In addition, Fall has brought us around to football season and a new partnership with the Denver Broncos.

It continues to be my privilege to share our successes and upcoming events with you. I hope you enjoy the newsletter that follows.

Richard D. Schulick, MD, MBA, FACS
The Aragón/Gonzalez-Giustí Chair
Professor & Chair

Fall is in the air, the leaves are on the cusp of changing, and you can almost sense the anticipation in the air of the upcoming ski season. Yet another great reason to live in Colorado.

We extend our welcome to the new Faculty, Fellows and Residents that have joined us over the past few months and hope they are enjoying all that Colorado has to offer.

Congratulations to our Faculty, voted by their peers, as this year's 5280 TopDocs. We continue to have a strong showing of exemplary professionals in this annual listing. I'd also like to congratulate Stephanie Farmer who was recently named President of the Association of Academic Surgical Administrators.

As our existing Faculty expand their research into a number of groundbreaking areas. We continue to assess our own processes using information obtained through NSQIP. Investigating areas of patient care such as inpatient malnutrition. While expanding the services we offer, such as our Center for Lungs and Breathing that is now available to patients.

Welcome New Hires
...

Inpatient Malnutrition
...

Center for Lungs and Breathing
...

Welcome Fellows & Residents

A WORD FROM THE CHAIR

WWW.CUSURGERY.COM
Welcome New Faculty & Staff!

Faculty

Anne Wagner, MD
Associate Professor
GI, Tumor & Endocrine

Paul Bauling, MD
Assistant Clinical Professor
GI, Tumor & Endocrine

Kendra Conzen, MD
Assistant Professor
Transplant Surgery

Michelle Cowan, MD
Assistant Professor
GI, Tumor & Endocrine

Lisa Ferrigno, MD
Assistant Professor
GI, Tumor & Endocrine

Ana Gleisner, MD
Assistant Professor
GI, Tumor & Endocrine

Ashley Ignatiuk, MD
Assistant Professor
Plastic & Recon. Surgery

Cameron Bell, CCNS
Instructor
GI, Tumor & Endocrine

Caitlin Blaine, PA
Instructor
Cardiothoracic Surgery

Alyssa Clire, PAC
Instructor
GI, Tumor & Endocrine

Sarah Longyshore, PA
Instructor
GI, Tumor & Endocrine

Nicole Williams, NP
Instructor
GI, Tumor & Endocrine

Sheryl Holbrook
Senior PRA
Urology

Robert Meller
PRA
Cardiothoracic Surgery

Staff

Amy Bothor
Patient Affairs Coord.
GI, Tumor & Endocrine

Laurinda Campbell
Patient Affairs Coord.
GI, Tumor & Endocrine

Susan Ficca
Executive Assistant
GI, Tumor & Endocrine

Tracy Gray, BA, SPHR
HR & Faculty Affairs Manager
Finance & Administration

Alexandria Hughes
Admin Assistant
Cardiothoracic Surgery

Marissa Kaezemeyer
Division Manager
Pediatric Surgery

Sanghee Lee, PhD
Post Doc Fellow
Urology

Courtney Maloney
Admin Assistant
Cardiothoracic Surgery

Ruth Mittiga
Admin Assistant
Cardiothoracic Surgery

Laura Montoya
Admin Assistant II
GI, Tumor & Endocrine

Tanya Obermyer
Patient Affairs Coord.
GI, Tumor & Endocrine

Aspen Schmidt
Admin Assistant
Vascular Surgery

Richard Tobin, PhD
Post Doc Fellow
GI, Tumor & Endocrine

This publication is viewable online at: http://issuu.com/slangesurgery/docs/October_2015_dos_newsletter
C O N G R A T U L A T I O N S  T O  O U R  2 0 1 5  T O P  D O C S!

