Antonio Gangemi, a fourth year surgery resident at UIC, sits in front of a monitor displaying what appears to be a video game. Manipulating the controls in his hands, Gangemi picks up simulated crates and dominoes and stacks them on top of each other while a clock in the corner of the monitor counts down the time. But Gangemi is not playing around; he is using a simulation called the dVTrainer to practice handling controls and pedals typically found in a $2 million da Vinci robot, which enables surgeons to perform operations by guiding robotic arms, and he’s learning how to wield surgical instruments that would normally be placed inside a patient.

Despite the rapid growth of robotic surgery and its clinical applications, and the increasing acceptance of this technology as a tool of the modern operating room, training and education in the field is still at an early stage. Training new surgeons in robotic surgery is expensive, whether the robot is in a dedicated laboratory or is shared in a clinical setting. Few models are available for the didactical training and the instruments’ cost is still high. Furthermore, it is difficult to assess the skills of a trainee objectively.

There always has been a lot of emphasis on the mechanical characteristics and performance of the robotic system, and as a result an important element of this revolution sometimes is missed: the concept of virtuality. This aspect is one of the most revolutionary features underlying the concept of robotic surgery, and it can make the difference in the way new surgeons can be trained at the da Vinci console. During a robotic procedure, the surgeon is no longer in direct contact with the patient, and the 3-D images that guide the physician are generated by a computer using a small digital camera placed in the patient.

The dVTrainer developed by Mimic Technologies features a hardware console that is similar in feel and function to the real da Vinci. It is able to reproduce the robotic instruments’ response to a users’ handling of the controls in a realistic virtual environment that employs 3-D imaging. The use of the simulator helps the trainee become familiar with the console and the way it operates, including basic troubleshooting. It allows novices to develop general skills in operating the camera and instruments as well as in compensating for the loss of tactile feedback while performing surgery. At the same time, the dVtrainer offers the advantage of allowing trainees to develop these skills in a risk-free environment.

Continued - see COVER STORY on page 11
Dear Friends of the UIC Department of Surgery,

It is my pleasure to present to you the third edition of “The Cutting Edge”, the newsletter of the Department of Surgery at the University of Illinois at Chicago. I am sure that as you read through the issue, you will be pleased by and proud of the achievements of our faculty.

This issue features an update about our efforts to offer our surgical residents a world-class education that is attentive to new technologies in surgery. As you'll read, we have made important investments to ensure we can continue to provide our residents with training in robotic surgery. We have recently acquired a computer-based simulation program called Mimic and a dual console robotic system for our operating room, which considerably expands our ability to teach our surgical residents during real operations. With these two new additions and our pre-existing world-class robotic laboratory, our program offers the most advanced general surgery resident training in robotic surgery in the United States today.

I want to emphasize that we have reached this remarkable goal with the help of two great philanthropists, Bruno and Tony Pasquinelli, who donated more than $1.5 million to acquire the SI system in the robotic laboratory and the new dual console SI system for the operating room.

Philanthropy is the other focus in this edition. Thanks to your help, the department has an excellent track record in fundraising. We currently have five endowed chairs with a total cash flow of nearly $450,000 a year from our endowments. In addition, the department raised more than $2.3 million during fiscal year 2010 alone. As we thank you for the past support, we also invite you to continue the tradition of generous giving with a special focus on our surgical resident education.

Finally, I would like to offer my full availability to you to discuss any initiative you may want to promote in partnership with the department. I can be reached easily by e-mail at enrico@uic.edu or by phone at (312) 996-1774.

