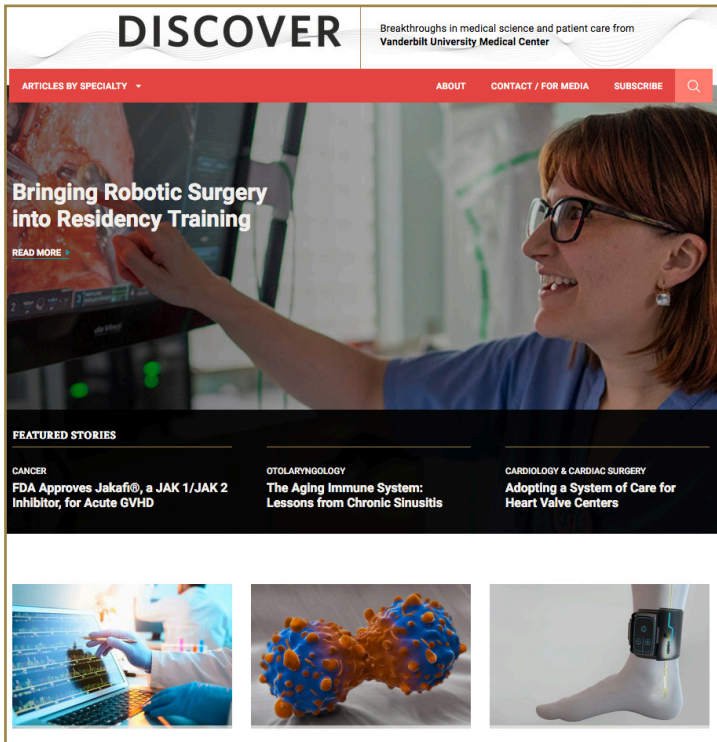


Section News

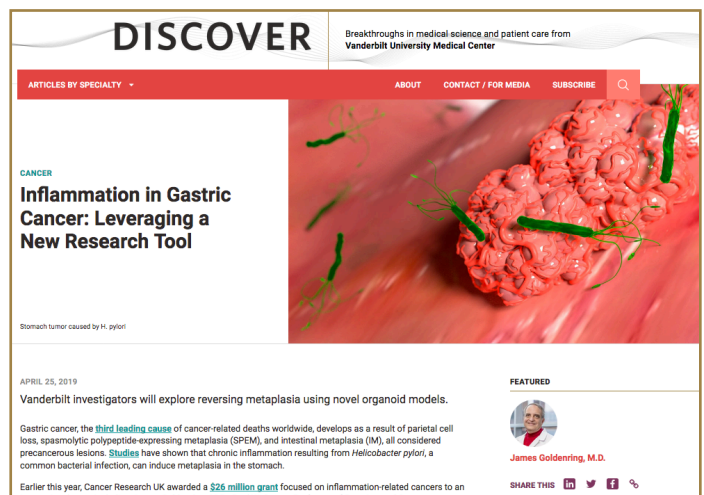
Vanderbilt Section of Surgical Sciences

SPRING 2019

New online journal, *Discover*, promotes VUMC research, medical and surgical innovations nationally



Thoracic surgeon Erin Gillaspie, MD, MPH, cardiac surgeon Melissa Levack, MD and researcher James Goldenring, MD, PhD were among many Section physicians featured recently in the online journal *Discover.vumc.org*



To better connect with our patients and spread the word about exciting discoveries, VUMC is starting a new online journal showcasing VUMC as an exciting digital presence. *Discover* stories are written for physicians, physician-scientists and clinicians, covering VUMC's latest research advances and specialty care offerings. Recent stories have featured cardiac surgery, gastric cancer research and robotic surgery in resident training. Please check it out if you have time, and feel free to contribute your work.

Discover stories are emailed to subscribers in a personalized newsletter sent every other Thursday. All faculty in Surgical Sciences should be receiving a biweekly *Discover* email. If you are not receiving it, please check your VUMC spam filter on Thursday evenings. Select "Release and Approve Sender" (one-time only) to unblock *Discover* emails. Anyone can sign up for *Discover* emails by visiting the website.



Dr. Karp

Discover stories are also emailed nationally to physicians in the 16 specialties ranked by *U.S. News & World Report*, and shared on social media. Sharing *Discover* stories on your social media is easy and highly encouraged. To post a *Discover* story to your LinkedIn or Twitter account, click one of the social media icons found at an article's top (when viewed on a desktop computer) or bottom (when viewed on a mobile phone). Contact Joshua.j.palmer@vumc.org with your latest news and innovations.

Seth Karp, MD
Chair, Section of Surgical Sciences

Solórzano named chair of Department of Surgery



Carmen Solórzano, MD, professor of Surgery and former chief of the Division of Surgical Oncology and Endocrine Surgery, has been named chair of Vanderbilt's Department of Surgery.

Solórzano had been serving as interim chair since last summer while a national search was conducted to fill the position vacated by **Seth Karp, MD**, H. William Scott Jr. Professor. Karp now serves as the chair of the Section of Surgical Sciences.

"Dr. Solórzano has proven herself a master surgeon and educator with a national and international reputation treating disease of the thyroid, parathyroid and adrenals," said Karp. "She has held multiple national leadership positions in surgery. A recent recipient of the Sawyers Teaching Award, Dr. Solórzano is an ideal mentor for faculty, residents and students and is the personification of the spirit of collaboration and collegiality that makes Vanderbilt unique."

"Under her leadership over the past five years, the Division of Surgical Oncology & Endocrine Surgery grew significantly, as has the Department of Surgery over these past months as she served as interim chair. I look forward to working with her to develop her vision for the clinical, educational and scientific missions of the largest department in the Section of Surgical Sciences."

Solórzano specializes in endocrine surgery, including neoplasms and cancers of the thyroid, parathyroid and adrenal glands, the pancreas and digestive system, as well as neuroendocrine tumors. She has authored more than 150 publications and lectured around the world.

"I am honored to be selected for this very important position," Solórzano said. "As I reflect on my surgical career so far, the most rewarding moments continue to be caring for patients at their most vulnerable moment, mentoring learners and colleagues, and collaborating with scientists to advance discovery."

"I want the Department of Surgery and VUMC to continue to be a place where faculty, learners and researchers can experience fulfillment in our mission which is centered on providing the highest quality and compassionate care to our patients."

Solórzano is a member of the American Surgical Association, Southern Surgical Association, Society of University Surgeons, Association for Academic Surgery, American Thyroid Association, Society of Surgical Oncology, and the Western Surgical Association, among others. She serves on editorial boards for the *Journal of Thyroid Research*, *Journal of Surgical Oncology*, *Annals of Surgical Oncology* and *World Journal of Surgery*, and she was recently named vice president of the American Association of Endocrine Surgeons and Governor of the American College of Surgeons.

Solórzano came to the United States from Nicaragua at 19 to pursue an education. A graduate of the University of Florida, she earned Phi Beta Kappa honors as an undergraduate and Alpha Omega Alpha honors as a medical student. She remained at the University of Florida to complete her general surgery residency. She moved to Texas as a post-doctoral research fellow before completing a clinical fellowship in surgical oncology at MD Anderson Cancer Center.

