### PATIENT CARE / EDUCATION / RESEARCH / COMMUNITY SERVICE

NEWS UPDATE FROM THE DEPARTMENT OF SURGERY STONY BROOK UNIVERSITY MEDICAL CENTER FALL-WINTER 2007 NUMBER 22

# STONY BROOK UNIVERSITY MEDICAL CENTER

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#### Introducing Our New Faculty:

- Breast Surgeon
- General Surgeon, Intensivist, Laparoscopist
- Neurotologist
- Vascular Laboratory Director
- Vascular Surgeon

# "Grateful Patients"—New Philanthropic Program

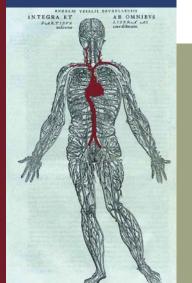
Residency Update & Alumni News

New Five-Year Residency In Vascular Surgery

Division Briefs— And More!

#### "Lung Cancer: Update On Screening, Staging, And Management"

Upcoming CME symposium at Stony Brook—see page 11 for details.



# Performing Minimally Invasive Aortic Valve Replacement

Another First in Heart Surgery For Our Region

About 95,000 Americans undergo heart valve procedures each year for problems that are relatively common. They can be caused by congenital defects, aging, or an untreated infection. Left untreated, heart valve problems can lead to heart failure or life-threatening cardiomyopathy. Fortunately, advances in their surgical treatment offer patients considerable benefits.

In August, our cardiothoracic surgery service performed the region's first minimally invasive aortic valve replacement via a mini-thoracotomy (small incision between the ribs).



Providing breast care services and vascular services in Hampton Bays—see page 3 for details.

Performing aortic valve replacement through a small incision between the ribs in a new procedure that can reduce postoperative pain and scarring, and improve recovery time.

## **Cardiovascular Symposia Success** *Providing Continuing Medical Education*

In mid-October, our cardiovascular faculty hosted two continuing medical education (CME) symposia that attracted participants from all over the region. These programs, held at Stony Brook's Charles B. Wang Center, were a success as both educational events and gatherings of our own physicians with community-based physicians—cardiologists, cardiac surgeons, vascular/neurovascular surgeons—and other healthcare professionals. With traditional "open chest" cardiac surgery, surgeons typically divide the breastbone to reach the heart. Recovery time can take several weeks or months, and patients are left with a scar down the middle of the chest.

With the newly developed minimally invasive procedure, surgeons reach the heart through a smaller incision between the ribs, often only two inches long. They use special instruments as well as cameras to reach and operate on the heart through the smaller opening.

#### Cardiovascular Symposia Success continued from Page 1

On Saturday, October 13, Todd K. Rosengart, MD, professor of surgery and chief of cardiothoracic surgery, served as program director, along with David L. Brown, MD, professor of medicine and chief of cardiology, of the all-day symposium titled **"Meeting of the Minds: Emergent Therapies in Cardiovascular Disease, Outcomes and Evidence-Based Medicine.**"

The program was designed to explore and critique decisions based on evidence and clinical data in the area of cardiovascular disease, as well as to generate discussion about issues related to state-of-the-art treatment of patients with heart disease. Case studies were presented, along with a panel discussion by cardiologists in the community, in order to come to a consensus on the ideal treatments for very complex cases.

On Sunday, October 14, John J. Ricotta, MD, professor and chairman of surgery and chief of vascular surgery, served as program director of the morning-long symposium titled **"Challenges in Cardiovascular Intervention: Management of Combined Coronary and Carotid Disease."** 

The program emphasized the current treatment of combined coronary and carotid disease, and reviewed historical data on managing patients with combined coronary and carotid disease. The current state-of-the-art treatments were discussed, along with plans for a prospective trial to evaluate the role of carotid stenting in patients with combined coronary and carotid disease.

In addition to the participation of Stony Brook faculty, invited faculty included distinguished physicians from around the country:

- Michael A. Acker, MD, William Maul Measey professor of surgery, and chief, Division of Cardiovascular Surgery, University of Pennsylvania Health System, Philadelphia, PA;
- Jeffrey S. Borer, MD, Gladys and Roland Harriman professor of cardiovascular medicine, chief of cardiovascular pathophysiology, and co-director, Howard Gilman Institute for Valvular Heart Diseases, Weill Medical College of Cornell University, New York, NY;
- R. Clement Darling III, MD, professor of surgery, and chief, Division of Vascular Surgery, Albany Medical College / Albany Medical Center Hospital, Albany, NY;
- Robert R. Edelman, MD, chairman, Department of Radiology, Evanston Northwestern Healthcare, and professor of radiology, Northwestern University School of Medicine, Evanston, IL;
- John A. Elefteriades, MD, professor and chief of cardiothoracic surgery, Yale University School of Medicine, New Haven, CT;
- Peter L. Faries, MD, professor of surgery and chief of vascular surgery, Mount Sinai Medical Center, New York, NY;
- Howard C. Herrmann, MD, director, Interventional Cardiology and Cardiac Catheterization Laboratories, professor of medicine, University of Pennsylvania Medical Center, Philadelphia, PA;
- John R. Marler, MD, associate director for clinical trials, National Institute of Neurological Disorders and Stroke, National Institutes of Health, Rockville, MD;
- Rita F. Redberg, MD, MSc, director, Women's Cardiovascular Services, University of California-San Francisco, San Francisco, CA.

For information about CME programs at Stony Brook, please call (631) 444-2094.

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Performing Minimally Invasive Aortic Valve Replacement continued from Page 1

"The mini-valve procedure allows us to operate on the heart without 'opening' the chest—typically our patients' greatest fear," says Todd K. Rosengart, MD, professor of surgery and chief of cardiothoracic surgery.

"Performing aortic valve replacement via mini-thoracotomy is another very exciting first for us and the region in minimally invasive cardiac surgery, complementing our existing off-pump surgery, mini-mitral repair surgery, and thoracic stent programs."

For consultations/appointments with our cardiothoracic surgeons, please call (631) 444-1820.



Comparison of resulting scars from open chest surgery (top) versus minimally invasive surgery via mini-thoracotomy (courtesy of CardioVations).

GRATEFUL ACKNOWLEDGMENT IS MADE TO CONSUMERS' RESEARCH COUNCIL OF AMERICA FOR USE OF THE COVER IMAGES OF ITS 2007 EDITIONS OF GUIDES TO AMERICA'S TOP PHYSICIANS, PLASTIC SURGEONS, AND SURGEONS.

## **Providing Outpatient Services** In Hampton Bays

Breast Care and Vascular Surgery

We are very pleased to announce that physicians on our breast care service and our vascular surgery service are now seeing patients at the Stony Brook University Outpatient Services Center, located at 225 West Montauk Highway in Hampton Bays.

Patients on the East End can now enjoy the convenience of office visits and consultations close to home.

