

The Newsletter of the Department of Surgery at the University of North Carolina At Chapel Hill



Melina R. Kibbe, MD

Welcome to the new Department of Surgery Newsletter! Through this quarterly Newsletter, we hope to convey important information and updates to our faculty, trainees, staff, and alumni. We also hope to highlight significant achievements by members of the department and will have regular messages from our Vice Chair of Research, Vice Chair of Education, Director of the Mentorship Program, and our Program Directors and trainees. I hope you enjoy reading this Newsletter!

This Spring brings several notable accomplishments. In March, we celebrated **Match Day**. I am thrilled to report that all three of our

ACGME residency training programs matched extremely well! General Surgery matched six medical students into the categorical PGY1 positions, six UNC medical students into the preliminary PGY1 positions, and one of our own residents into our preliminary PGY2 position. Plastic Surgery matched two into their PGY1 positions. And, Cardiothoracic Surgery matched one into their PGY1 position. Notably, this incoming class will contain 69% women (11 of 16), clearly lead the way with respect to training female surgeons, with representation nearly double the national average.

Another significant accomplishment for the UNC Medical Center occurred in March. The UNC Healthcare Board of Trustees approved the full budget of \$290 million to build the long overdue new **Surgical Tower**. The surgical tower will contain 24 operating room and 56 ICU beds, with the intent to move the SICU, CVT ICU and Neurosurgery ICU into this new building. The building will be located in front of the Memorial Hospital (see Figure), with connections to the existing hospital on multiple levels. The proposed timeline has construction starting in 2019 with building completion targeted for 2021.







Lastly, in March, the Department of Surgery kicked off its **Strategic Planning** process. On March 21, 2017, all of the Division Chiefs and Vice Chairs met with the strategy team to discuss the process that will occur over the next year. Importantly, everyone was asked to answer three questions that will help inform our process. The questions were regarding the three missions of our department (i.e., clinical, research, and education):

- In 25 years, in which missions would we like to be leading nationally as a Department of Surgery assuming no barriers or constraints (i.e., financial, physical, etc.?).
- In which missions is our Department of Surgery leading nationally now?
- Over the next 5 years, where should we focus our efforts in order to accomplish our 25 year goal?

Over the next 2 months, the strategy team, led by Kenji Brantley, Hogan Medlin, and Jon Blair, will conduct a series of interviews with Department of Surgery leaders across the United States to gain important insights that will help guide our process. The Working Group, which will meet monthly, will also include Jim Murphy, Chris Weathington, Lisa Moore, and Cecelia Reik. The Steering Committee, which will meet every other month, consists of the Working Group as well as John Lewis, Matt Ewend, Matt Mauro, Jayne Byrd, and Karen McCall. These are exciting times for our Department. This is an opportunity for all of us to shape and impact our future ability to care for patients through innovation and discovery research and educate the next generation of surgeons and surgeon scientists.



Melina R. Kibbe, MD

Chair, Department of Surgery

Zack D. Owens Distinguished Professor of Surgery

FEATURED NEWS

Second Annual Research Day and Nathan A. Womack Surgical Society Meeting Friday June 16, 2017

Continuing with our showcase of the Department's outstanding work from last year, the day will feature a session on academic success, oral and poster presentations from our residents and medical students, and an awards ceremony during the Womack Reception at the Carolina Inn.



The Nathan A. Womack Distinguished Visiting Professor will be Adil Haider, MD, MPH, FACS. Dr. Haider is an active trauma and critical care surgeon, prolific researcher, and the Kessler Director for the Center for Surgery and Public Health (CSPH), a joint initiative of Brigham and Women's Hospital, Harvard Medical School, and the Harvard T.H. Chan School of Public Health. Dr. Haider is credited with uncovering racial disparities after traumatic injury and establishing the field of trauma disparities research. He is regarded as one of the foremost experts on healthcare inequities in the United States.



Agenda

11:30 am - 1:00 pm

Check in/Registration

(NC Cancer Hospital Lobby)

12:00 pm - 1:00 pm

Six Steps to Academic Success

Adil Haider, MD MPH and Trainees (Sanofi-Aventis Conference Room 1, NC Cancer Hospital)

1:00 pm - 2:15 pm

Posters

(NC Cancer Hospital/ Women's Hospital Lobby)

2:30 pm - 4:00 pm

Oral Presentations

(Bondurant G-100)

4:00 pm - 5:00 pm

Healthcare Outcomes: Should What You Look Like or Who You Love Matter?