Solórzano returned to Florida as assistant professor of Surgery at the University of Miami and rose to become chief of Endocrine Surgery. She was recruited to Vanderbilt in 2010 as professor of Surgery and director of the Endocrine Surgery Center. In 2012, she also became chief of the Division of General Surgery at the Nashville VA Medical Center (NVAMC). In June 2018, she was honored by the chief resident class with the John L. Sawyers Award for her outstanding contributions to surgical education.

[Complete story link](#)

Forbes to help lead kidney, pancreas transplant program

Rachel Forbes, MD, MBA, assistant professor of Surgery, has been appointed associate chief of the Division of Kidney and Pancreas Transplantation. In her new position, Forbes will work to promote the Vanderbilt Transplant Center's innovative and specialized transplant programs by increasing physician-led outreach to referring providers, said **David Shaffer, MD**, professor of Surgery and chief of the Division of Kidney and Pancreas Transplantation. She will continue the center's work to expand access to kidney transplantation including use of hepatitis C-positive kidney donors, telemedicine for referral and waitlist patients, and kidney paired donation.

"Dr. Forbes is a rising star both in the Vanderbilt Department of Surgery and nationally in the field of kidney transplantation," Shaffer said. "She is known as the consummate team player and collaborator who easily reaches across disciplines in the transplant center and the medical center to accomplish our goals."

Forbes is a graduate of Vanderbilt University, receiving her Bachelor of Science in 2001 and her medical degree in 2005. She completed a general surgery residency here in 2010 and transplant and surgical critical care fellowships

at the Ohio State University Medical Center before joining VUMC's Division of Kidney and Pancreas Transplantation in 2013.

Since December 2016, Forbes has been surgical director of the Living Donor Program, where she has been instrumental in reorganizing and streamlining the donor evaluation workflow, resulting in a significant increase in living donor transplants.

She has also led VUMC's paired donor exchange program, leading to additional living donor transplants. Forbes was recently given the Chair's Faculty Excellence in Teaching award and also works with transplant fellows, serving as associate program director for the recently created transplant surgery fellowship.



Dr. Forbes

[Complete story link](#)



Bacchetta and colleagues publish study that shows significant improved lung function and cellular regeneration which may boost supply of donor lungs

About 80% of donor lungs are too damaged to be considered for transplantation, but a new technique could rehabilitate many of them to the point where they could be.

The new technique could potentially add to a limited supply of donor organs for an increasing population with end-stage lung disease, according to research from **Matthew Bacchetta, MD, MBA, MA**, associate professor of Thoracic Surgery.

Bacchetta and colleagues from Columbia University studied a novel interventional platform using cross-circulation from an animal model. The method resulted in significantly improved lung function and cellular regeneration, and allowed researchers to develop diagnostic tools for non-invasive organ evaluation and repair, according to the study published in *Nature Communications*.

"Our work has established a new benchmark in organ recovery," Bacchetta said. "It has opened up new pathways for translational applications and basic science explo-

ration. We have spent years refining this technology to improve the recovery and regeneration of organs."

The study focused on lungs injured by gastric aspiration, or the introduction of material from the stomach to the lungs. Many lungs rejected for transplant have gastric aspiration or a similar type of injury, Bacchetta said.

Current methods of preserving lungs only give doctors about six hours to assess them, which is insufficient time to rehabilitate them, Bacchetta said. His team demonstrated that the cross-circulation technique could maintain lungs for 36 hours, giving doctors time to rehabilitate the lungs and test new interventions. The regenerated lungs met criteria for transplantation, something that wasn't possible with existing methods.

As doctors refine the new technique, Bacchetta foresees expanding the time to work on organs to days or even weeks.

[Complete story link](#)
[WSMV story link](#)

First artificial heart patient gets his permanent replacement



Tim Lowell, here with his wife, Ginger, was Tennessee's first total artificial heart transplant patient. He recently received a permanent donor heart.

Tim Lowell of Hernando, Mississippi, received the first total artificial heart in the state of Tennessee when the VUMC cardiac surgery team placed the device in his chest last fall. The mechanical heart kept him alive for nearly three months until a matching human donor heart became available and he was transplanted at VUMC.

Lowell, 57, who was at the end stage of congestive heart failure before receiving the artificial heart, was recently released from Vanderbilt Stallworth Rehabilitation Hospital and is continuing to recover at a private apartment in Nashville. In addition to a new human heart, he also has a new kidney, transplanted the day after his heart.

"The staff over at Vanderbilt did everything in the world to get me better," Tim said. "The nurses did everything to get me comfortable. There are a lot of good people over there."

The cardiac surgery team used a SynCardia Total Artificial Heart, a mechanical solution for a patient's failing heart, whereby surgeons remove the patient's heart and replace it with an artificial device, eliminating risks associated with leaving a diseased heart in place.

Artificial heart technology has been around for several decades, but now advanced teams have the expertise to understand which patients benefit most from

implantation, said **Ashish Shah, MD**, professor and chair of Cardiac Surgery. The device is not currently intended for use as a permanent replacement for a heart; rather it is a temporary implantation that can save a patient's life before a permanent donor heart becomes available for transplant.



Dr. Shah

"Our goal of saving [Tim's] life certainly brought out the best in what is already a world-class group." — Dr. Shah

[Complete story link](#)

As thousands wait for transplants, medical centers fight to keep livers close to home

A lawsuit over how to distribute donated livers to dying patients took some startling turns recently.

The United Network for Organ Sharing (UNOS) is returning for the moment to an earlier system for distributing donated livers which it had changed earlier, after a federal court in Atlanta threatened to hold the agency in contempt.

"Reprogramming this complex and important system is not a simple process, and will take time to execute," UNOS spokeswoman Anne Paschke said in a written statement. "However, it is underway now and UNOS will have a greater sense of when the work will be completed soon."

UNOS is a national nonprofit that has a federal contract to manage the U.S. organ transplant system. It began revising the system for distributing livers in 2012.

There are 13,489 U.S. patients waiting for a liver transplant, according to UNOS. In 2018, 1,176 people died on waiting lists.

*"The more complex the distribution scheme is, the more chances you have of not using the liver," **Seth Karp, MD**, professor and chair, Section of Surgical Sciences says.*

The new policy, known as the "Acuity Circles Policy," was adopted by the UNOS in its capacity as the nation's Organ Procurement Transplantation Network (OPTN). The policy will result in a dramatic shift from sharing donor livers based on patients' medical needs within their region of the country to sending donor organs up to 500 nautical miles away from each donor hospital.



Dr. Karp

[NPR story link](#)

[NBC story link](#)

[WTVF story link](#)

Idrees performs VUMC's first isolated limb infusion

HIPEC chemotherapy surgery helps save patient's leg



Tom Deweese can keep up with his grandchildren because of a highly specialized surgery using hot chemotherapy that saved his leg. In certain advanced melanoma and sarcoma or bone cancers, amputation is used to treat these cancers that develop in a person's limb. Faced with

that prospect, Deweese opted for isolated limb infusion instead of amputation. He had multiple tumors that were eradicated with the procedure.

VUMC is one of only a few hospitals where chemotherapy can be administered during surgery. The treatment is offered by Vanderbilt-Ingram Cancer Center's (VICC) Regional Cancer Therapy clinic.