## **Breast Care**

disease

diagnosis

node biopsy

mastectomy

cancer

surgery

surgery

Comprehensive

management of breast

Early detection and

cancer and benign breast

Management of high-risk

Minimally invasive sentinel

MRI-guided breast biopsy

surgery and skin-sparing

therapy for early breast

Treatment of advanced

malignancies and palliative

Reconstructive and plastic

Minimally invasive radiation

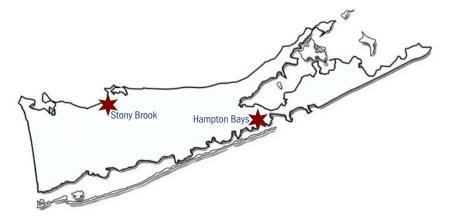
Breast conservation

patients for screening

## Vascular Surgery

- Comprehensive vascular assessment to evaluate the condition of the circulatory system
  - Minimally invasive arterial therapies using the latest treatment advances, including thrombolytic therapy, angioplasty, endovascular stents, and stent graft repair
  - State-of-the-art surgical and endovascular treatment of carotid artery disease, aneurysms, mesenteric and lower extremity arterial insufficiency, and chronic venous insufficiency
  - Minimally invasive venous therapies for varicose veins, including endoluminal vein ablation, mini-phlebotomy, and ultrasound-guided sclerotherapy; as well as sclerotherapy and laser therapy for spider veins
  - Non-surgical treatment of chronic leg/foot ulcers using impulse compression technology and other modalities
  - Complete, fully accredited Non-Invasive Vascular Laboratory performing carotid, upper/lower extremity, and abdominal vascular studies, using the latest ultrasound technology (no dyes, x-rays, or needles)
  - Assessment of chronic venous insufficiency with duplex ultrasound and routine scheduled evaluations of arteriovenous fistula function for maintenance
  - Frequent screenings for vascular disease (carotid artery, for risk of stroke—abdominal aorta, for presence of aneurysms lower extremity, for risk of peripheral arterial disease and for varicose veins)

For consultations/appointments with our physicians in Hampton Bays, please call (631) 723-5000.

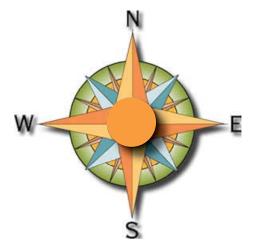


### Selected Recent Publications\*

- Azu MC, Jean S, Piotrowski JM, O'Hea B. Effective methods for disclosing breast cancer diagnosis. *Am J Surg* 2007;194:488-90.
- Bhatti AF, Leon LR Jr, Labropoulos N, Rubinas TL, Rodriguez H, Kalman PG, Schneck M, Psalms SB, Biller J. Free-floating thrombus of the carotid artery: literature review and case reports. J Vasc Surg 2007;45:199-205.
- Bilfinger TV. Invited commentary [Refers to: van der Linden J, Bergman P, Hadjinikolaou L. The topography of aortic atherosclerosis enhances its precision as a predictor of stroke]. Ann Thorac Surg 2007;83:2092.
- Cavezzi A, Labropoulos N, Partsch H, Ricci S, Caggiati A, Myers K, Nicolaides A, Smith PC; UIP. Duplex ultrasound investigation of the veins in chronic venous disease of the lower limbs—UIP consensus document. Part II. Anatomy. Vasa 2007;36:62-71.
- Chirch LM, Feiner J, Go R, Mynarcik D, **McNurlan MA**, Gelato M, Steigbigel R. Osteopenia in HIV patients is not associated with elevated sTNFR2 levels. *Clin Infect Dis* 2006;43:1084-5.
- Coleridge-Smith P, Labropoulos N, Partsch H, Myers K, Nicolaides A, Cavezzi A; UIP. Duplex ultrasound investigation of the veins in chronic venous disease of the lower limbs— UIP consensus document. Part I. Basic principles. *Vasa* 2007;36:53-61.
- Gavi S, Feiner JJ, Melendez MM, Mynarcik DC, Gelato MC, McNurlan MA. Limb fat to trunk fat ratio in elderly persons is a strong determinant of insulin resistance and adiponectin levels. J Gerontol A Biol Sci Med Sci 2007;62:997-1001.
- Gavi S, Stuart LM, Kelly P, Melendez MM, Mynarcik DC, Gelato MC, **McNurlan MA**. Retinol-binding protein 4 is associated with insulin resistance and body fat distribution in nonobese subjects without type 2 diabetes. *J Clin Endocrinol Metab* 2007;92:1886-90.
- Gonzalez MA, Sorrento JJ, Tsao E. A rolling stone. Am J Med 2007; 120:772-4.
- Gotte JM, Bilfinger TV. Resection of giant right-sided thymoma using a lateral thoracotomy approach followed by median sternotomy for completion thymectomy. *Thorac Cardiovasc Surg* 2007;55:336-8.
- Karakitsos D, Saranteas T, Patrianakos AP, **Labropoulos N**, Karabinis A. Ultrasound-guided "low approach" femoral vein catheterization in critical care patients results in high incidence of deep vein thrombosis. *Anesthesiology* 2007;107:181-2.
- Kontothanassis D, Di Mitri R, Ferrari Ruffino S, Ugliola M, **Labropoulos N**; IEWG Group. Endovenous thermal ablation Standardization of laser energy: literature review and personal experience. *Int Angiol* 2007;26:183-8.

continued on Page 15

\* The names of faculty authors appear in boldface.



# **Introducing New Faculty**



**Breast Surgeon** 

Patricia A. Farrelly, MD, has joined our Division of Surgical Oncology as assistant professor of surgery. She comes to Stony Brook from a private practice in New York, specializing in breast surgery. She was an attending physician at Lenox Hill Hospital. She had been assistant director of surgery there.

Board certified in surgery, Dr. Farrelly will focus her practice at Stony Brook on the medical and surgical management of the breast, including both benign and malignant lesions; and will also include the management of high-risk patients for screening and care of breast diseases.

Dr. Farrelly was selected for inclusion in the 2007 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America.

Dr. Farrelly received her medical doctorate from UMDNJ-New Jersey Medical School in 1987. She completed her residency training in general surgery at Lenox Hill Hospital. She became a Fellow of the American College of Surgeons (FACS) in 1995.

For consultations/appointments with Dr. Farrelly, please call (631) 638-1000.



General Surgeon, Intensivist, Laparoscopist

John H. Wang, 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 fellowship training in surgical oncology at the City of Hope Medical Center, Duarte, CA.

Board certified in both surgery and surgical critical care, Dr. Wang will focus his practice at Stony Brook on the management of diseases of the gastrointestinal system; surgical treatment of cancers; minimally invasive laparoscopic surgery for the treatment of gastroesophageal reflux disease (GERD; chronic severe heartburn), achalasia (severe swallowing difficulty), common bile duct stones, inguinal hernia; colorectal surgery, gallbladder and spleen removal.

Dr. Wang was selected for inclusion in the 2007 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America.