My best wishes for a prosperous year,
The Department of Surgical Oncology joined the Department of Surgery as its newest division on July 1, 2010. This announcement was followed with the appointment of Michael A. Warso, MD as the Chief, Division of Surgical Oncology. Dr. Warso has an incredible history with the Department of Surgery: He received his medical degree and completed his residency and fellowship at the University of Illinois at Chicago. Immediately after completion of his fellowship in 1989, he was recruited as an Assistant Professor, an appointment he held until 2001 when he was promoted to Associate Professor. Dr. Warso has consistently served the College of Medicine and the UIC Campus in many capacities. Currently, he serves on the College of Medicine Executive Committee, Hospital Transfusion Committee, OR Task Force, Cancer Center Protocol Review Committee, and as President of the Medical Staff. He is also the surgical liaison to the Cancer Center. Dr. Warso is deeply involved in clinical cancer research and is Principal Investigator of a number of clinical trials. Through Dr. Das Gupta’s mentorship, Dr. Warso will carry on Surgical Oncology’s unique mission of bringing clinicians and basic scientists together in close collaboration with the goal of taking their research from bench to bedside. His predecessor, Tapas K. Das Gupta, M.D., Ph.D., D.Sc served as Department Head of Surgical Oncology from July 1994 to January 2010. Dr. Das Gupta, Professor in the Departments of Surgery and Anatomy and Cell Biology, joined UIC in 1968. Dr. Das Gupta’s publications and oncologic clinical practice are recognized nationally as well as internationally. Over the years, he has served in a number of prestigious national committees. He has also chaired the Experimental Therapeutics Study Section of the National Institutes of Health as well as the Surgical Devices Panel of the Food and Drug Administration. He was Chicago Surgical Society President, 1992-93, served as Chair of the Society of Surgical Oncology’s Committee on Clinical Research and Government Relations, 1992-93, and has been an Editorial Board Member of a number of scientific journals. He received the Distinguished Faculty Award in 1993 and was named University Scholar 1994-97. He was awarded the D.Sc. from the University of London in 1996. Since 1968, Dr. Das Gupta has consistently received peer-reviewed funding from the National Institutes of Health, the American Cancer Society, and other national agencies. He has also been the principal investigator of several National Cancer Institute-sponsored program project grants. George Salti, M.D. completed his general surgery residency followed by a surgical oncology fellowship at the University of Illinois at Chicago in 1999. He was hired immediately as an Assistant Professor, and in 2006 was promoted to Associate Professor of Surgery. He served as Chairman of the Oncology Advisory Board 2006-2010. He has developed a strong interest in melanoma, both as a clinician and researcher. He is Principal Investigator on a GlaxoSmithKline clinical trial for melanoma and has been P.I. on several clinical trials and research grants. Extensive translational research (bench to bedside) studies are underway in the Division of Surgical Oncology. Briefly, these include discovery of new anticancer drugs, both from bacterial and plant sources. One of the most promising avenues has been in isolating a family of redox proteins from an opportunistic pathogen Pseudomonas aeruginosa. Of these proteins, in the forefront is a redox protein Azurin. Fragments of azurin have been synthesized, and of these a fragment containing 28 amino acids (p28) shows considerable efficacy in tumors. P28 is now undergoing Phase 1 clinical trial with Dr. Warso as the P.I. Basic scientists in the department are not only investigating the mechanisms of progression of these cancers but also the applicability of new molecular markers for estimation of prognosis. Konstantin Christov-Tzelkov, M.D., Ph.D. joined UIC in 1994 as Research Assistant Professor and was promoted to Research Associate Professor in 2000. He holds an M.D., Ph.D. and D.Sc. from Sofia Bulgaria. Dr. Christov has been in cancer research for more than 40 years. His first 10 years were devoted to thyroid carcinogenesis. He made substantial contributions in characterizing the pathogenesis and hormone regulation of radiation-induced thyroid tumors. His second decade was mostly devoted to identifying prognostic markers in cancer development and progression. Once again, his contributions were quite significant. In his third decade his studies focused on animals for chemoprevention studies and on biomarkers used to assess the efficacy of chemoprevention agents. These studies resulted in numerous...
The UIC department of surgery is very excited to announce the opening of the new Comprehensive Vein Clinic at the University of Illinois Medical Center under the dynamic leadership of Giancarlo Piano, MD, FACS, associate professor of surgery, division of vascular surgery. Dr. Piano was recruited from the University of Chicago, where he was an associate professor of surgery. The clinic is located in the University of Illinois Outpatient Care Center at 1801 W. Taylor, Suite 3F.

The opening of the new clinic comes at a time when, for a variety of reasons, more attention has been given to raising public awareness of venous disease for both practitioner and the general public (see the Surgeon General’s Call to Action to Prevent Deep Vein Thrombosis and Pulmonary Embolism 2008. Available at http://www.surgeongeneral.gov/topics/deepvein). Concomitantly, minimally-invasive surgical treatments of lower extremity venous disease have also expanded rapidly in the past decade. These treatments encompass a wide range of disorders from potentially life-threatening deep vein thrombosis and pulmonary embolism to disabling, non-DVT problems such as venous ulcers and varicose veins, to cosmetic concerns such as spider and reticular veins.

