

**Baltimore  
Integrated Surgery  
Department**

**2021 Annual Report**



**Where Quality,  
Excellence in Patient Care,  
and Innovation Meet**



**MedStar Health**

## By the Numbers

Our vision is for MedStar Health's Baltimore Integrated Surgical Services Department to become the premier clinical surgical program in the region. Case volumes suggest that we are propelling our vision forward when comparing FY21 and FY19 data.

### Enhanced Clinical Productivity

#### MFSMC Cases (% change FY19-21)

**32%** ↑

**Bariatric Surgery**

**28%** ↑

**Colon & Rectal Surgery**

**20%** ↑

**Gastroenterology**

**48%** ↑

**Neurosurgery**

**73%** ↑

**Plastic Surgery/  
Podiatry**

**14%** ↑

**Thoracic Surgery**

#### MUMH Cases (% change FY19-21)

**16%** ↑

**Hand Surgery**

**4%** ↑

**Joint/Spine Surgery**

**16%** ↑

**Pain Management**

**3%** ↑

**Cardiac Surgery**

**100%** ↑

**Endocrine Surgery**

### Five Priority Principles Guiding Our Operations

- Improve surgical outcomes
- Regionalize operating room usage
- Grow volumes to increase market share
- Identify and deploy cost containment opportunities
- Optimize resident distribution to enhance quality without loss of revenue

*Some photos were selected prior to the COVID-19 pandemic. All patients and providers are expected to follow the current MedStar Health guidelines for safety including proper masking and physical distancing where appropriate. Learn more at [MedStarHealth.org/Safe](https://www.MedStarHealth.org/Safe).*

## From the Desk of the Regional Chief of Surgery



It's no secret that our hospitals—like most hospitals across the country—faced significant and ongoing challenges as the COVID pandemic continued in 2021. As new variants like Delta and Omicron surged, we found ourselves migrating through familiar yet uncharted territory, without reprieve. Yes, it has absolutely been taxing on our team physically, mentally, and emotionally. But at the same time,

the ongoing COVID journey has truly put the spotlight on our commitment to excellence in patient care and underscored our position as a true regional leader. In the midst of the pandemic, we have continued to evolve, grow, innovate, and invest in our future.

There is a tremendous level of thought leadership and forward-thinking progress taking place within the Baltimore Region's Department of Integrated Surgery and in our health system. This issue of our Surgery Annual Report highlights numerous examples of how and why Baltimore Integrated Surgery, as well as all MedStar Health surgical service lines, continue to be successful. We have launched new and highly-specialized services, and recruited incredibly skilled clinical providers to lead them. The MedStar Center for Surgical Innovation was introduced, giving us a platform to think and work collaboratively and strategically as one health system, as we determine how and where to invest in our people and in technology. All of this occurring during the pandemic, and all of this to ensure that we continue to provide the highest quality care possible for our patients. Quality, safety, education, performance improvement, and research remain top priorities, as we work with each other, our fantastic team of OR nurses, and other clinical and administrative leaders and support teams who share our vision and commitment.

We are in a great place, and so much opportunity lies ahead. It's a truly exciting time to be part of MedStar Health and the Baltimore Department of Integrated Surgery. I am incredibly proud of our team and the tremendous progress we are making as we position MedStar Health as THE best place to turn in the region for the highest quality, most state-of-the-art, evidence-based surgical care.

Sincerely,

David E. Stein, MD, MHCM  
Chief of Surgery, Baltimore Region  
MedStar Health

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# New Surgical Services at MedStar Health



Dr. [Name]

Paul Busch, MD, MPH  
Neurovascular Surgery

## Neuroendovascular Biplane Streamlines Treatment for Patients with Complex Brain and Spine Conditions

The number of people requiring care for complex vascular conditions of the brain and spine is on the rise. The neurosciences program at MedStar Franklin Square Medical Center is earning a reputation as the place to go for comprehensive, outcomes-based care, with a team of trained neurosurgeons, neurologists, neuro critical care specialists, and neuroendovascular specialists offering access to the latest treatment options and technologies. In January 2020, the hospital announced the opening of its new neuroendovascular biplane suite, which deploys a minimally invasive approach to diagnose and treat brain and spine issues—from aneurysms and strokes to carotid blockages and arteriovenous malformations (AVMs).