THE LIST
University of Colorado Denver
DEPARTMENT OF SURGERY
2015

COMPLEX GENERAL SURGICAL ONCOLOGY
Richard D. Schuller
UNIVERSITY

CONGENITAL CARDIAC SURGERY
David N. Campbell
UNIVERSITY

Jordi Noguera
UNIVERSITY

PEDIATRIC SURGERY
Dennis D. Bensard
UNIVERSITY

Jennifer Brum
UNIVERSITY

Frederick M. Karrer
ERICK

David Patrick
UNIVERSITY

PEDIATRIC TRANSPLANT HEPATOPATHY
Frederick M. Karrer
UNIVERSITY

DR. 5280 TOP DOCS
THE 515 BEST PHYSICIANS IN DENVER

PEDIATRIC UROLOGY
Duncan T. Wilcox
UNIVERSITY

PLASTIC SURGERY (WITHIN THE HEAD/NECK)
Frederick W. B. Deleyannis
UNIVERSITY

SURGERY
Robert C. McIntyre, Jr.
UNIVERSITY

SURGERY OF THE HAND
Michael J. Gordon
UNIVERSITY

SURGICAL CRITICAL CARE
Ernest E. Moore
UNIVERSITY

THORACIC AND CARDIAC SURGERY
Joseph C. Cleveland, Jr.
UNIVERSITY

John D. Mitchell
UNIVERSITY

Michael Weyand
UNIVERSITY

UROLOGY
Paul D. Maroni
UNIVERSITY

Randall Meschan
UNIVERSITY
SMASH 3 Hikers at the top of Mt. Sherman

Surgery’s annual SMASH Expedition hikers bag 14er

by Joelle Klein | UCH Insider, Central

What has about 100 legs and over 14,000 feet? Give up? It’s the third annual Surgical Mountain Assault Series Hike (SMASH) expedition.

For each of the last three years the University of Colorado School of Medicine’s Department of Surgery has coordinated a hike to one of Colorado’s 54 14ers (mountains with peaks that are over 14,000 feet in elevation). This year’s hike up Mount Sherman (elevation 14,036) near Fairplay, about two-and-a-half hours west of Denver, took place on August 8. It included members of all seven surgery divisions, a visiting scholar from China, dogs, spouses, friends, children, and staff from University of Colorado Hospital.

The group, led by Department of Surgery Chair Richard Schulick, MD, and Urology Chief Randall Meacham, MD, lucked out this year with a gorgeous sunny day, free of storms.

“How many other departments of surgery get to do stuff like this? I think we’re very lucky to not only be in this great institution but also in a great state with a lot of great things to do,” said Schulick.

Hiking history. Annual 14er hikes were originally started by Meacham and the Urology Division back in 1997. About 10 to 15 people joined each year with the biggest drawing about 40 hikers. The final Urology 14er expedition took place in 2008.

When Schulick came on board in 2012, he noticed the coffee mugs that Meacham’s group had made for each 14er hike they did, and asked him where they came from.

“He told me the story and I thought that [the hikes] would be a great team building experience,” Schulick said. …..

Better surgical outcomes? It’s a numbers game

by Todd Neff | UCH Insider, Central

Big databases don’t get much attention, and when they do, it’s often not positive (think National Security Agency controversy). But big data put to good use can save pain, time, money, and lives.

In mid-2013, the University of Colorado School of Medicine’s Department of Surgery, along with several other departments, the School of Medicine, and University of Colorado Hospital, started investing $250,000 a year to participate in the American College of Surgeons’ National Surgical Quality Improvement Program (NSQIP, sounds like “Nesquip”). NSQIP is a national database through which more than 600 hospitals track surgical patients, collecting data on up to 135 variables from before surgery through 30 days afterward. Their collective efforts have filled a giant pool of information pertaining to people young and old and sick and healthy, who undergo every imaginable surgical procedure.

Such data can help answer relevant questions that previously couldn’t have been answered. For example, CU School of Medicine thoracic surgeon Robert Meguid, MD, MPH, wondered whether pregnant women fare better or worse than nonpregnant women in the 30 days after surgery (they fare about the same – see related story, this issue). Surgeon Csaba Gajdos, MD, was curious about how being on long-term dialysis or having cognitive impairment affects surgical outcomes (both rendered patients significantly more likely to suffer complications and become ill, Gajdos and colleagues found).

Such answers have consequences: Pregnant women who must undergo surgery can rest easier, and Gajdos and colleagues said preoperative assessments, if they don’t already, should also include cognition. But more important to patients and UCH will be the local quality improvements that NSQIP enables through better outcomes......