DVT and PE are most commonly diagnosed and treated by surgeons. Furthermore, as a group, surgeons are the most predominantly involved specialty with the diagnosis and treatment of patients with chronic venous reflux disease and its associated problems of varicose veins and venous ulcers.

Each year more than 100,000 Americans die from deep vein thrombosis and pulmonary embolism (often arising in complex surgical patients), and 25 million patients are diagnosed with chronic venous reflux disease, the underlying etiology of venous ulcers and symptomatic varicose veins. Put in the context of other causes of death and disability, more people die yearly from DVT and PE than from breast cancer, traffic accidents, and AIDS combined.

For symptomatic varicose veins, following the failure of conservative measures, such as compression and elevation therapy, surgical intervention in the form of high ligation and stripping of the great or short saphenous vein has been the prescribed surgical option for more than a century. This historical but standard procedure is associated with significant five-year recurrence rates and patient dissatisfaction because of the extended time needed for recovery and significant complication profile.

With the advent of new, minimally invasive, percutaneous treatment modalities, particularly radiofrequency endovenous ablation, (known as the VNUS Closure procedure, one of the treatments offered in the Comprehensive Vein Clinic) percutaneous endovenous treatment of axial venous reflux has become more commonplace. The VNUS closure procedure offers more rapid recovery times and has established high success rates, low recurrence, and improved patient satisfaction as compared to high-ligation and stripping. Additionally, when compared to endovenous laser treatment, radiofrequency endovenous ablation was associated with less pain, less tenderness, less bruising, and fewer adverse events. (VOLVeS and Recovery Trials).

For patients with venous ulcers, most (70-80%) patients with lower extremity ulcers have a venous etiology in which venous reflux is usually found in both the superficial venous and perforator systems.

Continued - see VEIN on page 10
Third Annual Olga Jonasson Symposium/2nd Annual Warren H. Cole Scientific Meeting

On June 4, 2010, the department of surgery hosted the 3rd annual Olga Jonasson Symposium/2nd annual Warren H. Cole Scientific Meeting. It was a delight for members of the department to reconnect with alumni and visit with Olga’s dearest friends. The CME-accredited event had its highest attendance to date, with participants from across the country, including Texas, California and Washington DC.

Guest speakers included honored alumni Jeffrey Friedman, MD; Merrick I. Ross, MD; Steven Vaslef, MD, PhD and the keynote speaker, Julie A. Freischlag, MD, William Stewart Halsted Professor and chair, department of surgery, John Hopkins Hospital. Dr. Freischlag reflected on her professional and personal experiences with Dr. Jonasson and inspired our graduating residents with her presentation, "Leading During Times of Change".

During the morning session, the department presented the Warren H. Cole Distinguished Alumni Award to James DeBord, MD. Dr. Enrico Benedetti, professor and head of surgery, acknowledged Dr. DeBord for his instrumental role in funding the Lloyd M. Nyhus Chair in General Surgery. Dr. DeBord accomplished this achievement through his outreach to fellow alumni and with his own generous support. Dr. DeBord continues to be a strong advocate of the College of Medicine in Chicago and in Peoria.

Lloyd M. Nyhus Lectureship

On Wednesday, July 28, 2010, the department of surgery hosted the first lecture in honor of Lloyd M. Nyhus, MD (1923-2009). Dr. Nyhus was the second professor and head of the department, and over his career the program expanded to include 52 full-time faculty members and a surgical residency program. During this time, Dr. Nyhus helped to train more than 300 graduates of the program.

Pier C. Giulianotti, MD, Lloyd M. Nyhus Endowed Chair in Surgery and professor and chief, division of general, minimally, invasive and robotic surgery, invited Enrico Nicolo MD, FACS, FICS to present to the invited alumni, faculty members and residents at the Nyhus lectureship. Dr. Nicolo is the president of the American Hernia Association and an emeritus professor of surgery, Jefferson Regional Hospital, Pittsburgh, Pennsylvania. His presentation, "Principles of Hernia Surgery", was well received by the audience.
The department of surgery continues to receive generous support from our alumni, faculty and grateful patients. We would like to thank you for your financial support and your advocacy. Your support is essential to the success and future of the department and has a direct impact upon patient care, the training of our residents and our translational research. We generate more than 92 percent of our resources, with less than eight percent of our budget coming from the State of Illinois. For this reason, your support is vital.