“This biplane allows us to access the brain and spine quickly and easily, and gives us a comprehensive view of problem areas that require prompt intervention,” said Paul Singh, MD, director of neuroendovascular surgery at MedStar Franklin Square. “What is most fascinating is that we are able to do this through a very small hole—no bigger than the size of the tip of a pen—in the arm or leg. This makes a tremendous difference for the patient. Their process of care is streamlined, and their recovery is greatly simplified, too.”

Growth of the neurosciences division has been crucial as MedStar Franklin Square works to become a Thrombectomy Capable Stroke Center, and ultimately, a Comprehensive Stroke Center, designations offered collaboratively through The Joint Commission and Maryland Emergency Medical Service Systems. Comprehensive Stroke Centers are those capable of providing the highest level of research and evidence-based stroke care possible, without the need for transfer to another facility. Investments in the latest technologies, such as the neuroendovascular biplane, position the hospital well to earn these designations.

“MedStar sees the value in bringing these technologies in-house, so that we are equipped with the right tools to act quickly when patients come in with life-threatening medical conditions,” said Dr. Singh. “Our team is incredibly integrated. We have a common goal to coordinate and expedite care when patients present with time-sensitive needs. Our outcomes data proves we are doing a lot of things right, and making a positive difference for the people in our community who rely on us for care.”



“MedStar sees the value in bringing technology in-house, so that we are equipped with the right tools to act quickly when patients come in with life-threatening medical conditions.”

—Paul Singh, MD

## Acute Care Surgery Adds a New Level of Specialized Care to Emergency Departments



General surgeons have earned a reputation for their ability to “do it all.” They evaluate patients in clinic and plan and perform surgeries to fix hernias, remove tumors, and heal wounds. They provide on-call coverage for busy emergency departments as well as critical inpatient services when patients experience post-surgical complications. Additionally, general surgeons devote time and energy to ongoing education, to assure they can deliver the most up-to-date and state-of-the-art care for every patient they encounter. While a general surgeon’s knowledge base must be broad, it must also be incredibly specialized, in-line with patient needs and healthcare system goals to streamline care and optimize clinical outcomes.

Recognizing the scope of expertise general surgeons must possess, the American College of Surgeons and other nationally-recognized professional organizations now view acute care surgery as a specialty clinical service. Surgical oncology, colorectal surgery, thoracic surgery, and many other clinical services have long been recognized for their subspecialized nature, but positioning of emergency-based surgical care as a specialized service line is a newer concept, initially introduced in the early 2000s.

“General surgery residents get a lot of experience and exposure to emergency surgeries during their years in training, then

they go into practice and the scope of patient care they are responsible for is broad, while also incredibly concentrated,” said Christian Jones, MD, who serves as chief of surgery at both MedStar Good Samaritan Hospital and MedStar Union Memorial Hospital and director of the Acute Care Surgery Program. “Staying up-to-date in acute care surgical practices is important and must be very deliberate and focused to assure the best possible care for our patients.”

Dr. Jones has collaborated with David E. Stein, MD, MHCM, regional chief of surgery for the Baltimore region, and hospital administrators, to formally introduce MedStar Health’s acute care surgery (ACS) service. One priority of the new program, which launched in September 2021, is to help specialty providers dedicate more time to the specific surgical procedures they have mastered, and are known to be true experts in providing. This model is designed to ensure

patients receive the highest level of quality, outcomes-based surgical care, with modern and consistent approaches applied.



Christian Jones, MD



Raina Wallace Solá, MD



Kei Nakamoto, MD



Victoria Lai, MD

“We want to give each surgeon the opportunity to focus on what they do best, and to minimize distractions that cause them to question if they will be rested enough to handle a case tomorrow, or if they might have to cancel patient appointments scheduled for later in the day,” explained Dr. Jones.