Adil Haider, MD MPH (Bondurant G-100)

5:30 pm - 7:00 pm

Nathan A. Womack Surgical Society Awards Reception

(Old Well Room, Carolina Inn)



IN THE LOOP

Research

A big welcome to **Michelle Collins MPA**, our new research administrator! Michelle will support us in all areas of proposal development and will be your main contact for all things research. She is located in 3013 Burnett-Womack. Stop by and say hi!



Happy Spring!

Jen Jen Yeh MD Vice Chair for Research

Program Director's Corner

The Division of Plastic and Reconstructive Surgery is pleased to announce we matched our top two choices in the 2017 residency match! We welcome **Dr. Meredith Kugar** from Indiana University and **Dr. Marcos Lopez** from Columbia University.



[†] Michelle Curtis Roughton MD Program Director, Plastic and Reconstructive Surgery

Mentoring

Setting up the Department's Mentoring Program for all Assistant and Associate Professors is now in full swing. Training sessions for both mentors and mentees are currently being planned. Stayed tuned for more details. In the meantime, take time out for a coffee with your mentor or mentee.



David W. Ollila MD
Director of the Mentorship Program

Medical Students

The Translational Education at Carolina (TEC) curriculum is now in its second year. The curriculum was developed as a way for medical students to learn more about the art and science of medicine by integrating basic science and clinical skills, providing longitudinal patient care experiences, and offering earlier clinical opportunities in specialty fields. Our current medical students are on their first clinical rotation ever. Unlike the traditional prior curricula, the basic clinical sciences have been compressed to 18 months, hence these students are generally younger with a different foundational knowledge base than we are used to seeing. I ask for patience when interacting with our students and implore our surgical residents to continue to fully incorporate our student learners into the team.



Achee

Anthony G. Charles MD, MPH
Director, Medical Student Clerkship

Womack Society

For the first time in its history, the Annual Womack Surgical Society Meeting will be held in conjunction with the Department of Surgery's Research Day. This combined effort will allow alumni to participate in evaluating and discussing the latest surgical research in the department as well as allow them to hear about the strategic focus under Dr. Kibbe's leadership as the fifth chair of surgery. All members of the department, trainees, faculty and alumni are encouraged to attend on Friday June 16th.



Pa (a)
Bruce A. Cairns, MD
President of the Womack Society

Simulation Center



Suturing and knot tying course third year medical students in the Department of Surgery Sim Center!

which has been developed by the Simulation Center Manager, Mr. Neal Murty. In May we began training our residents using a VR simulator for endoscopy. Dr. Nick Shaheen from

Gastroenterology has kindly agreed to have one of his fellows help teach our residents

During the last 4 months, the Simulation Center has seen an increased level of activity, for both Medical Students and Residents. For the MS III students rotating through surgery, we have now two sessions during each clerkship block: one for scrubbing, gowning and gloving and one for knot tying and suturing. We are now starting a similar session for MS Is who have an interest in surgery. Drs. Crowner and McGinigle are working with PGY 1 and PGY2 residents for basic laparoscopic skills, central line placement and bowel anastomosis.

Schlottmann (Simulation Fellow) and I are taking PGY3-5 residents through laparoscopic suturing advanced laparoscopic procedures using a simulator based on a perfused tissue block,

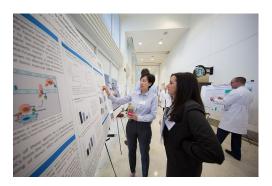


Marco Patti MD

Director. Simulation Center

Residents

EGD and colonoscopy.



The process of identifying and working through a research project as a resident can seem like a daunting, impossible process. However, the submission of an abstract, likely within 5 minutes of the deadline, comes with a huge sigh of relief...SUCCESS! This feeling is magnified with the receipt of the "Your abstract has been accepted for presentation!" email. BIGGER SUCCESS! You should be happy - the opportunity to present your work at a national meeting is a fantastic opportunity to not only share your research with the

medical community, but also to network with other

residents, fellows, and attendees. Also, you get a chance to travel, hopefully to somewhere cool. This is all very exciting...until you realize that you then have to prepare your presentation. Whether putting together a poster or PowerPoint, everyone dreads this process. If it is your first presentation, the question of "Where do I even start?" is likely prevalent within your thoughts. Rest assured, no need to re-invent the wheel—templates and examples of past presentations are now available on the Resident Research page under **Research Templates**. On this page you will also find a sample cover letter for manuscript submission and revisions. Happy formatting!



