Salivary Endoscopy Now Done at Stony Brook
Gland-Sparing Minimally Invasive Procedure
First Performed on Long Island

Our otolaryngology-head and neck surgery team performed in October the first salivary endoscopy ever done on Long Island. This new, minimally invasive technique allows for the examination of the salivary ducts under endoscopic guidance. Treatments, such as stone removal, duct dilatation, and steroid injection, can be done at the same time.

Sialolithiasis, or stone(s) in the salivary duct, is the most common disease of the salivary gland. It affects approximately 12 in 1,000 adults. Symptoms of sialolithiasis include pain, intermittent swelling of the gland, and possibly severe infection.

Salivary endoscopy is a minimally invasive technique that allows for salivary gland surgery in a safe and effective way, and is done on an outpatient basis.

The current standard in most institutions for treating salivary duct stones has been surgical removal of the gland that entails an incision in the neck and an overnight stay in the hospital.

Salivary endoscopy spares the gland without risk to adjacent vital structures such as the tongue and facial nerves, and patients can go home the same day.

The success rate of salivary endoscopy is over 90%, as reported in the current literature, with less than 5% recurrence. Recovery time is much faster than with an open technique, and patients may return to a normal diet the same day.

Endoscopic view showing salivary gland stone 0.5 cm in diameter (just under one quarter inch) within the submandibular gland duct, prior to removal.
Salivary Endoscopy Now Done at Stony Brook
continued from Page 1

Stony Brook University Medical Center is the only institution in both Nassau and Suffolk counties currently providing this state-of-the-art service to patients.

Mark F. Marzouk, MD, assistant professor of surgery, leads our program in salivary endoscopy, which offers patients an attractive new treatment option.

Dr. Marzouk’s practice is focused on the treatment of cancer of the head and neck and management of diseases of the salivary glands. He has special interest and training in the newest techniques in minimally invasive and endoscopic treatment of head and neck disease.

Salivary endoscopy with steroid injection is now giving new hope to patients suffering with post-radiation sialadenitis. These patients suffer from chronic inflammation of the salivary glands secondary to radiation exposure with symptoms of pain and dry mouth.

Until now, these patients had few to no options for treatment. However, the new endoscopic approach offers safe access to the gland with local infiltration of steroids, thus decreasing inflammation to the gland. Up to 75% of patients have shown improvement of their symptoms with this intervention.

THE PROCEDURE

Salivary endoscopy involves placement of a 1.1 mm endoscope (about one-sixteenth of an inch thick) into the salivary duct, and can be done with patients under local anesthesia in selected cases. The endoscope is a thin, tube-like instrument with a video camera plus light and channels to enable passage of surgical instruments.

First, the papilla of the duct is dilated transorally with probes of increasing size. A small endoscope is then introduced into the duct so the anatomy can be visualized as the duct is being irrigated. This provides 360-degree visualization of the lumen from papilla to the actual gland.

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Salivary endoscopy is first done in 1990—is made possible by the development of miniaturized imaging tools that can fit inside tiny parts of the body.

Any stenosis can be dilated using a balloon dilator, biopsies can be taken, and stones up to 5 mm in size (about one quarter of an inch) can be harvested using a wire basket.

Steroids can also be injected in cases of radiation-induced sialadenitis. In cases of larger stones, a combined approach can be utilized in which endoscopic manipulation of the stone is done with transoral sialodochoplasty, or incision on the duct, to remove the stone with marsupialization. This provides markedly less risk of morbidity compared to an open approach.

Pioneered by Francis Marchal, MD, PhD, at the University of Geneva, Switzerland, the salivary endoscopy procedure has had tremendous success, and is truly one of the most fascinating innovations introduced in the recent years in the field of otolaryngology—head and neck surgery.

For consultations/appointments with Dr. Marzouk, please call (631) 444-4121.
Drs. Szeremeta and Marzouk join our three other ENT faculty, whose primary office is located at our facility in East Setauket, NY:

- Elliot Regenbogen, MD, assistant professor of surgery, who specializes in general ENT and laryngology;
- Ghassan J. Samara, MD, associate professor of surgery, who specializes in general ENT, rhinology (disorders of nose and sinuses), and endocrine surgery; and
- David A. Schessel, MD, PhD, associate professor of surgery and chief of otolaryngology-head and neck surgery, who specializes in otology and neurotology (disorders of the ear, and related cancer and nerve pathway disorders).

Our ENT specialists are committed to the highest degree of specialization and expertise in problems of the ear, nose, and throat, plus related head/neck areas, in adults and children.

In addition to our five physicians, our ENT team includes a nurse practitioner, physician assistant, and dedicated audiologist—all committed to our shared mission to provide outstanding, leading-edge otolaryngologic care.

The Division of Otolaryngology-Head and Neck Surgery also serves as a center for outstanding teaching and research. It is anticipated that our residency program in otolaryngology-head and neck surgery will be re-established and gain full accreditation in the near future.

For consultations/appointments with our ENT specialists, please call (631) 444-4121.

Providing a full range of care for both adults and children with disorders and diseases of the ear, nose, and throat, and specializing in:

- Acoustic neuroma
- Branchial cyst
- Cancers
- Cholesteatoma
- Chronic sinus conditions
- Cochlear implants
- Congenital defects
- Dizziness
- Ear ache (otitis externa and media)
- Endocrine disease
- Endoscopy
- Facial nerve problems
- Geriatric otolaryngology
- Hearing loss (deafness)
- Laryngology
- Laser therapy for voice and throat
- Loss of smell and taste
- Ménière’s disease
- Minimally invasive procedures
- Nasal airway surgery
- Neurotology
- Nose inflammation (chronic rhinitis)
- Otology
- Parathyroid surgery
- Pediatric otolaryngology
- Pituitary gland tumor removal
- Postnasal drip
- Reflux esophagitis
- Salivary gland stones
- Sinusplasty for chronic sinusitis
- Skull base surgery
- Snoring (sleep apnea)
- Swallowing problems
- Thyroidectomy
- Tonsils and adenoids
- Tracheostomy
- Vertigo
- Voice disorders

Our ENT practice includes application of the most advanced techniques in minimally invasive and endoscopic surgery; subspecialty care in the disorders and diseases of the neurosensory system including taste, smell, hearing, and balance; and management of deformities and diseases of the airway in newborns and adults.