The department of surgery enjoys a strong tradition of philanthropic support. We currently have endowed chairs to support four of our eleven divisions, including the Turi Josefsen Chair in Colon-Rectal Surgery, the Warren H. Cole Professorship, the Lloyd M. Nyhus Chair in General Surgery and the Marion Schenk Surgery Research Fund.

In fiscal year 2010, the department of surgery raised more than $2.36 million and generated more than $480,000 from endowment earnings. We are proud to highlight some of the philanthropic investments made over the past year:

• A $650,000 challenge match gift from the Pasquinelli Family Foundation on May 10, 2010 has enabled us to purchase a new da Vinci SI dual console robot for the operating room. This new robot allows us to train residents, junior faculty and fellow surgeons during actual surgeries. We are continuing our efforts to raise the additional $350,000 required to fulfill this challenge gift.

• The Christopher Family Foundation made a $500,000 gift in support of the Chicago Diabetes Project.

• The Face the Future Foundation made a gift of $200,000 to benefit the Craniofacial Center.

• More than $200,000 was raised through the Chicago Diabetes Project’s Chicago Marathon team, Cellmates On The Run.

• Richard Schultz, MD, a 1959 graduate of the department of surgery’s residency program, established the Richard C. Schultz, MD, Lecture in Plastic Surgery Fund. The inaugural Schultz lecture was held on campus on June 16, 2010.

The Turi Josefsen Chair in Colon-Rectal Surgery, the Warren H. Cole Professorship, the Lloyd M. Nyhus Chair in General Surgery and the Marion Schenk Surgery Research Fund.
**NEW BASIC RESEARCH AND CLINICAL TRIALS**

Pravin Patel, MD, Professor of Surgery, Division of Plastic and Reconstructive Surgery was awarded a grant from Seattle Children's Hospital for “Genome wide study of Craniofacial Microsomia”

Chenthamaraksha Vasu, PhD, Visiting Assistant Professor, Division of Pediatric Surgery was awarded a grant from the National Institute of Health for “Dendritic cell directed T cell negative regulation for treating autoimmunity”

Janine Rosenberg, PhD, Visiting Assistant Professor of Psychology, Craniofacial Center was awarded a grant from NIDCR for “Quality of Life in Children with Clefts”

José Oberholzer, MD, Professor of Surgery, Division of Transplantation Surgery was awarded a grant from the Cleveland Clinic Lerner Research Institute (flow through from National Institute of Diabetes and Digestive and Kidney Diseases) to investigate, “A multidisciplinary approach towards cell therapy for Diabetes”

Konstantin Christov, Research Associate Professor, Division of Surgical Oncology is continuing work on a grant funded by Susan G Komen for “The Role of a Novel RARB5 ISOFORM in the Resistance of Breast Cancer Cells to Retinoids”

**ONGOING BASIC RESEARCH AND CLINICAL TRIALS**

Amelia Bartholomew, MD, Professor of Surgery, Division of Transplantation Surgery continues work on a grant from National Institute for Health for “Parathyroid prevention and mitigation of thrombocytopenia”

Amelia Bartholomew, MD, Professor of Surgery, Division of Transplantation Surgery continues work on a grant from US Health and Human Services for “Therapies for Hematopoietic syndrome bone marrow stromal cell loss and vascular injury”

Amelia Bartholomew, MD, Professor of Surgery, Division of Transplantation Surgery continues work on a grant from University of Maryland for “Medical countermeasures against radiological threats product development support”

Mark Holterman, MD, Associate Professor of Surgery, Division of Pediatric Surgery continues work on a grant from Allergan for “Laparoscopic adjustable gastric banding as a treatment for morbid obesity in adolescents”

José Oberholzer, MD, Professor of Surgery, Division of Transplantation Surgery continues work on a grant from University of Miami (flow through from National Institute of Diabetes and Digestive and Kidney Diseases) for Clinical Islet Transplantation (CIT), “Strategies to improve long term islet graft survival”