Reblera Brown PGY5



Rebecca Brown MD Mansi Shah MD PGY6

= Spring 2017 :

Education



Dr. John Mellinger

We continue to bring expert educators to speak to the department in different forums. **Dr. John Mellinger**, from the SIU Department of Surgery, delivered the annual Resident as Teacher conference entitled "Learning, Teaching and Leading in Residency" on September 23, 2016. **Justin Dimick MD, MPH** gave an inspiring Grand Rounds entitled "Innovative Approaches for Improving Surgical Quality" on March 1, 2017 and **Alice Chuang MD** gave an engaging talk on "The Science of Human Learning" at the Grand Rounds on May 10, 2017. **David A. Rogers MD, MHPE** will serve our Resident as Teacher guest on September 15, 2017. We are working to engage Surgery faculty in the Foundation Phase of the Medical School curriculum. This is needed to introduce our medical students to surgeons prior to the clinical clerkship. There are ongoing opportunities to provide clinical correlation in the anatomic dissections that

take place all through the year. If you are interested in participating, please let me know!

The new Educators Research Group met twice this quarter. Thanks to **Dr. Jen Jen Yeh** and **Paula Strassle**



Timothy Farrell MD Vice Chair of Education

MSPH who helped us learn more about the many resources and personnel available to the members of the Department. Everyone is invited to this forum in the future, which is intended to foster collaboration between groups looking to study any aspect of surgical education. These meetings occur the third Friday of each month at noon.

HIGHLIGHTS



Melina Kibbe MD (Chair) was featured in the April 2017 issue of Chapel Hill Magazine. Dr. Kibbe was featured along with other local leaders in the magazine's annual Women's Issue, which celebrates "women making an impact on our community every day."



Edward Bahnson PhD, (Vascular), served as a panelist for "Out in the Lab: Visibility Matters" discussion in March 2017. The panel featured UNC faculty and a visiting speaker discussing issues facing LGBTQ individuals in science.



Katharine McGinigle MD (Vascular) will serve as the Department's Associate Director of the Surgical Clerkship. Dr. McGinigle has been an active voice in advocating for improvements in surgical education and has given several lectures to students at both the

School of Medicine and the School of Public Health.



Anthony G. Charles MD, MPH (Trauma) has been selected as a new member of the Order of the Golden Fleece, UNC's oldest and highest honorary society. The Order is recognizing Dr. Charles for his work with the Malawi Surgical Initiative, as well as the many

other great contributions he has made to UNC.





Mark Farber MD (Vascular) and Thomas G. Caranasos MD (CT) joined efforts for an endovascular repair of aortic arch aneurysm involving the great vessels. This minimally invasive repair was

performed as part of a physician sponsored IDE (PS-IDE) trial spearheaded by Dr. Farber. The procedure was life saving for the patient, who was not a candidate for traditional open repair.



Daryhl Johnson, II MD, MPH (Trauma) was elected Chair of the Faculty Athletics Committee for the 2017-2018 academic year. The charge of the committee is to inform and represent the faculty and advise the chancellor on any aspect of athletics, including, but not

limited to, the academic and broader University experience for varsity student athletes and the general conduct and operation of the University's athletic program.



Lawrence Kim MD (Surg Onc) will serve as the new chair of the Endocrine/Head and Neck Disease Site Workgroup for the Society of Surgical Oncology.



Elizabeth Dreesen MD (Trauma) will assume the role of Program Director for the Surgical Critical Care fellowship, and will work with Dr. Brownstein as the co-director of the SICU. Dr. Dreesen has also been selected to be the graduation speaker for the UNC School

of Medicine in May 2017.



Bruce A. Cairns MD (Burn) was featured in the University Gazette, "Cairns' Golden Rule: 'It's never about you" reflecting on his time as UNC Faculty Chair.



Thomas M. Egan MD (CT) served as an expert research proposal reviewer for the University of Leuven, Belgium, on March 30, 2017.



Michelle Brownstein MD (Trauma) will assume the role of the SICU Medical Director and Associate Program Director of the Surgical Critical Care fellowship. She has been Associate Director of the SICU for several years.



Jen Jen Yeh MD (Surg Onc), was promoted to Tenured Professor. Dr. Yeh was also the Third Annual Feeney Distinguished Lecturer in HPB Surgical Oncology at the University of Toronto.



Sharon E. Schiro PhD (Trauma) received a scholarship to attend the SAS Global Forum in April 2017. Dr. Schiro was also recently selected for the 2017-2018 Health Behavior Capstone team. Dr. Schiro will precept the team as they spend an academic year

working with the State Trauma Advisory Committee on a collaborative trauma quality improvement project.

