PATIENT CARE / EDUCATION / RESEARCH / COMMUNITY SERVICE

NEWS UPDATE FROM THE DEPARTMENT OF SURGERY STONY BROOK UNIVERSITY MEDICAL CENTER **SPRING-SUMMER 2009 NUMBER 25**

STONY BROOK **IN** UNIVERSITY MEDICAL CENTER

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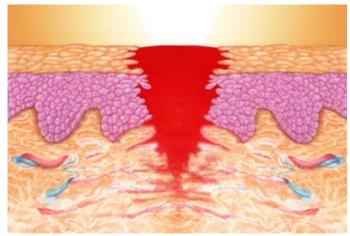
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Stony Brook Wound Center Established Comprehensive, Multidisciplinary Wound Care



Chronic wound in the lower extremity.

The newly established Stony Brook Wound Center located in East Setauket, NY is dedicated to providing the best wound care to patients with chronic non-healing wounds.

Our multidisciplinary team brings together experts from different specialties to provide comprehensive wound care.

Our treatment plans are custom-designed for each individual to successfully advance the healing process.

Any wound that doesn't show improvement in four weeks or is not healed within eight weeks is considered a chronic non-healing wound. continued on Page 2

Defining the Best Wound Care

The Association for the **Advancement of Wound Care** (AAWC) in 2005 issued its formal "Statement on Comprehensive, Multidisciplinary Wound Care" to stress the following points:

- The nature of the chronic wound demands comprehensive, multidisciplinary care in order for patients to receive the best wound care.
- The wound care literature abounds with research describing improved quantitative outcomes resulting from comprehensive, multidisciplinary care.
- Substantial qualitative research studies demonstrate positive outcomes and the value of comprehensive. multidisciplinary wound care.

The AAWC, the premier international society for wound care, is dedicated to promoting excellence in education, clinical practice, public policy, and research to advance wound care.

Expanding Minimally Invasive Surgery For Gastrointestinal Tumors and Other Diseases

Dr. Kevin T. Watkins Appointed Chief of New Group



We are very pleased to announce the formation of our Upper Gastrointestinal and General Oncologic Surgery Group to broaden minimally invasive surgery for complex gastrointestinal (GI) tumors and other diseases of the GI tract. Kevin T. Watkins, MD, assistant professor of surgery, has been appointed to serve as chief of this new group.

"The creation of this new surgical group is a key part of the development of a comprehensive surgical program at Stony Brook for treating upper GI and soft tissue malignancies in ways that are highly effective, technologically advanced, less invasive, and lead to better outcomes for patients," says Todd K. Rosengart, MD, professor

and chairman of surgery and chief of cardiothoracic surgery.

Dr. Watkins and colleagues will use laparoscopic and other minimally invasive surgical methods, including robotically-assisted surgery, in the treatment and management of malignant continued on Page 3

Stony Brook Wound Center

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Our multidisciplinary team of wound care specialists at the Stony Brook Wound Center combines the expertise of different medical and surgical specialties that include:

- Vascular Surgery
- Plastic Surgery
- Podiatry
- Internal Medicine
- General Surgery
- Infectious Disease
- Burn Surgery

Our physicians provide technically advanced, surgical, and non-surgical outpatient care that is highly effective in healing wounds that resist conventional therapy.

The Stony Brook Wound Center provides comprehensive, multidisciplinary wound care with a wide range of treatment options.

Treatments range from Unna-boots to recombinant DNA growth factor and cultured skin substitute. Our comprehensive approach can heal wounds that have resisted other treatments, reduce incidence of recurrence, and help avoid loss of limbs.

The Stony Brook Wound Center treats different types of chronic non-healing wounds, including:

- Diabetic ulcers
- Surgical wounds
- Venous stasis ulcers
- Trauma wounds
- Pressure ulcers
- Burn wounds
- Wounds caused by peripheral vascular and collagen vascular disease

As part of the region's only academic medical center, the Stony Brook Wound Center is involved in several clinical trials that enable us to use, in addition to established therapies, the newest and most advanced technologies and treatments—long before they are available to other physicians.

Our unique wide range of treatment options, together with our multidisciplinary team approach, thus distinguishes the care we provide at Stony Brook.

The Stony Brook Wound Center is located at 37 Research Way, in East Setauket, NY 11733. For consultations/appointments, please call (631) 444-4545.

Skin Substitute Therapy For Venous Leg Ulcers

New Trial Seeks Patients

As part of the region's only academic medical center, the Stony Brook Wound Center is involved in several clinical trials that enable us to use the newest and most advanced technologies and treatments before they are available to other physicians.

This spring, our wound care team started testing a promising therapy for venous leg ulcers, as a participating center in a prospective, multicenter, randomized, controlled clinical investigation of the skin substitute called Dermagraft.

The principal investigator of the Dermagraft trial at Stony Brook, Apostolos K. Tassiopoulos, MD, associate professor of surgery and interim chief of vascular surgery, says:

"Dermagraft has been successfully used in the treatment of diabetic foot ulcers. This trial will test its efficacy in leg ulcers caused by chronic venous insufficiency. Our previous experience has shown that skin substitutes may shorten the time required for complete healing of these ulcers and improve patients' quality of life. Therefore, we expect to see a significant benefit in patients with venous ulcers resistant to conventional treatment."

Closure of deep venous ulcers that are unlikely to heal with conventional therapy may require a two-step process: compression to counter the effects of venous hypertension, and a therapy to promote a healthy, viable ulcer bed for supporting and stimulating granulation tissue that will eventually form a surface for optimizing epithelial migration.

The goal of the Dermagraft trial is to determine the safety and effectiveness of the skin substitute, together with four-layer compression bandaging therapy, in promoting the healing of venous leg ulcers compared with conventional treatment of four-layer compression bandaging therapy alone. The study involves a total of eight weekly treatments.

Diagnosis and Main Inclusion Criteria: Chronic, full-thickness skin ulceration of the leg due to venous hypertension, with confirmed venous reflux of >0.5 seconds in saphenous (great or small), calf perforators, or the deep venous system. Dermagraft is a bioengineered skin substitute that is placed on wounds to cover them and to help them heal. It has been approved by the U.S. Food and Drug Administration to treat full-thickness foot ulcers that have been present for at least six weeks in patients with diabetes.

Dermagraft stimulates the patient's own skin cells to multiply and heal the wound. It is made of human fibroblasts, extracellular matrix, and a bioabsorbable mesh scaffold. It does not contain macrophages, lymphocytes, blood vessels, or hair follicles.

Patients enrolled in our Dermagraft trial will receive all treatment free of charge.

For more information or to refer a patient, please call our clinical research coordinator Eileen Finnin, RN, at (631) 444-5454.

POST-OP is published by the Department of Surgery, Stony Brook University Medical Center, Stony Brook, New York

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Expanding Minimally Invasive Surgery For GI Tumors, Other Diseases

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and benign tumors of the GI tract, liver, pancreas, esophagus, and stomach.

We have expanded our robotic upper GI surgery program, and now perform robotically-assisted minimally invasive pancreatic surgery.

Dr. Watkins's practice at Stony Brook primarily focuses on liver and pancreatic resections, as well as removal of gastric and esophageal lesions. He brings 16 years of experience as a surgical oncologist and expert in minimally invasive techniques for all forms of GI cancer and related diseases.

Joining Dr. Watkins are Colette R.J. Pameijer, MD, assistant professor of surgery, and Philip Bao, MD, assistant professor of surgery.

Dr. Pameijer's area of expertise includes therapies for melanoma and other skin and soft tissue tumors, as well as regional therapies for advanced cancers.

She has brought Stony Brook to the forefront of technology in the treatment of advanced malignancies with use of intraperitoneal chemotherapy and isolated limb infusion, methods that deliver heated chemotherapy directly to the area affected by cancer while sparing the rest of the body.

Dr. Watkins, who joined our faculty in 2004, received his MD from the University of Virginia and completed his surgical residency at the University of Florida. He completed a fellowship in surgical oncology at the M.D. Anderson Cancer Center in

Houston, TX, with a focus on upper GI surgery.

He subsequently spent six years in the U.S. Air Force as chief of surgical oncology at the Air Force's Wilford Hall Medical Center in San Antonio, TX. While in the Air Force, he designed surgical techniques for laparoscopic liver and pancreatic resections, and has presented these operative techniques at national and international meetings.

Dr. Pameijer, who joined our faculty in 2005, received her MD from the Medical College of Pennsylvania in Philadelphia, PA, and completed her surgical training at the combined MCP-Hahnemann Hospitals, at the Children's Hospital of Philadelphia, and at the University of Wisconsin. She completed her fellowship training in surgical oncology at City of Hope National Medical Center in California.

Surgical oncologists who specialize in

- Malignant and benign tumors of the GI tract, liver, pancreas, esophagus, and stomach.
- Laparoscopic and other minimally invasive surgical methods.
- Melanoma and other skin and soft tissue tumors.
- Regional therapies for advanced cancers.

For consultations/appointments with our specialists in upper gastrointestinal and general oncologic surgery, please call (631) 444-8086.



Dr. Kevin T. Watkins, Dr. Philip Bao, and Dr. Colette R.J. Pameijer

Introducing Dr. Philip Bao

Our New Surgical Oncologist, Hepatobiliary Surgeon

Philip Bao, MD, has joined our Division of Surgical Oncology as assistant professor of surgery. He comes to Stony Brook from the University of Pittsburgh Medical Center in Pittsburgh, PA, where he completed fellowship training in surgical oncology.

Board certified in general surgery, Dr. Bao will focus his practice at Stony Brook on the treatment and management of malignant and benign tumors of the upper gastrointestinal tract including liver, pancreas, esophagus, and stomach.