"The concept is that there are areas or regions of the body that are unique where we can surgically administer heated chemotherapy in that particular region or organ without affecting the rest of the body," said **Kamran Idrees, MD, MSCI, MMHC**, director of Hepatobiliary, Pancreas and Gastrointestinal Surgical Oncology and director of the Peritoneal Surface Malignancy Program at VICC. "This allows us to give a really high dose to that particular organ that is diseased while sheltering the rest of the body from the side effects and toxicities of chemotherapy," Idrees said.

The treatment is more often done for abdominal cancers, and is referred to as hyperthermic intraperitoneal chemotherapy (HIPEC).

Idrees has performed more than 100 HIPEC surgeries at VUMC, but the isolated limb infusion was a first.

"Dr. Idrees was very honest and very open," Deweese

said. "He told me all about it, that it was the first one done at Vanderbilt. My wife and I talked it over and said, 'Let's go with it.' He had said you can go somewhere else if you want a second opinion. I said, 'No, Vanderbilt has a good reputation. I'm very comfortable with Vanderbilt.'"

During the procedure, tumors are targeted and treated by delivering as much as 10 times the normal amount of chemotherapy. First, catheters are placed in the blood vessels of the affected limb followed by placement of a tourniquet above the catheters.

Then, high-dose, heated chemotherapy is administered to kill cancer cells while the treated limb is clamped off, which keeps the chemotherapy from circulating through the blood system to the rest of the body. The heat improves the absorption of the chemotherapy in the targeted area for about 30 minutes before being flushed out.

In Deweese's case, the tumors were so prolific they couldn't be surgically removed individually, which would have necessitated amputation, but the hot chemotherapy proved effective.

HIPEC and isolated limb infusion procedures require a specially trained surgery team in the operating room. Nationwide, Idrees is one of only 108 surgeons who are members of the American Society of Peritoneal Surface Malignancies.

"It's a team effort between the surgeon, anesthesiologists, perfusionists, pharmacy staff and medical oncologists," Idrees said.

Deweese, 69, of Nashville, said he's glad his leg was saved, and his disease remains in remission 18 months later. Now that it has completely healed from surgery, he has returned to work and in his spare time he and his wife enjoy playing with their grandchildren.

[Complete story link](#)

The Daily Beast interviews Thompson about e-cigarette dangers

Callie Thompson, MD, assistant professor in the Division of Trauma and Surgical Critical Care, has worked in trauma centers for years. In that time, she's seen at least one injury become increasingly common: exploding e-cigarettes, which can cause painful injuries like third-degree burns, tooth loss, and tissue damage.

"All of these people were using these e-cigarette devices because they thought they were safer," Thompson told *The Daily Beast*. "That to me is what really sticks out: These were marketed as a very healthy, low-risk way to stop smoking. And without the regulation on the devices, they're not necessarily safer."



Dr. Thompson

[Daily Beast story link](#)

J. Kenneth Jacobs Fellowship in Surgery endowed fund expands support for surgical residents

Exactly 88 years from the day he was born at VUMC, **J. Kenneth Jacobs, MD**, professor of Surgery, emeritus, returned to the institution to present a financial gift to the Section of Surgical Sciences to support the future education and research efforts of surgical residents.

Jacobs and his wife, Ellen, presented their gift to **Seth Karp, MD**, H. William Scott Jr. Professor and chair of the Section of Surgical Sciences, and **Kyla Terhune, MD, MBA**, associate professor of Surgery and director of the Surgery Residency Training Program, bringing the total of the J. Kenneth Jacobs Fellowship in Surgery endowed fund to more than \$1 million.

The fund was established in Jacobs' honor in 1985 at the request of his surgical colleagues **James O'Neill Jr., MD**, former chair of the Section of Surgical Sciences, and **Steven Eskind, MD**, director of the Surgical Clerkship Program. Jacobs and other donors have continued to contribute to the fund over the years.

"Dr. Jacobs established a legacy as an outstanding surgeon whose teaching influenced the careers of countless residents," said Karp. "With this generous gift, the Jacobses will continue in perpetuity to exert a profoundly positive influence on resident education and training. We are so grateful that Dr. and Mrs. Jacobs continue to be part of the Vanderbilt surgical family."

Jacobs received his undergraduate degree from Vanderbilt University and, after completing his medical degree at Northwestern University and a stint with the U.S. Public Health Service, he returned to Vanderbilt to complete his surgical residency. He credits the mentorship of then Department of Surgery Chair H. William Scott Jr., MD, for igniting his passion for challenging cases in the operating room.

"Dr. Scott was a giant in the field of surgery in his time, and he was a fantastic individual," Jacobs said. "He helped

transform surgical training to include basic research, and this change was adopted all over the country at the better universities. When we finished our surgical training, we were qualified to take both the general American Board of Surgery exam and the American Board of Thoracic Surgery exam."

Jacobs entered private practice in Nashville in 1963, and during his approximately 40 years of practice, he was extensively involved in student and resident education at VUMC and Saint Thomas Hospital. In 1991, he received the Shovel Award, VUSM's highest teaching award, and he twice received the Thomas Brittingham Clinical Teaching Award, in 1992 and 1996.

He initially retired from clinical practice at age 69, but returned when O'Neill asked if he would come back to work with residents in the NVAMC operating rooms.

"It was my pleasure to come back; I love the operating room," Jacobs said.

In 2000, he joined the staffs of the NVAMC and Nashville General Hospital at Meharry. In 2002, Jacobs was appointed to the faculty of the medical school as the H. William Scott Jr. Professor of Surgery and became the director of Endocrine Surgery at VUMC.

Through the years, Jacobs has received hundreds of letters from former residents expressing gratitude for their training at Vanderbilt and the large part he played in that training. Terhune remembered the first procedure, a thyroidectomy, she performed in 2004 as a surgical intern with Jacobs. She said he encouraged her and others in surgery throughout residency and beyond, and she still keeps a note he wrote her tacked up on her office wall.



Celebrating the J. Kenneth Jacobs Fellowship in Surgery's recent milestone were, from left, Seth Karp, MD, Ellen Jacobs, J. Kenneth Jacobs, MD, and Kyla Terhune, MD, MBA.

[Complete story link](#)

Join your colleagues, alumni and patients in giving back

There are many ways to join our community of supporters — from making an outright gift to making a gift through your will. To learn more about how to help further our mission, contact VUMC Development at giving@vumc.org or 615-936-0230.

The Legion Fund recognizes VUMC physicians and others who provide training and support



Last month representatives from the The Legion Fund and 5th Special Forces Group traveled to VUMC from Fort Campbell, KY to honor selected faculty and staff who have directly or indirectly supported the Group's medical and surgical trauma rotations here at VUMC .



Joel Pruitt, a former 5th Group soldier and his wife Tara, currently on staff with The Legion Fund, traveled to Nashville to make the presentations. They are pictured (*top left*) with Cathy Wilson, RN and Alex Jahangir, MD, MMHC, (*second*) **Oscar Guillamondegui, MD, MPH**, (*third*) **Rick Miller, MD**, (*fourth*) **Dan Beauchamp, MD**, and (*fifth*) Rory Langefeld.



Previously in 2018 at a formal ceremony, Willy Stern, the chair of The Legion Fund, organized the presentation of "Legion" coins to deserving staff. Then the coveted commemorative wooden "Gladius" swords were given to key physicians and nurses who work directly with the military and its patients and support the ongoing education and training of U.S. Army personnel, specifically the 5th Special Forces Group medics.