AWARDS



Bruce A. Cairns MD (Burn) and Robert Maile PhD (Burn), received a R42 grant from the National Institute of Allergy and Infectious Disease to examine the key steps towards commercializing

a sensor that measures nitric oxide in whole blood.



Thomas G. Caranasos MD (CT) will serve as an investigator with Ke Cheng PhD, of the UNC/NC State Department of Biomedical Engineering, on a Biotechnology Innovation Grant (\$100,000) awarded by the North Carolina Biotechnology Center.



Edward Bahnson PhD, (Vascular), was selected as a CTSA KL2 scholar for his study, "Cell-mediated targeted redox intervention for the prevention of restenosis in the injured vasculature." Dr. Bahnson also received a \$20,000 Pilot and Feasibility grant award

from the UNC Nutrition Obesity Research Center.



Sean McLean MD (Ped Surg), was a recipient of the University Research Council's 2017 James Moeser Award for Distinguished Research.

UNC female surgeons and residents recreate The New Yorker "Operating Theater" Cover



The April 23, 2017 cover of *The New Yorker*, created by French artist Malika Favre, went viral as Dr. Susan Pitt, an endocrinologist at University of Wisconsin, issued a challenge to her fellow female surgeons to recreate the image, in order to bring awareness to women and minorities who work daily in a traditionally white and male-dominated role. Since this challenge, female surgeons around the world have replicated this image, tagging it with #NYerORCoverChallenge, #ILookLikeASurgeon. 24 of our Department's faculty members and residents got together to recreate this photo.

NEW FACULTY



John Ikonomidis MD, PhD joined the Department as the Chief for the Division of Cardiothoracic Surgery in March. He most recently served as Horace G. Smithy Professor of Surgery and Chief for the Division of Cardiothoracic Surgery at the

Medical University of South Carolina (MUSC).



Luigi Pascarella MD joined the Division of Vascular Surgery as an Assistant Professor on May 1. He most recently served as a Clinical Assistant Professor of Surgery at the University of Iowa.



Paul Tessmann MD, PharmD will be joining the Division of Cardiothoracic Surgery as an Assistant Professor on June 15. He currently serves as an Assistant Professor of Surgery at the University of Kentucky, Lexington.



Pablo Serrano Rodriguez MD joined the Division of Abdominal Transplant as a Clinical Fellow on May 2. He most recently served as Chief of Kidney Transplantation at the Centro Medico Nacional 20 de Noviembre in Mexico City, Mexico.

MEETINGS

Southeastern Surgical Congress Awards Nashville, TN. February 25-28, 2017



- Black J (PGY4), Shah M (PGY6), and Brown RF (PGY5) won the Resident Jeopardy competition at the Southeastern Surgical Congress in March. The winning question was, "Who was Queen Victoria?"
- **Black J** (**PGY4**), won a Gold medal award for outstanding resident abstract at the Southeastern Surgical Congress annual meeting for his abstract entitled "Outpatient Thyroidectomy is safe for moderate volume surgeons." (Oral).

Nat'l Committee on Trauma Paper Competition Washington, DC. March 2, 2017

 Gallaher JR (PGY6), Mabedi C, Cairns BA (Burn), Charles AG (Trauma). The effect of a new surgical residency program on trauma mortality at a sub-saharan Africa tertiary center (Oral).

Society of Surgical Oncology Seattle, WA. March 15-18 2017

- Schmidt B (Surg Onc Fellow), Herrera S, Yeh JJ (Surg Onc). A KRAS P53 P16 genetically engineered mouse model demonstrates robust onset and penetrance of pancreatic ductal adenocarcinoma (Oral).
- Ellis C, Samuel C, **Stitzenberg KB** (**Surg Onc**). Longterm survival in patients with a pathological complete response after chemoradiotherapy for rectal cancer: a national study (Poster).

- Laks S (Surg Onc Fellow), Kolarczyk LM, Strassle PD (Database), Isaak RS, Hance L, Kim H (Surg Onc). Enhanced recover after surgery (ERAS) for pancreatectomy: increased intraoperative vasopressor use does not increase pancreatic fistula rates (Poster).
- Carr JS (PGY4), Baggett C, McGuire KP (Surg Onc). Age disparity exists in the use of neoadjuvant chemotherapy for breast cancer (Poster).