Our ENT physicians are joined by their colleagues at Stony Brook University Medical Center in the multidisciplinary treatment of cancer and endocrine problems of the head and neck; dysfunction of voice and swallowing; disorders of hearing and deafness; disorders of balance, dizziness, and falling; and the diagnosis and management of diseases of the skull base.

Conveniently located on “Doctors Row” in Smithtown—at 222 Middle Country Road (Suite 209), just east of the intersection of route 25A and highway 111—the new office offers patients plenty of easy parking.

Office hours are 8:30 am to 5:00 pm, Monday through Friday.

For consultations/appointments at our Smithtown office, please call (631) 444-4545.
Introducing New Faculty

Arnold R. Leiboff, MD, has joined our Division of Colon and Rectal Surgery as assistant professor of surgery. An alumnus of our residency program in general surgery (class of ’85), Dr. Leiboff has had for many years a successful private practice in colon and rectal surgery in our local community.

Board certified in both general surgery and colon and rectal surgery, Dr. Leiboff will focus his practice at Stony Brook on all aspects of colon and rectal surgery, including colonoscopy and surgery for colorectal cancer, diverticulitis, inflammatory bowel disease, and anorectal diseases, among numerous other conditions.

Dr. Leiboff received his MD in 1978 from New York Medical College. He subsequently completed his general surgery residency here at Stony Brook, and in 1989 he completed his fellowship in colon and rectal surgery at the University of Illinois College of Medicine in Urbana-Champaign, IL.

Since 1989, Dr. Leiboff has been practicing general and colon and rectal surgery in Suffolk County. He has been selected for inclusion in the present edition and past editions of the Castle Connolly Guide, Top Doctors: New York Metro Area.

continued on Page 5

Mark F. Marzouk, MD, has joined our Division of Otolaryngology-Head and Neck Surgery as assistant professor of surgery. Dr. Marzouk comes to Stony Brook from the University of Pittsburgh Medical Center in Pittsburgh, PA, where he recently completed his residency training in otolaryngology-head and neck surgery.

Dr. Marzouk will focus his practice at Stony Brook on the treatment of cancer of the head and neck and management of diseases of the salivary glands, with emphasis on minimally invasive endoscopic treatment. He has special interest and training in the newest techniques in minimally invasive and endoscopic treatment of head and neck disease.

Dr. Marzouk will contribute significantly to expanding our clinical services. He is skilled at endoscopic treatment of thyroid and parathyroid disease; treatment of disorders of the nose, sinuses, and skull base tumors via minimally invasive approaches; and treatment of disorders of the voice and swallowing, as well as management of obstructive sleep apnea.

A specialist in the relatively new, minimally invasive procedure of salivary endoscopy, Dr. Marzouk provides state-of-the-art treatment of salivary gland stones (see page 1; lead article).

continued on Page 5

Brian M. Hall, MD, has joined our Division of General Surgery, Trauma, Surgical Critical Care, and Burns as assistant professor of surgery. Dr. Hall recently completed fellowship training in critical care here at Stony Brook, and was invited to join our faculty because of his outstanding performance.

Dr. Hall will focus his practice at Stony Brook on the pre- and post-operative critical care of adult surgical patients, as well as the surgical management of injured patients, including all aspects of traumatology.

Dr. Hall’s general surgery practice will focus on the management of diseases of the gastrointestinal and endocrine systems; treatment of soft tissue disease; repair of hernias; appendectomy; and cholecystectomy. He has expertise in both conventional and minimally invasive laparoscopic surgery.

Dr. Hall’s research interests include the development of intensive care unit protocols, acquired respiratory distress syndrome and respiratory mechanics, and injury response to various forms of trauma.

Brian M. Hall, MD

continued on Page 5

Wasyl Szeremeta, MD, has joined our Division of Otolaryngology-Head and Neck Surgery as professor of surgery. Dr. Szeremeta comes to Stony Brook from Temple University in Philadelphia, PA, where since 1996 he was on the faculty of the Department of Otolaryngology-Head and Neck Surgery, serving as residency director and, more recently, acting chairman as well.

Board certified in otolaryngology, Dr. Szeremeta will focus his practice at Stony Brook on the management of pediatric ear, nose, and throat diseases, with special interest in the diagnosis and treatment of congenital and acquired malformations of the airway and respiratory obstruction, pediatric sleep apnea, pediatric sinus disease, and pediatric ear disease.

A cum laude graduate of Harvard, Dr. Szeremeta received his MD in 1989 from Jefferson Medical College in Philadelphia. He subsequently completed his internship in general surgery at the Medical Center of Delaware in Christiana, DE, and his residency in otolaryngology at the Henry Ford Health System in Detroit, MI.

In 1996, Dr. Szeremeta completed his fellowship training in pediatric otolaryngology at the Children’s Hospital of Pittsburgh. He then joined the faculty at Temple University.

Wasyl Szeremeta, MD

continued on Page 5

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

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

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

For consultations/appointments with Dr. Szeremeta, please call (631) 444-4121.
Operation Babahoyo in Ecuador
Medical Mission with Our Residents

Three thousand miles away from Stony Brook, Babahoyo is a small provincial city flanked by two rivers that join to form the Babahoyo River, which eventually flows into the Pacific.

The city is surrounded by open country, where the way of life is very traditional, with farmers sowing crops, working the land, and cattle herds dominating the pastures.

The Cascada Milagrosa—“Miracle Falls”—is a nearby waterfall believed to have healing powers, but it does not provide the modern healthcare that people need.

Our physicians and members of Stony Brook’s operating room staff went to Babahoyo as part of the team sent by Blanca’s House, a Long Island-based organization of volunteer healthcare professionals who provide free medical treatment to people without access to good healthcare.