[The Legion Fund web link](#)

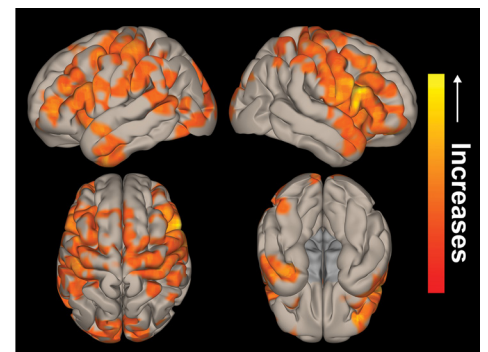
Englot study shows brain network activity improves after epilepsy surgery

Successful epilepsy surgery can improve brain connectivity similar to patterns seen in people without epilepsy, according to a new study published in the journal *Neurosurgery*.

The VUMC study of 15 people with temporal lobe epilepsy is the first to show improvements in brain networks after surgery compared to a group of healthy subjects.

Brain networks involved in the study are important for keeping the brain awake and alert, according to senior author **Dario Englot, MD, PhD**, surgical director of VUMC's Epilepsy Program.

"It's important to realize that, over time, seizures lead to brain network problems which may be related to cognitive deficits seen in patients with epilepsy," said Englot. "Our new results show some brain network activity can improve with surgery if you stop the seizures."



Over 3 million people in the United States, or roughly 1 percent, have epilepsy. Nearly one-third of people with epilepsy have bad seizures despite taking medication, leading to a reduced quality of life with a persistent risk of injury and limitations on mobility, socializing and working.

[Complete story link](#)
[Discover story link](#)

The Section clinical research arm has streamlined a pathway for scientific review and biostatistical support for clinical research projects and grant proposals



Jay Wellons, III, MD, MSPH, Section vice chair for Clinical Research, professor of Neurological Surgery and Pediatrics, and chief of Pediatric Neurosurgery, has developed a submission pathway for surgical clinical research projects and grant proposals. The pathway allows Section surgeons to submit projects for review by the Section Scientific Review Committee which will review and prioritize proposals for Section-centralized biostatistical support. Details and proposal forms are available on the Section website.

[Clinical Research web link](#)

Remington excels in all five General Surgery clinics Credo Award winner exemplifies humility in service

Tonya Remington, LPN for the VUMC General Surgery Clinic, received a Credo Award for her work in all five general surgery clinics — surgical specialties, trauma/burn, general surgery, colorectal and liver/kidney transplant.

Credo Awards, given quarterly, honor employees who exemplify the VUMC Credo: “We provide excellence in healthcare, research and education. We treat others as we wish to be treated. We continuously evaluate and improve our performance.” Winners of the Credo Award receive \$500 and an Elevate gift bag.

After 10 years at Vanderbilt, Remington moved to the General Surgery Clinic in 2016, proving a mastery of work in all five clinical areas.

“She is one of the hardest working employees at VUMC,” her nomination letter for the award said. “She is professional and courteous. She places patient safety and satisfaction above all else. The patients and other staff love her...She is an excellent resource and is full of creative ideas on how to make VUMC a better place for patients and employees.”

When the Epic/E-star system implementation began, Remington took initiative to become an expert, help others learn the system, and

Tonya is an adaptable team player who demonstrates excellence in her everyday work to patients and colleagues alike. She is crossed-trained throughout all of the surgical specialty clinics and routinely serves as a preceptor for new staff. — Heather Hubbs, Clinic Manager

was nominated to represent the clinic to share her ideas with nursing leadership.

“Tonya is our clinic preceptor for the new Epic/E-star system and she has excelled in that role,” the letter continued. “She is proactive and assists the staff with questions, even after work hours and on the weekends...She is open and communicates effectively with everyone. Her assistance has helped lower the stress associated with changing to the new E-star system.”

Remington, who picked up the award at the Clinical Enterprise Leadership Assembly, said that being part of a team that helps patients motivates her.



[Complete story link](#)

More congenital heart patients becoming transplant candidates

Patients with a form of congenital heart disease — having only one ventricle (pumping chamber) — are now living longer lives due to the successful surgical and medical treatments they receive as children.

However, as these patients survive to adulthood some of them face a new problem — heart failure, for which they will require heart transplantation.

Transplant in these adults with congenital heart disease (CHD), which remains rare, is more frequently required and becoming more common at VUMC, the only location in Tennessee and one of a few in the South where such transplants are possible, said Jonathan Menachem, MD, a transplant cardiologist and director of Advanced Congenital Cardiac Therapies (ACCT) at Vanderbilt Health.

Menachem, assistant professor of Medicine and Pediatrics, said four single-ventricle patients who have been palliated with a Fontan procedure have been transplanted in the last 12 months, out of a total of nine transplant recipients with CHD. Fontan is the name of the procedure given to pediatric patients with one ventricle.

Menachem points to two remarkable patient outcomes in the last six months involving Fontan patients. In January, Shawn Land of Clarksville, Tennessee, a Fontan patient with liver cirrhosis (a common complication in these patients), successfully underwent a combined heart/liver transplant. Then, in October 2018, Deja Baynard-Watson of Delaware became Vanderbilt's first documented case of using a heart from a hepatitis C-positive donor in a patient with CHD.

"These two cases demonstrate the ability of Vanderbilt to take the sickest single-ventricle patients and successfully transplant them using innovative techniques," Menachem said. "A lot of these patients and also providers don't realize that transplantation is an option."

Vanderbilt Health has the second largest heart transplant program by volume nationwide.

"As one of the largest heart transplant programs in the country, we need to leverage our true strengths: an uncommon depth of experience and teams that can work collaboratively when faced with difficult problems," said **Ashish Shah, MD**, professor and chair of Cardiac Surgery.

A normal heart has two pumping chambers, called ventricles, said **David Bichell, MD**, William S. Stoney Jr. professor of Cardiac and Thoracic Surgery, professor of Clinical Cardiac Surgery and chief of Pediatric Cardiac Surgery.

"Patients with only a single working ventricle can suffer progressively inefficient circulation, resulting in fatigue. The condition can be fatal if untreated," said Bichell.



Dr. Bichell



Dr. Shah

[Complete story link](#)

Wisconsin Surgical Club visits VUMC - 10 presentations and tours



Since 1913 members of the Wisconsin Surgical Club have annually traveled across the country and abroad, seeking surgical education and camaraderie from various hospitals. This year they chose VUMC. Back-to-back presentations in April included **Drs. Baregamian, Duke, Geevarghese, Holzman, Idrees, Meszoly, Nesbitt, Perdikis, Sharp and Shinall.**

Front row left to right

Drs. Mike Holzman, James Larson, Lou Bernhardt, Elise Lawson, Lou Suarez, Ann O'Rourke, Joe Bodensteiner, James Binder, and **Ken Sharp**

Back row left to right

Drs. Steve Shapiro, Steve Kappes, Sig Gundersen III, Phil Vogt, Ron Waits, Ben Jarman, James Rydlewicz, and Rod Malinowski

2019 meeting of VUMC AWS Chapter hosts speaker Dunn



(Above) Attendees of the 2019 meeting of the Vanderbilt University Medical Center AWS Chapter. (Right) Drs. Karp, Dunn and Solórzano.