To finish reading about NSQIP and ongoing initiatives please click the link below.
There are two common approaches to protecting humans from infectious disease: Targeting pathogens and parasites with medicines like antibiotics, or dealing with the conditions that allow transmission. A paper published in the journal *Nature Scientific Reports* demonstrates the effectiveness of a third strategy: Adjusting the landscape of the human body to remove the mechanism that allows pathogens to cause disease. The discovery is the result of serendipity and collaboration between high-level scientists in different fields.

“It was pure luck that I ended up on this paper,” says Dan Theodorescu, MD, PhD, director of the University of Colorado Cancer Center. “Bill Petri and I had been social friends for years – Christmas parties, that kind of thing. When I was at Virginia it happened that we were on a recruitment committee together and the candidate was late, so we started talking.”

His conversation with William A. Petri, Jr., MD, PhD, chief of the Division of Infectious Diseases & International Health at the University of Virginia led to the idea of applying an innovative cancer science technique to the study of infectious disease. With first author Chelsea Marie, PhD, postdoctoral researcher in the Petri Laboratory at Virginia, the group decided to silence genes in human cells to discover if the loss of any single gene would confer immunity to the parasite *E. histolytica*, which infects 50 million people and causes 40,000-110,000 deaths via severe diarrhea worldwide.

“Chelsea is a fearless experimenter. She took a library of cells that Dan had developed in his work with bladder cancer and then sequentially killed them with *E. histolytica* parasites,” Petri says.

Specifically, the group used the technique called RNAi to create a library of bladder cancer cells with thousands of independent, silenced genes. Then they challenged these cultures with the parasite *E. histolytica*. “We do this all the time in cancer research,” Theodorescu says. “Commonly, we’re looking for genes that, when silenced, will make cells more susceptible to chemotherapy.”

In this case the analogue of chemotherapy was the infectious, dangerous pathogen.

“This amoeba is a cluster bomb – a voracious killer. In the back of my mind I was thinking the parasite was going to decimate the host cells no matter what we did with their genetics,” Marie says.

For the vast majority of cells in this genome-wide screen, Chelsea Marie was correct; *E. histolytica* decimated many thousands of these independent cell cultures. However, a small number of cells seemed to resist the parasite. Was this the random chance of lucky survival or had silenced genes somehow offered immunity to these cells? To find out, Marie discarded the killed cells and retested the cells that had survived; again she infected these survivor cells with *E. histolytica*.

“It wasn’t a fluke,” says Marie. “We did this over nine generations of cells, each time selecting the cells that survived and then re-applying the parasite. Over these generations of selection, we saw the cultures becoming more and more enriched for cells lacking specific genes.”

Using next generation sequencing, Marie identified the genes that conferred resistance and found that many were involved in managing the flow of potassium into and out of human cells. Specifically, the identified genes KCNA3, KCNB2, KCNIP4, KCNJ3, and SLC24A3 are involved in what is called potassium transport. A follow-up experiment showed that new intestinal cells treated with *E. histolytica* showed potassium efflux – the flow of potassium from inside a cell out through the cell wall – directly before cell death.

“We started to see a pretty clear line of reasoning,” says Theodorescu. “The parasite was causing potassium efflux right before cell death and cells that happened to be unable to transport potassium didn’t die.”

To ensure that lack of potassium transport was, in fact, causing resistance to the parasite, the group reversed the direction of their experiments. Marie started with new cells and used drugs to block their ability to transport potassium. Blocking potassium efflux created cells that were resistant to *E. histolytica*.

“There is a clear need for new drugs targeting *E. histolytica*,” Petri says. “Right now there is a single antibiotic that works against this parasite. We know that eventually the parasite will develop resistance to the antibiotic and at that point there’s no plan B. This could be the plan B – targeting the human genes that enable the parasite to cause disease.”

Marie is pushing forward. She recently learned from a mentor at John’s Hopkins how to isolate stem cells from human tissue to grow what she calls “mini guts” to test therapeutics that may be useful in human patients. And technological advances make this study’s general technique more efficient, allowing the use of what are called CRISPR libraries instead of RNAi screens.

“This is a major finding with translational implications for this infection that causes so many deaths worldwide, but also proof that this cancer-science approach can be used to explore genetic mechanisms of resistance in the field of infectious disease,” Theodorescu says.