Three members of our faculty—Drs. Todd Rosengart, Alexander Dagum, and Philip Bao—and three of our general surgery residents—Drs. Soojin Ahn, Joshua Karas, and Brett Phillips—traveled last August to Babahoyo, Ecuador, as part of a medical team to help needy patients there.

Stony Brook third-year medical student Christine Malino also went with the team, as part of her training and learning experience.

Dr. Rosengart felt the experience he had there was important for up-and-coming doctors. “The experience gained cannot be replicated,” says Dr. Rosengart, about what doctors learn on these missions. “Their flexibility as physicians is reinforced, and their ability to adapt to a variety of surgical situations is both tested and made stronger.”

“The sense of helping those who otherwise have no access to the resources we have available left a lasting impression on me. It will always be a highlight of my career.”

The gratitude expressed by the patients and their families was tremendous. It was truly a great reward for our surgical care.

In Babahoyo, our surgeons performed a total of nearly 50 operations; namely, laparoscopic gallbladder removals, hernia repairs, cleft palate and cleft lip repairs, cleft fistula closures, scar revisions, and for burn victims other plastic surgery procedures.

In addition to his clinical education, Dr. Szeremeta earned an MBA in healthcare management, plus MS in healthcare finance, from Temple University’s Fox School of Business in 2002.

Dr. Szeremeta’s research interests include molecular biology of chronic sinusitis and adenoiditis; the effect of adenotonsillectomy on voice and vocal production; pain control in pediatric otolaryngologic procedures; predictors of obstructive sleep apnea in the pediatric population; immune modulators in otitis media; and measures of otolaryngology resident education and evaluation.

As a well-respected academic physician, Dr. Szeremeta will contribute significantly to expanding our clinical services, as well as our research and educational programs.

“New Faculty
Dr. Marzouk
continued from Page 4

Dr. Marzouk received his medical degree with surgical training (MB-BCh) in 2001 from the prestigious Ain-Shams University School of Medicine in Cairo, Egypt. He subsequently came to the United States, and completed his internship in general surgery at North Shore University Hospital-Long Island Jewish Medical Center.

Following his internship, Dr. Marzouk spent a year as a research fellow at the Northport VA Medical Center, where his mentor was Ghassan J. Samara, MD, associate professor of surgery and member of our Division of Otolaryngology-Head and Neck Surgery.

New Faculty
Dr. Szeremeta
continued from Page 4

In Babahoyo, during their weeklong visit, our surgeons performed a total of nearly 50 operations, both general surgery and plastic/reconstructive surgery.

Having traveled to Africa as a resident on a similar mission many years ago, Dr. Rosengart felt the experience he had there was important for up-and-coming doctors.

“The experience gained cannot be replicated,” says Dr. Rosengart, about what doctors learn on these missions. “Their flexibility as physicians is reinforced, and their ability to adapt to a variety of surgical situations is both tested and made stronger.”

The gratitude expressed by the patients and their families was tremendous. It was truly a great reward for our surgical care.

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Plans are currently underway for our faculty, together with residents and students, to go on another mission to Ecuador, which will take place in October 2011.
Surgical Skills Center Established
Providing Surgical Simulation Training

Our new Surgical Skills Center (SSC) was inaugurated in January with a formal ribbon-cutting ceremony. This high-tech resource center further enhances our ability to provide a leading-edge training experience for all our surgery residents. Kenneth Kaushansky, MD, dean of the School of Medicine and senior vice president of health sciences, presided over the ceremony.

The SSC is an 1800-square-foot facility located at the heart of Stony Brook University Medical Center, in close proximity to clinical care areas and operating room suites, offering an ideal environment for advanced surgical education.

SCC director Apostolos K. Tassiopoulos, MD, associate professor of surgery and interim chief of vascular surgery, oversaw the Department’s effort to design and equip the center.

“Simulation in surgical training provides a reduced stress environment to learn and practice the most innovative and minimally invasive techniques in surgery for both common and rare medical scenarios,” explains Dr. Tassiopoulos.

“This training venue is also ideal to take the time to demonstrate errors and complications and discuss strategies to avoid them, which ultimately translates to enhanced patient safety.”

As this effort was embraced by all residents and faculty and the curriculum expanded with the addition of new modules, the need for establishing an effective in-house facility to support simulation education became clearly evident. The new SCC meets this need effectively.

The operating room is not the best classroom for developing some of the new surgical skills that surgeons must now have. With the new mandate from the American College of Surgeons on the fundamentals of laparoscopic skills, there has been more emphasis on surgical simulation.

Our simulation curriculum focuses on the development of surgical and clinical skills early on in the training process, while the emphasis at senior levels of training is on the development of leadership skills, effective communication and collaboration, practice building skills, critical assessment of patient safety issues, and thorough understanding of systems-based problems and quality assurance issues.

Accessible 24/7 (via ID card access) to all residents and faculty, the SSC provides opportunities to practice in a stress-free environment not only surgical technical skills, but also pre- and postoperative patient care scenarios that enhance residents’ educational experience.

Currently available training modules range from basic open skills (knot tying, suturing, intravenous access, central line and chest tube insertion) and fundamental laparoscopic skills (camera navigation, controlled cutting, transfer drills, laparoscopic suturing) to advanced open surgical skills (inguinal hernia anatomy and repair, sutured and stapled intestinal anastomosis, vascular anastomosis, arterial endarterectomy and bypass, open aortic aneurysm repair) and advanced patient care skills (advanced trauma and cardiac life support, various surgical clinical care scenarios).

SIMULATING SURGERY

Three high-end haptic virtual reality simulators are also available for training in laparoscopic advanced skills, laparoscopic cholecystectomy, laparoscopic colon resection, angiographic vascular anatomy, and a wide array of basic and advanced endovascular skills (navigation of endovascular catheters, angioplasty, stenting).

