



# Temple Surgery

LEWIS KATZ SCHOOL OF MEDICINE AT TEMPLE UNIVERSITY DEPARTMENT OF SURGERY NEWSLETTER

## Growth Occurring Across the Board in Temple Surgery

It was a glimpse into the future when 13 surgeons who have been at Temple less than five years gathered for the Department of Surgery's first-ever young faculty dinner in late September. The 13 represent about 30 percent of Temple's surgical staff and are an indicator of how much the department has grown in recent years.

"We're currently in one of the most dynamic growth periods in our department's history," says Amy J. Goldberg, MD, FACS, the George S. Peters, MD and Louise C. Peters Chair of Surgery at Temple. "Many of the new faculty members we've hired bring subspecialty experience to Temple, helping us expand the depth and breadth of procedures we can offer our patients."

These new faculty members join an already robust staff of 41 surgeons across nine clinical divisions. Procedures offered range from the most common to the most complex, including multi-organ transplantation and pulmonary thromboendarterectomy. Surgical volume is up significantly, particularly in the areas of cardiac surgery, lung transplantation and colorectal surgery. In addition, all of Temple's surgical specialty programs are accredited, including all transplantation programs, bariatric surgery, trauma, plastic surgery and cardiothoracic surgery.

The department has also expanded its geographic reach. In recent years, Temple surgeons have begun operating at Jeanes Hospital in Northeast Philadelphia (a member of Temple Health), with a focus on heart, vascular,

and bariatric surgery. Temple surgeons also see patients at Temple's outpatient centers in Ft. Washington, Pa. (515 Pennsylvania Avenue) and Center City (255 South 17th Street).

The department has also expanded and further strengthened its teaching program as well. The residency program has nearly doubled its graduates from four 30 years ago to seven chief residents finishing each year and moving on from Temple to esteemed fellowships and faculty positions all over the country.

"We've also improved our formal didactic program by both consolidating the mandatory teaching conferences on Wednesday mornings, and freeing our residents from clinical responsibilities during this time," Dr. Goldberg says. "And, for the first time ever, the department sent medical students to the American College of Surgeons' conference (see page 4)."

The research enterprise is also on the upswing. Surgery residents and their faculty mentors have intensified their research endeavors leading to conference presentations at the local and national level. Most recently, surgical resident Andrea Lubitz, MD, won the Resident Paper Competition Award at the annual meeting of the American Association for the Surgery of Trauma (AAST) and Clinical Congress of Acute Care Surgery.

"Temple is a tremendous place to work right now if you are a surgeon," Dr. Goldberg says. "Thanks to the strong support of leadership, we're building something for the next 10, 20, 30 years."

### MESSAGE FROM THE CHAIR



## Upholding Our Culture While Growing

Teamwork, optimism, professionalism, quality – those four words are painted on my office walls as a daily reminder of the values we uphold in the Department of Surgery at Temple University Hospital and the Lewis Katz School of Medicine at Temple University.

Many of you receiving this new newsletter are graduates of our program, and I'm pleased to report that the department's tripartite mission of patient care, education and research is alive and well. I was named Chair in November 2015, but my ties to Temple go back 30 years to when I was an intern under Dr. Wallace Ritchie.

Our department has grown greatly in recent years. We have added dozens of new faculty members, acquired the most advanced robotic technology, expanded our mission of service to the community, and grown our research enterprise. The department is different, no doubt, but the Temple heart is the same.

I look forward to keeping you updated on activities within the department and encourage you to contact me anytime or come in for a visit to reconnect with Temple's Department of Surgery.

#### AMY J. GOLDBERG, MD, FACS

George S. Peters, MD and Louise C. Peters  
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## SPOTLIGHT ON

## Janelle Wagner, MD



After interviewing at more than a dozen residency programs around the country, Janelle Wagner, MD, felt something different when she arrived at Temple. When her interviewer was called into the OR, she found herself sitting across from Amy Goldberg, MD, FACS, who was then Chief of Trauma Surgery and is now the Peters Chair of Surgery.

"I remember that conversation as very collegial," Dr. Wagner says. "That's how it was with the residents, too. Temple's was the only program where I felt this sense of camaraderie."

It's those strong bonds between residents and faculty that Dr. Wagner tries to emulate today as a faculty member in the Plastic Surgery Residency Program.

"Residency is a tiring, stressful time, but the people training you can be respectful, meet you at the edge of where you're comfortable, and ask questions to bring out the next level of your understanding. That's how it was when I was a resident here, and that's what I try to do with my own residents."