The field of infectious disease has been focused on the infection, targeting pathogens and their transmission. This study shows that in addition to characteristics of the parasite, mortality due to disease can be prevented by manipulating characteristics of the host.
Robin Saucier, RD, CNSC (left), co-chairs UCH’s new Interprofessional Nutrition Council with Burn/Trauma surgeon Arek Wiktor, MD

**Inpatient Malnutrition in the Cross-Hairs**

by Todd Neff | UCH Insider, Central

About a quarter of those living in Sub-Saharan Africa, the hungriest region on Earth, are malnourished, according to the World Health organization.

There’s a group right here in the United States whose numbers are worse yet: hospital inpatients.

No joke: U.S. inpatients have malnutrition rates of 30 percent to 50 percent upon admission; and among those who are well-nourished when they arrive, 38 percent will see their nutrition status decline while in the hospital, according to data from Robin Saucier, RD, CNSC, manager of Clinical Nutrition for University of Colorado Hospital.

Saucier is going well beyond collecting shocking statistics, however. For more than three years she led a push for a house-wide, interdisciplinary team focusing on nutrition. She now co-chairs the new Interprofessional Nutrition Council, the fruits of that effort.

The council, whose first quarterly meeting happened in July, consists of dietitians, nurses, pharmacists, and members of medical staff, including representatives from surgery, anesthesiology and general medicine. They aim to “achieve excellence in nutrition therapy” by disseminating best practices, breaking down barriers, and serving as role models in all things nutrition. Burn and Trauma surgeon Arek Wiktor, MD, serves as co-chair (see box for the current roster).

“We all know that people need to eat, but we didn’t have a great venue for collaboration in a more house-wide context,” Saucier said.

**Spread the word.** The focus is on acute care. Intensive care units, bone marrow transplant, organ transplant, and GI surgery have long since developed sophisticated nutrition programs for TPN (total parenteral nutrition, in which a milky mix of glucose, amino acids, fats, vitamins, and minerals is sent straight into the bloodstream via a central-line catheter) and tube feeding tailored to specific patient populations. Food & Nutrition Services, working with dietitians, has created a variety of specialized diets based on particular patient populations – not to mention paying close attention to the nutritional profiles of more standard hospital meals. Nutrition experts themselves have been working on tools like a new provider pocket guide to identify and document malnutrition.

But they all worked in isolation. The council aims to serve as a combination clearinghouse and expert resource for these and other nutritional endeavors.

“We’re trying to get those people together who have different insights into nutrition in different patient populations and improve the nutrition of the patient population as a whole,” Wiktor said.

**Costs.** Malnutrition is a welcome mat for a mob of health problems. It doubles the risk of developing a pressure ulcer, triples the risk of surgical-site infection, increases hospital length of stay, boosts readmission rates, and elevates the need for rehabilitation as well as morbidity and mortality, according to Saucier’s widely sourced data. Paul Wischmeyer, MD, an anesthesiologist and director of UCH’s Nutrition Support Team, which covers TPN and IV nutrition at the hospital, told those gathered at the council’s first meeting that while being underweight counts as the number-one disease risk factor worldwide, malnutrition gets very little attention in hospitals.

Malnutrition also affects reimbursement, in particular when patients arrive malnourished and it’s not properly documented, thereby failing to reflect and justify the added care and interventions such patients later need, Saucier says.

**The guide.** Complicating matters, though, is that there’s no simple test for identifying and categorizing someone who’s malnourished. That’s what’s drove Saucier and colleagues to develop the pocket guide. It contains tips on how to conduct a nutrition-focused physical exam. That includes examining fat and muscle loss at different points of the body and providing benchmarks for the level of depletion of either. For example, for muscle loss, one point of interest is the area around the temples. Well-nourished patients have well-defined muscle there; those with moderate muscle depletion will have a slight depression; and those with severe muscle depletion have temples with a “hollowing, scooping depression.”
The guide then provides a rundown of clinical indicators for moderate and severe protein calorie malnutrition, reminds physicians to involve a registered dietician if malnutrition is a factor, and suggests the following in an Epic note: Patient meets criteria for severe protein calorie malnutrition. I have reviewed nutrition documentation by the RD and concur with the treatment plan provided. Standardizing malnutrition assessment and improving documentation are among the things Wiktor would like the council to tackle first. He said the council will also work to standardize nutrition orders, tube-feeding guidelines, and TPN processes. In some cases, that might be to avoid pitfalls, such as having a bag of TPN showing up in the patient room before a central line has been placed; in others, it might mean taking the nutrition-related improvements a particular unit has made and reflecting them in hospital-wide standards. Success will hinge not only on doctors, dieticians and nurses, but also on coding, clinical documentation and quality teams.

