2007

Meet Our Surgical Interns

Follow this and additional works at: http://jdc.jefferson.edu/jss

Part of the Surgery Commons

Let us know how access to this document benefits you

Recommended Citation

Available at: http://jdc.jefferson.edu/jss/vol1/iss2/4

This Article is brought to you for free and open access by the Jefferson Digital Commons. The Jefferson Digital Commons is a service of Thomas Jefferson University’s Center for Teaching and Learning (CTL). The Commons is a showcase for Jefferson books and journals, peer-reviewed scholarly publications, unique historical collections from the University archives, and teaching tools. The Jefferson Digital Commons allows researchers and interested readers anywhere in the world to learn about and keep up to date with Jefferson scholarship. This article has been accepted for inclusion in Jefferson Surgical Solutions by an authorized administrator of the Jefferson Digital Commons. For more information, please contact: JeffersonDigitalCommons@jefferson.edu.
Meet Our Surgical Interns

Jefferson surgeons are currently assisted by an exceptional group of categorical interns. The interns are pictured with the original Gross operating table and portrait of Dr. John H. Gibbon Jr.

These doctors, who recently matched with Jefferson, started on July 1, 2006 (l to r): Jason Comeau, MD, Jefferson Medical College; Alex Arriaga, MD, Cornell University Medical College; Sarah Fernandez, MD, University of Miami School of Medicine; Robert Adamo, MD, SUNY Downstate Medical School; Nathan Richards, MD, University of Utah School of Medicine; David Rittenhouse, MD, Jefferson Medical College. We are also pleased to welcome Jefferson graduates: Peter Amenta, MD, Avi Galler, MD and Melissa Lasar, MD as preliminary general surgery interns.

This article is available in Jefferson Surgical Solutions: http://jdc.jefferson.edu/jss/vol1/iss2/4
Trends in Plastic and Reconstructive Surgery

A new teaching hospital, Jefferson benefits from being on the cutting edge of the latest techniques and technologies, including in the area of plastic and reconstructive surgery. Clinical Professor, John H. Moore, Jr., MD, explains that part of the Jefferson philosophy is to encourage research among the residents, as surgeons need to understand innovative, effective techniques that today open the body’s own tissues.

“We have implants, for example, we were doing a 3D lip procedure, using tissue from the abdominal wall,” Dr. Moore explains. “Now we have switched to using a latissimus dorsi flap (from the back), which seems to be easier with less complications and without suturing to the final result.” Jefferson residents and college students are now compiling data from more than 750 patients as part of a 10-year study by the Department of Surgery evaluating the safety of this newer procedure.

The use of stem cells is another trend that has begun to show considerable promise, as the cells can be grown into bone, cartilage and fat in any desired shape. In breast augmentation, natural tissues do not cause the local scarring that can be associated with saline and silicone implants, although this is now in current experimentation. For reconstructive surgery, stem cells maintain its shape and size more effectively than conventional soft tissue implants.

Jefferson alumni, conducted research on the ability to propagate stem cells into soft tissues such as bone, cartilage and muscle. These are now soft tissue follow-up studies will be followed. Further research in this area continues at Jefferson under the direction of Dr. Moore’s young colleagues Gary Tenen, MD. “We hope to design a method to develop tissue-engineered dermal skin cells for soft tissue augmentation,” says Dr. Tenen. While more research is needed, he hopes for healing that will allow skin to open a tissue engineering lab at Jefferson in early 2007.

Dr. Moore points out the benefits of the diverse research interests of Jefferson’s Plastic Surgery faculty. “We are training the next generation of surgeons to be even better” he says, “and are always striving for a new standard of excellence.”

New Members to the Surgical Team

Assistant Professor Joseph Lombardi, MD is helping transform the treatment of Jefferson’s vascular surgery patients. Since completing a vascular fellowship in 2003 at the University of Pennsylvania, Dr. Lombardi (Jeff Club class of 1997) has been practicing at Jefferson, starting breakthroughs and granting awareness. This new and exciting field is called endovascular surgery, in which disease is directed through catheters and wires within the bloodstream. The vessels, which make up the wall of the vessel, are then inserted into an endovascular graft or tube used to make a new path for blood to flow – an placed inside the vessel without traditional open surgery. This minimally invasive approach allows most patients to go home the same day.

Dr. Lombardi’s research interest involves diseases of the aorta. Aortic aneurysm can occur in the chest and/or abdomen, where a “bulge” develops in the vessel wall and can rupture and result in death if left untreated.Thoracic aortic disease is a sudden event in which the lining of the aorta tear, allowing blood to flow into the middle layer of the aorta, causing a sudden flow of blood to vital organs. Endovascular surgery has revolutionized how these maladies are treated. This new procedure offers many benefits without having to cut open the aorta itself.

“Patients today are so savvy that many want access to doctors’ most recent published articles and their research endeavors,” Jennifer observes, “We’re striving to create online resources that address a wide spectrum of needs.” Keep an eye on www.jeffersonhospital.org/surgery for the latest.