A dedicated space for a surgical wet-lab has also been created to allow for practice using animal tissue. The SSC utilizes cutting-edge audio/video technologies and
software in order to maximize the utility and productivity of the activities it hosts, and to provide opportunities for performance review of, effective debriefing with, and meaningful feedback to trainees.

Surgical attending faculty and staff with experience in surgical simulation education are available on a daily basis for guidance with training modules and skills development. Residents are provided with protected time each Thursday morning to participate in simulation exercises.

Surgical simulation has emerged as a training tool with enormous potential for teaching, learning, and research. Our SSC provides residents and medical students the opportunity to be a part of this rich, dynamic process, and to work collaboratively in making meaningful contributions to the field of surgical simulation education.

"This new facility will further enhance clinical skills education and promote surgical training at the highest level," said Dr. Kenneth Kaushansky, dean of the School of Medicine. “The Surgical Skills Center should make Stony Brook University School of Medicine a national leader in training students, residents, and attending physicians in current and future surgical techniques, allowing their delivery of the very highest quality clinical care.”

“Opening the Surgical Skills Center is an important milestone for training future surgeons at Stony Brook,” added the surgery department’s chairman, Dr. Todd K. Rosengart. “The timing of the opening is right, as high-tech simulation training will grow as a training tool because we are in an era in which minimally invasive surgical approaches and technology are constantly advancing.”

Dr. James Jen, fifth-year resident, at the controls of a simulated laparoscopic procedure, with Dr. Todd Rosengart.
Resident Wins Research Award To Study Wound Care in Burns
Aiming to Predict Tissue Viability And Develop Artificial Tissue

Brett T. Phillips, MD, clinical assistant instructor of surgery, was awarded one of two Clinical Research Scholar Awards sponsored by Stony Brook’s K30 Clinical Research Training Program funded by the National Institutes of Health.

A resident in our general surgery residency program and currently a research fellow, Dr. Phillips received the competitive grant award for his proposed research titled “Comparison of Clinically Quantitative Cutaneous Vascular Perfusion Techniques in Tissue-Engineered Constructs and Burn Injuries.”

Dr. Phillips’ one-year basic science study, initiated last July, uses noninvasive and minimally invasive perfusion techniques to investigate burn wound progression and lay the groundwork to develop artificial tissue constructs for improving patient care, in particular wound care.

There are over 11.8 million wounds and 500,000 burn injuries treated annually in emergency rooms nationwide, and wound care management can be improved.

Although the technology for engineered skin replacements is advancing, providing vascularization of replacement skin (establishing the network of blood vessels) is still a significant problem. Means of assessing vascular perfusion (blood flow) provide the first step in tackling this important problem. This is the objective of Dr. Phillips’ research.

Co-investigators of his study are Stony Brook faculty, who have served as his mentors: Adam J. Singer, MD, professor of emergency medicine and vice chairman for research; Steven Sandoval, MD, assistant professor of surgery and medical director of the Stony Brook Burn Center; Alexander B. Dagum, MD, professor of surgery and orthopaedics and chief of plastic and reconstructive surgery; and Richard A. Clark, MD, professor of biomedical engineering, dermatology, and medicine, and director of the Clinical Research Scholar Program.

Concerning the clinical significance of this research, Dr. Phillips explains: “Robust clinical trials for therapies to limit burn injury progression and for technologies to construct tissue-engineered flaps must utilize the best method for predicting tissue viability.

“As a result of our research, we can improve surgical outcomes by early determination of injury progression and be able to determine adequate perfusion in engineered skin constructs. Such assessments would overcome the critical issue of vascularization in bringing therapy to limit burn injury progression and providing the ability to create an unlimited supply of artificial tissue in a global problem of wound care.”

Dr. Phillips received his BA in biology from New York University and his MD from Stony Brook. In 2009, after completing two years of surgical training here, he became a research fellow in the Department of Surgery, participating in the Empire Clinical Research Investigator Program.

Following the completion of his current research in June, Dr. Phillips will rejoin surgical training as a third-year resident. He plans to pursue a career in plastic surgery following completion of his general surgery residency.
Testing New Drug Therapy For Leg Varicose Veins
Aiming to Find an Effective Non-Surgical Treatment

Varicose veins affect approximately 20% of the adult population. They are superficial vessels that are abnormally lengthened, twisted, or dilated, and are seen most often on the legs and thighs.

Varicose veins bulge and rise above the skin’s surface. They may be uncomfortable and result in swelling of the legs. If left untreated, varicose veins may lead to more serious medical problems, such as phlebitis, inflammation, or leg ulcers.

Our vascular team is currently participating in a multicenter clinical trial of an investigational drug and non-surgical procedure for the treatment of varicose veins. Antonios P. Gasparis, MD, associate professor of surgery and director of the Stony Brook Vein Center, is the principal investigator of the study here.

Varicose veins can be a real medical condition, not just a cosmetic problem, and they call for the best ideas in medicine.

The purpose of this research study is to evaluate the safety and effectiveness of polidocanol endovenous microfoam (PEM) compared to placebo (inactive solution) when used following an FDA-approved heat treatment (standard of care) in subjects with varicose veins.

PEM is a sclerosant, that is, a chemical that causes veins to close. This sclerosant has been made into foam of very small bubbles to create microfoam. Approximately 700 subjects have received PEM in the United States and Europe over the past six years, and its therapeutic promise motivates the current trial.

Men and women between the ages of 18 and 75 with varicose veins may be eligible to enroll in this study. Participants will get the study drug and study-related medical care at no cost, and will also receive compensation for participating in the trial.

Performing Clinical Trials To Advance Patient Care

Our faculty is committed to excellence in research, in order to find new and better treatments for our patients, as part of our commitment to excellence in patient care.

We currently are performing a variety of clinical trials to evaluate the effectiveness of potentially new treatment options related to the surgical specialties represented by our physicians.

Our goal is to give patients the opportunity to participate in approved and exploratory therapies without long-distance travel.

For information about current clinical trials in the Department of Surgery, please call our clinical research coordinator Eileen Finnin, RN, at (631) 444-5454.