Dr. Wang received his medical doctorate from the University of Maryland in 1997. He was trained in general surgery at New York Medical College (Saint Vincent Catholic Medical Centers). He then completed fellowship training in minimally invasive surgery at St. Peter's University Hospital, New Brunswick, NJ, and also at SUNY-Stony Brook; surgical critical care at the University of Hawaii; and surgical oncology at the City of Hope Medical Center.

For consultations/appointments with Dr. Wang, please call (631) 444-4545.



Neurotologist

**David A. Schessel, MD, PhD**, has joined our Division of Otolaryngology-Head and Neck Surgery as associate professor of surgery. He comes to Stony Brook following 15 years of academic practice as associate professor of otolaryngology and neurosurgery at George Washington University and Children's National Medical Center in Washington, DC. He also served as consultant at Walter Reed Army Medical Center, Bethesda Naval Hospital, and the United States Peace Corps.

Board certified in both otolaryngology and neurotology, Dr. Schessel will focus his practice at Stony Brook on pediatric and adult neurotology/otology; diagnosis and treatment of ear and skull base problems, including dizziness, vertigo, hearing loss; cochlear implants; skull base surgery; diagnosis and treatment of acoustic neuromas, Ménière's disease, otosclerosis, ear infections, and cholesteatoma.

In 2005, Dr. Schessel was honored as a "Top Doctor" selection in *Washingtonian* Magazine. He was also selected for inclusion in the 2007 edition of *Guide* to America's Top Physicians, published by the Consumers' Research Council of America. He was awarded the medal for service excellence by the U.S. Army for his work at Walter Reed Army Medical Center.

Dr. Schessel received his medical doctorate in 1985 from Albert Einstein College of Medicine, where he also received his doctorate in neuroscience for studies on the vestibular system. He completed his internship in general surgery at Montefiore Hospital Medical Center, and residency in otolaryngologyhead and neck surgery at Jacobi Medical Center; both hospitals are affiliated with Albert Einstein College of Medicine. He then completed fellowship training in neurotology at the University of Toronto.

For consultations/appointments with Dr. Schessel, please call (631) 444-4121.



Vascular Surgeon

Andrea J. Hendrzak, MD, has joined our Division of Vascular Surgery as assistant professor of surgery. She comes to Stony Brook from Wayne State University where she just completed her two-year fellowship training in endovascular and vascular surgery at Detroit Medical Center.

Board certified in surgery and board eligible in vascular surgery, Dr. Hendrzak will focus her practice at Stony Brook on minimally invasive endovascular surgery for the management of carotid disease, aortic aneurysms, lower extremity vascular disease, and venous disease.

Her practice will include surgery for stroke prevention (carotid endarterectomy), aortic aneurysms, lower extremity vascular reconstruction, and dialysis access; and also the treatment of spider veins (laser and sclerotherapy).

Dr. Hendrzak was selected for inclusion in the 2007 edition of *Guide to America's Top Surgeons*, published by the Consumers' Research Council of America.

Dr. Hendrzak received her medical doctorate from Temple University in 1994. She was trained in general surgery at Easton Hospital (Pennsylvania). She then completed a year of fellowship training in vascular surgery at the Mayo Clinic in Jacksonville, FL, after which she practiced general and vascular surgery.

For consultations/appointments with Dr. Hendrzak, please call (631) 444-4545.

### New Capabilities of Our Non-Invasive Vascular Laboratory

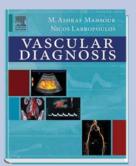
- Renal arteries and renal parenchyma for patients with suspected reno-vascular hypertension
- Mesenteric circulation for patients having symptoms of mesenteric ischemia
- Hepato-portal system for patients having portal hypertension or thrombosis
- Inferior vena cava and iliac veins for thrombosis and compression syndromes
- Pelvic vein in patients with pelvic congestion syndrome
- Intracranial arteries for children with sickle cell disease
- Temporal artery in patients with signs and symptoms of temporal arteritis

- Thoracic outlet syndrome Plaque morphology of the carotid arteries to estimate the risk for stroke
- Carotid intima-media thickness to assess the risk for stroke and heart attack
- Flow-mediated dilatation to assess the risk for stroke and heart attack
- Pre-, intra-, and post-operative imaging of patients with dialvsis access
- Mapping of arteries and veins for reconstructive plastic surgery
- Ultrasound-guided procedures such as percutaneous balloon angioplasty and stenting of dialysis access and peripheral arteries



Vascular Laboratory Director

**Nicos Labropoulos**, **PhD**, **RVT**, has joined our Division of Vascular Surgery as professor of surgery, and will serve as director of the Non-Invasive Vascular Laboratory. Dr. Labropoulos comes to Stony Brook from UMDNJ-New Jersey Medical School. Previously, he was on the faculty of surgery and director of the vascular laboratory at Loyola University Medical Center, in Chicago, IL, and director of research at Vascular Diagnostics Ltd, in Park Ridge, IL.



Dr. Labropoulos is certified in noninvasive vascular technology by the American Registry for Diagnostic Medical Sonographers, and is a registered vascular technologist (RVT).

A world-renowned scholar, Dr. Labropoulos is the author of more than one hundred peer-reviewed journal articles, as well as four textbooks. His book,

*Vascular Diagnosis*, published by Elsevier-Saunders in 2005, is widely considered the bible of non-invasive vascular diagnosis.

Dr. Labropoulos serves on the editorial board of Annals of Vascular Surgery, International Venous Digest, Journal of Vascular Surgery, Seminars in Cardiology, Spanish Journal of Surgical Research, Vascular and Endovascular Surgery (deputy editor), and Venous Digest. In addition, he is a reviewer for Archives of Surgery, British Journal of Surgery, Clinical Physiology, European Journal of Vascular and Endovascular Surgery, International Angiology, Lancet, Stroke, and Surgery.

Dr. Labropoulos received his PhD in cardiovascular medicine from the University of London in 1995, subsequent to his receiving his master's degree in vascular medicine from there. He was trained in vascular diagnostics at St. Mary's Hospital (London).

To speak with Dr. Labropoulos, please call (631) 444-1279.

For appointments/information, please call (631) 444-1717.

## Performing Anal Fistula Repair With New Minimally Invasive Anal Fistula Plug

Anal fistulas are abnormal tunnels from the anus or rectum usually to the skin near the anus but occasionally to another organ. They may cause pain and discharge, and are often associated with abscesses that, when infected, may produce systemic symptoms. These fistulas tend to occur more frequently in men than in women, and also in people with Crohn's disease or tuberculosis. They also occur in people with diverticulitis, cancer, or an anal/rectal injury.

Traditionally, surgical intervention is required for anal fistula repair. Although the conventional form of fistula surgery is usually relatively straightforward, the potential for complication exists. This surgery usually involves cutting a portion of the anal sphincter muscle in order to unroof the tunnel, thereby joining the external and internal opening(s) and converting the tunnel into a groove that will then heal from within outward.

Incontinence resulting from partial division or loss of the sphincter muscle is a possible complication of fistula surgery. This has made the need for the development of alternative treatments an important step in optimizing patient care.