Dr. Bao uses standard open surgery as well as laparoscopic and robotic surgical techniques when possible. In addition, for advanced abdominal cancers, he provides treatment using new modalities such as heated intraperitoneal chemotherapy (HIPEC) for carcinomatosis.

Dr. Bao was selected for inclusion in the 2009 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America.

Dr. Bao's research interests include intraoperative tumor imaging and surgical navigation, decision analysis for cancer management, and clinical trials. He earned a Certificate in Clinical Research during his fellowship in Pittsburgh. Previously, while a surgical resident, he was granted a National Research Service Award (National Institutes of Health) as principal investigator for his study titled "Tracked Laparoscopic Ultrasound for Use in Liver Surgery."

Dr. Bao received his MD in 2000 from Mount Sinai School of Medicine in New York, NY. He completed his residency in general surgery at Vanderbilt University in Nashville, TN, and in 2007 he started his training in surgical oncology.

Introducing More New Faculty



Breast Surgeon

Christine Rizk, MD, has joined our Division of Surgical Oncology as assistant professor of surgery. She comes to Stony Brook from Roswell Park Cancer Institute in Buffalo, NY, where for the past three years she has been practicing in the Division of Breast and Soft Tissue Surgery, and serving as a member of the surgical faculty at SUNY-Buffalo.

Board certified in general surgery, Dr. Rizk will focus her practice at Stony Brook on breast surgery, and provide clinical services for the diagnosis and treatment of breast cancer.

Dr. Rizk was selected for inclusion in the 2009 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America. She also has received many awards including humanitarian and teaching awards.

Dr. Rizk's research interests include nipple-sparing mastectomy, oncoplastic surgery, and breast conserving surgery to improve breast cosmesis.

Dr. Rizk earned her MD with honors in 2000 from SUNY Upstate Medical University in Syracuse, NY, and completed her residency training in general surgery at the Cleveland Clinic in Cleveland, OH. She then completed a fellowship in breast diseases at Brown University's Women and Infants Hospital in Providence, RI, after which she joined the breast care team at Roswell Park.



Cardiac Surgeon

Sandeep Gupta, MD, has joined our Division of Cardiothoracic Surgery as assistant professor of surgery. He comes to Stony Brook from the Cleveland Clinic in Cleveland, OH, where he completed both his general surgery residency and his cardiothoracic surgery fellowship. He is not only an accomplished surgeon, but also a distinguished innovator in minimally invasive mitral valve repair surgery.

Board certified in general surgery, Dr. Gupta will focus his practice at Stony Brook on surgery for all forms of adult heart disease. His special interests include minimally invasive complex mitral valve repair and aortic valve surgery, including robotic mitral valve repair.

In addition, Dr. Gupta will treat high-risk patients after acute myocardial infarctions and patients with congestive heart failure, aortic disease, and history of prior cardiac surgery. He specializes in the use of all arterial conduits for patients with coronary artery disease.

Dr. Gupta was selected for inclusion in the 2009 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America.

Dr. Gupta has numerous publications, as well as national and international presentations, to his credit. He received the Cleveland Clinic Foundation Innovator Award for development of devices to enhance the practice of minimally invasive mitral valve repair surgery. Currently, Dr. Gupta is developing new devices to allow mitral valves to be repaired with smaller incisions. His research interests include minimizing the risk of acute and chronic rejection in heart and lung transplant recipients by identifying new HLA and non-HLA antibodies involved in organ rejection.

Dr. Gupta received his MD with honors in 2000 from the University of Vermont College of Medicine in Burlington, VT. He then went to the Cleveland Clinic for his training in general surgery, after which he completed a transplant research fellowship there in the departments of thoracic and cardiothoracic surgery and transplantation. Subsequently, in 2006, he entered the training program in cardiothoracic surgery.



Colorectal Surgeon

Paula I. Denoya, MD, has joined our Division of Colon and Rectal Surgery as assistant professor of surgery. She comes to Stony Brook from Cleveland Clinic Florida, located in Weston, FL, where she completed fellowship training in colorectal surgery.

Board certified in general surgery, Dr. Denoya will focus her practice at Stony Brook on all aspects of colon and rectal surgery, including laparoscopic colorectal surgery, colonoscopy, colorectal cancer, diverticulitis, inflammatory bowel disease, and anorectal diseases.

Dr. Denoya was selected for inclusion in the 2009 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America.

Dr. Denoya's research interests are in the areas of laparoscopic surgery, inflammatory bowel disease, and colorectal cancer.

Dr. Denoya received her MD in 2002 from Mount Sinai School of Medicine in New York, NY. At her graduation she was given the Eugene W. Friedman MD Award for Clinical Excellence. She subsequently completed her residency in general surgery there. She then spent a year at Cleveland Clinic Florida as a clinical research fellow in the colorectal surgery department, and went on to complete her fellowship training in colorectal surgery.



General Surgeon

Jared M. Huston, MD, has joined our Division of General Surgery, Trauma, Surgical Critical Care, and Burns as assistant professor of surgery. He comes to Stony Brook following his residency in general surgery at Weill Cornell Medical College (New York Presbyterian Hospital) in New York, NY.

Dr. Huston will focus his practice at Stony Brook on the management of diseases of the gastrointestinal tract and endocrine systems; minimally invasive laparoscopic and conventional surgery for inguinal and incisional/ventral hernias, gallbladder and biliary disease, and diseases of the stomach and spleen.

Dr. Huston will also serve on our trauma service, where he will perform emergency surgery in the management of injured patients.

In addition to his practice, Dr. Huston will pursue his research interests in shock hypoxia and inflammation, and will further extend the department's scholarly activity in this area. He will launch our second research core laboratory, focusing on inflammatory processes.

Dr. Huston received his MD in 2001 from Stony Brook University. He earned considerable distinction as a medical student here, and was elected to membership in the Alpha Omega Alpha Honor Medical Society, serving for a year as president of the Stony Brook Mu Chapter.



Otolaryngologist, Laryngologist

Elliot Regenbogen, MD, has joined our Division of Otolaryngology-Head and Neck Surgery as assistant professor of surgery. His expertise in laryngology and general otolaryngology complements the strengths of our existing ENT faculty. He comes to Stony Brook from Westchester County, where he had practiced general otolaryngology for 17 years, and also served as chairman of the otolaryngology department at Northern Westchester Hospital.

Board certified in otolaryngology, Dr. Regenbogen will focus his practice at Stony Brook on general otolaryngology-head and neck surgery, as well as on advanced diagnosis and treatment of voice and swallowing disorders. His clinical practice will also include the diagnosis and treatment of chronic sinus conditions, postnasal drip, nasal obstruction, allergy, loss of smell and taste, reflux esophagitis, snoring, hearing loss, and ear infections.

Dr. Regenbogen was selected for inclusion in the 2009 edition of *Guide to America's Top Physicians*, published by the Consumers' Research Council of America.

Dr. Regenbogen's research interests include the development of ultrahigh resolution immunofluorescent-based imaging systems for the detection and treatment of benign

and malignant disorders of the vocal cords, head and neck, and paranasal sinuses.

Dr. Regenbogen received his MD in 1986 from Albert Einstein College of Medicine, where he subsequently completed his residency training. His training included a preceptorship at Japan's Kurume University Hospital under Minoru Hirano, MD, PhD, one of the founders of modern concepts in laryngology, as well as collaboration with Wilbur J. Gould, MD, and Stanley M. Blaugrund, MD, at the Ames Vocal Dynamics Laboratory of Lenox Hill Hospital in New York.



Plastic Surgeon, Hand Surgeon

Jason C. Ganz, MD, has joined our Division of Plastic and Reconstructive as assistant professor of surgery. He comes to Stony Brook from New York Medical College, where he practiced at Westchester Medical Center in Valhalla, NY. Previously, he was on the faculty of Case Western Reserve University in Cleveland, OH, and on staff at University Hospitals/Case Western Medical Center, as well as at Louis Stokes Cleveland Veterans Affairs Medical Center, where he was chief of plastic surgery.

Board certified in plastic surgery, Dr. Ganz will focus his practice at Stony Brook on reconstructive and aesthetic surgery; hand surgery, including treatment of hand and wrist disorders, fractures, tendon injury, and nerve injury or compression (carpal tunnel); microsurgery; breast reconstruction after cancer, breast reduction, and breast augmentation; nose surgery; treatment of facial fractures; reconstructive surgery for burn patients; facelift, gen-

eral liposuction, and tummy-tuck surgery; evaluation and surgical management of chronic wounds (skin grafting and soft-tissue flap coverage).

Dr. Ganz was selected for inclusion in the 2009 edition of *Guide to America's Top Plastic Surgeons*, published by the Consumers' Research Council of America.

Dr. Ganz received his MD in 1998 from New York Medical College, where his outstanding performance earned him election to the Alpha Omega Alpha Honor Medical Society. He was trained in plastic surgery at Georgetown University in Washington, DC. Subsequently, he completed his fellowship training in hand surgery in the orthopaedics department here at Stony Brook.



Vascular Surgeon

David S. Landau, MD, has joined our Division of Vascular Surgery as assistant professor of surgery. He comes to Stony Brook from the University of Illinois at Chicago, where for the past 12 years he has been a member of the surgical faculty, and recently served as interim chief of vascular surgery. A leader in minimally invasive surgery, he was responsible for the creation and maintenance of all endovascular capabilities at the University of Illinois Medical Center.

Board certified in both general surgery and vascular surgery, Dr. Landau will focus his practice at Stony Brook on all areas of arterial and venous surgery, using both conventional surgical techniques and minimally invasive endovascular techniques; arterial conditions related to carotid, aor-

tic, and lower extremity diseases; and venous conditions including varicose veins and venous insufficiency. In addition, he has a special interest in lower extremity limb salvage.