Selected Clinical Trials Now Being Conducted By Our Faculty Involve These Conditions:

**Skin necrosis in breast reconstruction**
Studying new minimally invasive imaging technology to measure blood flow and assess tissue viability in skin before reconstructive breast surgery following mastectomy, for best surgical outcome for women.

**Coronary artery disease**
Studying new short-acting platelet inhibitor to maintain patency of coronary arteries prior to undergoing bypass surgery / Studying drug therapy’s ability to help maintain the patency of vein grafts following bypass surgery.

**Melanoma**
Studying whether removal of all lymph nodes is necessary in patients who have a positive sentinel node.

**Deep venous thrombosis (DVT)**
Studying new clot-busting treatments to see if they prevent post-thrombotic syndrome and improve quality of life in patients with a blood clot in the leg.

**Varicose veins**
Studying new non-surgical treatment involving endovenous ablation with sclerosant called polidocanol endovenous microfoam (PEM).

**Lower extremity lymphedema**
Studying “at home” therapy using pneumatic compression devices.

**Wound healing**
Studying new gel used topically in the treatment of venous leg ulcers.

**Pediatric ear infection**
Studying new antibiotic ear solution (drops) used in treating middle ear infections in children with ear tubes.

**Crohn’s disease**
Studying new stem cell therapy for patients with late-stage disease.

**Hemorrhoids**
Studying new minimally invasive procedure that treats the source of hemorrhoids in order to eliminate them.
Surgical Educator Joins Education Division
Supporting Our Teaching And Training Programs

We are very pleased to announce that Shubha Dathatri, PhD, has joined our Education Division as surgical educator. Coming to Stony Brook from the Menlo Park, California-based Center for Technology in Learning at SRI International, Dr. Dathatri brings a range of expertise in curriculum development, evaluation, and assessment to support our programs in both undergraduate and postgraduate medical education.

Dr. Dathatri’s recent professional experience includes a three-year position at Stanford University School of Medicine as a research consultant with the Medical Simulation Education Project, where she played a role in evaluating the ways that the use of a human patient simulator impacted the experience of teaching and learning for both medical educators and students.

Here at Stony Brook, Dr. Dathatri works with our faculty and residents, as well as medical students doing their surgical rotations, to assess educational opportunities and experiences.

Dr. Dathatri currently is developing and evaluating curricula in surgical education and surgical skills to support our efforts to establish a core curriculum sequence for surgical residents and medical students on surgical rotations. To that end, she also collaborates with our faculty to develop competency-based rotation-specific goals and objectives in medical and surgical residency education.

Dr. Dathatri is particularly interested in the design of formative and summative measures of assessment and evaluation that enable both learners and educators to examine learning outcomes in the context of specific instructional activities. Her work considers the roles that reflective practice and adaptiveness play in being an effective clinician and educator.

In addition to other functions related to advancing our education programs, Dr. Dathatri works collaboratively with the Office of the Dean and with other departments in the medical school to help improve resident and medical student educational experiences and opportunities.

Guy A. Cassara Memorial Scholarship

To honor Guy, his colleagues at Stony Brook University Medical Center have established a memorial scholarship to help physician assistant students who share his commitment to distinguished service.

Guy began his career at Stony Brook in 1988. He was one of the first physician assistants hired in the Department of Emergency Medicine. Guy then transferred to the Department of Surgery where he spent 10 years.

Guy’s background as a volunteer firefighter provided him with a special interest in working with the patients who had suffered burn injury.

Throughout his career, Guy was actively involved in clinical research. He was co-investigator on numerous studies focusing on trauma triage, wound healing, and burn injury.

Given Guy’s commitment to education, volunteerism, and clinical care, his colleagues at Stony Brook feel that a memorial scholarship is the best way to honor his memory.

The Guy Cassara Memorial Scholarship will be awarded annually to a physician assistant student who is enrolled in the School of Health Technology and Management at Stony Brook, and who demonstrates through his or her own volunteerism the same passion for clinical care that Guy had.

Donations to the scholarship fund—which are tax-deductible—are welcome. Checks should be made payable to the Stony Brook Foundation with “Guy Cassara” written in the memo portion of the check, and mailed to: Dr. Kevin Watkins, Department of Surgery, Stony Brook University Medical Center, Stony Brook, NY 11794-8191.

For more information, please call trauma nurse coordinator Jane McCormack, RN, at (631) 444-3116.
ALUMNI NEWS

Since the class of 1975 entered the profession of surgery, 196 physicians have completed their residency training in general surgery at Stony Brook. The alumni of this residency program and our other residency (fellowship) programs now practice surgery throughout the United States, as well as in numerous other countries around the world—and we’re proud of their diverse achievements and contributions to healthcare.

2010 Graduating Residents

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<tr>
<th>Name</th>
<th>Career Direction</th>
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<tr>
<td><strong>GENERAL SURGERY</strong></td>
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<tr>
<td>Marco Gonzalez, MD</td>
<td>Plastic surgery fellowship, Long Island Plastic Surgical Group, Garden City, NY</td>
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<tr>
<td>Albert Kwon, MD</td>
<td>Colorectal surgery fellowship at Stony Brook U</td>
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<tr>
<td>Mark Melendez, MD</td>
<td>Plastic surgery fellowship, Long Island Plastic Surgical Group, Garden City, NY</td>
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<tr>
<td>Daniel Rutigliano, DO</td>
<td>Pediatric surgery critical care fellowship, Children’s Hospital of Pittsburgh of UPMC, Pittsburgh, PA, followed next year by pediatric surgery fellowship, Montreal Children’s Hospital (CHU Sainte-Justine), Montreal, PQ, Canada</td>
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<tr>
<td>Cynthia Salinas, MD</td>
<td>Cardiothoracic surgery fellowship, Stony Brook U</td>
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<tr>
<td>Alla Zemlyak, MD</td>
<td>Research fellowship (NYS Empire Clinical Research Investigator Program), Stony Brook U</td>
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<td><strong>COLORECTAL SURGERY</strong></td>
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<tr>
<td>Salim Amrani, MD</td>
<td>Pecos Valley Medical Group, Carlsbad Medical Center, Carlsbad, NM</td>
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<td><strong>VASCULAR SURGERY</strong></td>
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<tr>
<td>Celso Dias, MD</td>
<td>Private practice in vascular surgery, Eastern Maine Healthcare Systems, Bangor, ME</td>
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<td><strong>CRITICAL CARE</strong></td>
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<tr>
<td>Brian Hall, MD</td>
<td>Assistant professorship, Stony Brook U Department of Surgery, in general surgery, critical care, and burns</td>
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Dr. Biago Ravo (’84) continues to practice at the Rome American Hospital in Italy. This past March he attended the American Hernia Society’s annual educational meeting in Orlando, FL, where he gave a presentation titled “Pure Tissue Inguinal Hernia Repair with Reinforcement of the Transversalis Fascia with a Biological Material: A Five-Year Follow-up.” As a resident at Stony Brook, he distinguished himself with publications on his surgical innovations in peer-reviewed journals.