At Stony Brook, our colorectal service performs the new minimally invasive repair of anal fistula by means of the anal fistula plug (AFP). This repair is a unique alternative to traditional fistula surgery. The AFP is a conical device made of a natural biomaterial that supports tissue healing. The plug is placed by drawing it through the fistula tract and suturing it in place.

With the AFP, the fistula tract is repaired without cutting the sphincter muscle; thus, the risk of incontinence is minimized. The AFP provides an innovative yet simple treatment. When the AFP is implanted, host tissue cells and blood vessels colonize the "graft." In essence, the plug provides a scaffold or matrix for the patient's connective tissue growth.

Early clinical results for the AFP show significant improvement over conventional treatments:

- High percentage of success and greater efficacy shown from early use.
- Minimally invasive procedure.
- Sphincter-saving procedure minimizes risk for postoperative incontinence.
- Suturable biomaterial offers more staying power than fibrin glue.
- Recurrence, while higher rate, does not preclude use of other options or repeat treatment.

### **CONSENSUS ON AFP**

In May, a member of our colorectal surgery team, Marvin L. Corman, MD, professor of surgery, took part in a consensus conference held in Chicago, IL, to develop uniformity of opinion from surgeons who have had considerable experience with the AFP technique in the management of anal fistula. Of the 15 surgeons in attendance, five had performed 50 or more AFP procedures.

The panel members concluded that implantation of the AFP is a reasonable alternative for the surgical management of anal fistula disease, and that a success rate of 50% to 60% should be considered acceptable. In order to achieve the highest probability of success, the panel concluded that patient selection, avoidance of local infection, and meticulous technique are required.

It was further concluded that, outside of the cost, patients should be affected no more adversely than prior to plug implantation, and all other options of management are still available. However, even with observed healing, the recurrence rate is unknown. Ideally, a prospective, randomized trial comparing the AFP procedure with that of conventional fistulotomy will be forthcoming.

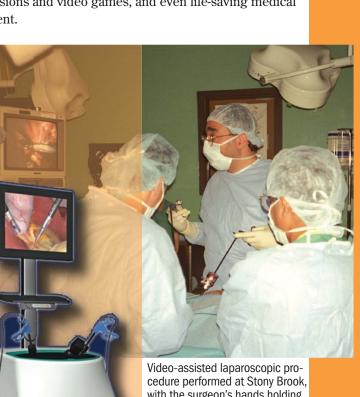
For consultations/appointments with our colorectal surgeons, please call (631) 638-1000 or (631) 444-4545.

## "Grateful Patients"—A New Program Benefiting Our Department And Medical Center

The Department of Surgery's mission to deliver excellence in patient care, research, education, and community service is driven by a dedicated team who put the care in healthcare. Our patients take notice, and many wish to find a meaningful way to show their gratitude for the expertise and compassion of our talented staff.

Indeed, throughout the country today patients are expressing their gratitude by giving back to the hospitals and physicians who cared for them. Making a donation to our Department is a concrete way of improving the fate of others while satisfying the need to show gratitude.

At Stony Brook, donations of all sizes have already improved the lives of many through the purchase of items such as isolette covers for the cribs in the neonatal intensive care unit, murals and art in waiting areas, electronics such as televisions and video games, and even life-saving medical equipment.



Video-assisted laparoscopic procedure performed at Stony Brook, with the surgeon's hands holding the surgical instruments, and his eyes on the monitor showing the patient's inner abdomen. The Department of Surgery has a number of initiatives that would benefit from private funding:

One initiative is the Expansion/Renovation of the Operating Room Suite so that we can accommodate new minimally invasive surgical equipment and emerging imaging-assisted procedures.

As part of the Major Modernization Project of Stony Brook University Medical Center, this initiative will ensure that the Department of Surgery continues to provide access to the latest medical developments and technology.

Another initiative is the establishment of our **Minimally Invasive Skills Training Center** to teach residents, fellows, and faculty how to use the new technology in abdominal and vascular surgery. Funding is needed for the purchase of simulators.

The Minimally Invasive Skills Training Center will provide training in laparoscopy, robotics, endovascular skills, and endoscopy. "Virtual reality" simulators are used to develop proficiency in basic and advanced procedures.

Minimally invasive surgery, compared with traditional "open" surgery, offers patients a range of benefits, including less postoperative pain, smaller scars, shorter hospital stays or no hospital stays at all, and faster return to normal activity/diet.

> Now there is a new way to recognize outstanding care and compassion here at Stony Brook—a program that offers patients and their families an opportunity to "Say Thank You" by making a gift to the Department of Surgery.

Gifts can be made in honor of someone special a doctor, nurse, or staff member who made a difference—or for the benefit of a particular program within the Department, such as one of our research programs aimed at improving patient care.

There are almost as many ways to give to the Department of Surgery as there are reasons to give. The power of a gift is tremendous and translates into necessary funding that will further our already remarkable history of excellence.

For more information about the initiatives taking place within the Department of Surgery and how you can help, please call the Advancement Office at (631) 444-2899.

Simulator of minimally invasive abdominal surgery that we wish to acquire for our Minimally Invasive Skills Training Center: the LAP Mentor<sup>™</sup> from Simbionix. This simulator enables simultaneous hands-on practice for a single trainee or a team, offering training opportunities to new and experienced surgeons for everything from perfecting basic laparoscopic skills to performing complete laparoscopic surgical procedures.

## **RESIDENCY UPDATE**

Since the class of 1975 entered the profession of surgery, 178 physicians have completed their residency training in general surgery at Stony Brook. The alumni of our residency program 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.

Our nonpyramidal residency program fulfills the standards for professional excellence adopted by the American Board of Surgery, and leads to eligibility for board certification. As of now, six (formerly five) surgical residents are selected each year through the National Resident Matching Program.

2007 Graduating Residents	
Name	Career Direction
General Surgery	
Wei Chen, MD	Plastic surgery fellowship at U of Chicago
Julia Gotte, MD	Cardiothoracic surgery fellowship at U of California, San Francisco
	Surgical oncology fellowship at Commonwealth Hospital, Richmond, VA
Paul Kochupura, MD	Vascular surgery fellowship at Atlanta Medical Center, Atlanta, GA
Kristen Rezak, MD	Plastic surgery fellowship at Beth Israel Deaconess Medical Center (Harvard U), Boston, MA
Otolaryngology	
Neil Chheda, MD	Laryngology fellowship at Medical College of Georgia, Augusta, GA
Colorectal Surgery	
Brett Ruffo, MD	Private practice in Riverhead, NY
Critical Care	
Sherwood Barefoot, MD	Assistant professorship in Division of Trauma/Critical Care, University of Kansas, Kansas City, KS
Steven Khalil, MD	General surgery, trauma, and critical care at Lakeland Regional Medical Center, Lakeland, FL

## **New Chief Residents**

Name	Medical School (Grad. Year)
Michelle Azu, MD	U of Missouri-Columbia ('03)
Celso Dias, MD	
Paul Impellizzeri, MD	
Fady Kaldas, MD	U of California-Irvine ('02)
Sepehr Sajjad, MD	
Khaled Salhab, MD	

## Incoming Residents/All Categorical PGY-1\*

Name	Medical School (Grad. Year)
George Angelos, MD	Buffalo U ('07)
Morad Awadallah, MD	Stony Brook U ('07)
Nicole Curci, MD	Columbia U ('07)
Dhaval Patel, MD	Drexel U ('07)
Brett Phillips, MD	
Michael Polcino, MD	Mt. Sinai School of Medicine ('07)
* As of July 1, 2007.	