While the council and its members can’t solve the African hunger problem, they can make a big difference for patients at UCH.

"Nutrition directly impacts how sick our patients are, mortality, and how we get reimbursed," Saucier said. "So it's a very real impact."

---

**Inter-professional Nutrition Council Members**

Robin Saucier, RD, CNSC  
Clinical Nutrition Manager

Arek Wiktor, MD  
GI, Tumor & Endocrine Surgery

Paul Wischmeyer, MD  
Anesthesiology

Trevor Nydam, MD  
Transplant Surgery

Franklin Wright, MD  
GI, Tumor & Endocrine Surgery

Erik Peltz, DO  
GI, Tumor & Endocrine Surgery

Lindsay Thurman, MD  
Internal Medicine

Jason Brainard, MD  
Anesthesiology

Ellen Burnham, MD  
Pulmonary Sciences & Critical Care

Lindsay McGuiness  
Nurse Manager, Transplant

Kelly McIntosh  
Associate Nurse Manager

Barbara Wenger  
Clinical Educator Nursing

Krystal Chamberlain  
Clinical Educator Nursing

Catherine Dannug, RN  
SICU

Caitlin Irwin, RD, CNSC

Laura Laski, MS, RD, CNSC

Gigi Vigue, RD, CNSC

Holly Ratkovic, RD

Katherine Levin  
Clinical Pharmacist

Janessa Pedroza  
Clinical Pharmacist

Victoria Franklin, RD  
Director, Food Nutrition Services

Amy Searls  
Director of Service Excellence

Kimberly Vigliotta, RN  
Diabetes Educator (ad hoc)
**WELCOME!**

### Fellows

#### Congenital Cardiac Fellowship
- David Mauchley, MD  
  University of Colorado - General Surgery Residency  
  University of Washington School of Medicine

#### Pediatric Surgery Fellowship
- Erica Gross, MD  
  University of Connecticut - General Surgery Residency  
  Pennsylvania State College of Medicine

#### Pediatric Urology Fellowship
- Alonso Carrasco, MD  
  Mayo Clinic Rochester - Urology Residency  
  University of Texas Medical School at Houston

#### Reconstructive Urology Fellowship
- Stephen Blakely, MD  
  Upstate Medical University - Urology Residency  
  University of Maryland School of Medicine

#### Surgical Critical Care Fellowship
- Chadrick Evans, MD  
  University of Illinois - General Surgery Residency  
  University of Illinois School of Medicine

#### Trauma Acute Care Surgery Fellowship
- Scott Moore, MD  
  University of North Carolina - General Surgery Residency  
  University of North Carolina School of Medicine

#### Transplant Surgery Fellowship
- Megan Adams, MD  
  University of Colorado - General Surgery Residency  
  Wayne State University School of Medicine  
- Thomas Pshak, MD  
  University of Colorado - Urology Residency  
  University of Colorado School of Medicine

#### Vascular Surgery Fellowship
- Gregory Magee, MD  
  University of Southern California - Surgical Critical Care Fellowship  
  Stanford University - General Surgery Residency  
  Yale University School of Medicine