Dr. Landau was selected for inclusion in the 2009 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America.

Dr. Landau's research interests include computed tomographic (CT) angiography and gene therapy for myointimal hyperplasia.

Dr. Landau received his MD in 1990 from SUNY Upstate Medical University in Syracuse, NY. He completed his residency in general surgery at the University of Illinois at Chicago, followed by a one-year vascular surgery research fellowship. He then completed his fellowship training in vascular surgery at the Ohio State University College of Medicine in Columbus, OH, and from there joined the surgical faculty at the University of Illinois at Chicago. In 2002, he completed a threemonth fellowship in endovascular surgery at the Cleveland Clinic in Cleveland, OH.

Since 2004, Dr. Landau was also a member of the adjunct surgical faculty of Northwestern University. In addition, at the University of Illinois Medical Center he served as medical director of the Blood Flow Laboratory (certified by the Intersocietal Commission for the Accreditation of Vascular Laboratories), and director of the Wound Clinic there.



Dr. Rizk	(631) 638-1000
Dr. Gupta	(631) 444-1820
Dr. Denoya	(631) 444-4545
Dr. Huston	(631) 444-4545
Dr. Regenbogen	(631) 444-4121
Dr. Ganz	(631) 444-4666
Dr Landau	(631) 444-4545

Breast Care Center Gains National Accreditation

First in New York State



In May, the Carol M. Baldwin Breast Care Center was granted a three-year/full accreditation designation by the National Accreditation Program for Breast Centers (NAPBC), a new program administered by the American College of Surgeons. Our breast center is the first in New York State to gain this quality-assurance designation, which further demonstrates our long commitment to excellence in patient care.

Accreditation by the NAPBC is given only to those centers that have voluntarily committed to provide the highest quality care in breast disease diagnosis and treatment, and that undergo a rigorous evaluation process and review of their performance.

Our breast center successfully demonstrated compliance with standards established by the NAPBC for treating women who are diagnosed with the full spectrum of breast disease. The standards include proficiency in the areas of center leadership, clinical management, research, community outreach, professional education, and quality improvement.

A breast center that achieves NAPBC accreditation has demonstrated a firm commitment to offer its patients every significant advantage in their battle against breast disease.

Brian J. O'Hea, MD, associate professor of surgery and chief of surgical oncology, who serves as medical director of the Breast Care Center, says:

"NAPBC accreditation involves a rigorous 60-page application process, as a well as a full-day site visit. We were judged on 27 separate standards, and we passed all of them without any deficiencies. We were awarded three-year/full accreditation, and we are the first breast center in New York State to be so recognized."

"This is a great accomplishment for our breast program, our hospital, and the entire university community. This accreditation is further validation of the high-quality state-of-the-art breast care that we provide here at Stony Brook. Our team will continue to work hard in serving the needs of the patients in our community."

The NAPBC is a consortium of professional organizations dedicated to the improvement of the quality of care and the monitoring of outcomes for patients with diseases of the breast. This mission is pursued through standard-setting, scientific validation, and patient and professional education.

Bringing together leaders from the major medical disciplines that routinely work together to diagnose and treat breast disease, the NAPBC created 27 program standards and 17 program components of care that collectively provide the most efficient and contemporary care available for patients diagnosed with diseases of the breast.

NAPBC-accredited breast centers have met the criteria set forth for each discipline treating patients with breast disease. When a breast center applies for NAPBC accreditation, it does so with the understanding that it will offer a multidisciplinary approach to diagnosing and treating breast disease.

Moreover, the center must be willing to undergo a rigorous application process and on-site survey to assure its patients that NAPBC standards are being met. Accredited breast centers also agree to maintain their high level of clinical care with recertification by the NAPBC required every three years.

Established in 1993, our multidisciplinary Breast Care Center was the first of its kind in Suffolk County, and it still is the only one of its kind in our region.

At Stony Brook, our weekly Treatment Planning Conference is a multidisciplinary forum where our physicians review potential treatment options for patients with newly diagnosed cancer or patients with recurrent disease. At this conference, their individual cases are presented to a team

of highly trained cancer specialists, including radiologists, breast surgeons, pathologists, reconstructive surgeons, radiation oncologists, and medical oncologists.

Indeed, our multidisciplinary team approach to breast cancer treatment distinguishes the quality of care we provide for our patients.

NAPBC accreditation requires that the Breast Care Center offer a complete range of state-of-the-art services and equipment; a multidisciplinary team approach to coordinating the best available treatment options; information about ongoing cancer clinical trials and new treatment options; access to prevention and early detection programs, cancer education, and support services; and ongoing monitoring and improvements in cancer care.



NAPBC Performance Report Summary says: "The breast specialists at the Carol M. Baldwin Breast Care Center provide all the necessary components for complete, state-of-the-art, and comprehensive breast care. They diagnose and treat benign and malignant disease, and have a welldeveloped algorithm for patient intake and navigation through the diagnosis and treatment phases of breast cancer care. They offer multiple educational and support services, as well as offer community outreach education and many different types of screening and support programs to satisfy the diverse cultural mix of their patient population."

Performing Clinical Trials

Advancing Patient Care

Our faculty is committed to excellence in research, in order to find new and better treatments for our patients, as part of our commitment to excellence in patient care.

We currently are performing some 30 clinical trials to evaluate the effectiveness of potentially new treatment options related to the surgical specialties represented by our physicians.

Our goal is to give patients the opportunity to participate in approved and exploratory therapies without long-distance travel.

Our clinical trials enable us to use, in addition to established therapies, the newest and most advanced technologies and treatments—long before they are available to other physicians.

Our Current Clinical Trials Involve These Conditions

- Claudication
- Deep venous thrombosis
- Hemorrhoid
- Hernia in colorectal surgery
- Ileus in colorectal surgery
- Ischemia in CABG
- Lung cancer

- Melanoma
- MRSA in heart surgery
- Nosocomial pneumonia
- Peripheral artery disease
- Wound healing
- Plus more!

For information about current clinical trials in the Department of Surgery, please call our clinical research coordinator Eileen Finnin, RN, at (631) 444-5454.

Clinical Trials

Trial of Lymph Node Surgical Options in Melanoma

Patient Volunteers Needed

The Multicenter Selective
Lymphadenectomy Trial II is a
national surgical trial that is
evaluating the role of lymph node
surgery in patients with melanoma.
The current recommendation for
patients with a positive sentinel
node biopsy is to undergo a
completion lymph node dissection.

However, at present, no clear evidence demonstrates that patients have better survival if this surgery to remove the lymph nodes is done, although previous data suggest that patients at least have a longer disease-free survival with completion lymph node dissection.

Lymphadenectomy (LIM-fadeh-NEK-toh-mee) is a surgical procedure in which the lymph nodes are dissected (removed) and examined to see if they contain cancer. In sentinel lymph node biopsy, the surgeon removes only the very first node that filters fluid draining away from the area of the cancer, in order to determine whether further lymph node surgery is needed.

The Multicenter Selective
Lymphadenectomy Trial II is
designed to determine if a
therapeutic benefit exists for routine
completion lymph node dissection
in patients with microscopic or
molecular involvement of the
sentinel lymph node.

Any patient with cutaneous (skin) melanoma and a positive sentinel node is eligible for the trial. The sentinel node procedure does not have to be done at Stony Brook, so patients can be referred to us after their initial surgical procedure.

Patients who enroll are randomized to either immediate lymph node dissection or observation of the nodal basin with ultrasound every four months. The lymph node dissection or ultrasounds do need to be done at Stony Brook.

To maintain continuity of care of those patients referred to us, we involve the referring physician in the patient's long-term follow-up.

For more information or to refer a patient, please call our melanoma navigator Claire Smith, RN, at (631) 444-1244.

ALUMNI NEWS

Since the class of 1975 entered the profession of surgery, 190 physicians have completed their residency training in general surgery at Stony Brook. The alumni of this residency program and our other residency (fellowship) programs now practice surgery throughout the United States, as well as in numerous other countries around the world—and we're proud of their diverse achievements and contributions to healthcare.

		Name	Career Direction
2009 Graduating Residents	GENERAL SURGERY	Salim Amrani, MD	Colorectal surgery fellowship at Stony Brook U
		Kwan Nang Lau, MD	Hepatobiliary surgery fellowship at U of North Carolina-Charlotte
		Kristine O'Hara, MD	Laparoscopic surgery fellowship at St. Francis Hospital, Hartford, CT
		Garri Pasklinsky, MD	Vascular surgery fellowship at Stony Brook U
		Michael Sleet, MD	Critical care fellowship at U of Pittsburgh, followed by cardiothoracic surgery fellowship at U of California-San Diego
		Andrea Zimmern, MD	Laparoscopic colorectal surgery fellowship at U of Illinois-Chicago
	COLORECTAL SURGERY	David Hong, DO	Private practice in Garden City, NY
	VASCULAR SURGERY	Dmitri Gelfand, MD	Private practice with Sutter Gould Medical Group, Modesto, CA

Dr. Elias R. Quintos ('87) reports that he has taken root well in Punta Gorda, FL, where he relocated in 2007. He continues his cardiothoracic surgery practice and, as he has done for the past 10 years, to perform offpump coronary bypass surgery operations, many on octogenarians. Other interests include atrial fibrillation surgery and off-pump redo-coronary bypass surgery through the anterolateral thoracotomy approach. He also continues to be honored by inclusion in the latest editions of Consumers' Research Council of America Guide to America's Top Surgeons.