Our accredited residency in otolaryngology was established in 1993 by our Division of Otolaryngology-Head and Neck Surgery, and since then, 11 otolaryngology-head and neck surgeons have been trained at Stony Brook.

Our newly accredited colon and rectal surgery residency (fellowship) was established in 2006 by our Division of Surgical Oncology, and since then, 1 colorectal surgeon—our first—has been trained at Stony Brook.

Our accredited residency (fellowship) in surgical critical care was established in 2000 by our Section of Trauma/Surgical Critical Care, and since then, **11** surgeons have been trained in surgical critical care at Stony Brook.

### New residency in vascular surgery.

In February 2007, our proposal for a five-year residency in vascular surgery was approved by the Accreditation Council for Graduate Medical Education (ACGME). This integrated training program, directed by John J. Ricotta, MD, professor and chairman of surgery and chief of vascular surgery, is now fully accredited, and is one of only six currently available nationwide. Residents are chosen out of medical school and enter the five-year program which culminates in eligibility for certification in vascular surgery.

For those physicians who are sure that they want vascular surgery as a career, this residency provides focused training and reduces the amount of training time from the standard training period (ie, five years of general + two years of vascular) by two years. Those who choose this path will not be eligible for certification in general surgery. The Department continues to offer the traditional two-year "fellowship," which also is fully accredited by the ACGME. Stony Brook University Medical Center is the "parent" teaching hospital, and in addition to rotations here, our vascular residents and fellows also do rotations at the Northport VA Medical Center and Winthrop-University Hospital.

For more information about our training programs in vascular surgery, please call Dr. Ricotta at (613) 444-7875.



Dr. John Ricotta (far left) and Dr. Eugene Mohan (far right) with our 2007 graduating chief residents (from left to right), Drs. Kim, Chen, Rezak, Gotte, and Kochupura, at the graduation banquet held in June at Flowerfield, St. James, NY.



Our graduating otolaryngology resident, Dr. Neil Chheda (right), with Dr. Arnold Katz.



Our graduating colorectal surgery resident, Dr. Brett Ruffo (third from left), with (left to right) Drs. David Rivadeneira, Paul Hartendorp, and Jules Garbus.



Our graduating critical care residents, Drs. Steven Khalil (left) and Sherwood Barefoot (center), with Dr. Marc Shapiro.



ALL PHOTOS BY GERALD BUSHART | DEPARTMENT OF SURGERY

Dr. Fady Kaldas (center) was the recipient of the 2007 David J. Kreis Jr. Award for Excellence in Trauma Surgery; pictured here with trauma nurse coordinator Jane McCormack, RN, and Dr. Marc Shapiro. Established in 2000, this annual award is presented to a senior (fourth-year) surgical resident by the Trauma Section in honor of the late Dr. Kreis, the founding chief of our trauma service, who served with distinction on our faculty until his untimely death.

## **ALUMNI NEWS**

The alumni of our residency program in general surgery distinguish themselves as physicians and surgeons. They are leaders in their specialty fields, here and abroad, and their successful practices represent our success. Indeed, our alumni reflect our commitment to excellence in education through their own excellence, as demonstrated in their careers following their training at Stony Brook.

**Dr. Boniface C. Abba** ('82), who practices general surgery on St. Thomas, VI, has been elected to serve as one of the vice presidents of the International College of Surgeons (U.S. Section), starting in January 2008.

Dr. Biagio Ravo ('84), a general surgeon, practices in Rome, Italy, at the Rome American Hospital, and also teaches at the Università Campus Bio-Medico di Roma. An active inventor of surgical devices and technique ever since his days as a resident at Stony Brook (eg, intraluminal bypass tube for intracolonic bypass procedure), he currently has U.S. patents pending on a combination endoscopic operative delivery system and an irrigation suction trocar. Last March, at the annual conference of the American Hernia Society held in Hollywood, FL, he gave a presentation ("preliminary report") on the use of a biological mesh for hernia repair.

**Dr. Thomas R. Walek** ('84) continues to practice plastic surgery in Warwick, RI, specializing in cosmetic surgery.

**Dr. Bruce E. Alper** ('90), who practices general surgery in Satellite Beach, FL, is currently president of the Florida Society of General Surgeons.

**Dr. Patricia R. Kennedy** ('92) is now director of the Clarian North Breast Center, and a member of the surgical faculty at Indiana University, in Indianapolis, IN. **Dr. John J. Doski** ('93), a pediatric surgeon practicing in San Antonio, TX, contributed to the following study presented in September at the annual meeting of the Scoliosis Research Society, held in Edinburgh, Scotland: "The VEPTR 'Parasol' Expansion Thoracoplasty for Treatment of Transverse Volume Depletion Deformity of the Convex Hemithorax Rib Hump in Early Onset Scoliosis" [authors: Campbell RM Jr, Smith, MD, Woody JT, Inscore S, Cofer BR, Doski JJ, Grohman C].

**Dr. Steven J. Busuttil** ('94), a vascular surgeon, is an assistant professor of surgery at the University of Maryland, and serves as medical director of the Non-Invasive Vascular Laboratory of the VA Maryland Health Care System.

**Dr. Ravindra K. George** ('98) last September joined a multi-specialty medical group in Centralia, IL, where he practices general surgery. His practice includes advanced laparoscopic surgeries. In addition to all general surgery, he also performs thyroid, parathyroid, and esophageal surgery.

**Dr. Elliott H. Chen** ('04), now practicing plastic surgery in Cleveland, OH, recently completed a one-year fellowship in craniofacial surgery at the University of Pennsylvania (Children's Hospital of Philadelphia). This training followed his residency in plastic surgery at Vanderbilt University in Nashville, TN. In April, he won First Place in the clinical abstract presentation competition for residents sponsored by the 2007 Combined Meeting of the Robert H. Ivy Society of Plastic Surgeons and the John Staige Davis Society of Plastic Surgeons. In August, he presented a study titled "Tongue Dysmorphology in Cranofacial Microsomia" [authors: Chen E, Chike-Obe C, Reid R, Bartlett S] at the Biennial International Congress of the International Society of Craniofacial Surgery, held in Salvador, Bahia, Brazil.

**Dr. Denise Ortega Sanderson** ('04) is now practicing as a breast surgeon at the Breast Care Center of the Treasure Coast, in Stuart, FL (www.breast-center. com). Last October, she was granted certification in surgery by the American Board of Surgery.