### Residents

#### General Surgery Residency
- Heather Carmichael, MD  
  General Surgery - Categorical  
  Harvard Medical School
- Oliver Fackelmayer, MD  
  General Surgery - Categorical  
  New York Medical College
- Alison Halpern, MD  
  General Surgery - Categorical  
  University of North Carolina School of Medicine
- Jessicaah Hard, MD  
  General Surgery - Categorical  
  St. Louis University School of Medicine
- Samuel Michel, MD  
  General Surgery - Categorical  
  Johns Hopkins University School of Medicine
- Juliana Roberts, MD  
  General Surgery - Categorical  
  University of Toledo College of Medicine
- Jason Samuels, MD  
  General Surgery - Categorical  
  University of Colorado School of Medicine
- Emily Vitt, MD  
  General Surgery - Categorical  
  Rush Medical College
- Kevin Bohn, MD  
  General Surgery - Prelim Radiology  
  University Colorado School of Medicine
- Arineh Hayrapetian, MD  
  General Surgery - Prelim Radiology  
  Islamic Azad University  
  Najfabad Branch Faculty of Medicine
- Dil Patel, MD  
  General Surgery - Prelim Radiology  
  Medical University of South Carolina College of Medicine
- Carl Termine, MD  
  General Surgery - Prelim Radiology  
  Ross University
Congratulations!

Thoracic Surgery Residency

Charles Cole, MD
University of Cincinnati - General Surgery Residency
University of Arkansas College of Medicine

Brendan Dewan, MD
Emory University - General Surgery Residency
University of Texas Medical School at San Antonio

Urology Residency

Salvatore Catarinicchia, MD
University of Colorado—General Surgery Prelim
University of Illinois College of Medicine

Jason Warncke, MD
University of Colorado—General Surgery Prelim
University of Missouri, Columbia School of Medicine

Plastic Surgery Residency

Karen Lo, MD
University of Colorado - General Surgery Residency
University of California, Davis School of Medicine

Seth Tebockhorst, MD
University of Colorado - General Surgery Residency
University of California, Irvine School of Medicine

Andrew White, MD
General Surgery - Prelim Radiology
West Virginia School of Osteopathic Medicine

Majdee Islam, MD
General Surgery - Prelim Urology
University of Missouri, Columbia School of Medicine

Jeffrey Marks, MD
General Surgery - Prelim Urology
University of Missouri, Columbia School of Medicine

Daniel Bachman, MD
General Surgery - Prelim
University of Kentucky School of Medicine

Joshua Byers, MD
General Surgery - Prelim
University of Colorado School of Medicine

Alexis Cralley, MD
General Surgery - Prelim
Georgetown University School of Medicine

Benoit Herbert, MD
General Surgery - Prelim
Faculte de Medecine Paris Sud

Meghan Hinskey, MD
General Surgery - Prelim
University of Texas Medical School at San Antonio

Adi Kam, MD
General Surgery - Prelim
Technion Israel Institute of Technology

Keon Ho Kong, MD
General Surgery - Prelim
Drexel University College of Medicine

Kiara Leasia, MD
General Surgery - Prelim
University of Colorado School of Medicine

John Loomis, MD
General Surgery - Prelim
Texas A&M College of Medicine

Alan McGee, MD
General Surgery - Prelim
Wright State University Boonschoft School of Medicine

Amanda Munoz, MD
General Surgery - Prelim
University of Colorado School of Medicine

Abhinav Singh, MD
General Surgery - Prelim
George Washington University School of Medicine

Zachary Spinuzzi, MD
General Surgery - Prelim
University of Colorado School of Medicine

Ali Vaheshlabad, MD
General Surgery - Prelim
Tehran University of Medical Sciences

Daniel Van Der Ploeg, MD
General Surgery - Prelim
University of Kentucky School of Medicine

Allan Wang, MD
General Surgery - Prelim
University of Texas Southwestern Medical School at Dallas

Salvatore Catarinicchia, MD
General Surgery Prelim
University of Illinois College of Medicine

Jason Warncke, MD
General Surgery Prelim
University of Missouri, Columbia School of Medicine

Amanda Munoz, MD
General Surgery Prelim
University of Colorado School of Medicine

This publication is viewable online at: http://issuu.com/slangesurgery/docs/October_2015_dos_newsletter
On the Chinese zodiac, the year of the horse was last year. For University of Colorado Health, it arrived last week. The public relations fireworks came with the announcement July 30 that UCHealth and the Denver Broncos had finalized a partnership agreement that includes naming the team’s 115,000-square-foot Englewood training facility the “UCHealth Training Center.” The structures at the facility, formerly known as Dove Valley, are now emblazoned with the UCHealth logo.