Joseph Lombardi, MD, prepares for an endovascular procedure using a 3D computer model of the patient’s anatomy. A custom model is generated for each patient using CT and MRI scans. Joanne Moore stresses the importance of refining surgical techniques and encouraging the research endeavors of young surgeons.

Jefferson’s vascular surgery patients. Since completing a vascular fellowship in 2003 at the University of Pennsylvania, Dr. Lombardi (Jeff Club class of 1997) has been practicing at Jefferson, starting breakthroughs and granting awareness. This new and exciting field is called endovascular surgery, in which disease is directed through catheters and wires within the bloodstream. The vessels, which make up the wall of the vessel, are then inserted into an endovascular graft or tube used to make a new path for blood to flow – an placed inside the vessel without traditional open surgery. This minimally invasive approach allows most patients to go home the same day.

Dr. Lombardi’s research interest involves diseases of the aorta. Aortic aneurysm can occur in the chest and/or abdomen, where a “bulge” develops in the vessel wall and can rupture and result in death if left untreated. Thoracic aortic disease is a sudden event in which the lining of the aorta tear, allowing blood to flow into the middle layer of the aorta, causing a sudden flow of blood to vital organs. Endovascular surgery has revolutionized how these maladies are treated. This new procedure offers many benefits without having to cut open the aorta itself.

“Patients today are so savvy that many want access to doctors’ most recent published articles and their research endeavors,” Jennifer observes, “We’re striving to create online resources that address a wide spectrum of needs.” Keep an eye on www.jeffersonhospital.org/surgery for the latest.

“Two years ago, Dr. Lombardi introduced a new technique called aortic reconstruction done on the entire practice.” Jennifer remarks.

“With breast implants, for example, we are doing a 3D lip procedure, using tissue from the abdominal wall,” Dr. Moore explains. “Now we have switched to using a latissimus dorsi flap (from the back), which seems to be easier with less complications and without suturing to the final result.” Jefferson residents and college students are now compiling data from more than 750 patients as part of a 10-year study by the Department of Surgery evaluating the safety of this newer procedure. The use of stem cells is another trend that has begun to show considerable promise, as the cells can be grown into bone, cartilage and fat in any desired shape. In breast augmentation, natural tissues do not cause the local scarring that can be associated with saline and silicone implants, although this is now in current experimentation. For reconstructive surgery, stem cells maintain its shape and size more effectively than conventional soft tissue implants.

Jefferson alumni, conducted research on the ability to propagate stem cells into soft tissues such as bone, cartilage and muscle. These are now soft tissue follow-up studies will be followed. Further research in this area continues at Jefferson under the direction of Dr. Moore’s young colleagues Gary Tenen, MD. “We hope to design a method to develop tissue-engineered dermal skin cells for soft tissue augmentation,” says Dr. Tenen. While more research is needed, he hopes for healing that will allow skin to open a tissue engineering lab at Jefferson in early 2007.

Dr. Moore points out the benefits of the diverse research interests of Jefferson’s Plastic Surgery faculty. “We are training the next generation of surgeons to be even better” he says, “and are always striving for a new standard of excellence.”

Visualizing New Possibilities in Vascular Surgery

A new member to the surgical team – Dr. Thomas d’Amato (Thoracic Surgery), Dr. Francis E. Rosato Jr. (General and Advanced Laparoscopic Surgery) and Jennifer Brumbaugh, MA (Webmaster & Editor of this newsletter). Please join us in welcoming several new members to the surgical team – Dr. Thomas d’Amato (Thoracic Surgery), Dr. Francis E. Rosato Jr. (General and Advanced Laparoscopic Surgery) and Jennifer Brumbaugh, MA (Webmaster & Editor of this newsletter). Please join us in welcoming several new members to the surgical team – Dr. Thomas d’Amato (Thoracic Surgery), Dr. Francis E. Rosato Jr. (General and Advanced Laparoscopic Surgery) and Jennifer Brumbaugh, MA (Webmaster & Editor of this newsletter). Please join us in welcoming several new members to the surgical team – Dr. Thomas d’Amato (Thoracic Surgery), Dr. Francis E. Rosato Jr. (General and Advanced Laparoscopic Surgery) and Jennifer Brumbaugh, MA (Webmaster & Editor of this newsletter).

Dr. Lombardi is also the director of a new aortic program at Jefferson, which combines vascular, cardiothoracic and cardiology expertise to evaluate patients with aneurysms and recommend the appropriate treatment.

“Patients today are so savvy that many want access to doctors’ most recent published articles and their research endeavors,” Jennifer observes, “We’re striving to create online resources that address a wide spectrum of needs.” Keep an eye on www.jeffersonhospital.org/surgery for the latest.

“The program makes it possible for patients with aortic disease to be thoroughly evaluated and for patients to approach surgery and medical treatment the right way,” Jennifer says. “The program is designed as a comprehensive web resource for patients, physicians, and researchers interested in this area.”

For an appointment with a Jefferson Surgeon, call 1-800-JEFF-TOLL.