UNIVERSTIY HOSPITAL AND MEDICAL CENTER AT STONY BROOK

RICOTTA ASSUMES THE CHAIR

New Leadership Heralds New Era for Surgery At Stony Brook

n June 1, 1997, John J. Ricotta, MD, joined our faculty as professor and chairman of surgery. Dr. Ricotta is a distinguished academic vascular surgeon who comes to us from SUNY-Buffalo, where he held the positions of professor of surgery and chief of vascular surgery, as well as chief of surgery at the Millard Fillmore Hospital.

His arrival at Stony Brook heralds a major new era of positive growth and development for our Department of Surgery and for our entire medical center.

Among his principal duties here, Dr. Ricotta is chief of surgery of Stony Brook's University Hospital and Medical Center and medical director of the newly formed Surgical Hospital. He also serves as director of our residency training programs in both general surgery and general vascular surgery.

Dr. Ricotta has received a number of awards and honors. Recently, he was named among our region's best in the 1996-97 edition of the *Best Doctors in America: Northeast Region*, and was recognized by *Good Housekeeping* this year as one of the top vascular surgeons in the country for his expertise in cerebrovascular disease.



Dr. John J. Ricotta (right) has recently been honored by peer review as one of "The Best Doctors in America, Northeast Region," and recognized by Good Housekeeping as one of the nation's top vascular surgeons for his expertise in cerebrovascular disease.

A graduate of Yale University, Dr. Ricotta received his MD from Johns Hopkins University in 1973. He completed his surgical residency training at the Johns Hopkins Hospital during which time he had advanced training in vascular surgery at Walter Reed Army Hospital and in thoracic surgery at Frenchay Hospital in Bristol, England.

Dr. Ricotta is a Fellow of the American College of Surgeons and a Diplomate of the American Board of Surgery, and is board certified with special competency in vascular surgery.

Prior to his position in Buffalo, he was on the faculty of the University of Rochester where from 1980 to 1988 he was an assistant professor and later an associate professor. During his tenure at the University of Rochester, he was also the director of the kidney transplant program and the organ procurement organization. (Continued on Page 3)

RICOTTA CHAIRS DEPARTMENT

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Dr. Ricotta and his team of vascular surgeons provide specialized care for a wide variety of circulatory disorders, performing:

- Reconstructive aortic surgery for occlusive and aneurysmal diseases
- Thoracoabdominal surgery
- Surgery for stroke prevention
- Surgery for the treatment of hypertension
- Lower extremity vascular reconstruction
- Surgery for diabetic foot ulcers



Dr. John J. Ricotta

Contributing To His Profession

Dr. Ricotta is a member of numerous professional societies and has served as the president of the Rochester Vascular Society, the Western New York Vascular Society and as the secretary and recorder of the Eastern Vascular Society. He is a member of both the Stroke Council and the Council of Cardiothoracic and Vascular Disease of the American Heart Association.

He has been an examiner for the American Board of Surgery, and is on the Executive Committee for the Association of Program Directors in General Vascular Surgery.

An active academic as well as a practicing surgeon, Dr. Ricotta serves on the editorial board of four national and international journals in his specialty, is the author or co-author of more than 150 publications, and has received local, regional and national peer-reviewed funding for his work in cardiovascular disease.

For consultations/appointments with Dr. Ricotta, please call (516) 444-2565.

Introducing New Clinical Faculty

Stony Brook Surgical Associates, PC, of the Department of Surgery is very pleased to announce that the following physicians have joined their clinical practice. Profiles will appear in future issues of Post-Op.

Mouwafak Al-Rawi, MD Otolaryngology-Head and Neck Surgery

Irvin B. Krukenkamp, MD Cardiothoracic Surgery

Allison J. McLarty, MD Cardiothoracic Surgery

Denise C. Monte, MDOtolaryngology-Head and
Neck Surgery

John J. Ricotta, MD Vascular Surgery

Maisie L. Shindo, MD Otolaryngology-Head and Neck Surgery

Thomas R. Smith, MD Critical Care

HEAD AND NECK RECONSTRUCTION

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healthy bone is not available for mandible reconstruction; and 3) the patient is left with an unsightly defect (distorted ripple) at the donor site.

Microvascular free flaps are playing an increasingly larger role in the reconstruction of head and neck defects after ablative surgery, as they provide better functional and cosmetic results, thereby improving the quality of the patient's life.

Microvascular free tissue transfer offers the ability to three-dimensionally reconstruct a complex head and neck defect, such as one resulting from removal of jaw, tongue, floor of mouth, and soft palate. In such situations, a flap comprising appropriate tissue components (bone, skin, muscle) from the groin can be transferred to "custom fit" the head and neck defect.

The wide variety of potential donor sites in the body allows the reconstructive surgeon to accomplish this improved care in head and neck reconstruction. The selection of donor tissue is determined by the specific goals of the surgery, as different parts of the body offer different advantages.

Today, the absolute indications for performing microvascular free tissue transfer are for the reconstruction of anterior mandibular and floor-of-mouth defects, circumferential pharyngeal defects, and extensive soft-tissue and bony defects of the face. It can also be considered in many other situations as an alternative to the use of a regional flap.

Recent studies have shown that, compared to pedicled flap reconstruction, free flap reconstruction in the head and neck region yields superior functional and esthetic results, a lower wound complication rate, and less donor-site morbidity/deformity.

For consultations/appointments with Dr. Shindo, please call (516) 444-4122.