Terms of the agreement were not announced, but UCHealth President and CEO Liz Concordia said in her July video update to employees and physicians that “this agreement will generate regional and national exposure for the UCHealth brand and the advanced care we provide, and it opens up an entirely new audience for us.”

At a press conference announcing the deal at the newly named facility, both Concordia and Broncos President and CEO Joe Ellis said the agreement was built on a mutual desire to help build healthier communities.

“Our partnership will encourage and improve the health and wellness of Denver Broncos fans throughout the Rocky Mountain region,” Ellis told reporters.

More than a name. Concordia called the partnership “an opportunity for us to really improve the care of the patients, fans, and residents” of the state and region. “If you think about how does one do that – with education, awareness and early detection, we really can make a difference in the lives of the people that we love and touch each and every day,” she said.

The partners quickly announced plans for their first major project. They will join with 9News in sponsoring a free Health and Wellness Expo Sept. 5-6 under an 1,800-square-foot tent on a concourse at Sports Authority Field at Mile High. About a dozen services and specialties from UCHealth are slated to host exhibits focused on maintaining and improving health and preventing disease and injury. The Pink Life Saver, UCHealth’s mobile mammography unit, will also be parked outside the stadium, ready to provide breast cancer screenings.

The Expo is a prominent example of the underlying goal of the partnership, said Manny Rodriguez, chief marketing officer for UCHealth.

“The deal is structured to create awareness of being healthy and staying fit,” he said. “It’s a platform for encouraging prevention, which is always the best cure.”

Rodriguez said UCHealth and the Broncos will have regular conversations in the weeks and months ahead about other community awareness projects that involve Broncos players, cheerleaders, and mascots. October, which is Breast Cancer Awareness Month, will also be a point of focus. The Pink Life Saver will again serve as a high-profile ambassador during the month, with frequent trips to the community to offer screenings, he said.

Path to prevention. Richard Schulick, MD, chair of the Department of Surgery at the University of Colorado School of Medicine, underscored the prevention message at the press conference.....

To finish reading about the partnership between UCHealth and the Broncos click the link to the right.
Thanks to all of you who came out to Washington Park July 19 for the 16th annual Donor Dash, an event to honor the lives of organ and tissue donors, celebrate the lives of organ and tissue recipients, and recognize those who continue to wait for a lifesaving transplant. The day included a release of balloons to honor donor families.

The event drew 4,680 participants, 187 teams, and 150 volunteers. The support included 134 members of “Team UCH” (some of them pictured above) who pitched in on behalf of Donor Alliance, the organ procurement organization for Colorado and Wyoming.

Kudos to the Transplant Center and the UCH Marketing team for setting up and staffing an informational booth for participants and visitors. The day was a great reminder of the service we provide to patients and families as the leading transplant center in the state and region.

A 28-year-old Colorado woman suffering from a rare disease that attacked her liver got a new lease on life from a familiar source. Her younger sister stepped forward to donate more than half of her liver for a lifesaving transplant.

Igal Kam, MD, interviewed in video. 9News, 7/17

Congratulations to Dr. Mark Nehler who has been named President of the Rocky Mountain Vascular Society.

Ernest E. Moore, MD, Vice Chair for Research in the Department of Surgery and Editor of the Journal of Trauma has received and Honorary Fellowship in the Royal College of Surgeons of Thailand.

Congratulations to Stephanie Farmer. She has been named President of the Association of Academic Surgical Administrators.

The University of Colorado Hospital and CU School of Medicine have established a small grants program to seed promising ideas from faculty and staff who display leadership in improving clinical effectiveness and patient safety.

Congratulations to Robert McIntyre Jr., MD; Stephanie Cox, MS, RN, CCRN; Peter Einersen, MD; Karl Hammermeister, MD; William Henderson, PhD, MPH; Nora Hennecken, JD, RN; Robert Meguid, MD, MPH; Allen Wentworth, RRT, Med, FAARC on receiving this award for their project to Develop and Implement a Protocol to Reduce Postoperative Pulmonary Complications.

On June 26, 2015 the CU School of Medicine Division of Urology received approval to transition their training program to a 1+4 formation (One year of preliminary training in General Surgery and four years of Urology training). In addition, they received approval to increase the program’s resident complement to 3-3-3-3 for a total resident complement of 12. The program will begin enrolling residents into available URO-1 and preliminary training positions as of July 1, 2015.