Dr. William S. Cassel ('91) is practicing general and vascular surgery in Muncie, IN, and also contributes to Ball State University's Center for Medical Education. He does research at Ball Memorial Hospital, where he has been a principal investigator since 2000. Recently, he conducted a clinical trial that, hopefully, will lead to identification of genetic traits contributing to plague formation in carotid arteries, better understanding of the structure and buildup of plague, and discovery of additional biomarkers (DNA, RNA, and proteins in blood and tissue) to allow earlier detection and treatment of plaque forming in patients.

Dr. Steven J. Busuttil ('94), a vascular surgeon, is on the faculty at the University of Maryland as assistant professor of surgery. He serves as medical director of the Non-Invasive Vascular Laboratory of the VA Maryland Health Care System. He also has been doing research to investigate the inflammatory response induced by different vascular biomaterials.

Dr. Steve R. Martinez ('03), a surgical oncologist, is now on the faculty (assistant professor of surgery) of the University of California-Davis, where he completed his participation in the NIH-sponsored K30 Mentored Clinical Research Training Program, and earned a master's degree in applied science. In the past year he has published eight peer-reviewed papers, of which the following three he chose to mention:

Chen SL, Martinez SR. The survival impact of the choice of surgical procedure after ipsilateral breast cancer recurrence. *Am J Surg* 2008;196:495-9.

Leggett MD, Chen SL, Schneider PD, Martinez SR. Prognostic value of lymph node yield and metastatic lymph node ratio in medullary thyroid carcinoma. *Ann Surg Oncol* 2008;15:2493-9.

Martinez SR, Robbins AS, Meyers FJ, Bold RJ, Khatri VP, Goodnight JE Jr. Racial and ethnic differences in treatment and survival among adults with primary extremity soft-tissue sarcoma. *Cancer* 2008;112:1162-8.

Dr. Martinez has given nine research presentations in the past year, of which the following three he chose to mention:

Local and regional therapies influence overall survival in patients with locally advanced breast cancer [authors: Martinez SR, Chen SL, Bold RJ]. Annual Meeting of the Pacific Coast Surgical Association. San Francisco, CA; February 2009.

Racial and ethnic disparities in overall and breast cancer-specific survival in 15,895 patients with advanced breast cancer [authors: Chen SL, Martinez SR]. Annual Academic Surgical Congress. Fort Myers, FL; February 2009.

Advanced breast cancer survival in the pre- and post-anthracycline era [authors: Martinez SR, Chen SL, Canter RJ, Khatri VP, Bold RJ]. Annual Meeting of the American Radium Society. Vancouver, BC; April 2009. Dr. Martinez writes that he looks forward to increasing his academic productivity in the coming years.

Dr. Hiroshi Sogawa ('06) became a transplant surgeon. and last year was appointed to the faculty, as assistant professor of surgery, at the Mount Sinai School of Medicine in New York, NY. He is based in the Recanati/Miller Transplantation Institute, where his practice includes liver, intestine, kidney, and pancreas transplantation. He is active in both adult and pediatric liver transplant, in addition to intestinal transplant and intestinal rehabilitation. The Recanati/Miller Transplantation Institute has accomplished 3,000 liver transplants, and last year celebrated its 20th anniversary.



Our 2009 graduating residents (from left to right), Drs. David Hong, Michael Sleet, Salim Amrani, Kristine O'Hara, Andrea Zimmern, Kwan Nang Lau, Garri Pasklinsky, and Dmitri Gelfand, at the graduation banquet held in June at Stony Brook's Charles B. Wang Center.

2009 Resident Match

Our resident match this year was an exceptional success, as general surgery continued to be a very competitive specialty throughout the nation. We received 700 applications, interviewed 70 candidates, and offered positions to six of them who were in the top third.

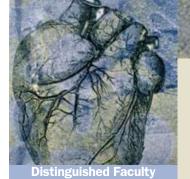
Our six new residents—all stellar young doctors, from Tufts University, New York Medical College, SUNY Downstate, SUNY Buffalo, UMDNJ, and University of Athens—highly matched our preferences among all applicants desiring to train at Stony Brook.

Conducted annually by the National Resident Match Program (NRMP), the match uses a computer algorithm designed to produce favorable results for medical students applying for residency training positions in all specialties available at U.S. teaching hospitals.

The NRMP is a private, not-forprofit organization established in 1952, at the request of medical students, to provide an orderly and fair mechanism to match the preferences of applicants with the preferences of residency program directors for those applicants.

alum info and submissions

To submit alumni news online and to find current mailing addresses of our alumni, please visit the Department's website at www.StonyBrookSurgery.org GENERAL SURGERY ALUMNI: Please send your e-mail address—for inclusion in the Alumni Directory—to Jonathan. Cohen@StonyBrook.edu



Keith D. Aaronson, MD, MS, Cardiac Transplantation, University of Michigan Medical Center, Ann Arbor, MI Saverio
J. Barbera, MD, Cardiovascular Medicine, Stony Brook University Medical Center, Stony Brook, NY Peter B. Berger, MD Cardiovascular Medicine, Geisinger Health Systems, Danville, PA > Peter C. Block, MD, Valvular Intervention & Structural Heart Disease Treatment, Emory University, Atlanta, Robert O. Bonow, MD, Cardiology, Northwestern University, Northwestern Memorial Hospital, Chicago, IL L. Brown, MD, Cardiovascular Medicine, Stony Brook University Medical Center, Stony Brook, NY Kuang-Yuh Chvu. MD, PhD, Cardiology, Cedars-Sinai Heart Institute, Los Angeles, CA Jay N. Cohn, MD, Cardiovascular Disease Prevention University of Minnesota, Minneapolis, MN James L. Cox, MD, Cardiothoracic Surgery, Washington University, St. Louis, Caldwell B. Esselstyn, Jr., MD, Preventive Medicine, Cleveland Clinic Foundation, Cleveland, OH A. Gaziano, MD, MSc, Cardiology & Social Medicine, Harvard Medical School, Boston, MA Geoffrey S. Ginsburg, MD, PhD, Cardiovascular & Genomic Medicine, Duke University, Durham, NC Michael
R. Gold, MD, PhD, Cardiology, Medical University of South Carolina, Charleston, SC Barry H. Greenberg, MD, Advanced Heart Failure Program, University of California-San Diego Medical Center, San Diego, CA Philip Greenland, MD, Cardiovascular Medicine, Clinical & Translational Research, Northwestern University, Northwestern Memorial Hospital, Chicago, IL Gruberg, MD, Cardiovascular Medicine & Catheterization, Stony Brook University Medical Center, Stony Brook, NY Sanjay Kaul, MD, Vascular Physiology & Thrombosis Research, Cedars-Sinai Medical Center, Los Angeles, Smadar Kort, MD, Cardiovascular Medicine & Imaging, Stony Brook University Medical Center, Stony Brook, NY Itzhak Kronzon, MD, Non-Invasive Cardiology, New York University, New York, NY Joseph Lamelas, MD, Cardiac Surgery, Mount Sinai Medical Center, Miami Beach, Michael J. Mack, MD, Cardiac Surgery, Cardiothoracic Surgery Associates of North Texas, Dallas, TX Francis E. Marchlinski, MD, Cardiovascular Medicine & Cardiac Electrophysiology, Hospital of the University of Pennsylvania, Philadelphia, PA Allison J. McLarty, MD, Cardiothoracio Surgery, Stony Brook University Medical Center, Stony Brook, NY Emerson C. Perin, MD, PhD, Cardiovascular Medicine, Texas Heart Institute, Houston, TX Michael Poon, MD, Cardiovascular Medicine & Radiology, Stony Brook University Medical Center, Stony Brook, NY Eric J. Rashba, MD, Cardiovascular Medicine & Cardiac

E lectrophysiology, Stony Brook University

K. Rosengart, MD, Cardiothoracic Surgery,

Stony Brook University Medical Center, Stony Brook, NY Frank C. Seifert, MD,

Skopicki, MD, PhD, Cardiovascular Medicine, Stony Brook University Medical Center, Stony

Valve Intervention, St. Paul's Hospital, University

of British Columbia, Vancouver, BC, Canada

John G. Webb, MD, Heart

Cardiothoracic Surgery, Stony Brook Univer

Medical Center, Stony Brook, NY

Medical Center, Stony Brook, NY

SECOND "MEETING OF THE MINDS"
SYMPOSIUM ON HEART DISEASE
A Great Success Once Again

In June, our second annual Meeting of the Minds symposium brought together national leaders in the field of cardiovascular medicine to discuss advances in therapy and patient care. The two-day symposium, held in Montauk, NY, was attended by nearly 200 clinical

and interventional cardiologists, cardiac surgeons, internists, and other healthcare professionals.

Focusing on the latest clinical research, speakers raised critical questions that provoked serious thought—all with the goal of improving patient care. Session topics included coronary artery disease, defining risk, ablation therapy for arrhythmias, treatment options for aortic stenosis, heart failure, and treatment approaches to mitral regurgitation.

The symposium's program directors—the co-directors of the Stony Brook Heart Center—were David L. Brown, MD, professor of medicine and chief of cardiovascular medicine, and Todd K. Rosengart, MD, professor and chairman of surgery and chief of cardiothoracic surgery.

Commenting on the success of the symposium, Dr. Rosengart says: "The feedback from internists and cardiologists attending from around the region was extremely positive. All were thrilled that we were able to provide such a high-quality conference in our community. Such feedback encourages us in our efforts to organize next year's program."

Dr. Rosengart co-moderated the session on treatment approaches to mitral regurgitation, and also gave a presentation on mitral valve repair.

Other members of our surgical faculty who participated in the symposium were Frank C. Seifert, MD, associate professor of surgery, who moderated the panel on coronary artery disease, and Allison J. McLarty, MD, associate professor of surgery, who co-moderated the panel on treatment options for aortic stenosis.