Under Dr. Jones’ leadership, the Acute Care Surgery Program in Baltimore is quickly growing. Raina Wallace Solá, MD, joined the organization in September 2021, followed by Kei Nakamoto, MD, in December 2021. Victoria, Lai, MD, who also works at MedStar Washington Hospital Center, is also part of the team, which sees patients at all four Baltimore-based hospitals.

## Collaboration is Key as Endocrine Surgery Department Launches and Thrives

In 2020, the Baltimore region of MedStar Health officially established its endocrine surgery department when Rebekah Campbell, MD, endocrine surgeon, joined the medical staff. Working in close collaboration with the endocrinology team, the department was created to provide specialized care for patients with thyroid, parathyroid, and adrenal pathology, along with small bowel neuroendocrine tumors.

Endocrine surgeries are performed at both MedStar Franklin Square Medical Center and MedStar Union Memorial Hospital. Both hospitals are equipped with the latest and most innovative technologies, including NIMS monitors, which help ensure appropriate function of the recurrent laryngeal nerve during thyroid and parathyroid surgical procedures. Intraoperative parathyroid hormone monitoring is also possible at both facilities, and is a necessary component when parathyroidectomies are performed, requiring connectivity between pathology and the laboratory, pre- and intra-operatively. Additionally, both MedStar Franklin Square and MedStar Union Memorial house 4D CT equipment, to aid in the identification of abnormal parathyroid glands. Adrenal vein sampling, a procedure necessary to diagnose adrenal tumors, is also available, and performed by the interventional radiology team at MedStar Good Samaritan Hospital.

“These tools have allowed us to foster truly positive and collaborative relationships with the pathologists, neuroradiologists, nuclear medicine specialists, and interventional radiologists,” said Dr. Campbell. “And, those relationships have allowed us to create a better care experience when patients are diagnosed with critical and complex medical issues that require immediate attention.”

In tandem, continuing medical education is an important focus for the endocrine surgery department. As medical students and residents rotate to support bariatric and endocrine surgery services at both MedStar Franklin Square and MedStar Union Memorial, weekly endocrine meetings are attended by the endocrinology



and endocrine surgery departments. An endocrine tumor board conference is held monthly, and is attended by representatives from endocrinology, endocrine surgery, pathology, radiation oncology, and medical oncology. It creates opportunities for the nuances of individual patient disease to be evaluated, while provoking discussions about innovative treatment options.

In 2021, 18 thyroidectomies and six parathyroidectomies were performed at MedStar Union Memorial Hospital. At MedStar Franklin Square, six thyroidectomies, one parathyroidectomy, and one adrenalectomy were completed.

“I am passionate about educating my patients about the disease process and their treatment options,” said Dr. Campbell. “I feel it’s important to engage them and their families in plan of care decisions and then guide them every step of the way. Endocrine surgery is complex, and requires that we evaluate and treat each patient holistically. It’s one reason why I love my work.”

# Integrating New Technologies





## Introducing the MedStar Center for Surgical Innovation

In July 2021, the MedStar Center for Surgical Innovation (MCSI) was officially announced and launched, with a mission to position the organization as a national leader in shaping the future of surgical care. Through integrating new technologies and elevating research and education initiatives, MedStar Health can become a Magnet destination for surgeons and residents, and the premier place for patients to turn for the latest, most advanced approaches to surgical care.

Among the technologies to be discussed and evaluated:

- Video-based tools in the operating room
- Cutting-edge surgical technologies
- Innovative surgical planning and training tools
- Big Data and Informatics

MCSI is housed in the MedStar Institute for Innovation at corporate headquarters in Columbia, Maryland. The Institute provides administrative, technical, and organizational infrastructure for MCSI to pursue its strategic and operational goals, including:

- **Optimize surgical system-ness.** Integrate surgical specialties across MedStar Health and deliver a platform to exchange ideas and best practices for growth in all surgical specialties.