The sense of community she found at Temple complemented its "unparalleled" clinical experience.

"When I left Temple for a fellowship, I felt like I could handle anything that rolled through the door," she says. "By the time you're done, you have an innate sense of being capable as a surgeon because you've seen everything."

As a rising leader in her department, Dr. Wagner is part of strengthening the clinical experience for residents.

"We have a more diverse faculty now, with more subspecialties represented," she says. "That kind of leadership and experience prepares our residents even better for life as a surgeon."



Dr. Goldberg reacts to a speaker at her investiture.

## Dr. Amy Goldberg Lauded at Investiture Ceremony

It was 11 minutes after its expected 4 p.m. start time when Larry Kaiser, MD, FACS, stepped to the podium and announced that the investiture ceremony for Amy Goldberg, MD, FACS, could begin.

"Amy told me it was OK to start," he quipped.

The late start came because of the large number of guests still pouring through the doors. In fact, it was standing room only on March 16 for the investiture of Dr. Goldberg as the George S. Peters, MD and Louise C. Peters Chair of Surgery at the Lewis Katz School of Medicine at Temple University (LKSOM).

From current residents to long-retired colleagues and everyone in between, they came to honor Dr. Goldberg for her decades of service to Temple and recognize her for the exceptional leadership she provides the Department of Surgery.

"It's no secret that I think the world of Amy Goldberg as a leader, colleague and friend," said Dr. Kaiser, The Lewis Katz Dean at LKSOM, President and CEO of Temple University Health System, and Senior Executive Vice President for Health Affairs for Temple University. "She is a realistic idealist, driven by a powerful commitment to do what's right."

Dr. Kaiser went on to laud Dr. Goldberg for her years of service as Chief of Trauma

and Critical Care at Temple University Hospital, her teaching acumen, her commitment to organ donation, and her nationally-recognized advocacy activities around violence prevention.

Wallace Ritchie, Jr., MD, PhD, the former Chair of Surgery at LKSOM and the person who hired Dr. Goldberg in 1993, praised her as a unique and wonderful person. "She came, she saw, she conquered," he said simply. "It's no surprise to me that she is Chair today."

For her part, Dr. Goldberg thanked a long list of colleagues past and present.

"I am so very proud to stand before you today as a Temple surgical resident, a Temple trauma surgeon, and now as the George S. Peters, MD and Louise C. Peters Chair of Surgery."

The Peters Chair of Surgery is named after George S. Peters, MD, a 1933 graduate of LKSOM and a staunch supporter of the school for decades. Dr. Peters passed away in 2005 at the age of 100. His gifts to LKSOM over the years totaled nearly \$5 million.

In addition to being the Peters Chair of Surgery, Dr. Goldberg is Professor of Surgery, Surgeon-in-Chief of the Temple University Health System, and Medical Director of Perioperative Services for Temple University Hospital.

## Temple Leading Citywide Study of Prehospital Trauma Care

In the City of Philadelphia, one in five shooting victims dies—about 236 people in 2015 alone.

A forthcoming study led by Temple University Hospital trauma surgeons will investigate how prehospital interventions influence survival and other outcomes for certain shooting and stabbing victims.

The first of its kind in the city, the Philadelphia Immediate Transport in Penetrating Trauma (PIPT) trial will be conducted at every major trauma center in the city and could dramatically change national practices for victims of shootings or stabbings.

“Every year in Philadelphia, emergency medical personnel perform advanced life support on about 200 patients as they’re rushed to a trauma center. We have imperfect but compelling data indicating that for these patients, less may actually be more,” says Zoe Maher, MD, Assistant Professor of Surgery and co-investigator of the PIPT trial.

This idea is supported by data from a longstanding “scoop-and-run” practice in which city police officers transport victims to the ER in their cruisers rather than waiting for an ambulance. This happens in about half of all shootings and stabbings and leads to measurably higher survival rates.

Survival is not just about how quickly a patient gets to the ER, Dr. Maher notes.

“Retrospective studies demonstrate that, regardless of transport times, basic life

supports like oxygen, CPR or immobilization have an 18 percentage-point survival advantage over advanced procedures, such as IVs and endotracheal tubes,” she says. “An IV can dilute the oxygen-carrying capacity of the blood and diminish its ability to form blood clots, and intubation can increase chest pressure in the thoracic cavity and impair the body’s ability to return blood to the heart.”