Dr. Michelle Azu (’08) completed her fellowship in breast surgery at Memorial Sloan-Kettering Cancer Center, and is now an assistant professor of surgery in the Division of Surgical Oncology at UMDNJ-Robert Wood Johnson Medical School, in New Brunswick, NJ. Board certified in surgery in 2009, she practices at the Cancer Institute of New Jersey, and specializes in breast surgery. Her current research interests are in the disparities in breast cancer outcomes, nutrition and cancer epidemiology, and cancer prevention.

Dr. Joshua Rosenthal (’08) has opened his own otolaryngology practice in Huntington, NY.

Our 2010 graduating general surgery residents (from left to right), Drs. Albert Kwon, Mark Melendez, Alla Zemlyak, Cynthia Salinas, Daniel Rutigliano, and Marco Gonzalez, at the graduation banquet held in June at The Watermill in Smithtown, NY.

To submit alumni news online and to find current mailing addresses of our alumni, please visit the Department’s website at www.StonyBrookSurgery.org

GENERAL SURGERY ALUMNI: Please send your e-mail address—for inclusion in the Alumni Directory—to Jonathan.Cohen@StonyBrook.edu
Saturday Seminars
Our Saturday Seminars, co-sponsored with the Department of Medicine, offer continuing medical education (CME) credit through the School of Medicine of Stony Brook University. This activity is designated for a maximum of 2 AMA PRA Category 1 Credits™.

The seminars—held on the second Saturday of each month, from 8:00 to 10:00 am, at Stony Brook University Medical Center—provide lectures and discussion on topics covering the full range of current surgical concerns.

The focus of each seminar is on what referring physicians need to know about the latest advances in surgery, in terms of the new options available for patients.

For more information, please call (631) 444-2037.

Surgical Grand Rounds
Our Surgical Grand Rounds program offers CME credit through the School of Medicine of Stony Brook University. This activity is designated for a maximum of 1 AMA PRA Category 1 Credit™.

The weekly Surgical Grand Rounds lectures are generally held on Wednesday morning, from 7:00 to 8:00 am, in the Health Sciences Center (level 2, lecture hall 1).

Topics cover the full range of current surgical concerns, focusing on clinical issues of interest to practicing physicians and surgeons. Featured speakers include distinguished visiting professors from the nation’s top universities and medical centers.

For more information, please call (631) 444-7875.

Trauma Conference
The Trauma Conference of the Division of General Surgery, Trauma, Surgical Critical Care, and Burns offers CME credit through the School of Medicine of Stony Brook University. This activity is designated for a maximum of 1 AMA PRA Category 1 Credit™.

The weekly conferences are generally held on Friday morning, from 7:00 to 8:00 am, in the Health Sciences Center in the trauma conference room (level 18, room 040).

Topics cover the full range of concerns related to the trauma/critical care environment, including thoracic injuries, ICU administration/billing, and case histories. Presentations are made by attending physicians, as well as other medical professionals.

For more information, please call (631) 444-8330.

Vascular Surgery Conference
The Vascular Surgery Conference of the Division of Vascular Surgery offers CME credit through the School of Medicine of Stony Brook University. This activity is designated for a maximum of 2 AMA PRA Category 1 Credits™.

The weekly conferences are generally held on Wednesday morning, from 8:00 to 10:00 am, in the Health Sciences Center in the surgery department classroom (level 19, room 025).

Topics cover the full range of concerns related to the diagnosis and management of vascular disease, with case presentations. Presentations are made by attending physicians and surgical residents, as well as the director of the non-invasive vascular lab.

For more information, please call (631) 444-2037.

Selected Recent Publications
continued from Page 7


ENSURING SAFETY IN THE OPERATING ROOMS

Stony Brook University Medical Center is the first on Long Island to implement new technology in its operating rooms (ORs). The new technology system will help to improve patient safety, efficiency, teamwork, and communication in the ORs.

The system provides real-time information about patients to staff and physicians in the OR during surgeries. Information is displayed on 42-inch flat-panel displays mounted on the walls in 10 new ORs at the hospital.

This information includes patient allergies, lab results and information about blood and tissue collected for analysis, as well as a checklist of steps to be taken before, during, and after surgery.

The system verifies that the correct procedure is being performed on the correct patient at the correct surgical site. During operations, the system also prompts staff when it is time to provide antibiotics and reposition patients to maintain proper circulation.

The OR staff and physicians named it SAFE: Situational Awareness For Everyone. Other hospitals from around the state and nation will be visiting Stony Brook over the next several months to learn more about the system’s capabilities.
**Breast Surgery**

Dr. Brian J. O’Hea, associate professor of surgery, chief of breast surgery, and director of the Carol M. Baldwin Breast Care Center, was again selected for inclusion in the 2010 “Best Doctors” list of *New York* Magazine, and in the new Castle Connolly Guide, *America’s Top Doctors for Cancer*, published in October.