José Oberholzer, MD, Professor of Surgery, Division of Transplantation Surgery continues work on a grant from Beckman Research Institute for “Integrated Islet Cell distribution program”

José Oberholzer, MD, Professor of Surgery, Division of Transplantation Surgery continues work on a grant from Synthecon for “Methods for improving pancreatic islet transplantation”

José Oberholzer, MD, Professor of Surgery, Division of Transplantation Surgery continues work on a grant from KMT Hepatech for “Hepatocyte Isolation”

Chenthamaraksha Vasu, PhD, Visiting Assistant Professor, Division of Pediatric Surgery was awarded a grant from the Juvenile Diabetes Research Foundation for “Bone Marrow Rich in autoimmune memory in Type 1 Diabetes”

Patricia West, PharmD, Visiting Assistant Professor, Division of Transplantation Surgery continues work on a clinical trial awarded by Lifecycle for “Phase 3 trial into the study of the efficacy and safety of conversion from Prograf capsules twice daily to LCP”

Patricia West, PharmD, Visiting Assistant Professor, Division of Transplantation Surgery continues work on a clinical trial awarded by CTI Clinical Trials Services for “Phase 2 trial to demonstrate the pharmacokinetics of LCP-Tacro tablets once daily and Prograf capsules twice daily”

Craig Beattie, Ph.D., Professor, Division of Surgical Oncology was awarded a grant funded by BRDC for “Studying the critical relationship between Mycobacterium avium subsp. Paratuberculosis (MAP) and its host at a transcriptional level during the course of an infection”

Konstantin Christov, Research Associate Professor, Division of Surgical Oncology is continuing

*Continued - see ONGOING on page 11*
publications of his findings. Now, in addition to his continuing contributions to the discovery of new anticancer drugs, he also is P.I. on an NCI grant and Susan G. Komen grant, both focusing on breast cancer.

Craig W. Beattie, Ph.D., Associate Professor 1977-1983 and Professor 1983-1991, returned to UIC in 2007 as Professor to join the team on discovery of new anticancer drugs. During his Professorship from 1983 to 1991 his well funded research was exceptionally productive producing 58 publications. During his 15 year absence from UIC, Dr. Beattie attained both a national and international reputation in animal genomics. He has been instrumental in mapping large animal genomes. His current interests also include developing large animal models for in vivo cancer imaging technology as well as evaluating blood brain barrier (BBB) for treatment of brain metastases.

Dr. Tohru Yamada received his Ph.D. in September 2003 from the Tokyo Institute of Technology, performing much of his research work in UIC Department of Microbiology and Immunology. He is now Research Assistant Professor working on the development of anticancer drugs, performing research to identify anticancer agents that induce apoptotic cell death and growth arrest in human cancer cells. Additionally, he is developing newer agents for more accurate in vivo imaging.

Continued - from NYHUS on page 5

included Dr. Nicolo’s highlights of studying underneath Dr. Nyhus.

Dr. Nyhus’s children, Shelia and Leif, and Sheila’s husband, Garth Massey, joined Department Professor and Head, Dr. Enrico Benedetti, and the division chiefs the evening before the lecture for a dinner in Dr. Nyhus’s honor. They also attended the lecture, which began with a welcome from Sheila.
L.D. Britt M.D. FACS, Brickhouse Professor of Surgery and Chairman of the Department of Surgery at Eastern Virginia Medical School was installed as the President of the American College of Surgeons in October 2009.

A graduate of Harvard Medical School, Dr. Britt joined the General Surgery Residency Program at the University of Illinois at Chicago under Professor L.M. Nyhus from 1979-1984. After additional training in trauma/critical care, he was recruited to Norfolk, VA to join the surgical faculty at EVMS. He distinguished himself rapidly and had a meteoric rise to ultimately assume the Brickhouse Professor of Surgery and Department Head at EVMS.

Dr. Britt has had a stellar career in academic and organized surgery. He has served numerous surgical societies as a member, officer and President including AAST, and Southern Surgical Association. He has served on the Residency Review Committee for Surgery, Association of Program Directors in Surgery and Society of Surgical Chairs. He has been a Director of the American Board of Surgery and Chaired the Accreditation Council for Graduate Medical Education. Prior to assuming the Presidency, he was the Chair of the Board of Regents of American College of Surgeons.