American Heart Association 2017 Scientific Sessions Arlington, VA. April 2-3, 2017

Goins A, Strassle PD (Database), Ramm CJ, Teeter EG, Smeltz AM, Caranasos TG (CT), Vavalle JP, Kolarczyk LM. Intravenous anesthesia as compared to volatile anesthesia is associated with reduced length of stay after transcatheter aortic valve replacement: Results from two-year program at major academic medical center (Poster).

International Society for Heart and Lung Transplantation San Diego, CA. April 5-8, 2017

- Jernigan EG (CT MS), Gonzalez V, Long JM (CT), Nelson JS (CT - Former Faculty). A 26-year survivor of heart-lung transplant: Complications of chronic immunosuppression (Poster).
- Gonzalez V, Jernigan EG (CT MS), Strassle PD (Database), Nelson JS (CT Former Faculty). Very long-term outcomes of combined heart-lung transplantation: A single-center 26-year experience and current strategies for follow-up (Poster).
- Egan TM (CT), Blackwell J (CT Lab), Haithcock BE (CT), Long JM (CT), Birchard K, Lobo J, Masuodi S (CT), Requard J, Thys C. Lessons learned from the first clinical trial to compare outcomes of lungs transplanted from uncontrolled donation after circulatory determination of death donors (uDCDDs) assessed by ex-vivo lung perfusion (EVLP) and CT scan and lungs transplanted from conventional donors (CONV) (Oral).

- Masuodi S (CT), Blackwell J (CT), Stewart P, Egan TM (CT). Cytokine levels in Steen Solution perfusate increase during ex-vivo lung perfusion (EVLP) of lungs from conventional donors (Conv) and uncontrolled donation after circulatory determination of death donors (uDCDDs) (Poster).
- **Egan TM (CT)**, Requard J, Edwards T. What does first person authorization (FPA) mean? Knowledge and attitudes among FPA adults re: Brain Dead donors (BDDs) and controlled Donation after Circulatory Determination of Death (cDCDD) donors. Understanding vs the law (Oral).
- Egan TM (CT). Lung allocation score: The changing landscape of lung transplantation in the USA. Invited speaker at symposium 13: lung allocation scores (LAS): Making the complex simple, or just the simple complex? (Oral).
- **Egan TM (CT)**, Requard J, Edwards T. Can lungs be recovered quickly from first person authorized (FPA) uncontrolled donation after circulatory determination of death donors (uDCDDs)? The law vs knowledge and attitudes among FPA adults (Poster).

Society of Cardiovascular Anesthesiologists Orlando, FL. April 22-26, 2017.

- Dhandha V, Rohman TP, Caranasos TG (CT), Vavalle JP, Kolarczyk LM. Acute, severe aortic insufficiency leading to cardiac arrest in transcatheter aortic valve replacement: Implications and management (Poster).
- Bruno KA, **Caranasos TG (CT)**, Kolarczyk LM. Tricuspid valve avulsion after blunt chest wall trauma: replace now or wait? (Poster).
- Goins A, Strassle PD (Database), Ramm CJ, Teeter EG, Smeltz AM, Caranasos TG (CT), Vavalle JP, Kolarczyk LM. General anesthesia for transcatheter aortic valve replacement: Total intravenous anesthesia is associated with decreased hospital length of stay and a trend toward less delirium compared to volatile agent technique (Poster).
- Maves GS, Haithcock BE (CT), Kolarczyk LM. Dynamic tracheal obstruction from a posterior mediastinal hematoma (Poster).
- Frangopoulos CM, Kidd BJ, Hance L, Michael LC, Long JM (CT), Haithcock BE (CT), Teeter EG, Kolarczyk LM. Analgesic techniques for a thoracic enhanced recovery pathway: Intercostal blocks provide equivocal analgesia and shorter length for stay compared to thoracic epidurals (Poster).



UNC Department of Surgery presented 22 abstracts at the Academic Surgical Congress.

REFLECTIONS

On Interviews and Recruiting



By Tim Farrell MD

I have been occupied recently interviewing applicants for several faculty positions at UNC. This has caused me to reflect on my own personal success as an interviewer, both as a judge of ability and fit, and also as an

effective recruiter to our institution. In addition, I have been reading the literature in an effort to improve my approach. Given my position as the Vice Chair of Education, I realized this was a chance for me to share what I have learned with the department so that we can all see recruitment of others (i.e., interns, faculty, or staff) as an opportunity to showcase what makes UNC Surgery great.