**Cardiothoracic Surgery**

Dr. Thomas V. Bilfinger, professor of surgery and director of thoracic surgery, in October was granted a tenured full professorship in recognition of his 21 years of distinguished service at Stony Brook and his continued professional achievements as a physician-scientist.

Recent presentations at national meetings include:

Recent honors include selection for the latest listing of *Newsday’s* “Top Doctors Long Island,” and recognition as “Attending of the Year, Department of Surgery” by 2010 graduates.

**Division Briefs**

**Dr. Sandeep Gupta**, assistant professor of surgery, has been **trained to perform percutaneous heart valve replacement** for aortic stenosis (replacing a heart valve without surgically opening the chest). Dr. Gupta spent June and July at the world-renowned Leipzig Heart Center in Leipzig, Germany, to gain this required special training.

Although not yet approved by the Food and Drug Administration, the necessary approval is anticipated by 2012, and Dr. Gupta will then start performing the new procedure at Stony Brook.

**Dr. Allison J. McLarty**, associate professor of surgery and director of thoracic aortic surgery and integrative medicine, continues to develop our leading-edge program in **destination therapy**, an alternative to heart transplant. She is now treating a growing number of patients who have congestive heart failure with implantation of the newly developed left ventricular assist device (LVAD) called HeartMate II.

Last April, Dr. McLarty accomplished the **first permanent LVAD implantation on Long Island**, making headlines for her success with this important new advance in patient care.

The HeartMate II, just approved by the FDA in February 2010 as a permanent implant, consists of a surgically implanted pump which takes over the work of the heart’s left chamber that’s become severely weakened as a result of congestive heart failure.

Unlike earlier LVADs that were designed for temporary use, the HeartMate II is for permanent use. This LVAD engineering represents a new generation of “artificial heart” technology.

**Dr. Todd K. Rosengart**, professor and chairman of surgery and chief of cardiothoracic surgery, recently received a shared $1 million grant from the Lisa and James Cohen Family for five years’ support to help him further his research aimed at developing a **new treatment for coronary disease called biologic bypass**.

For this genetic research program, titled “Studies Using Gene Therapy for the Treatment of Coronary Artery Disease,” Dr. Rosengart is co-principal investigator with Dr. Ronald G. Crystal, chairman of genetic medicine at Weill Cornell Medical College. The two physician-scientists have a long history of research collaboration related to gene therapy.

Dr. Rosengart was **reappointed chair of the American Heart Association National Surgery and Imaging Study Section**. He will be responsible for guiding and directing the peer-review committee in the review of affiliate career development and project support applications.

Dr. Rosengart was again selected for inclusion in the 2010 “Best Doctors” list of *New York* Magazine, as well as the latest listing of *Newsday’s* “Top Doctors Long Island.”

This coming June, Dr. Rosengart will be honored as **distinguished guest of honor** at the American Heart Association’s “**Heart of the Hamptons**” Gala, to take place in Bridgehampton, NY.

**Colon and Rectal Surgery**

Dr. Roberto Bergamaschi, professor of surgery and chief of colon and rectal surgery, reports that patients with very low rectal cancer have been referred from outside institutions to our colon and rectal surgery service for second opinion because they were told that their anus would have to be removed. As a result, we learned that we are the only center on Long Island performing sphincter-saving procedures such as
intersphincteric resection with coloanal anastomosis or pull-through reconstruction.

Dr. Bergamaschi presented a lecture titled “Laparoscopic Surgery for Diverticulitis” to an audience of well over 1,000 surgeons and other attendees at a plenary session of the Clinical Congress of the American College of Surgeons, held in October in Washington, DC. This lecture demonstrated the stature of Dr. Bergamaschi, who is world renowned for his expertise in laparoscopic surgery for colorectal disease.

Dr. Marvin L. Corman, professor of surgery, was a guest lecturer at the Brazilian Congress of Coloproctology held in September in Rio de Janeiro, where he spoke on the following subjects in areas of his expertise:
- Avoiding intraoperative complications in colon surgery
- Management of rectal prolapse
- Management of recurrent colorectal cancer
- Treatment options for anal incontinence

In November, Dr. Corman was a grand rounds speaker in New York at Cornell University and at NY Methodist Hospital, giving lectures titled “Avoiding the Pitfalls of Anal Fistula Surgery” and “Complications of Stomas and Their Management.”

Dr. Paula J. Denoya, assistant professor of surgery, recently gained board certification in colon and rectal surgery. She now performs anorectal physiology/manometry studies and anorectal ultrasound.

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

**Dr. Jared M. Huston**, assistant professor of surgery, in September was awarded the “Outstanding Recent Graduate” Honor of the School of Medicine. He was selected for this annual award for demonstrating through professional development, research, and community involvement a desire to make a contribution to and a difference in our society. He received the award during the Distinguished Alumni Awards Ceremony held in conjunction with the White Coat Ceremony in September.

Dr. Huston this past summer was appointed site director of our third-year medical student clerkship program at Stony Brook University Hospital.

This winter at national meetings, Dr. Huston presented the following two studies conducted with departmental colleagues:

Dr. Steven Sandoval, assistant professor of surgery and medical director of the Burn Center, and other members of the Burn Center team took part in the program to celebrate Burn Center Recognition Day. Suffolk County volunteer firefighters and elected officials came together here once again to express their gratitude to the physicians, nurses, and staff of the Burn Center for their dedication and skills in caring for burn victims in Suffolk County.

The special event was highlighted by the testimonies of burn victims who shared stories of trauma, survival, and the care they received at the Burn Center.

**Dr. Marc J. Shapiro**, professor of surgery and anesthesiology, and interim chief of general surgery, trauma, surgical critical care, and burns, in November was honored by the American College of Surgeons for serving as an instructor in more than 100 Advanced Trauma Life Support (ATLS) courses. The course is designed to improve the care of trauma patients. Dr. Shapiro received the official certificate of the ATLS 100 Club, which the ATLS Committee initiated this year.