Margaret Dunn, MD, MBA, professor of Surgery and Dean of the Boonshoft School of Medicine at Wright State University in Dayton, Ohio, was the guest speaker at the 2019 meeting of the VUMC Chapter Association of Women Surgeons (AWS). Her message on how to negotiate issues effectively, from conflicts to compensation, was well received by our faculty, fellows, and residents. **Seth Karp, MD** ended the evening by asking for feedback from the surgeons regarding how we can best support them in their professional relationships and responsibilities.



Thoracic surgery team explores fungal infection quandary in lung cancer screenings

Serving a region that lies within the tobacco belt, clinicians at Vanderbilt Health — including **Melinda Aldrich, PhD, MPH**, and **Stephen Deppen, PhD**, assistant professors of Thoracic Surgery, and **Eric Grogan, MD, MPH**, associate professor of Thoracic Surgery — face challenges distinguishing lung cancer from histoplasmosis, a fungal infection that creates cancer-mimicking lesions in the lungs.

Their work, published recently in *Emerging Infectious Diseases*, revealed that histoplasmosis is prevalent beyond previously identified regions of the United States and led to the U.S. Centers for Disease Control and Prevention (CDC) updating its maps.

A collaboration from across Vanderbilt, and with contributions from researchers at the University of Alabama at Birmingham, their model expanded likely histoplasmosis exposure areas beyond the Ohio and lower Mississippi River basins to include the upper Missouri River basin.

Other research by the team — in partnership with MiraVista and VICC, and published in *Cancer Epidemiology Biomarkers & Prevention* — indicates that a new blood test for histoplasmosis antibodies shows promise as a diagnostic tool for distinguishing cancer tumors from benign nodules caused by the fungal infection. Their findings can help cancer clinicians better determine when biopsy surgeries are necessary in diagnosing lung cancer.



The Vanderbilt team studying histoplasmosis includes (front row, from left) Heidi Chen, PhD, Melinda Aldrich, PhD, MPH, (back row, from left) Stephen Deppen, PhD, Eric Grogan, MD, MPH, and Jeffrey Blume, PhD.

"If you have histoplasmosis antibodies — IgG and IgM — in your blood that are both strongly positive tests, based on the work we're doing, I'm not going to take you to the operating room," said Grogan. "I am going to say, 'You need to be watched, and let's see how this does before we end up doing invasive procedures.'"

Grogan and Deppen presented an update of their research to the National Institute of Allergy and Infectious Diseases. They are looking to form a benign lung nodule consortium with other medical research institutions across the country to validate and extend their work into clinical practice.

[Complete story link](#)
[Discover story link](#)

Perdikis leads nation in study to restore sensation in breast tissue

Patient Kelly Keogh opted for DIEP flap reconstruction and re-connected nerves



Galen Perdikis, MD, with New York resident Kelly Keogh, who underwent a procedure at VUMC that uses donor nerve grafts to restore sensation after breast reconstruction surgery.

VUMC is the nation's leading recruitment site for a new study examining the effectiveness of donor nerve grafts to restore sensation to breast tissue following mastectomy and reconstruction.

When breast tissue is removed during a mastectomy, nerves that provide feeling to the breast are severed, often leading to a permanent loss of sensation. The numbness means light touches are not perceived, but it can

also be potentially dangerous if a serious injury goes unnoticed.

Plastic surgeons with Vanderbilt Health offer an advanced microsurgical breast reconstruction option called DIEP (deep inferior epigastric perforator artery) flap reconstruction. Patients choosing this type of reconstruction, which uses their own abdominal tissue to form a new breast, are the best candidates to participate in the national ReSensation study.

In the study, plastic surgeons use allograft nerve tissue, or donor nerve tissue that is harvested from cadavers, to reconnect the nerves that remain in the patient's chest wall to nerves in the transplanted abdominal tissue. The donated tissue serves as a bridge to allow the two nerve segments to grow together. If successful, this leads to the return of feeling to the chest area.

"This is almost the final step in breast reconstruction," said **Galen Perdikis, MD**, chair of the Department of Plastic Surgery and the lead principal investigator for the study at VUMC. "We can use the patient's own tissue to reconstruct the shape and form of the breast, but we've never been able to restore the protective and fine sensation to that tissue."

The ReSensation study is being conducted at 22 study sites nationwide, and more than 70 women have chosen to participate at VUMC to date. Participating patients return to VUMC every three months during a two-year period for a sensory check that measures the level of sensation that has returned to the tissue. Patients also

complete a survey that provides more detail on their progress.

Nerves grow at a slow rate, about an inch per month under ideal conditions, so the return of sensation can be a lengthy process. Because of this, the data that researchers obtain through regular patient progress reports are invaluable, Perdikis said.

"Through this study, we're going to continue to learn what the best technique for this is and what is the most appropriate nerve on the chest to use," said Perdikis. "For example, is the lateral nerve better than the medial nerve? We're also looking at the number of axons or nerve fibers in the lateral nerve versus the medial nerve and seeing if that is a determining factor in better outcomes."

Armed with the knowledge that women in her family had a significant history of breast cancer, Kelly Keogh had genetic testing in 2017 that showed she was positive for BRCA2 mutation. National statistics show that women who have a BRCA2 mutation have an estimated 69% chance of developing breast cancer by age 80.

Keogh lives in New York where she has a busy schedule working in communications for a professional hockey team. Because VICC is a highly reputed National Cancer Institute-designated Comprehensive Cancer Center, and her parents, who had recently moved to Nashville, could care for her after surgery, Keogh chose to have a bilateral prophylactic mastectomy and a double DIEP flap breast reconstruction at VUMC.

Perdikis, **Raeshell Sweeting, MD**, assistant professor of Surgery and **Julian Winocour, MD**, assistant professor of Plastic Surgery, coordinated her surgery in the operating room, with Sweeting performing the bilateral mastectomy and Perdikis and co-surgeon Winocour performing the DIEP flap procedures and re-connecting the nerves using the donor nerve tissue. Although she had the additional procedure to bring sensation back to the reconstructed tissue, due to her distance from VUMC, Keogh opted not to participate in the ReSensation study.



Dr. Sweeting



Dr. Winocour

[Complete story link](#)

Forbes part of three-recipient kidney transplant chain – a first in VUMC history

Kristie Kuzy was touched by a post on social media a little over a year ago from an acquaintance whose son needed a kidney transplant. Kuzy stepped forward as a donor to give her friend's son a second chance at life. Unfortunately, she wasn't a match. That might have been the end of it — good intentions, but no result. That's not the decision Kuzy made. She decided to donate anyway — to a complete stranger.

That second effort at donating started a chain reaction that resulted in not just one, but three people getting kidneys — the first three-recipient kidney transplant chain in the history of VUMC.

Three pairs of donors and recipients were part of the chain of transplants. The chain was made possible by people who, like Kuzy, originally expressed a desire to donate to loved ones but had incompatible blood types.

Through Vanderbilt's Living Kidney Donor Program, coordinators matched these willing donors with strangers who were compatible. The coordinators performed a deft juggling act — ensuring the pairs passed a months-long battery of health tests to ensure compatibility and arranging a convenient time for donors and recipients to meet for transplants.

With this many donors and this many recipients, things can get complicated. A man named Steve (he asked that his last name not be used) had been on the list for two years and he had a donor who was incompatible. But last year, that all changed, and the chain led back to Kuzy.