Now that March Madness in Chapel Hill has come to an end, I will frame my comments using a basketball analogy. When does Coach Roy Williams' development of a championship team really begin? The casual fan might identify the first practice, or the first pre-conference game. However, opposing coaches would likely say the competitive advantage begins well before the season. A quick Google search on "UNC recruits" will show 19 players are presently under active recruitment by the Tar Heels for the next three incoming UNC classes. Coach Williams 13 recruiting trips since the start of the ACC conference schedule indicates how much he prioritizes this aspect in assuring the ongoing success of the program (www.tarheeltimes.com/wheresroy).



There are not Pubmed citations on interviewing and recruiting for positions in medicine. In the business world, there are a few experts and some electronic and published resources from which we can draw parallels. I will attempt to summarize my review of these and translate the lessons into ones we surgeons can utilize.

First of all, it is necessary to decide what is needed for the organization. Coach Williams will recruit a point guard or a center based on the team's needs, and his understanding of the personalities of his existing players. In a particular surgical division, it is equally important for all the stakeholders to agree on the required attributes for the ideal candidate. It is helpful to consider qualities of current top performers in the environment when forming this ideal profile. However, cultural "fit" is less discriminating than adaptability when selecting employees who will succeed in an established work environment.

Conducting an interview for a surgical colleague is like performing an operation. It works best if one is informed, the process is standardized, and the surgeon encourages the right environment.

UNC basketball reviews videos and statistics before considering a recruit. In interviewing, experts agree it is best to learn about an applicant before an interaction, by reading documents available and talking to those who know him or her. Some also recommend having questions prepared beforehand that query for the desired attributes, and that will assure a standardized comparison between candidates. It is best to allow the applicant time to prepare also, by providing details about the interview ahead of time. During the conduct of the interview, steps to diffuse stress are valuable, such as starting with safe questions, using some open ended questions, and demonstrating that you already know something about the applicant and are listening. Later, a low-stress interview can progress to include more detailed "real-world" questions that query the true competency and potential of the interviewee.

Coach Williams prefers recruits who value the 4-year total experience at Carolina, rather than "one and done" players who are looking to jump into the NBA after freshman year. In interviewing surgical applicants, it is also important

to consider the mindset and likely longevity. Is he or she focused on only short-term variables, such as access to cases and starting salary, or do the discussions center on areas connected to longitudinal growth in the institution, such as research support and pathways to leadership? It is expensive and disruptive to morale to have too much of a rotating workforce in an organization. Asking about future goals during an interview is a great way to get a sense of the candidate's intent to integrate for the long term.

Conducting an interview for a surgical colleague is like performing an operation. It works best if one is informed, the process is standardized, and the surgeon encourages the right environment.

According to experts, there are many bad interview questions. These include, "Why should I hire you?" "What is your greatest weakness?" Generally, they are poor because they do not relate to the job, but rather ask the interviewee to prove himself or herself as a person. Remember, it is illegal to ask about age, race, ethnicity or color, gender or sex, religion, disability, or pregnancy. It is also illegal to gather information about these things indirectly by asking about child care, citizenship, time to retirement, etc.

Once you become confident in a candidate, it is important to "sell" the job. After all, the best candidates have many options. In some situations, when things are going very well in an interview, the process can shift to become more of a mutual screening process, and then even to a wooing

process. Of course, there are rules that must be followed, whether in collegiate sports or in business, but it helps to tell the top candidates why you think they will be a good fit, and to introduce them to potential peers and others who can give an honest view of the job.

Sometimes, in the midst of an interview, it is clear the applicant is not at the top of the list. Still, it is important to "sell" the program to these candidates as well. Applicants who come through for interviews will continue to drive the reputation of a program as they proceed through their careers in other locations. If they perceive high quality and potential from the institution and a strong culture within the program, their message will be positive. A strong culture becomes a recruiting tool that takes life beyond the individuals that comprise an organization. The legacy established by Dean Smith and others gives Coach Williams a head start as a recruiting agent for Carolina Basketball. Likewise, we should wear our collective pride and honor our department's heritage as we represent ourselves as recruiting agents for UNC Surgery.