# 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.uhmc. sunysb.edu/surgery

#### **GENERAL SURGERY ALUMNI**

Please send your e-mail address— for inclusion in the Alumni Directory—to Jonathan.Cohen@StonyBrook.edu

## **DIVISION BRIEFS**

## Cardiothoracic Surgery

**Dr. Thomas V. Bilfinger**, professor of surgery and director of thoracic surgery, is **participating in two new clinical trials**:

Radio-frequency ablation in stage 1 lung cancer. Sponsored by the American College of Surgeons Oncology Group (ACOSOG) and National Cancer Institute (NCI).

Tarceva in early-stage lung cancer. Sponsored by OSI Pharmaceuticals.

Since 1999, our thoracic surgery section has been an active member of ACOSOG, participating in multi-center clinical trials of thoracic surgery for the treatment of lung cancer and other cancers in the chest.

In May, Dr. Bilfinger presented two studies, done with Stony Brook colleagues, at the annual international conference of the American Thoracic Society, held in San Francisco, CA: "PET Scan Findings in Pulmonary Carcinoid Tumors" [authors: Garcia R, Bilfinger TV, Baram D] and "Surveillance PET after Lung Cancer Resection" [authors: Baram D, Fasullo K, Bilfinger TV].

## Dr. Todd K. Rosengart,

professor of surgery and chief of cardiothoracic surgery, was selected for inclusion in the "Best Doctors" listing of *New York* Magazine (June 18, 2007), representing the **top 2% of physicians** in the New York Metropolitan area.

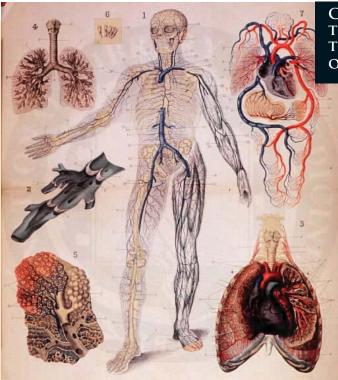
In September, Dr. Rosengart was **elected to the Board of Directors of the American Heart Association** of the Long Island Region. In October, Dr. Rosengart was honored as a "**Physician Hero**" by *Long Island Business News* and among a select group of "Healthcare Heroes" honored by the paper as our region's major healthcare leaders.

That same month, Dr. Rosengart also made **national news with life-saving emergency surgery** that he performed on a Stony Brook man who had a one-in-a-million freak accident while mowing his lawn, and was left with a four-inch finishing nail in his heart. The operation to remove the nail took nearly two hours.

In November, Dr. Rosengart and his Stony Brook colleagues in cardiology presented the following study (abstract) at Scientific Sessions 2007 featured at the annual meeting of the American Heart Association, held in Orlando, FL: "The Effect of Revascularization on Outcomes of Patients with Stable Coronary Artery Disease" [authors: Jeremias A, Gruberg L, Rosengart TK, Brown DL].

The purpose of this study was to better understand the role of **revascularization for patients with stable coronary artery disease**. The authors conducted a meta-analysis of randomized clinical trials comparing surgical or percutaneous revascularization with medical therapy.

The conclusion of the study is that "revascularization in patients with stable coronary artery disease results in significantly improved survival without reducing the risk of nonfatal myocardial infarction" (*Cardiology* 2007;166:II\_538).



The veins and lungs. In: Turner W, Goodsir J. Atlas of Human Anatomy and Physiology. Edinburgh: Johnston, 1857. National Library of Medicine.

CME SYMPOSIUM PRESENTED BY THE LUNG CANCER EVALUATION CENTER AND THE OFFICE OF CONTINUING MEDICAL EDUCATION OF STONY BROOK UNIVERSITY MEDICAL CENTER

> Topic Lung Cancer: Update On Screening, Staging, and Management When January 12, 2008 Where Charles B. Wang Center Stony Brook University

Continuing medical education (CME) credits: This activity is designated for a maximum of 3.5 AMA PRA Category 1 Credits<sup>™</sup>. For further information, please call (631) 444-2981.

The purpose of this symposium is to review the many recent advances in the prevention, screening, staging, and treatment of lung cancer. Integration of current knowledge and understanding of ongoing research allows healthcare practitioners to optimize the care they deliver to their patients. Development of multidisciplinary teams, as done at Stony Brook University Medical Center, improves all aspects of care from initial diagnosis through treatment and follow-up.

## General Surgery, Trauma, Surgical Critical Care, and Burns

**Dr. Steven Sandoval**, assistant professor of surgery, in May presided over a **celebration of the Burn Center**, held at Stony Brook University Medical Center, to honor individuals who have dedicated their efforts to enhance the care for burn victims across Suffolk County. Participants included Burn Center physicians and nurses, Suffolk County firefighters, and New York State legislators.

At this event, Senator Kenneth P. LaValle (R-Port Jefferson), who in 1986 helped to establish the Burn Center, installed the new officers of the Suffolk County Volunteer Firefighters Burn Center Fund.

#### Dr. Marc J. Shapiro,

professor of surgery and anesthesiology, and chief of general surgery, trauma, surgical critical care, and burns, has been honored by inclusion in the 2007 edition of *Cambridge Who's Who*.

In September, Dr. Shapiro presented a study at the annual meeting of the American Association for the Surgery of Trauma, held in Las Vegas, NV:

Let the surgeon sleep: trauma team activation for severe hypotension [authors: Jen J, McCormack J, Huang EC, Shapiro MJ].

In May, Dr. Shapiro presented a study at the annual congress of the National Patient Safety Foundation, held in Washington, DC: Surviving sepsis: how to increase detection and standardize care [authors: McMullen C, Boremski PB, Shapiro MJ]

Dr. Shapiro was recently awarded grants for two clinical studies, of which he is principal investigator at Stony Brook:

Phase IV, open-label, non-comparative trial of IV anidulafungin followed by oral azole therapy for the treatment of candidemia and invasive candidiasis [sponsor: Pfizer].

A pivotal, multicenter, multinational, randomized, double-blind, placebocontrolled study to evaluate the efficacy and safety of TAK-242 in adults with severe sepsis [sponsor: Takeda Corporation].

Dr. Shapiro was recently featured in a special film short titled *That's Gotta Hurt*, produced by The Learning Channel, about the **remarkable work of Stony Brook's trauma team** in saving the life of Arsenio Matias who, in 2005 in a work-related accident, had both of his hands severed at the wrist, and then—most remarkably—had his hands reattached by our surgeons.

Also featured in the film short about this case, which attracted much national media attention, was **Dr. Alexander B. Dagum**, associate professor of surgery and chief of plastic and reconstructive surgery, who directed the 11-hour operation to reattach the patient's hands that involved four surgeons, with two working on each hand.



Dr. Marc J. Shapiro (second from left) with trauma team being filmed at Stony Brook by The Learning Channel for two stories focusing on trauma care and "starring" our Level 1 trauma service.