Here's how: Annalise Perry of Shelbyville, TN was put on the transplant list last year. She had an incompatible donor named Gabrielle Hargrove. Perry had the relatively rare blood type B. Hargrove had blood type O. And here's



Kristie Kuzy, left, with kidney transplant surgeon Rachel Forbes, MD, MBA. Kuzy's decision to donate a kidney to a stranger created a chain of events that led to three people receiving new kidneys.

where Kuzy comes in again — her blood type was B, just like Perry's.

VUMC's nurse Kaylin Centanni, BSN, RN soon realized that Perry's incompatible donor, Hargrove, was blood type O, which matched Steve. Steve's incompatible donor was blood type A and that donor matched Latrice Parker, who was on Vanderbilt's waiting list without a paired donor.

So, Kuzy could donate a kidney to Perry, while Perry's incompatible donor Hargrove could donate to Steve, whose incompatible donor could donate to Parker. **Rachel Forbes, MD, MBA**, assistant professor of Surgery and Living Donor Program surgical director, said living kidney donors are modern-day heroes.

[Complete story link](#)

Mettler, Grogan honored by induction into the AATS

Bret Mettler, MD, assistant professor of Pediatric Cardiac Surgery, and **Eric Grogan, MD, MPH**, associate professor of Thoracic Surgery, were inducted into the American Association for Thoracic Surgery in Toronto, Canada, earlier this year. The AATS is one of the most prestigious academic thoracic surgery societies in the world and was founded over 100 years ago.



This organization has had and will continue to have a profound impact on the practice of cardiothoracic surgery. The legacy of the AATS promotes education, scholarship, and research as the base of its foundation.



Heroes come in all sizes, from tiny tots to world-class surgeons Ceremony honors organ donors and all members of the donor families



Seth Karp, MD, chair of Surgical Sciences, H. William Scott Jr. Professor, and director of the Vanderbilt Transplant Center, was among the speakers at VUMC's 10th annual Donate Life Flag-Raising Ceremony.

Eighty individuals donated the gift of their organs at the medical center last year, more than any other hospital in the nation, and they and their families were saluted at the ceremony.

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C. Wright Pinson, MBA, MD, Deputy CEO of VUMC and CEO of the Vanderbilt Health System echoed that sentiment.

"You may not realize the great impact you have, but we do. Without you, donation would not be possible, and lives could not be saved through transplantation" — Dr. Karp

"Their selflessness resulted in 257 life-saving gifts to people waiting and hoping for another opportunity at life — mothers and fathers, sons and daughters, our friends, families, co-workers and neighbors," said Pinson.

The ceremony, held in the atrium of the Critical Care Tower, was part of a national effort to raise awareness about the need for organ and tissue donors. In addition to honoring organ donors and their families, the ceremony

salutes hospital staff who care for donors and transplant recipients. The event is a partnership between VUMC and Tennessee Donor Services, the federally designated donor network that facilitates organ and tissue donation in the region.

The ceremony featured speakers representing two groups of gift givers — end-of-life and living donors.

Graham and Heather Honeycutt (see companion story) spoke about their choice to donate the organs of their 5-year-old daughter, Mikayla. Her heart, liver and kidneys saved the lives of four other people, and her esophagus was also donated for research.

"When it became clear that our sweet Mikayla was no longer with us, it was an obvious decision for us," said Heather.

Karp noted that the wait for a lifesaving transplant in Tennessee is dramatically shorter than other parts of the country, which he attributed to the giving spirit of citizens of the Volunteer State.



Heather and Graham Honeycutt at the annual flag-raising ceremony, recounting their decision to donate their daughter Mikayla's organs after her death.

[Complete story link](#)

[The Honeycutt family journey complete story link](#)

Should Nashville ban scooters? Rise in injuries rekindles debate

In April, the Nashville Fire Department responded to 43 emergency calls related to scooter injuries. **Oscar Guillamondegui, MD, MPH**, professor of Surgery, Division of Trauma and Surgical Critical Care, estimates VUMC's trauma center and emergency department see about one major traumatic brain injury a month related to scooters and one-to-two injuries to faces, arms and legs per day. At Saint Thomas Midtown, Dr. Allison Bollinger said the emergency department sees two to three scooter injuries in any given eight-hour shift.

"If you think about the actual number of scooters on the road, it becomes pretty impressive that, with the few thousand (scooters) that they have, we are seeing that number of injuries per day," Guillamondegui said.



[Tennessean story link](#)
[WSMV story link](#)
[WTVF story link](#)
[WKRN story link](#)

Gillaspie holds second week-long robotic surgery training camp

The new curriculum will be open to residents from many services



(Left) Drs. José Diaz and Erin Gillaspie with training robot. (Below top) Residents on the consoles while Dr. Meredith Duke instructs the movements. (Bottom center) Dr. Seth Karp takes a turn on the simulation console. (Below bottom) Residents from the urologic surgery service, instructed by Dr. Kristen Scarpato, train using the robot on mannequins as well as wet tissues.

Now in its second year, the robotic surgery training program at VUMC follows a course of graduated experiences that **Erin Gillaspie, MD, MPH**, assistant professor in the Department of Thoracic Surgery, and colleagues found worked for them. After online training on a simulator, residents will learn the fundamental parts of the da Vinci robot and how they work in a dry lab environment, then later in a wet lab using tissue models. As residents advance into the OR, they will assume progressive responsibilities from initially putting in ports, docking the robot and exchanging instruments to eventually performing critical portions of operations.

From the onset, Gillaspie knew that for efficiencies of scale—based on the time and resources needed to have da Vinci bring in robotic consoles—the program must extend beyond thoracic surgery alone. As she reached out to colleagues like **Meredith Duke, MD, MBA**, **Joseph Broucek, MD** in general surgery, Lauren Prescott, MD, MPH in GYN and Kristen Scarpato, MD, MPH in urology, the scope has continued to expand.

“I connected with colleagues across the hospital about a formalized robotics curriculum. The idea was met with incredible enthusiasm as all realized what we could accomplish by partnering to maximize resources,” Gillaspie said. “By the time of our first dry lab with a robot last fall, we were able to train residents in general surgery, urology, OBGYN, and thoracic surgery, and even medical students. It was extraordinary to see the value of collaboration across residency programs.”

“Medical knowledge and technology are advancing at an unprecedented pace. Clinical educators are tasked with ensuring that our trainees acquire expert medical knowl-

edge and surgical skill. It is essential that we maximize and optimize operative experiences and I believe the key to that is simulation.”

“I don’t see the technology presenting challenges, I see it bringing everyone together,” Gillaspie said.



[Discover story link](#)

Guillamondegui interviewed on CBS Health Watch about appendicitis warning signs



Oscar Guillamondegui, MD, MPH, professor of Surgery, Division of Trauma and Surgical Critical Care, Medical Director, Trauma ICU, Director, Vanderbilt Multidisciplinary Traumatic Brain Injury Clinic, Vice Chair for Surgical Quality, Safety, and Professionalism, was interviewed about the acute signs of appendicitis after *CBS This Morning* co-host Nora O'Donnell had an emergency appendectomy earlier this year.

[CBS story link](#)

Thompson weighs in on cognitive issues after lightning strike



Callie Thompson, MD, assistant professor in the Division of Trauma and Surgical Critical Care, has dealt with electrocution cases but says each is different.