Sources:

https://hbr.org/2015/01/how-to-conduct-an-effectivejob-interview

https://www.entrepreneur.com/article/248608

https://blog.bufferapp.com/6-powerful-communicationtricks-from-some-of-the-worlds-best-interviewers

https://www.forbes.com/sites/shelisrael/2012/04/14/8-tips-on-conducting-great-interviews/#79306c4956f1

https://youtu.be/4eOynrl2eTM



UPCOMING EVENTS

Upcoming Grand Rounds

Wednesdays 7:15-8:15 AM 4th Floor Clinic Auditorium



Tim Sadiq, MDAssistant Professor, Department of Surgery, Division of Gastrointestinal Surgery University of North Carolina at Chapel Hill May 31, 2017



"A Scientific Journey from Singapore to Stem Cells"

Diane Farmer, MD

Chair, Department of Surgery

University of California Davis Health System

June 21, 2017

Dismantling Racism in Medicine Coalition

The Dismantling Racism in Medicine Coalition is composed of students, staff, faculty, and residents at the School of Medicine and other professional schools who are invested in helping the institution adopt a racial justice perspective with regards to medical education, clinical care, and research.

The Coalition is in search of faculty mentors to guide and support students as they learn about and work towards racial justice in our institution.

If you are interested in attending a sub-committee or general meeting, would like further information about the Coalition's work, or have ideas of how the Coalition can mutually support and collaborate across professional schools to form an anti-racism health professionals movement, please email **Margo Faulk@med.unc.edu** for more information.

General Surgery Chief Residents Reception

 Saturday, June 10, 2017, Paul J. Rizzo Center Loudermilk East/Magnolia Room Chapel Hill, NC

ABSTRACT DEADLINES

31st Eastern Association for the Surgery of Trauma (EAST) Annual Scientific Assembly

- January 9-13, 2018, Disney's Contemporary Resort, Lake Buena Vista, FL
- More information available **here**.
- Due Date: Saturday, July 1, 2017 by 11:59 pm

129th Annual Meeting of The Southern Surgical Association

- December 3-6, 2017 The Homestead, Hot Springs, VA.
- More information may be found **here**.
- Due Date: Saturday, July 1, 2017 by 11:59 pm

Society of Asian Academic Surgeons - 2nd Annual Meeting

- September 21-22, 2017, University of Alabama at Birmingham
- More information available **here**.
- Due Date: Friday, May 26, 2017 by 11:59 pm CDT

American Heart Association - Scientific Sessions 2017

- Scientific Sessions: November 11–15, 2017, Anaheim, CA
- More information **here**.
- Due Date: Monday, June 12, 2017

RESEARCH RESOURCES

Apply For Grants

Carolina Center of Cancer Nanotechnology Excellence

Due Date: Monday, June 5, 2017 Award Amount: Up to \$50,000

For more information, please contact Tamea Love at

tamea love@med.unc.edu.

TraCS \$2K Grants (These are great grants for your projects – brief one page write up) October 18, November 15, December 20. https://tracs.unc.edu/index.php/services/pilot-program/tracs-2k-grants

Core Facility Services

UNC Research Core Facilities are shared resources which offer a wide range of services to the research community. Below are some core facilities that are available to you.

Animal Models
Biochemistry
Clinical and Translational

<u>Genomics</u> <u>Imaging</u> Research Support Service

Research Support

Proposal Development



Michelle Collins, MPA, our Research Administrator, provides support for all areas of proposal development and will be your main contact for all things research. Please contact Michelle as soon as you think

about applying for a grant. She will help you with developing your budget, compiling the appropriate documentation for your proposal, and routing your grant for submission. Please remember external grants must be routed and submitted 7-days before the due date! Request Michelle's assistance using the **online service request form.**

Database Management



Paula Strassle, MSPH, our database manager, provides assistance for data collection and database set-up, e.g. chart reviews. She will help you organize and think about things so that you will be able to analyze it when

you are ready. Paula is also in charge of the NIS, NSQUIP, and SEER <u>databases</u>. Contact her if you would like to use them or have questions about them. She can also point you to other databases that may help you. Contact Paula BEFORE you start any project involving data. Request Paula's assistance using the <u>online service request form.</u>

Biostatistics



Jason Fine, PhD, Professor of Biostatistics, leads our biostatistics team with the help of his graduate research assistant Daniel Luckett. Dr. Fine has extensive experience in collaborative research and statistical methodology development related to observation studies and clinical trials, longitudinal and survival data, genetics and imaging data and statistical methods in diagnostic medicine, including applications in genetics and imaging and in biomarker development. Request Dr. Fine's assistance using the **online service request form.**