The featured "Montauk Lecture"—titled "The Powerful Role of Genomics in the Future of Cardiovascular Medicine"—was given by Geoffrey S. Ginsburg, MD, PhD, professor of medicine and pathology, and director of the Center for Genomic Medicine, at Duke University.

Dr. Ginsburg described how the practice of cardiovascular medicine is now developing "a new genomic toolbox" to predict and treat disease more effectively, and how patient care will improve in the near future, thanks to the recent sequencing of the human genome.

The symposium faculty included James L. Cox, MD, past president of the American Association for Thoracic Surgery, who gave an update on the landmark procedure he developed in the mid-1980s to treat atrial fibrillation (irregular heartbeat), known as the Cox-Maze operation. The day before the symposium, Dr. Cox joined us at our weekly grand rounds to discuss this operation.

Other distinguished faculty included Northwestern University's Robert O. Bonow, MD, past president of the American Heart Association, and Stony Brook University's Michael Poon, MD, past president of the Society of Cardiovascular Computed Tomography.

Co-sponsored by Stony Brook
University School of Medicine and
University Hospital Auxiliary, the
Meeting of the Minds symposium
was accredited by the Accreditation
Council for Continuing Medical
Education to provide continuing
medical education for physicians,
and designated for a maximum of
13 AMA PRA Category 1 Credit(s)™.

For information about the cardiovascular symposium planned for next year, please call the Division of Cardiothoracic Surgery at (631) 444-1820.

Implementing WHO Surgical Safety Checklist *Taking Steps to Reduce*

Preventable Harm

In April, in conjunction with the World Health Organization (WHO) and the Institute for Healthcare Improvement, Stony Brook University Medical Center participated with more than 800 institutions nationally to use a new formal communication process—known as the Surgical Safety Checklist—to ensure that evidenced-based patient safety practices are used in the operating room. Several educational sessions were conducted here in April, and the checklist is in pilot stages.

The checklist, developed by a WHO-based team of clinical experts, is a one-page tool that itemizes essential safety steps that surgical teams should perform at three key stages of surgery: before administering anesthesia,

before skin incision, and before the patient leaves the operating room.

The WHO Surgical Safety Checklist has been shown to lower significantly the incidence of surgery-related deaths and complications.

The overriding goal of the checklist is to reduce complications and deaths that often stem from poor communication among members of the operating team. Like other institutions, Stony Brook adapted the WHO Surgical Safety Checklist to tailor it to our own staff and operating room.

Frank C. Seifert, MD, associate professor of surgery, with Kathryn A. Scheriff, RN, MS, CNOR, nurse manager of the operating room suite, and Mary Lee Schroeter, BSN, quality management practitioner in the continuous quality improvement department, led the medical center's successful participation in the nationwide initiative to use the checklist. Antonios P. Gasparis, MD, assistant professor of surgery, subsequently joined the leadership group.

Our implementation of the checklist originated with Peter S. Glass, MB, ChB, professor and chairman of anesthesiology, and Todd K. Rosengart, MD, professor and chairman of surgery and chief of cardiothoracic surgery, who together decided to use it here at Stony Brook.

As reported in the pilot study of the checklist published in January in the New England Journal of Medicine, hospitals in eight cities around the world successfully demonstrated that use of the checklist during major operations can lower the incidence of deaths and complications by

more than one third.

The rate of major inpatient complications dropped from 11% to 7%, and the inpatient death rate following major operations fell from 1.5% to 0.8% after implementation of the checklist. The effect was of similar magnitude in both high and low/middle income country sites.

The NEJM pilot study found that inpatient deaths following major operations fell by more than 40% with implementation of the checklist.

Dr. Rosengart says, "Our implementation of the WHO Surgical Safety Checklist will help enhance the safety of our patients, and also will help our hospital to continue to succeed with regulatory agencies, such as the Joint Commission. Dr. Seifert and his colleagues are to be congratulated for this achievement, which benefits us all."

Selected Recent Publications*

- Ahmed F, Salhab K, Stergiopoulos K, Seifert F, Baram D. Intramural hematoma of the aorta: delayed pericardial tamponade. Thorac Cardiovasc Surg 2009;57:112-4.
- Barie PS, Eachempati SR, Shapiro MJ. Antibiotic therapy: the old, the new and the future. In: Asensio JA, Trunkey DD, editors. Current Therapy of Trauma and Surgical Critical Care. Philadelphia: Mosby-Elsevier, 2008: 688-701.
- Bergamaschi R, Essani R. Laparoscopic resection for rectal cancer: are we there yet? *Colorectal Dis* 2009;11:1-2. **Bilfinger TV**. Descending aortic athero-
- sclerotic ulcers: natural history and treatment. In: Cao P, Giannoukas AD. Moll FL, Veller M, editors. Vascular Aneurysms. Volos, Greece: University of Thessally Press, 2009: 145-50.
- Braziuniene I, Garlick J, Mileva I, Desikan V, Wilson TA, McNurlan M. Effect of insulin with oral nutrients on whole-body protein metabolism in growing pubertal children with type 1 diabetes. Pediatr Res 2009;65:109-12.
- * The names of faculty authors appear in boldface.

- Brophy GM, Sheehan V, Shapiro MJ, Lottenberg L, Scarlata D, Audhya P; ASSESS Study Group and Amgen Inc. A US multicenter, retrospective, observational study of erythropoiesisstimulating agent utilization in anemic, critically ill patients admitted to the intensive care unit. Clin Ther 2008:30:2324-34
- Caso G, Barry C, Patejunas G. Dysregulation of CXCL9 and reduced tumor growth in Egr-1 deficient mice. J Hematol Oncol 2009;2:7.
- Chaudhary ND, Rivadeneira DE, Ranire-Maguire M, Corman ML. Topical sucralfate post-hemorrhoidectomy: an affordable and feasible treatment option. Dis Colon Rectum 2008;51:1857-8.
- Chiu ES, Kraus D, Bui DT, Mehrara BJ, Disa JJ, Bilsky M, Shah JP, Cordeiro PG. Anterior and middle cranial fossa skull base reconstruction using microvascular free tissue techniques: surgical complications and functional outcomes. Ann Plast Surg 2008;60:514-
- Eachempati SR, Shapiro MJ, Barie PS. Fundamentals of mechanical ventilation. In: Asensio JA, Trunkey DD, editors. Current Therapy of Trauma and Surgical Critical Care. Philadelphia: Mosby-Elsevier, 2008: 609-20.

- Essani R, Bergamaschi R. Laparoscopic management of adhesive small bowel obstruction. Tech Coloproctol 2008;12:283-7.
- Gasparis A, Kokkosis A, Labropoulos N, Tassiopoulos A, Ricotta J. Venous outflow obstruction with retroperitoneal Kaposi's sarcoma and treatment with inferior vena cava stenting. Vasa Endovascular Surg 2009;43:295-300.
- Gasparis AP. Evaluation of reflux and obstruction with duplex ultrasound In: Wittens C. editor. Innovative Treatment of Venous Disorders, Torino, Italy: Edizioni Minerva Medica, 2009: 41-9
- Gasparis AP, Labropoulos N, Kontothanassis D, Tassiopoulos AK. Are there any veins which should be excluded from endovenous ablation? In: Becquemin JP, Alimi YS, Gérard IL. editors. Controversies and Updates in Vascular Surgery. Torino, Italy: Edizioni Minerva Medica, 2009: 447-9.
- Gasparis AP, Labropoulos N, Tassiopoulos AK, Phillips B, Pagan J, Lo C, Ricotta J. Midterm follow-up after pharmacomechanical thrombolysis for lower extremity deep venous thrombosis. Vasc Endovascular Surg 2008;43:61-8.
- Gasparis AP, Tsintzilonis S, Labropoulos N. Extraluminal lipoma with

- common femoral vein obstruction: a cause of chronic venous insufficiency. J Vasc Surg 2009;49:486-90.
- Jeremias A. Kaul S. Rosengart TK. Gruberg L, Brown DL. The impact of revascularization on mortality in patients with nonacute coronary artery disease. Am J Med 2009;122:152-61. Kanu A, Tegay D, **Scriven R**. Bronchial
- anomalies in VACTERL association. Pediatr Pulmonol 2008;43:930-2.
- Kokkosis AA, Balsam D, Lee TK, Schreiber ZI. Pediatric nontraumatic myositis ossificans of the neck. Pediatr Radiol 2009:39:409-12.
- Kontothanassis D, Labropoulos N, Gasparis AP, Gérard JL. Endovenous laser1470 nm radial emission: preliminary results. In: Becquemin JP, Alimi YS, Gérard JL, editors. Controversies and Updates in Vascular Surgery Torino, Italy: Edizioni Minerva Medica, 2009: 455-6
- Labropoulos N, Gasparis AP, Kontothanassis D, Tassiopoulos AK. Hemodynamic patterns of the saphenofemoral junction: does location of terminal or preterminal valve incompetency change the mode of treatment? In: Becquemin JP, Alimi YS, Gérard JL, editors. Controversies and Updates in Vascular Surgery. Torino, Italy: Edizioni Minerva Medica, 2009: 399-401.

Teaching Our Residents By Playing "Surgical Jeopardy"

Building Surgical Knowledge

In January, our surgical residents (surgeons in training) and surgical faculty faced off in "Surgical Jeopardy," a game modeled in format after the popular TV show and in content by a game created by the American College of Surgeons (ACS) to test and increase surgeons' knowledge.

Be it questions on "All the World's a Stage" (tumor staging), "Tons of Fun" (bariatric surgery), or "Odds and Ends" (colorectal surgery), the competition was intense. The team of faculty members won the game in a close match.

"Our Jeopardy game encourages studying by adding some excitement to the undertaking, and highlights the importance of surgical knowledge," says Todd K. Rosengart, MD, professor and chairman of surgery and chief of cardiothoracic surgery, who acted as host.