Dr. Shapiro credits the collaborative efforts of the entire trauma team for the recent finding by the New York State Department of Health (DOH) that Stony Brook University Medical Center is one of three trauma centers statewide with the lowest mortality rate for victims of injury.

**Otolaryngology-Head and Neck Surgery**

**Dr. Elliot Regenbogen**, assistant professor of surgery, in June was honored by his selection to receive a Cochran Colloquium Grant.

The American Academy of Otolaryngology-Head and Neck Surgery annually provides three competitive travel grants to facilitate attendance at the annual Cochrane Colloquium for training in the conduct and publication of systematic literature reviews, with focus on state-of-the-art techniques for producing systematic reviews and meta-analyses.

**Dr. David A. Schessel**, associate professor of surgery, in November was appointed chief of otolaryngology-head and surgery. Dr. Schessel had served as acting chief since 2008.

**Pediatric Surgery**

**Dr. Thomas K. Lee**, associate professor of surgery and chief of pediatric surgery, in June gave surgical grand rounds at Huntington Hospital. The title of his presentation was “Pediatric Thoracic Surgery Issues.”

Dr. Lee in June was elected to serve as the vice president of the Medical Board of Stony Brook University Medical Center. The board is the governing body of the hospital’s entire medical staff.

Dr. Lee in September attended the annual fall meeting of the Children’s Oncology Group (COG) in Dallas, TX, as a COG member and “Responsible Investigator for Sur-
Surgery” here at Stony Brook. He was selected to join the surgical section of the COG’s Renal Tumors Committee.

Dr. Lee continues to serve as co-chair of the Practice Committee for CPMP (faculty practice plan), the aim of which is to improve patient access and experience of patients navigating through CPMP’s multiple practices.

Dr. Lee proudly reports: “The Practice Committee of CPMP rates all the clinical practices for patient satisfaction, in terms of telephone service, cancellation rate, and so forth. The Department of Surgery is perennially the best!

“In a recent third-party survey, we had three surgeons ranked as top 10 in the hospital-wide faculty practice, plus three of our front desk staff received awards for their outstanding service during the past year.”

Dr. Richard J. Scriven, associate professor of surgery and director of residency training in general surgery, in September attended the American College of Surgeons’ six-day course titled “Surgeons as Educators,” held in Landsdowne, VA.

This intensive course aimed to enhance surgeons’ abilities as teachers and administrators of surgical education programs. With his years of experience as an educator, Dr. Scriven enriched the program, as well as himself.

Also in September, Dr. Scriven was recognized by the American College of Surgeons for leading our residency program to ranking among the top five users in the nation of the ACS web-based curriculum known as SCORE. Since the start of the 2009-10 academic year, we have been using SCORE as the cornerstone of the didactic component of our general surgery residency program.

For his in-depth experience with SCORE, Dr. Scriven was invited to serve as an “ambassador” for SCORE, and to speak with program directors, coordinators, and chairs of surgical residency programs considering the use of SCORE. The top five SCORE users were invited serve in this way to advance the use of this leading-edge didactic technology in surgical education.

Plastic and Reconstructive Surgery Dr. Alexander B. Dagum, professor of surgery and orthopaedics and chief of plastic and reconstructive surgery, traveled to China this past spring for another mission to perform pro bono surgery. It was his sixth mission there. He repaired cleft lips and palates and also burn injuries. He was accompanied by surgical resident Dr. Brett T. Phillips.

Dr. Dagum was again selected for inclusion in the 2010 “Best Doctors” list of New York Magazine.

Dr. Jason C. Ganz, assistant professor of surgery, and his team recently gained media attention for two pioneering hand surgeries performed at Stony Brook. In one, the hand of a 29-year-old man was reattached during a 14-hour operation, after it had been severed in a log-splitting accident.

The other case involved a 25-year-old mother of two whose thumb and parts of two fingers on her left hand were severed in a fireworks incident around Halloween last year. Dr. Ganz and the surgical team performed a very rare “toe-to-thumb” transplant (also known as thumb reconstruction using microvascular toe transfer).

Ours is the only medical center in the entire region with the necessary technology and the surgeons who can perform these intricate and challenging surgeries.

Dr. Sami U. Khan, assistant professor of surgery and director of cosmetic surgery, has been promoted to associate professor of surgery.

Upper Gastrointestinal and General Oncologic Surgery Dr. Kevin T. Watkins, chief of upper gastrointestinal and general oncologic surgery, in October was promoted to associate professor of surgery.

Dr. Watkins in September made headlines in Newsday for treating a patient who traveled from California. As the first surgeon in the world to use irreversible electroporation (IRE) to treat cancer of the pancreas, he performed the new minimally invasive procedure on a patient from San José, CA.

After receiving a diagnosis of stage 4 pancreatic cancer, the patient and his family sought out Dr. Watkins.

Called cellular surgery, IRE disrupts the cell membrane and kills cancer cells by using controlled electrical pulses to open microscopic pores in the cells of the targeted area.

Vascular Surgery Dr. Antonios P. Gasparis, associate professor of surgery and director of the Stony Brook Vein Center, in June became a collaborating principal investigator in an NIH-sponsored trial titled “Pharmacomechanical Catheter-Directed Thrombolysis for Acute DVT.”

This study—also known as the ATTRACT (Acute Venous Thrombosis: Thrombus Removal with Adjunctive Catheter-Directed Thrombolysis) trial—aims to determine if new clot-busting treatments can safely prevent post-thrombotic syndrome and improve quality of life in patients with a blood clot in the leg. It is a phase 3, open-label, assessor-blinded, multicenter, randomized clinical trial sponsored primarily by the National Heart Lung and Blood Institute.

Dr. Gasparis in October was course director of the Vein Forum: A Comprehensive Hands-On Course for Practicing Physicians, sponsored by the American Venous Forum and held in Englewood, NJ. This three-day course follows the resounding success of the Fellows’ Courses in Venous Disease over the last few years and the many requests from practicing clinicians for a similar course.
Stony Brook Surgical Associates

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See Page 12

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