## Otolaryngology-Head and Neck Surgery

**Dr. Arnold E. Katz**, professor of surgery and chief of otolaryngology-head and neck surgery, in September presented a study at the annual meeting of the American Academy of Otolaryngology-Head and Neck, held in Washington, DC:

The pain of nasal tampon removal: a randomized control trial [authors: Chheda N, Katz AE, Singer A, Gynizio L].

Dr. Katz also presented at this meeting an instruction course on applying core competencies to clinical practice.

In May, Dr. Katz served as research judge for the Second Metropolitan New York Resident Research Day Symposium, sponsored by Cornell University, Joan and Sanford I. Weill Medical College. In June, Dr. Katz was guest judge of the Annual Residents Research Competition, sponsored by the Departments of Otolaryngology-Head and Neck Surgery at Columbia University and the Weill-Cornell Medical College of the New York Presbyterian Hospital.

**Dr. Denise C. Monte**, assistant professor of surgery, gave a presentation at the Cleft Palate Team Symposium held in April at Stony Brook: "A Team Approach to the Management of Cleft Lip and Palate and Craniofacial Anomalies: The Role of the Otolaryngologist."

**Dr. Maisie L. Shindo**, associate professor of surgery and director of head and neck oncology, was again selected for inclusion in the "Best Doctors" listing of *New York* Magazine (June 18, 2007), representing the **top 2% of physicians** in the New York Metropolitan area. In September, Dr. Shindo gave several presentations at the annual meeting of the American Academy of Otolaryngology-Head and Neck, held in Washington, DC:

Controversies in central neck management for thyroid cancer [miniseminar, with Steward DL].

Evaluation and management of unilateral vocal fold paralysis [instruction course].

Hyperparathyroidism: pearls and pitfalls, work-up, and management [instruction course, with Steward DL].

Minimally invasive parathyroidectomy under local with sedation [oral presentation, with Rosenthal J].

Parathyroid gland management in thyroid surgery [mini-seminar, with Cohen JI].

Treatment of hyperthyroidism disorders and large goiters [instruction course].

At Stony Brook's first **Women in Medicine "Research Day"** held in April, Dr. Shindo gave a presentation titled "Significance of Paratracheal Lymph Node Metastasis in Papillary Thyroid Cancer."

## Pediatric Surgery

**Dr. Cedric J. Priebe**, **Jr.**, professor of surgery, in July **retired** from his full-time faculty position at Stony Brook, where he served as founding chief of pediatric surgery since 1982. He continues to contribute to the Department as a professor emeritus.

**Dr. Thomas K. Lee**, associate professor of surgery, in August was **appointed chief of pediatric surgery**. Dr. Lee has been a member of our faculty since 2001. Aside from his clinical duties, he has been active in both resi-

dent and student education and practice development.

Dr. Richard J. Scriven, assistant professor of surgery, has been appointed associate program director of our residency program in general surgery, and will serve with our other associate program director, Dr. Allison J. McLarty, assistant professor of surgery.

In May, Dr. Scriven performed surgery on a 7-yearold girl from the Dominican Republic, in order to repair an anorectal malformation that had forced her to live with a colostomy. Thanks to his pro bono care, the girl returned to her homeland with the happy prospect of a new life.

## Plastic and Reconstructive Surgery

**Dr. Duc T. Bui**, assistant professor of surgery, gave the following presentation at the annual meeting of the Northeastern Society of Plastic Surgeons, held in Bermuda, in October: "Two for One: Salvage of Bilateral Lower Extremities with a Single Free Flap."

## Dr. Alexander B. Dagum,

associate professor of surgery and chief of plastic and reconstructive surgery, was again selected for inclusion in the "Best Doctors" listing of *New York* Magazine (June 18, 2007), representing the **top 2% of physicians** in the New York Metropolitan area.

### "America's Best" 2007 Selection Of Consumers' Research Council of America

# Guide to America's Top Surgeons

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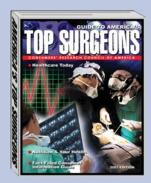
# Guide to America's Top Physicians

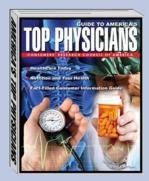
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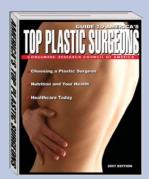
#### Guide to America's Top Plastic Surgeons

Balvant P. Arora, MD Duc T. Bui, MD Alexander B. Dagum, MD Steven M. Katz, MD

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# Surgical Oncology

**Dr. Marvin L. Corman**, professor of surgery, in June attended the World Congress of Coloproctology and Pelvic Diseases in Rome, where he was moderator of two panels that addressed **laparoscopic versus open colectomy** and **management of anal incontinence**.

In August, Dr. Corman gave several lectures at the University of Southern California's Annual Refresher Course in Medicine, held in Maui, HI, which this year focused on current issues in colorectal disease.

Dr. Corman addressed a range of issues which he illuminated with his knowledge and expertise: use of physiologic studies in the evaluation of colorectal problems; office management of hemorrhoids; bowel obstruction; management of prolapsing rectal tissue; and alternatives in the management of incontinence.

In October, Dr. Corman was named an honorary member of the Israel Society of Colon and Rectal Surgery, at the society's annual conference held in Ramat Gan, where he spoke on **complications of colostomy and their management**, and on **local treatment of rectal cancer**.

In November, Dr. Corman attended the Colorectal Congress on Rectal Cancer held in St. Gallen, Switzerland.

Dr. Corman has been honored to do the Khubchandani Lectureship at the Biennial Congress of the International Society of University Colon and Rectal Surgeons, to be held in San Diego, CA, in September 2008.

## Dr. Brian J. O'Hea, as-

sociate professor of surgery and director of the Carol M. Baldwin Breast Care Center, was again selected for inclusion in the "Best Doctors" listing of *New York* Magazine (June 18, 2007), representing the **top 2% of physicians** in the New York Metropolitan area. Dr. O'Hea in May was **appointed interim chief of surgical oncology**.

## Dr. David E. Rivadeneira,

assistant professor of surgery, in May was the **invited keynote speaker** at the International Congress on Endoscopic Surgery, held in Veracruz, Mexico. The subject of his address was laparoscopic colon surgery in the United States.

A nationally recognized specialist in **laparoscopic colon surgery**, Dr. Rivadeneira continues to give workshops and lectures as a visiting professor, throughout our region as well as the rest of the country, on this newly developed technique of colon cancer surgery.

Dr. Rivadeneira has been honored by inclusion in the 2007 edition of *Marquis Who's Who*. An active member of the American Society of Colon and Rectal Surgeons, he has been elected to serve for a threeyear term on the society's program committee.

## **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.uhmc.sunysb.edu/surgery



MD: University of Chicago Pritzker School of Medicine (1988).