Our faculty team (threesome at left) competing against teams of our residents.

In an age where technical advancements are constantly improving surgical techniques, knowledge is paramount for performing surgery.

Richard J. Scriven, MD, associate professor of surgery and director of residency training in general surgery, served as the judge.

In total, five teams competed. In "round one," three teams of residents played against each other for a spot in Final Jeopardy.

The winning resident team was then pitted against an "all-star" team (residents selected based on their board exam scores) and the faculty team consisting of William P. Reed, Jr., MD, professor of surgery, Joseph J. Sorrento, Jr., MD, associate professor of surgery, and Marc J. Shapiro, MD, professor of surgery and anesthesiology, and chief of general surgery, trauma, surgical critical care, and burns.

The faculty team was victorious in the Final Jeopardy round. The winners graciously donated their prizes—a free trip to a professional surgical meeting anywhere in the country—to the resident winners, Michael Sleet, MD, Dhaval Patel, MD, and Emily Wood, MD.

The ACS has held Surgical Jeopardy at its Annual Clinical Congress for five-plus years. The game tests general and specialty surgery knowledge of residents around the country, and has been a great success. In 2008, 24 resident teams challenged each other at the annual meeting. Nine ACS chapters now include Jeopardy as part of their annual continuing education meetings.

Labropoulos N, Gasparis AP, Pefanis D, Leon LR Jr, Tassiopoulos AK.
Secondary chronic venous disease progresses faster than primary. J Vasc Surg 2009;49:704-10.

Labropoulos N, Tassiopoulos AK, Gasparis AP, Phillips B, Pappas PJ. Veins along the course of the sciatic nerve. *J Vasc Surg* 2009;49:690-6.

Lee J, Corman M. Recurrence of anal adenocarcinoma after local excision and adjuvant chemoradiation therapy: report of a case and review of the literature. J Gastrointest Surg 2009;13:150-4.

Melendez MM, **Dagum AB**. Surgical subspecialties. In: LaFemina J, Lancaster RT, editors. *First Aid for the ABSITE*. New York: McGraw-Hill, 2008: 311-30.

Melendez MM, **Shapiro MJ**. Skin and soft tissue. In: LaFemina J, Lancaster RT, editors. *First Aid for the ABSITE*. New York: McGraw-Hill, 2008: 181-92. Melendez MM, **Shapiro MJ**, Eachempati SR, Barie PS. Advanced techniques in mechanical ventilation. In: Asensio JA, Trunkey DD, editors. *Current Therapy* of *Trauma and Surgical Critical Care*. Philadelphia: Mosby-Elsevier, 2008: 621-6

Moore W, **Bilfinger TV**. Cryoablation of lung tumors. In: Jett JR, Ross, ME, editors. UpToDate.com 2009.

Nicolaides A, Goldhaber SZ, Maxwell GL, Labropoulos N, Clarke-Pearson DL, Tyllis TH, Griffin MB. Cost benefit of intermittent pneumatic compression for venous thromboembolism prophylaxis in general surgery. Int Angiol 2008;27:500-6.

Pasklinsky G, Gasparis AP, Labropoulos N, Pagan J, Tassiopoulos AK, Ferretti J, Ricotta JJ. Endovascular covered stenting for visceral artery pseudoaneurysm rupture: report of 2 cases and a summary of the disease process and treatment options. Vasc Endovascular Surg 2009;42:601-6.

Rosengart TK, de Bois W, Chedrawy E, Vukovic M. Adult heart disease. In: Norton JA, Barie PS, Bollinger RR, Chang AE, Lowry SF, Mulvihill SJ, et al., editors. *Surgery: Basic Science and Clinical Evidence*. 2nd ed. New York: Springer. 2008: 1621-68.

Shapiro MJ. Stabilization of the trauma patient. In: Rehm CG, editor. Adult Problem-Based Learning Discussions. Mount Prospect, IL: Society of Critical Care Medicine, 2008: 57-65.

Shapiro MJ, McCormack JE, Jen J. Let the surgeon sleep: trauma team activation for severe hypotension. *J Trauma* 2008:65:1245-52.

Shapiro MJ, Sandoval S. Skin wounds and musculoskeletal infection In: Gabrielli A, Layon AJ, Yu M, editors. Critical Care. Philadelphia: Lippincott Williams & Wilkins, 2009: 1593-604.

Shapiro MJ, Smith-Singares E, Eachempati SR, Barie PS. Fungal infections and antifungal therapy in the surgical intensive care unit. In: Asensio JA, Trunkey DD, editors. Current Therapy of Trauma and Surgical Critical Care. Philadelphia: Mosby-Elsevier, 2008: 702-10. Tanna N, Sidell D, Schwartz AM, **Schessel DA**. Cystic lymphatic malformation of the middle ear. *Ann Otol Rhinol Laryngol* 2008:117:824-6.

Uchal M, Haughn C, Raftopoulos Y, Hussain F, Reed JF, Tjugum J, **Bergamaschi R**. Robotic camera holder as good as expert camera holder: a randomized crossover trial. *Surg Laparosc Endosc Percutan Tech* 2009;19:272-5.

Uranues S, Salehi B, **Bergamaschi R**. Adverse events, quality of life, and recurrence rates after laparoscopic adhesiolysis and recurrent incisional hernia mesh repair in patients with previous failed repairs. *J Am Coll Surg* 2008;207:663-9.

Wexner SD, **Bergamaschi R**, Lacy A, Udo J, Brölmann H, Kennedy RH, John H. The current status of robotic pelvic surgery: results of a multinational interdisciplinary consensus conference. *Surg Endosc* 2008;23:438-43.

DIVISION BRIEFS

Cardiothoracic Surgery
Dr. Thomas V. Bilfinger

Dr. Thomas V. Bilfinger, professor of surgery and director of thoracic surgery, was again selected for inclusion in the Castle Connolly Guide *Top Doctors: New York Metro Area*, published in February. This selection is based on screening by a physician-directed research team that identifies the top 10% of physicians in the tri-state New York Metropolitan area.

Dr. Bilfinger in May presented the following two studies, conducted with Stony Brook colleagues, at the American Thoracic Society International Meeting held in San Diego, CA:

Overall and disease-specific survival after surgical and non-surgical treatment for stage IA lung cancer [authors: Baram D, Moore WH, Kim BS, Bilfinger TV].

Pulmonary function testing after stereotactic body radiotherapy to the lung [authors: Baram D, Moore WH, Bilfinger TV, Kim BS].

At the annual meeting of the American Society of Anesthesiologists held in October last year in Orlando, FL, he presented these two studies:

Anesthetic management of a patient with severe bilateral mainstem bronchial obstruction [authors: Bell J, Baram D, Bilfinger TV, Izrailtyan I].

Iatrogenic rupture of right main stem bronchus after double lumen intubation [authors: Tsang M, Izraityan I, Bilfinger TV, Leszak S, Moller D].

This fall, Dr. Bilfinger will have the following study presented at the Annual Clinical Congress of the American College of Surgeons, to be held in October in Chicago, IL.

Comparison of survival after sublobar resection and ablative therapies for stage I non-small cell lung cancer (NSCLC) [authors: Zemlyak A, Moore WH, Bilfinger TV].

The first author of this study, Dr. Alla Zemlyak, is a senior resident in our residency program in general surgery. Dr. William H. Moore is a member of the radiology faculty at Stony Brook.

Dr. Allison J. McLarty has been promoted to associate professor of surgery. She heads our program in thoracic aortic surgery and our program in integrative medicine. She also serves as associate director of residency training in general surgery.

Dr. Todd K. Rosengart, professor and chairman of surgery and chief of cardiothoracic surgery, in June served as program co-director (with Dr. David L. Brown, chief of cardiovascular medicine at Stony Brook) of the second annual "Meeting of the Minds" symposium on advances in therapy in cardiovascular disease. See article on page 9.

This fall, Dr. Rosengart will participate as a discussant at the Surgical Forum session on targeted therapies at the **Annual Clinical Congress** of the American College of Surgeons, to be held in October in Chicago, IL. As an expert in targeted therapies, he has been invited to comment on the study titled "Efficient Gene Transfer to Muscle Satellite Cells by In Utero Intravenous Delivery of Adeno-Associated Viral Vector."

Dr. Rosengart was again selected for inclusion in the Castle Connolly Guide, *America's Top Doctors*, published in January. This work identifies the **top 1% of physicians** in the United States and reflects the results of tens of thousands of physician respondents to Castle Connolly's nationwide survey process. Dr. Rosengart is also included again in Castle

Connolly's *Top Doctors: New York Metro Area*, published in February.

At the third annual celebration dinner for heart surgery patients, held at Stony Brook University Medical Center in February just before Valentine's Day, Dr. Rosengart gave a presentation in which he said our cardiac services are approaching perfection. He credited modern technology and our surgical team for this success. He cited our 99% success rate in bypass surgery, and detailed our advances in minimally invasive valve surgery. A total of 240 people, including 67 patients, attended the event.

Dr. Rosengart in February was a featured guest on the weekly WALK 97.5 FM talk show Island Assignment to discuss American Heart Month and describe to listeners some of the ways to prevent and treat heart disease. Every year, the American Heart Association designates February as American Heart Month, a time for learning about cardiovascular health. about risk factors, about warning signs of heart attack and stroke.

Dr. Rosengart last fall was elected to the New York Surgical Society. Established in 1879, the society's purpose remains the same: to promote "the highest standards of surgical practice in the world's greatest city," and to provide a forum for the advancement of surgical science.