In addition to being a superb general and trauma surgeon, a scholar, educator, researcher, Dr. Britt is most importantly a mentor to numerous students and residents guiding many to a career in surgery. He is the author of numerous publications in refereed journals, book chapters and a recent editor of Acute Care Surgery. The Warren H. Cole Society is proud and honored to have him as a guest speaker and a member; the Department of Surgery is equally proud to have had him as a resident.
**MEMORIAM**

**LORING S. HELFRICH, MD**

The late Loring S. Helfrich, MD, passed away January 10, 1970 at age 59. He is credited with the idea to create the Warren Cole Society as well as the Midwest Surgical Association and was the first president of both organizations. Dr. Helfrich was a close personal friend of Dr. Warren Cole. He has two sons who are also graduates of the University of Illinois College of Medicine. G. Baird Helfrich, MD, is a surgeon in Lubbock, TX, and Loring R. Helfrich, MD, is a surgeon in Sikeston, MO. They both are Warren Cole Society members, continuing the tradition their father began years ago. We honor the late Dr. Helfrich for his commitment to the department and for all he did many years ago to establish the two organizations in which many fellow alumni are active today. The Helfrich family continues a strong tradition of University of Illinois educated surgeons and we thank them for their dedication to the profession.

**THEODORE G. DRUGAS, MD**

On June 18, 2010, Theodore G. Drugas, MD, passed away at age 85. Dr. Drugas graduated from the College of Medicine in 1949 and practiced as a general surgeon. His daughter, Diane Drugas Keen, MD, graduated from the UIC surgery residency program in 1992. Diane’s husband and son-in-law of Dr. Drugas, Richard Keen, MD, is a 1985 graduate of the College of Medicine and a 1992 surgery residency graduate. Dr. Drugas provided a generous gift to create the Theodore and Joanna Drugas Endowed Chair in Surgery. We thank Dr. Drugas and his family for their impact on the field of medicine and their support of the Department of Surgery.

(Meyers BA. Venous insufficiency ulcers. In Meyers, BA (ed) Wound Management Principles and Practice, Pearson Education Inc. 2004). Compression and wound care has been the mainstay therapy for these venous ulcer patients. Because these conventional therapies fail to address the underlying venous reflux and venous hypertension, long term ulcer recurrence rates are more than double those in which the hypertension has been treated. (Barwell JR. ESCHAR study, Randomized controlled trial. Lancet 2004; 363(9424): 1854-1859). Percutaneous methods for treating venous reflux such as with radiofrequency endovenous ablation in conjunction with ultrasound-guided sclerotherapy have become the new standard-of-care because they are safe, effective and require minimal patient recovery. For these reasons, patients suffering from venous ulcers should undergo treatment of their venous reflux early in the course of their treatment. Failure to do so may result in delayed healing and increased incidence of recurrence.

Given the high volume of death and disability caused by venous disease and the availability of more minimally invasive treatments to improve patient outcomes, the need for the Comprehensive Vein Clinic is obviously paramount. In a little more than a month under Dr. Piano’s expert guidance, our comprehensive vein team has evaluated and treated scores of venous disease patients with the aforementioned treatment paradigms and percutaneous modalities. A great deal of work lies ahead, as Dr. Piano and the division of vascular surgery plan to increase the capacity and roll out other modalities, including ambulatory pharmacomechanical lysis for early intervention of DVT. There also plans to offer office-based sclerotherapy for cosmetic treatment of spider and reticular veins (small varicose veins).

For more information about the Comprehensive Vein Clinic or to refer a patient, please contact Shellie Moorehead-Cross at 312-996-8459 or shelliec@uic.edu.