"With peripheral nervous system impairment, you can have seizures, cognitive effects, which is hard to quantify for folks. Then you can see the psychiatric components like depression, acute stress disorder, and post-traumatic stress disorder," said Dr. Thompson.

[WRKN story link](#)

Idrees named interim chief of the Division of Surgical Oncology and Endocrine Surgery

Kamran Idrees, MBBS, MSCI, MMHC, associate professor of Surgery, has been named the interim chief of the Division of Surgical Oncology and Endocrine Surgery for our Department of Surgery. He will assume this additional role in the Section of Surgical Sciences effective immediately.



Dr. Idrees

Recruited to Vanderbilt in 2012 as an assistant professor of Surgery and Director of the Peritoneal Surface Malignancy/Hyperthermic Intraperitoneal Chemotherapy (HIPEC) Program, Dr. Idrees is an invaluable member of our academic community.

"I am confident Dr. Idrees will continue to provide outstanding leadership across the Section for our patients, clinical and research faculty, advanced practice providers, and staff, and look forward to working with him in this additional leadership capacity," said **Carmen Solórzano, MD**, chair, Department of Surgery.

Grateful patient Kinsman's generous gift will benefit cancer research



Doug Kinsman (center), an inspiring cancer survivor, presented his generous gift to medical oncologist, **Dr. Dana Cardin** (left), assistant professor of Medicine and his surgeon **Dr. Jonathan Nesbitt** (right), chair of the Department of Thoracic Surgery. Kinsman hosted two fundraisers at the GM plant in Spring Hill in support of esophageal cancer research at VICC and gave the funds in appreciation for his care at VUMC.

[VUMC Give link](#)

Ames creates custom mouthpieces to protect patients during radiation treatments



Dr. Tyler Ames holds a mouthpiece that can help protect head and neck cancer patients during radiation treatments.

When Laura McClure-Barnes, MD, learned she needed radiation therapy following surgery for adenoid cystic carcinoma, a rare cancer of the salivary glands, she knew that radiation could damage healthy tissue and bone near the tumor.

But because a doctor at VUMC was willing to think outside the box to protect structures of her jaw and face from harm, she's still smiling today, with only minor effects from her cancer treatment.

McClure-Barnes, a community oncologist, discovered the cancer tumor herself as she fretted over a sore spot in her mouth that she initially thought was an inflamed tooth. Ever since being treated for a childhood cancer — an osteogenic sarcoma that led to the amputation of her right leg in 1984 — she had dealt with a treatment after-effect of a chronically dry mouth. That, unfortunately, meant she developed cavities easily.

She reached into the back of her mouth one day and felt a mass. As a practicing oncologist who completed her fellowship training at VUMC, she knew she needed to get expert help quickly.

"I always knew I had some ongoing risk of a second malignancy, and as I became an oncologist, I became more concerned," McClure-Barnes said. "But even when you have that in the back of your mind, you're still shocked when it happens."

*McClure-Barnes credits a custom oral stent designed by **Tyler Ames, DMD**, an assistant professor in the Department of Oral and Maxillofacial Surgery, for protecting her face and jaw so the potential harm from radiation therapy was minimized.*

[Complete story link](#)

Plastic/Oral Surgery's Culbert voted VUMC "Nurse of the Year"

During Nurses' Week at the annual VUMC Nursing Honors & Awards Recognition ceremony **Paula Culbert, RN**, Assistant Nurse Manager for Plastic and Cosmetic Surgery, Oral Surgery and Dentistry Clinics was recognized as The Rosamond Gabrielson Staff Nurse of the Year.

VUMC recognizes one staff nurse from each entity—VUH, MCJCHV, VPH, and TVC.

Some comments submitted as part of Paula's nomination include:

Paula works to build up all of the people who work around her. She partners with and respects all members of the team, and encourages involvement and ownership. She fosters a sense of community. Specifically, Paula helped to develop education content and orientation plans for the new staff around her. She also partners with the dental assistants to ensure they are performing at the top of their license.

Paula collaborates with front desk nurses, surgery schedulers, dental assistants, OR staff, residents and attending

physicians to streamline the continuum of care for oral and maxillofacial surgery patients. These various teams perform in the clinic which is both an outpatient clinic and procedure area. She works to bridge the processes.

Paula consistently works to improve patient care. For example, she noticed that the post-sedation documentation standards for oral and maxillofacial surgery patients were not as clearly defined as for other patient populations. The documentation forms were still on "appear" and did not prompt nurses to document certain aspects of monitoring during the sedation procedure or assessment post procedure. She worked to establish evidence-based, standard documentation for these procedures and is working to transition this documentation into Epic.



VUMC and thoracic surgery research lands two studies

VUMC has landed two new test cases out of 12 from The National Evaluation System for Health Technology Coordination Center (NESTcc) an initiative of the Medical Device Innovative Consortium (MDIC).

One project includes the thoracic surgery research team led by **Stephen Deppen, PhD**, assistant professor of Thoracic Surgery, and co-investigators **Eric Grogan, MD, MPH**, associate professor of Thoracic Surgery, and Michael Matheny, MD, MS, MPH, assistant professor of Medicine.



Dr. Deppen

The project is titled “Estimating and Validating Diagnostic Cancer Biomarker IVD Test Panel Characteristics and Clinical Utility for Indeterminant Pulmonary Nodule Risk Stratification in Patients with Lung Cancer.”



Dr. Grogan

The second project from this second round of funding titled “Synthetic Mid-Urethral Slings for Stress Urinary Incontinence in Women”, is led by Matheny as the PI with Deppen as co-investigator.

Vanderbilt is also leading a case from the first round of funding titled “Real-World Clinical Outcomes in Patients with Mechanical Heart Valve Replacement and Anticoagulation Variability” led by Russell Rothman, MD, MPP, Professor of Internal Medicine, Pediatrics, & Health Policy.

This most recent round, NESTcc received 40 concepts submissions from 26 different organizations, health systems, government entities, medical device manufacturers, non-profits including patient advocacy organizations, and academic institutions.

In these year-long test cases, the selected projects reflect a diverse range of medical devices available and the different uses of data in pre-market and post-market settings.

[NESTcc Press Release](#)

Diaz named new director of the S.R. Light Laboratory

José Antonio Diaz, MD, joins our surgical faculty after having served as a Research Assistant Professor of Vascular Surgery in the Conrad Jobst Vascular Research Laboratories in the Section of Vascular Surgery at the University of Michigan, Ann Arbor, MI. Diaz is a Vascular Surgeon trained in Cardiovascular and General Surgery with additional specialization in ultrasonography and phlebology.

Following his career as a surgeon in Argentina, Diaz moved to the United States to be trained in basic science research under an NIH T32 training program in Vascular Biology at the University of Michigan.

Diaz is internationally recognized for his contributions to surgical animal model development and vascular disease research. He is interested in surgical research, vascular biology, and immunology, with expertise in deep vein thrombosis, aneurysm, pre-clinical models, and thrombosis.



Dr. Diaz

[Light Laboratory web link](#)

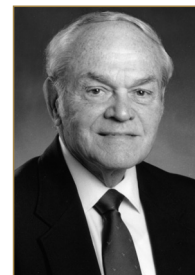
[Complete announcement link](#)

Pioneering pediatric surgeon George Holcomb, Jr. dies

George Holcomb Jr., MD, clinical professor of Surgery, emeritus, champion of the creation of a children’s hospital at Vanderbilt, and former executive director of Medical Alumni Affairs, died June 28. He was 97.