Colon and Rectal Surgery

Dr. Roberto Bergamaschi, professor of surgery and chief of colon and rectal surgery, in May was invited to join the advisory board of *Colorectal Disease*, the journal of the Association of Coloproctology of Great

Britain and Ireland. A multidisciplinary and international journal, it publishes high-quality original articles in the field of colorectal disease.

Dr. Bergamaschi in March gave the following three poster presentations of studies done with our residents at the Residents' Night of the New York Society of Colon and Rectal Surgeons, held in New York, NY:

Development of solid cecal cancer rat model with colonoscopic submucosal injection [authors: Polcino M, Essani R, Bergamaschi R].

Standardized laparoscopic intracorporeal right colectomy for cancer [authors: Kwon AO, Essani R, Bergamaschi R].

Unusual presentation of a primary jejunal sarcoma: a case report [authors: Angelos G, O'Hara K, Essani R, Bergamaschi R].

Dr. Bergamaschi in February was a member of the guest faculty at the Annual Congress of the International Society of Laparoscopic Colorectal Surgery, held in Weston and Hallandale Beach, FL. He served as moderator of the session titled "Laparoscopic Colorectal Techniques: Technical Pearls." He also gave a special presentation titled "Mentoring and Telementoring" for the session on training and credentialing for laparoscopic colectomy.

Dr. Bergamaschi in January gave a presentation titled "Laparoscopic Treatment of Colorectal Surgery" at the meeting of the Finnish Society of Surgeons, held in Bad Gastein, Austria.

Dr. Marvin L. Corman, professor of surgery, in April attended the National and International Congress of the Mexican Society of Colon and Rectal Surgery, held in Aguascalientes, Mexico. He gave two lectures there, titled "The Daughters of Mnemosyne and Zeus" and "Local Treatment of Rectal Cancer—A Reappraisal."

Dr. William B. Smithy, assistant professor of surgery, was again selected for inclusion in the Castle Connolly Guide *Top Doctors: New York Metro Area*, published in February. This selection is based on screening by a physician-directed research team that identifies the **top 10% of physicians** in the tri-state New York Metropolitan area.

In observance of March as Colorectal Cancer Awareness Month, Drs. Bergamaschi, Corman, and Smithy provided a free community lecture on the prevention and treatment of colorectal cancer on March 25 at Stony Brook University Medical Center. Attendees were able to sign up for free colorectal cancer screenings.

General Surgery, Trauma, Surgical Critical Care, and Burns

Dr. Marc J. Shapiro, professor of surgery and anesthesiology, and chief of general surgery, trauma, surgical critical care, and burns, was again selected for inclusion in the Castle Connolly Guide *Top Doctors: New York Metro Area*, published in February. This selection is based on screening by a physician-directed research team that identifies the **top 10% of physicians** in the tri-state New York Metropolitan area.

Dr. Shapiro in May was recognized at the New York City Police Surgeons Dinner as a member of the NYPD Police Surgeons.

Dr. Shapiro in February was a visiting professor and guest of the Hadassah University Medical Center in Jerusalem, Israel. He gave a grand rounds lecture titled "The Golden Four Hours: What Have We Learned?" to the surgery, anesthesia, critical care, and emergency medicine departments at the medical center's two hospitals, Hadassah-Ein Karem and Hadassah-Mount Scopus.

In January, here at Stony Brook, Dr. Shapiro gave a talk titled "So You Want to Be a Surgeon" to Project Hope, a group of regional high school students. He discussed the training and education one goes through to pursue a surgical career and what a surgical career is like. The students responded enthusiastically.

Research presentations that Dr. Shapiro and colleagues, including our surgical residents, have given in recent months include:

Do burn patient outcomes differ by time and day of admission? [authors: Taira BR, Xu X, Lau KN, McCormack JE, Huang E, Shapiro MJ]. Annual Meeting of the American Burn Association. San Antonio, TX; March 2009.

Do trauma patient outcomes differ by time and day of admission? [authors: Xu X, Tiara BR, Singer AJ, McCormack JE, Huang E, Shapiro MJ]. Annual Academic Surgical Congress. Fort Myers, FL; February 2009.

Unplanned admission to the ICU increases patient mortality [authors: Rutigliano DN, Tiara BR, McCormack J, Shapiro MJ]. Annual Academic Surgical Congress. Fort Myers, FL; February 2009.

Characteristics of pediatric trauma patients undergoing tracheostomy [authors: Tiara B, Fenton K, Mc-Cormack J, Huang E, Lee T, Shapiro MJ]. Annual Congress of the Society of Critical Care Medicine. Nashville, TN; February 2009.

Increasing detection and standardizing care for the treatment of severe sepsis [authors: McMullan C, Greene W, Shapiro MJ, et al.]. New York Hospital Association. New York, NY; November 2008.

Nosocomial pneumonia in pediatric trauma patients: a study using the NTDB [authors: Tiara BR, Fenton K, McCormack JE, Shapiro MJ]. Forum on Fundamental Surgical Problems. American College of Surgeons Annual Clinical Congress. San Francisco, CA; October 2008.

The abbreviated burn severity index revisited [authors: Tiara BR, Lau K, Singer A, Shapiro MJ]. International American Burn Association Burn Conference. Montreal, Canada; October 2008.

Otolaryngology-Head and Neck Surgery

Dr. Elliot Regenbogen, assistant professor of surgery, in May gave the following presentation at the annual meeting of the American Society of Geriatric Otolaryngology, held in Phoenix, AZ:

Patient-centered care and the emerging field of geriatric otolaryngology.



Dr. Marc J. Shapiro (right) in the Shock Trauma Unit of Hadassah University Medical Center in Jerusalem, while on rounds as a visiting professor there. Commenting on the unit's low mortality rate of 1.4%, Dr. Shapiro says: "The citizens of Israel are fortunate to have such a sophisticated and state-of-the-art facility."

This presentation represents Dr. Regenbogen's special interest in both geriatrics and patient-centered care. His geriatrics expertise makes a significant contribution to the care he provides at Stony Brook, since older adults make up as much as a third of all otolaryngology patients.

Dr. David A. Schessel, associate professor surgery and acting chief of otolaryngology-head and surgery, was again selected for inclusion in Consumers' Research Council of America *Guide to America's Top Physicians* (2009 edition).

Pediatric Surgery

Dr. Thomas K. Lee, associate professor of surgery and chief of pediatric surgery, was again selected for inclusion in the Castle Connolly Guide *Top Doctors: New York Metro Area*, published in February. This selection is based on screening by a physician-directed research team that identifies the **top 10% of physicians** in the tri-state New York Metropolitan area.

Dr. Richard J. Scriven, associate professor of surgery and director of residency training in general surgery, in April performed pro bono surgery to help a Dominican boy to lead a normal life. The 7-year-old patient was born with anal atresia and at birth had a colostomy so he would survive, but he was unable to receive the complex surgery needed to reconstruct his anus.

The rare and difficult operation performed by Dr. Scriven took about two hours to complete. The boy was brought to the United States by a Queens-based charitable organization that seeks to help children with medical problems in the Dominican Republic to receive the medical care they need.

Plastic and Reconstructive Surgery

Dr. Alexander B. Dagum, professor of surgery and chief of plastic and reconstructive surgery, was again selected for inclusion in the Castle Connolly Guide, America's Top Doctors, published in January. This work identifies the top 1% of physicians in the United States and reflects the results of tens of thousands of physician respondents to Castle Connolly's nationwide survey process. Dr. Dagum is also included again in Castle Connolly's Top Doctors: New York Metro Area, published in February.

In May, at the graduation ceremony of Stony Brook's School of Medicine, Dr. Dagum was honored as the recipient of the Gold Foundation's annual Leonard Tow **Humanism in Medicine** Award. This award is presented to a faculty member who best demonstrates the foundation's ideals of outstanding compassion in the delivery of care, respect for patients, their families, and healthcare colleagues, as well as demonstrated clinical excellence.

The Gold Foundation began this award in 1991 at Columbia University College of Physicians & Surgeons. The Healthcare Foundation of New Jersey began replicating these awards nationwide in 1998, with participation from the Gold Foundation. In 2003, with a generous

donation from Leonard Tow, these awards became solely sponsored and administered by the Gold Foundation.

Also in May, Dr. Dagum made his fifth **trip to China to perform pro bono surgery** to repair cleft lips and palates and also burn injuries. He spent just over two weeks there, working as a member of an international team sponsored by the Evangelical Medical Aid Society, a Christian, interdenominational, charitable, non-governmental organization based in Canada and Hong Kong.

Dr. Dagum's recent research presentations include:

Pyrolytic carbon PIP arthroplasty: two-year follow-up study [authors: Tanksley S, Dagum A, Hurst L, Rogachefsky R, Sampson S, Wang E]. Eastern Orthopedic Society Annual Meeting. Paradise Island, Bahamas; June 2009.

Outcomes of lower-extremity trauma reconstruction with Taylor spatial frame fixator and muscle flaps [authors: Xu X, Melendez MM, Gonzalez M, Divaris N, Kottmeier S, Khan S, Bui B, Dagum AB]. Annual Academic Surgical Congress. Fort Myers, FL; February 2009.

Dr. Sami U. Khan, assistant professor of surgery and director of cosmetic surgery, presented a study conducted with Stony Brook colleagues, titled "Outcomes of Abdominoplasty Com-

bined with Elective Breast Surgery in an Office-Based Surgical Setting" [authors: Melendez MM, Teotia S, Beasley M, Dagum AB, Khan SU], at the Nassau Surgical Society and Brooklyn and Long Island Chapter of the American College of Surgeons Annual Clinic Day, held in December in Uniondale, NY.