Congratulations to Ernest E. Moore, MD, Vice Chair for Research in the Department of Surgery and Editor of the Journal of Trauma who has received an Honorary Fellowship in the Royal College of Surgeons of Thailand.

Congratulations to Stephanie Farmer, she has been named President of the Association of Academic Surgical Administrators.
### Upcoming Events

**October 12, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
**Multimodal Management of Hepatolithiasis**  
Tingbo Liang, MD, PhD, FACS  
Professor of Surgery  
Zhejiang University  
Management of Esophageal Perforations  
Michael Weyant, MD  
Assoc. Prof., Cardiothoracic Surgery  
University of Colorado Hospital

**October 19, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
11th Annual Alan R. Hopeman Lectureship In Cardiothoracic Surgery  
The Innovation Imperative in Cardiothoracic Surgery: Lessons from Thoracic Aortic Disease  
Joseph E. Bavaria, MD  
Professor of Surgery  
Perelman School of Medicine

**October 26, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
Multidisciplinary Programs: Formula for Growth  
Cheryl Meguid, DNP  
Assistant Professor, GITES  
University of Colorado Hospital  
NSQIP Update  
Robert Meguid, MD, MPH  
Asst. Prof., Cardiothoracic Surgery  
University of Colorado Hospital

**November 2, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
Current Clinical Research Opportunities at the VA National Quality Safety Program  
John Eun, MD  
Assistant Prof., Vascular Surgery  
University of Colorado Hospital  
Adrenal Incidentaloma  
Christopher Raeburn, MD  
Assoc. Professor, GITES  
University of Colorado Hospital

**November 9, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
Damage Control Laparotomy: Morbidity and Appropriate Use  
Erik Peltz, DO  
Assistant Professor, TACS  
University of Colorado Hospital  
Chest Wall Reconstruction  
Tae Chong, MD  
Associate Professor  
Plastic & Reconstructive Surgery  
University of Colorado Hospital

**November 16, 2015**  
**John R. Lilly Memorial Lectureship in Surgery**  
Vascular Anomalies: Tumors and Malformations  
Steven J. Fishman, MD  
Professor of Surgery  
Harvard Medical School

**November 23, 2015**  
**Core Curriculum**  
6:30 am - 7:00 am  
Colorectal—Diverticulitis, Volvulus, Pseudo-obstruction, Ischemic Colitis, Lower GI Bleeding  
Jon Vogel, MD  
Associate Professor, GITES  
University of Colorado Hospital

**November 30, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
Local Flap Reconstruction of the Head and Neck  
David Mathes, MD  
Professor  
Plastic & Reconstructive Surgery  
University of Colorado Hospital  
How to Make Sense of the Juxtarenal Aorta: Open vs. Endovascular Repair  
Omid Jazaeri, MD  
Assistant Professor, Vascular Surgery  
University of Colorado Hospital

**December 7, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
Treatment of Adults with Congenital Heart Disease  
David Campbell, MD  
Professor, Cardiothoracic Surgery  
Children’s Hospital Colorado  
REBOA and Other Catheter Based Interventions for Hemorrhagic Shock  
Charles Fox, MD  
Assoc. Professor, Vascular Surgery  
Denver Health Medical Center

**December 14, 2015**  
**Grand Rounds**  
6:30 am - 8:00 am  
Decision Making in Dialysis Access Creation  
Peter Kennealey, MD  
Visiting Assoc. Professor  
Transplant Surgery  
University of Colorado Hospital  
Rectourethral Fistula  
Ty Higuchi, MD, PhD  
Assistant Professor, Urology  
University of Colorado Hospital

**December 21, 2015**  
**Core Curriculum**  
6:30 am - 7:00 am  
Adrenal—Adrenal Mass, Incidentaloma, Pheochromocytoma  
Jon Vogel, MD  
Associate Professor, GITES  
University of Colorado Hospital

**December 28, 2015**  
**Core Curriculum**  
6:30 am - 7:00 am  
Thyroid—Benign and Malignant, Nodule Papillary Thyroid Cancer  
Maria Albuja Cruz, MD  
Assistant Professor, GITES  
University of Colorado Hospital