The day concluded at the Ritz Carlton of Chicago with a celebration dinner for our graduating surgical residents. Dr. Gary Merlotti, Surgical Residency Program Director, hosted the evening, and in addition to recognizing the remarkable graduates, two faculty members also were honored. Malek Massad, MD, FACS, professor and chief, division of cardiothoracic surgery, received the Distinguished Service Award, and Joseph Vitello, MD, FACS, associate professor, division of general, minimally invasive and robotic surgery, received the Olga Jonasson Award.
The Tapas K. Das Gupta Endowed Fund initiatives are among our top priorities: fundraising efforts. The following to enhance the department through academic programs to develop robotic surgery, and Gary Merlotti, MD, chief of the minimally invasive and robotic surgery, surgical residency. Under the guidance of Pier Giulianotti, MD, chief of general, surgical residency. The acquisition of the dvTrainer in July, 2010 and the partnership with Mimic reflect the UIC department of surgery's belief that robotic surgery training should be a fundamental aspect of the surgical residency. Under the guidance of Pier Giulianotti, MD, chief of general, minimally invasive and robotic surgery, and Gary Merlotti, MD, chief of the residency program, the department is striving to become one of the first academic programs to develop robotic surgery as a mandatory component of the general surgery residency program.

POISED FOR THE FUTURE

The acquisition of the dvTrainer in July, 2010 and the partnership with Mimic reflect the UIC department of surgery's belief that robotic surgery training should be a fundamental aspect of the surgical residency. Under the guidance of Pier Giulianotti, MD, chief of general, minimally invasive and robotic surgery, and Gary Merlotti, MD, chief of the residency program, the department is striving to become one of the first academic programs to develop robotic surgery as a mandatory component of the general surgery residency program.

Today, UIC has the most complete training environment for robotic surgery in the United States and is rivaled by only a handful of sites in the world. Open since 2007, the Advanced Robotic Surgery Lab is the only dedicated robotic lab space in Illinois, and one of only a hand full of centers in the Midwest. The lab currently is being used to teach residents hands on training with the da Vinci system in a safe lab environment. Residents are taught how to control the system, how to perform surgical procedures such as suturing, and finally given the opportunity to practice simple operations like a robotic cholecystectomy in a lab environment.

This summer, UIC acquired the dual console da Vinci SI, the latest evolution of the robotic system that has two control stations. This acquisition gives UIC residents the opportunity to sit in the operating room at a robotic console watching and mimicking the actions of the surgeon while he is performing an actual surgery. The dual console also can be used to allow two surgeons to collaborate on a surgery by controlling separate instruments on the robot, or to allow a mentor to assist as a resident performs surgery and intervene immediately if needed.

“Simulation training provides an excellent opportunity to increase access to quality robotic training, while decreasing training costs,” observes Jeff Berkeley, president of Mimic Technologies. “The current challenge is to find the right way to integrate Mimic’s simulation training into a nationally accepted curriculum. We are excited to collaborate with the team from UIC, as we work together to help establish such a curriculum.”

In the coming year, we will continue to enhance the department through fundraising efforts. The following initiatives are among our top priorities:

- The Tapas K. Das Gupta Endowed Fund in Surgical Oncology has been created to honor Dr. Das Gupta for his 41 years of service to the University of Illinois. Former trainees, faculty colleagues, and grateful patients have been – and continue to be – generous in supporting the significant impact Dr. Das Gupta had made in patient care, surgical training and research.

- A memorial fund will be created for Phil Donahue, MD. Dr. Donahue completed his surgical residency (1975) and a fellowship in surgical gastroenterology (1976) at UIC under the leadership of Lloyd Nyhus, MD, the department’s second head since its establishment.

- Robotic surgery training – additional funds are needed to maintain the robotic surgery lab, which is used for training surgical residents as well as surgeons from Chicago and across the globe.

- Chicago Diabetes Project – support is needed to continue the project’s islet cell research.

- Translational research in all areas of surgery.

Our associate director of development, Stephanie Hilbert, has reached out to many of you and will continue to do so in the coming year. Stephanie looks forward to meeting with you to discuss the vision and goals of the department of surgery and how you can be further involved in our continued success. She can be reached at shilbert@uic.edu or 312-996-8769.
IN PURSUIT OF ITS MISSION, UIC SURGERY SHALL:

- Treat all patients with care, dignity, and respect
- Foster a spirit of inquiry and collaboration among all medical disciplines
- Recruit and maintain highly trained, qualified, and dedicated faculty and staff
- Advance medical and surgical knowledge through original clinical and laboratory research

Provide an optimal clinical and theoretical learning environment for medical students, residents and fellows
Measure, monitor and continuously strive to improve the quality of services provided by and through its faculty and staff