**Residency Training:** General Surgery, New York Hospital-Cornell University Medical Center.

Fellowship Training: Pediatric Surgery, St. Louis University Health Sciences Center. Board Certification: <u>Pediatric Surgery;</u> <u>Surgery</u>.

**Specialties**: Pediatric advanced minimal access surgery (<u>laparoscopic</u> and thoracoscopy); surgical management of congenital and acquired anomalies/disease of the neck, chest (airway, chest wall, lungs, esophagus), abdomen (biliary

Dr. Thomas K. Lee

disease, liver, spleen, gastrointestinal tract, anorectum), and soft tissues in children (newborn to adolescents); surgical management of childhood tumors (including kidney and adrenal glands); repair of inguinal hernias, undescended testes; surgical consultation for trauma.

Additional: Chief of Pediatric Surgery; Fellow, American College of Surgeons (<u>FACS</u>); Surgery Specialty Fellow, American Academy of Pediatrics; member, American Pediatric Surgical Association; associate member, Children's Oncology Group; see <u>selected recent publications</u>. Honors: Selected for inclusion in the <u>Castle Connolly</u> Guide, *Top Doctors:* 

*New York Metro Area* (2007), representing the top 10% of physicians in the New York Metropolitan area; selected for inclusion in *Guide to America's Top Surgeons* (2007) published by the <u>Consumers' Research</u> Council of America.

Languages Spoken: English, Chinese (Mandarin). Consultations/Appointments: 631-444-4545.



Procedicus VIST<sup>™</sup> from Mentice—the simulator that we wish to acquire for training in minimally invasive vascular surgery—is a virtual-reality based trainer designed to help physicians gain the skills needed for new procedures using the endovascular approach (*endo-*, within + *vascular*, vessel). See page 7 for information about our Minimally Invasive Skills Training Center.

## Vascular Surgery

**Dr. Nicos Labropoulos**, professor of surgery and director of the Non-Invasive Vascular Laboratory, in November gave the following presentations at the annual symposium on Advances in Vascular Imaging and Diagnosis (AVID), sponsored by the Cleveland Clinic, and held in New York:

Anatomic considerations and standardization of the assessment for venous reflux: recommendations from the UIP consensus document.

A new ultrasonographic sign for determination of age of venous thrombus.

Objective duplex derived criteria for the evaluation of suspected central vein stenosis.

Reflux testing: a technical demonstration.

Dr. Labropoulos served as a member of the AVID symposium faculty, which comprises the world's most renowned technologists, sonographers, physicians, and educators with an interest in vascular disease diagnosis.

# Selected Recent Publications continued from Page 3

- Labropoulos N, Abai B. Reflux testing and imaging for endovenous ablation. *Perspect Vasc Surg Endovasc Ther* 2007;19:67-70.
- Labropoulos N, Borge M, Pierce K, Pappas PJ. Criteria for defining significant central vein stenosis with duplex ultrasound. J Vasc Surg 2007;46:101-7.
- Labropoulos N, Manalo D, Patel NP, Tiongson J, Pryor L, Giannoukas AD. Uncommon leg ulcers in the lower extremity. J Vasc Surg 2007;45:568-573.
- Leon LR Jr, Arslan B, Ley E, Labropoulos N. Endovascular therapy of spontaneous aortocaval fistulae associated with abdominal aortic aneurysms. *Vascular* 2007;15:35-40.

**Dr. John J. Ricotta**, professor and chairman of surgery and chief of vascular surgery, was again selected for inclusion in the "Best Doctors" listing of *New York* Magazine (June 18, 2007), representing the **top 2% of physicians** in the New York Metropolitan area.

In October, Dr. Ricotta was a visiting professor at the University of Iowa, where he gave the lecture for surgical grand rounds.

In September, Dr. Ricotta and colleagues in our vascular team presented at the annual meeting of the Eastern Vascular Society, held in Baltimore, MD, the following study:

Mid-term follow-up after pharmacomechanical thrombolysis for lower extremity deep venous thrombosis [authors: Pagan J, Gasparis AP, Labropoulos N, Tassiopoulos AK, Lo C, Ricotta JJ].

Also at the annual meeting of the Eastern Vascular Society, **Dr. Antonios P. Gasparis**, assistant professor of surgery, gave a presentation titled "Mechanical Thrombolysis: Current Applications and Options."

- Mangrulkar VH, Brunetti VA, Gould ES, Howell N. Unusually large pedal schwannoma. J Foot Ankle Surg 2007;46:398-402.
- Melendez MM, Vosswinkel JA, Shapiro MJ, Gelato MC, Mynarcik D, Gavi S, Xu X, McNurlan M. Wall suction applied to needle muscle biopsy—a novel technique for increasing sample size. J Surg Res 2007;142:301-3.
- Molina PE, McNurlan MA, Rathmacher J, Lang CH, Zambell KL, Purcell J, Bohm S, Zhang P, Bagby GJ, Nelson S. Chronic alcohol accentuates nutritional, metabolic, and immune alterations during asymptomatic simian immunodeficiency virus infection. *Alcohol Clin Exp Res* 2006;30:2065-78.



#### Providing Free Referral Guides With Our Physicians' Contact Information And Office Locations

2007 Surgical Services Referral Guide 2007 Pediatric Services Referral Guide 2007 Cardiovascular Services Referral Guide 2007 Imaging & Radiation Oncology Services Referral Guide 2007 Cancer Services Referral Guide

To obtain free copies of any or all of these referral guides, please call the Practice Development Office of the Clinical Practice Management Plan at (631) 444-9830.

- Reinert RB, Oberle LM, Wek S, Bunpo P, Wang XP, Mileva I, Goodwin L, Aldrich CJ, Durden DL, McNurlan MA, Wek RC, Anthony TG. Role of glutamine depletion in directing tissue-specific nutrient stress responses to Lasparaginase. J Biol Chem 2006;281:31222-33.
  Ricotta JJ. Stroke, TIA, and determin-
- Ricotta JJ. Stroke, 11A, and determining "plaquetivity." *Cardiol Rev* 2007;24:36-7.
- Ricotta JJ. The intraoperative consult. In: Pearce WH, Matsumura JS, Yao JS, editors. *Trends in Vascular Surgery*. Evanston, IL: Greenwood Academic, 2007: 259-64.
- Rivadeneira DE, Killelea AG. Surgical treatments for colon and rectal cancer: a critical appraisal of evidence-based data. In: McCulloch P, Karpeh MS, Kerr DJ, Ajani J, editors. *Gastrointestinal Oncology: Evidence and Analysis*. New York: Informa, 2007: 113-123.
- Rivadeneira DE, Ruffo B, Amrani S, Salinas C. Rectovaginal fistulas: current surgical management. *Clin Colon Rectal Surg* 2007;20:96-101.
- Shindo M, Chheda NN. Incidence of vocal cord paralysis with and without recurrent laryngeal nerve monitoring during thyroidectomy. *Arch Otolaryngol Head Neck Surg* 2007;133:481-5.



Please visit the **Department of Surgery** website at www.uhmc.sunysb.edu/surgery



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