Holcomb received his undergraduate degree from Vanderbilt in 1943 and followed that with a Vanderbilt medical degree in 1946. He did a general surgery residency at Vanderbilt, during which he became interested in pediatric surgery, and did his pediatric surgery residency at Harvard University Medical School.

Beginning in 1952, Holcomb served in the U.S. Army during the Korean War, stationed in Japan as a thoracic surgeon. After the war, in 1954, he and his late wife, Alice Ingram Holcomb, and young son returned to the United States; and shortly after, their daughter was born. The family returned to Nashville, where Holcomb opened his private practice in pediatric surgery and joined the Vanderbilt clinical faculty. He became a full-time faculty member in 1972.



Dr. Holcomb

[Complete story link](#)

Bailey selected as Program Director for General Surgery Residency Program

Carmen Solórzano, MD, professor and chair of the Department of Surgery announced recently that **Christina Bailey, MD, MSCI**, assistant professor of Surgery in the Division of Surgical Oncology and Endocrine Surgery, has accepted the position of Program Director for our General Surgery Residency in the Department of Surgery and Section of Surgical Sciences, succeeding **Kyla Terhune, MD, MBA**. Bailey was selected through an internal and external interview process by a committee consisting of residents, faculty, and leaders in GME throughout the institution. **She will assume this new role on July 15, 2019, pending ACGME-RRC approval.**



Dr. Bailey

After completing her fellowship in Complex Surgical Oncology at the MD Anderson Cancer Center in 2015, Bailey was recruited back to Vanderbilt. She has had an exceptional academic career, establishing herself as a talented surgical oncologist, well-respected leader, and dedicated researcher. She has an impressive commitment to patients, collegiality, and the desire to foster an environment of learning and innovation. She is an outstanding teacher who has become a mentor to many of our residents and students.

Bailey has consistently been awarded the Chair's Award for Excellence in Teaching. In 2016 she was appointed Assistant Program Director, and in 2017, Associate Program Director, a position she has held for the past two years. She has been active in applicant selection, interviewing, mentoring, and other administrative aspects of the program.

Bailey attended the New Program Directors' Workshop sponsored by the Association of Program Directors in Surgery, completing formal instruction in the various duties of a program director. In 2018, she also completed the AAMC Leadership Education and Development Certificate Program.

We are confident that Dr. Bailey will continue to be a strong leader and mentor in the coming years in her capacity as General Surgery Residency Program Director.

Visiting professor from Kenya

Beryl Akinyi Ooro, MBChB, a general surgeon from AIC Kijabe Hospital in Kijabe, Kenya, visited VUMC recently to meet with surgical faculty, residents and medical students, and to observe both in the operating room and at a clinical practice.

AIC Kijabe Hospital is the home site for many international educational and service collaborations involving VUMC faculty, residents and nursing staff, and the Department of Surgery has been sending residents to rotate at the hospital since 2011.



(Top) Meeting in the School of Medicine with Ooro (center) are Marie H. Martin, PhD, MEd, and Doug Heimburger, MD.

(Bottom) from left, are Jasmine Walker, MD; Gretchen Edwards, MD; Rondi Kauffmann, MD, MPH; Beryl Akinyi Ooro, MBChB; Diane Haddad, MD; and School of Medicine student Catherine Zivanov.

Vascular Surgery's Garrard receives the 2019 Robert S. McCleery Master Teacher Award



Louis Garrard, III, MD, was the recent recipient of the annual Robert S. McCleery Master Teacher Award. This award is made possible through the generosity of the late Dr. Eustace H. Winn, Jr. of Greenville, Mississippi. This annual award recognizes outstanding full-time surgical teachers of surgical residents at Vanderbilt School of Medicine, and is presented each academic year through a nomination process by surgical residents. The award was presented by Vascular fellow **Caroline Nally, MD**.

Third-year GSR Medvecz honored with 2019 Resident Teaching Award



Andrew Medvecz, MD, third-year general surgery resident, was selected by the 2019 graduating class with one of their residents' teaching awards. These are very significant awards since only five house officers (residents/clinical fellows during the course of the class's education) receive these awards.

The awards are voted on by the entire class and selected from a pool of almost a thousand house staff. Medvecz was presented the honor by **Steven Eskind, MD**, director, Surgical Clerkship Program, at the annual alumni awards luncheon hosted by Ann Price, MD, associate dean for Alumni Affairs.

Medical student Gallagher receives Scott Society Award



Kathleen Gallagher, MD was the recent recipient of the annual Scott Society Award. This annual award recognizes an outstanding medical student at Vanderbilt University School of Medicine. It was presented this year by **Kyla Terhune, MD, MBA**.

Lin selected to serve on ABOMS boards



Dr. Lin

Susie Lin, DDS, MD, assistant professor in the Department of Oral and Maxillofacial Surgery, was nominated by her peers and chosen to serve on the examination committee of the American Board of Oral and Maxillofacial Surgery (ABOMS). Lin is a graduate of VUSM and did her internship and residency at VUMC.

NEW FACULTY

DIVISION OF SURGICAL RESEARCH

Research Associate Professor of Surgery
José Diaz, MD

DEPARTMENT OF ORAL & MAXILLOFACIAL SURGERY

Assistant Professor of Oral and Maxillofacial Surgery
Ashish Sharma, BDS, MSD

FACULTY PROMOTIONS

DEPARTMENT OF CARDIAC SURGERY

Professor of Cardiac Surgery, Emeritus
Michael Petracek, MD

DEPARTMENT OF NEUROLOGICAL SURGERY

Associate Professor of Neurological Surgery
Lola Chambless, MD

Research Professor of Neurological Surgery
Chevis Shannon, MBA, MPH, DrPH

DEPARTMENT OF SURGERY

DIVISION OF SURGICAL ONCOLOGY & ENDOCRINE SURGERY

Associate Professor of Surgery
Kamran Idrees, MD, MSCI, MMHC

DIVISION OF TRAUMA & SURGICAL CRITICAL CARE

Associate Professor of Surgery
Bradley Dennis, MD

DIVISION OF SURGICAL RESEARCH

Research Professor of Surgery, Emeritus
Phillip Williams

Congrats to all graduating residents and fellows

Division of General Surgery

Vance Albaugh
Christy Guth
Sandy Kavalukas
Sekhar Padmanabhan
Eric Rellinger
Cameron Schlegel
Jesse Wright



Breast Oncology

Yitian Liu

Division of Vascular Surgery

M. Caroline Nally

MIS/Bariatric Surgery

Jingliang Yan

Department of Pediatric Surgery

Margaret Gallagher

Department of Neurologic Surgery

Michael Dewan
Peter Morone
Scott Zuckerman

Department of Oral & Maxillofacial Surgery

Michael Lee
Erik Nielsen
Nicholas Tseffosa

Department of Plastic Surgery

Salam Al Kassis
Timothy Rankin
Blair Wormer

Surgical Critical Care/Acute Care Surgery

Robel Beyene
Christopher Guidry
Michael Smith
Luis Cesar Suarez-Rodriguez



Department of Thoracic Surgery

Michael Archer
John Evans