Surgical Oncology

Dr. Brian J. O'Hea, associate professor of surgery. chief of surgical oncology, and director of the Carol M. Baldwin Breast Care Center, was again selected for inclusion in the Castle Connolly Guide, America's Top Doctors for Cancer, published last fall. He was also selected for inclusion in the 2009 edition of Castle Connolly's America's Top Doctors, which identifies the top 1% of physicians in the United States. Dr. O'Hea is also included again in Castle Connolly's Top Doctors: New York Metro Area, published in February.

Dr. Colette R.J. Pameijer, assistant professor of surgery, in March was featured in a Newsday article about her innovative use of heated intraperitoneal chemotherapy (HIPEC) for treating cancer of the appendix, which is rare and generally difficult to treat.

Dr. Pameijer said HIPEC is not approved by the U.S. Food and Drug Administration, but she hopes to advance her work in the next two years to a formal nationwide clinical trial.

HIPEC is a "chemo bath" that uses the cancer drug, mitomycin, which is heated to 107 degrees Fahrenheit, and pumped through a catheter directly into the abdomen after surgery. It is performed only once. Dr. Pameijer was quoted as saying she believes that "in addition to the chemotherapy, the heat is directly toxic to the tumor cells."

Dr. Kevin T. Watkins, assistant professor of surgery and chief of upper gastrointestinal and general oncologic surgery, in February was quoted by Newsday about pancreatic cancer in its article about U.S. Supreme Court Justice Ruth Bader Ginsburg, who had just undergone surgery for what was described as an early-stage pancreatic tumor. An expert on pancreatic cancer, Dr. Watkins emphasized that this cancer occurs without a known hereditary link. He said it "can run in families but the majority of it is sporadic.'





Dr. James A. Vosswinkel, assistant professor of surgery and medical director of the Surgical Intensive Care Unit, in May was honored as Employee of the Month at Stony Brook University Medical Center. The official citation reads:

"Dr. Vosswinkel is described as a talented surgeon who inspires confidence due to his technical skill and knowledge of both elective and emergency procedures. He shows compassion and caring, and explains procedures in terms that are easy for his patients to understand. With co-workers, he does not hesitate to explain and teach whenever possible. In any circumstance, Dr. Vosswinkel is willing to help out or get involved. He is well respected by patients and staff, and is further described as someone who represents Stony Brook in the best possible way."

The Employee of the Month Award is given to those employees who make an outstanding contribution to the mission of Stony Brook University Medical Center. A committee made up of members of the medical center's staff reviews nominations on a monthly basis, and selects an employee to be honored.

Vascular Surgery

Dr. Antonios P. Gasparis in June was promoted to associate professor of surgery. He directs the Stony Brook Vein Center and also the newly established Wound Center. In addition, he serves as medical director of our Non-Invasive Vascular Laboratory.

Dr. Gasparis in June gave a presentation titled "Venous Thromboembolism in Patients with IVC Aplasia" at the Annual European Venous Forum held in Copenhagen, Denmark. In March he gave several presentations in Brazil at two meetings held there, the Symposium on Phlebology and the Congress of Brazilian Society of Cardiology:

- Imaging for endovenous ablation.
- Inferior vena cava filters: indications and technical aspects.
- Pharmacomechanical thrombolysis for DVT.
- Treatment of venous insufficiency with radiofrequency ablation, laser ablation, and foam sclerotherapy.
- Ultrasound-guided venous procedures.
- Vein pathology in uncommon locations.
- Venous imaging with CTA/CTV, MRV, and IVUS.

Dr. Nicos Labropoulos, professor of surgery and director of the Non-Invasive Vascular Laboratory, in January was on the faculty of the international postgraduate course for vascular specialists, Controversies and Updates in Vascular Surgery, held in Paris, France. He served as a moderator of the panel on hemodynamic patterns at the saphenofemoral junction, and also gave the following presentation:

Hemodynamic patterns of the saphenofemoral junction: does location of terminal or preterminal valve incompetency change the mode of treatment? [authors: Labropoulos N, Gasparis AP, Kontothanasis D, Tassiopoulos AK].

Free Venous Disease Screenings. The Division of Vascular Surgery will provide free-of-charge screenings for varicose veins and venous disease. The screenings will take place on

Saturday, September 12, from 8:00 am to 4:00 pm, and on Saturday, October 24, from 8:00 am to 4:00 pm, at the Stony Brook Vascular and Vein Center in East Setauket, NY. This community service program is designed to promote awareness of venous disease and risk factors for deep vein thrombosis. For an appointment, please call (631) 444-VEIN (8346).

Free Arterial Disease Screening. Our vascular service will provide a free-ofcharge screening for carotid (neck) artery disease and abdominal aortic aneurysm, as well as for peripheral (leg) arterial disease. The screening will take place on Saturday, November 14, from 8:00 am to 4:00 pm, at the Stony Brook Vascular and Vein Center in East Setauket, NY. This community service program is designed to promote awareness of vascular disease, identify signs and symptoms of disease, and reduce the risk of arterial disease by improving general health. For an appointment, please call (631) 444-VEIN (8346).

OUR ELECTRONIC PHYSICIAN DIRECTORY

The Department provides a physician directory as part of its website—please visit us at the following address to find information about our individual surgeons (see sample below), as well as our programs in patient care, education, research, and community service:

www.StonyBrookSurgery.org



Dr. David A. Schessel

MD: Albert Einstein College of Medicine (1985).

PhD: Neuroscience, Albert Einstein College of Medicine (1983).

Residency Training: General Surgery, Montefiore Hospital Medical Center; Otolaryngology, Jacobi Medical Center; Albert Einstein College of Medicine. Fellowship Training: Neurotology,

University of Toronto.

Board Certification: Neurotology; Otolaryngology.

Specialties: Pediatric and adult neurotology/ otology; diagnosis and treatment of disorders of the ear and skull base (including dizziness, vertigo and hearing loss; acoustic neuroma;

Ménière's disease and benign positional vertigo; otosclerosis [stapes surgery]; ear infections and cholesteatoma; facial nerve problems); laser ear surgery; skull base surgery; cochlear implants.

Additional: Acting Chief of Otolaryngology-Head and Neck Surgery; see selected publications.

Honors: Selected for inclusion in *Guide to America's Top Physicians* (2007, 2008, 2009) published by the <u>Consumers' Research Council of America</u>; "Top Doctors" selection of *Washingtonian* Magazine (2005); Service Medal ("for outstanding performance of services"), Walter Reed Army Medical Center, Washington, DC (2000).

Languages Spoken: English, Spanish.

Consultations/Appointments: 631-444-4121.



Surgical Grand Rounds

Trauma Conference

Saturday Surgical Seminar Series

CME

Our **Surgical Grand Rounds** program offers continuing medical education (CME) credit through the School of Medicine of Stony Brook University. This activity is designated for a maximum of 1 AMA PRA Category 1 Credit™.

The weekly Surgical Grand Rounds lectures are generally held on Wednesday morning, from 7:00 to 8:00 am, in the Health Sciences Center (level 4, Atkins Learning Ctr).

Topics cover the full range of current surgical concerns, focusing on clinical issues to practicing physicians and surgeons. Featured speakers include distinguished visiting professors from the nation's top universities and medical centers.

For more information, please call (631) 444-7875.

The **Trauma Conference** of the Division of General Surgery, Trauma, Surgical Critical Care, and Burns offers CME credit through the School of Medicine of Stony Brook University. This activity is designated for a maximum of 1 AMA PRA Category 1 Credit™.

The weekly conferences are generally held on Friday morning, from 7:00 to 8:00 am, in the Health Sciences Center in the trauma conference room (level 18, room 040).

Topics cover the full range of concerns related to the trauma/critical care environment, including thoracic injuries, ICU administration/billing, and case histories. Presentations are made by attending physicians, as well as other medical professionals.

For more information, please call (631) 444-8330.

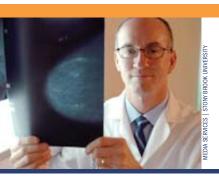
Our new **Saturday Surgical Seminar Series** will start in October and offer two (2) CME credits. The seminars—to be held on the second Saturday of each month, from 8:00 to 10:00 am, at Stony Brook University Medical Center—will provide lectures and discussion on topics covering the full range of current surgical concerns. For more information, please call (631) 444-2037.

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Stony Brook Surgical Associates

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Martyn W. Burk, MD, PhD Patricia A. Farrelly, MD Brian J. O'Hea, MD Christine Rizk, MD

BURN CARE

(631) 444-4545 (tel) (631) 444-6176 (fax) Steven Sandoval, MD Marc J. Shapiro, MD

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(631) 444-1820 (tel) (631) 444-8963 (fax) Thomas V. Bilfinger, MD, ScD Sandeep Gupta, MD Allison J. McLarty, MD Todd K. Rosengart, MD Frank C. Seifert, MD

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William B. Smithy, MD

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PEDIATRIC SURGERY

(631) 444-4545 (tel) (631) 444-8824 (fax) Thomas K. Lee, MD Richard J. Scriven, MD

PLASTIC AND RECONSTRUCTIVE SURGERY

(631) 444-4666 (tel)
(631) 444-4610 (fax)
Duc T. Bui, MD
Alexander B. Dagum, MD
Jason C. Ganz, MD
Mark A. Gelfand, MD
Steven M. Katz, MD
Sami U. Khan, MD

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UPPER GASTROINTESTINAL AND GENERAL ONCOLOGIC SURGERY

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Breast Care Center
3 Edmund D. Pellegrino Road
Stony Brook, NY 11794
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(631) 444-6348 (fax)

Plastic & Cosmetic Surgery Center / Vein Center 24 Research Way, Suite 100 East Setauket, NY 11733 (631) 444-4666 (tel) (631) 444-4610 (fax)

Smithtown Office 240 Middle Country Road Smithtown, NY 11787 (631) 444-4545 (tel) (631) 444-4539 (fax)

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