NEW PUBLICATIONS

- Arora S, Strassle PD (Database), Ramm CJ, Rhodes JA, Vaidya SR, Caranasos TG (CT), Vavalle JP. Transcatheter versus surgical aortic valve replacement in patients with lower surgical risk scores: a systematic review and meta-analysis of early outcomes. Heart Lung Circ. 2017 Jan 24. pii: S1443-9506(17)30022-7.
- Meyers MW, Rink JS, Jiang Q, Kelly ME, Vercammen JM, Thaxton CS, Kibbe MR (Chair). Systemically administered collagen-targeted gold nanoparticles bind to arterial injury following vascular interventions. Physiol Rep. 2017 Feb;5(4). pii: e13128.
- Gallaher JR (PGY6), Mulima G, Kopp D, Shores CG, Charles AG (Trauma). Consequences of centralised blood bank policies in sub-Saharan Africa. Lancet Glob Health. 2017 Feb;5(2):e131-e132.
- Martinelli SM, Lateef BD, Long JM (CT), Huang DY, Karmarkar A, Barrick BP. Challenges in the Anesthetic Management for a Robotic Thymectomy in a Patient With Myasthenia Gravis: A Case Report. A A Case Rep. 2017 Feb 3.
- Knowlin L (Burn), Reid T (Trauma), Williams F (Burn), Cairns BA (Burn), Charles AG (Trauma).
 Burn mortality in patients with preexisting cardiovascular disease. Burns. 2017 Feb 8. pii: S0305-4179(17)30046-3.
- McDermott MM, **Kibbe MR (Chair).** Improving lower extremity functioning in peripheral artery disease: exercise, endovascular revascularization, or both? JAMA. 2017 Feb 21;317(7):689-690.
- White SH, McDermott MM, Sufit RL, Kosmac K, Bugg AW, Gonzalez-Freire M, Ferrucci L, Tian L, Zhao L, Gao Y, Kibbe MR (Chair), MR, Criqui MH, Leeuwenburgh C, Peterson CA. Erratum to: Walking performance is positively correlated to calf muscle fiber size in peripheral artery disease subjects, but fibers show aberrant mitophagy: an observational study. J Transl Med. 2017 Feb 23;15(1):45.
- Carr JS (PGY4), King S, Dekaney CM (Ped Surg/ Alumni). Depletion of enteric bacteria diminishes leukocyte infiltration following doxorubicin-induced small intestinal damage in mice. PLoS One. 2017 Mar 3;12(3):e0173429.

- Tyson AF, Gallaher JR (PGY6), Mjuweni S, Cairns BA (Burn), Charles AG (Trauma). The effect of seasonality on burn incidence, severity and outcome in central Malawi. Burns. 2017 Mar 5.
- **Kibbe MR (Chair).** JAMA Surgery 2016 Year in Review. JAMA Surg. 2017 Mar 15.
- Linz BM, Neely CJ, Kartchner LB, Mendoza AE, Khoury AL, Truax A, Sempowski G, Eitas T, Brickey J, Ting JP, Cairns BA (Burn), Maile R (Burn). Innate Immune Cell Recovery Is Positively Regulated by NLRP12 during Emergency Hematopoiesis. J Immunol. 2017 Mar 15;198(6): 2426-2433.
- Samples J (PGY7), Evans K (Alumni), Chaumont N (GI), Strassle PD (Database), Sadiq T (GI), Koruda M (GI). Variant Two-Stage Ileal Pouch-Anal Anastomosis: An Innovative and Effective Alternative to Standard Resection in Ulcerative Colitis. J Am Coll Surg. 2017 Apr; 224 (4):557-563.
- Mohanty K, Blackwell J, Egan TM (CT), Muller M. Characterization of the Lung Parenchyma Using Ultrasound Multiple Scattering. Ultrasound Med Biol. 2017 May;43(5):993-1003.
- Tyson AF, Gallaher JR (PGY6), Mjuweni S, Cairns BA (Burn), Charles AG (Trauma). The effect of seasonality on burn incidence, severity and outcome in Central Malawi. Burns. 2017 Mar 5. pii: S0305-4179(17)30096-7.
- Vavalle JP, Yeung M, Caranasos TG (CT), Ramm CJ. Chapter 9, Hemodynamics of transcatheter and surgical aortic valve replacement. IN: Stouffer G, ed., Cardiovascular Hemodynamics for the Clinician, 2nd ed. Oxford, UK: Wiley-Blackwell. pp. 119-128.
- Seymour RB, Leas D, Wally MK, Hsu JR; PRIMUM Group (Schiro, S (Trauma). Prescription reporting with immediate medication utilization mapping (PRIMUM): development of an alert to improve narcotic prescribing. BMC Med Inform Decis Mak. 2016 Aug 22;16:111. Erratum in: BMC Med Inform Decis Mak. 2016;16(1):125.