During the PIPT trial, city paramedics called to treat an adult shooting or stabbing victim in hemorrhagic shock will, on a random basis, refrain from administering IV or intubating the patient. Once the patient arrives at the participating trauma center, standard care will be administered. The trial has met exception from informed consent guidelines set forth by the Food and Drug Administration.

The study will involve 1,000 patients over the next five years. Dr. Maher and her team hope to see an 8 percentage-point survival advantage for patients who receive basic instead of advanced life support.

“We’re asking these tough and somewhat counterintuitive questions because we want to save more lives and take better care of our patients,” Dr. Maher says. “Occasionally in trauma, there’s a huge paradigm shift as we realize we’ve been doing things the wrong way. I think the PIPT trial is going to be an example of that.”



### WHERE ARE THEY NOW?

#### ALEXANDRA TULUCA, MD

After completing her general surgery residency at Temple in 2011, Alexandra Tuluca, MD, moved on to a three-year fellowship in cardiac surgery at Houston’s Baylor Texas Heart Institute.



She felt “more than prepared” for this role thanks to the excellent teaching and wide variety of cases she saw at Temple.

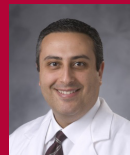
“Houston’s program is very large and busy, but I hit the ground running,” she says. “I left Temple with a lot of confidence.”

Now in her third year as an attending cardiothoracic surgeon at Einstein Healthcare Network in Philadelphia, Dr. Tuluca was recently named to the “Physician 40 Under 40” list by the Pennsylvania Medical Society.

“Pennsylvania is home to a lot of outstanding medical talent, so being named to this list is truly an honor,” Dr. Tuluca says. “I’m grateful to the many mentors I’ve had who have helped me reach this point.”

#### JOHN MIGALY, MD

Dr. John Migaly never thought he’d leave his native New York City. Then he visited Temple.



“There are ‘measurables’ when looking at residency programs – volumes, faculty, etc. – and then there are ‘unmeasurables’ ... I saw things at Temple that I didn’t see anywhere else,” says Dr. Migaly, who completed his general surgery residency at Temple in 2004.

“Everyone at Temple had shared goals and a collegial way of dealing with each other. I could tell they cared about a resident’s success, and I thought that would make me into an emotionally intelligent surgeon.”

Following his residency, Dr. Migaly completed a colorectal surgery fellowship at Cleveland Clinical Florida and then returned to Temple as a faculty member for four years. He is now an Associate Professor of Surgery and the General Surgery Residency Program Director at Duke University School of Medicine.

“Temple helped me understand the importance of resident education, and that’s something I still carry with me today,” he says.

Temple Health refers to the health, education and research activities carried out by the affiliates of Temple University Health System (TUHS) and by the Lewis Katz School of Medicine at Temple University. TUHS neither provides nor controls the provision of health care. All health care is provided by its member organizations or independent health care providers affiliated with TUHS member organizations. Each TUHS member organization is owned and operated pursuant to its governing documents.

## Medical Students Attend ACS Conference

In October 2016, two Temple medical students attended the American College of Surgeons' conference thanks to financial support from the Department of Surgery. Here, in their own words, are their experiences:



Amy J. Goldberg, MD, FACS (far left) attended the American College of Surgeons' annual conference with (from left) Salman Aziz, Benjamin Shore, Michael Klein, Daniel Zarif and Matthew Philp.

### BENJAMIN SHORE, 4<sup>TH</sup> YEAR

The conference exceeded my high expectations. I went wanting to learn about cutting-edge surgical research, gain exposure to attendings with unique career paths, and meet fellow students going into surgery. I got that and more. Be it a lecture on 3D printing in reconstructive surgery or a social hour with residents and attendings from across the country, I'm better prepared, and more excited, for my career.

### SALMAN AZIZ, 4<sup>TH</sup> YEAR

Interview season went exceptionally well for me, and I directly attribute my interview trail success to the medical student portion of ACS. I not only learned essential interviewing skills, but also learned about the latest research and other hot topics in surgery. I had a wonderful experience at the ACS conference, and have never been more sure that I chose the right career.

## Supporting Temple Surgery

Your philanthropic support makes an immediate and significant difference on the Department of Surgery's education, research and patient care activities. Please consider a donation to The Department of Surgery Education Fund via either the enclosed envelope or by visiting: [giving.temple.edu/surgery](http://giving.temple.edu/surgery).