- **Pilot innovation.** Identify, coordinate, facilitate, and sponsor new technologies.
- **Educate.** Develop and deploy new learning platforms to advance the practice of surgery at MedStar Health, plus support educational events focused on surgical innovation.
- **Research.** Open doors to scientifically investigate the value, utility, and safety of surgical innovations under consideration by MedStar Health.
- **Collaborate.** Cultivate partnerships to explore emerging surgical applications and generate new revenue streams.

“The MedStar Center for Surgical Innovation demonstrates that our organization is truly committed to being at the forefront of surgical leadership and is a pioneer in advancing the practice of surgery,” said David E. Stein, MD, MHCM, regional chief of surgery. “We are always thinking about what lies ahead, and how new technologies can improve surgical care and outcomes for our patients. MCSI brings together a team of clinical experts who are also thought leaders. We believe in and are vested in innovation.”

### Executive Oversight

Joy Drass, MD  
Steve Evans, MD  
Ed Woo, MD  
Bill Sheahan

### Operational Leaders

**Medical Director:**  
John Lazar, MD  
(Thoracic Surgery)  
**Innovator-in-Residence:**  
Mark Smith, MD (MI2)  
**Training/Education:**  
John Yosaitis, MD (SiTEL)  
**Administration/Finance/  
Strategic Partnerships:**  
Jeff Collins (MI2)

**Informatics:**  
Hank Rappaport, MD (MI2)  
**Intellectual Property:**  
Marck-Arthur Clerveau (MI2)  
**Manager:**  
Ellie Hwang (MI2)

### Surgical Innovation Advisory Board (SIAB)

Abeel Mangi, MD  
(Cardiac Surgery)  
Christopher You, MD  
(Bariatric Surgery)  
David Song, MD  
(Plastic Surgery)  
David E. Stein, MD, MHCM  
(Colorectal Surgery)

Edward Aulisi, MD  
(Neurosurgery)  
Erin Felger, MD  
(Endocrine Surgery)  
Henry Boucher, MD  
(Orthopedic Surgery)  
Jack Sava, MD  
(Trauma Surgery)  
Keith Kowalczyk, MD  
(Urology)  
Tamika Auguste, MD  
(Obstetrics and Gynecologic  
Surgery)  
Thomas Fishbein, MD  
(Transplant Surgery)  
Zeena Dorai, MD  
(Neurosurgery)

## Robotic Technology Transforming the Way We Operate



It's no secret that robotic technology is transforming the way surgeons operate on patients. These state-of-the-art systems streamline the process of care for both surgeons and patients—allowing for an incredible level of precision and accuracy during cases, and making the recovery process quicker and easier for patients, post-operatively.

Seeing the value, MedStar Health has progressively invested in robotic equipment for its operating rooms and has made it a priority to recruit surgeons who are trained and experienced to operate robotically. The Baltimore region brought its first robotic surgical system in-house, the da Vinci® Si, in November 2009. Urologic cases were the first to be performed robotically, at MedStar Franklin Square. Today, surgeons are using ten robotic surgical systems in operating rooms across the region, to streamline and optimize a wide range of cases including: bariatric, urologic, urogynecologic, gynecologic, colorectal, thoracic, hepatobiliary, and surgical oncology procedures.

“Digital surgery and integrated imaging are major strategic and clinical priorities at MedStar Health,” said Christopher You, MD, bariatric surgeon and director of robotic surgery at MedStar Franklin Square. “These technologies are allowing us to truly optimize and streamline the process of care. We can do more, quicker and more efficiently, and with higher levels of multi-disciplinary integration and connectivity amongst our team.”

### Introducing Jason Hawksworth, MD, FACS

*One of a few hepatobiliary surgeons in the country performing robotic surgery.*



Jason Hawksworth, MD, FACS, is an experienced, board-certified transplant and minimally invasive hepatobiliary (liver, gallbladder, bile duct, and pancreas) surgeon with additional expertise in liver, kidney, and intestinal transplant surgery. As system chief of robotic hepatobiliary surgery, he is one of only a few surgeons in the country who performs robotic surgery to treat benign and malignant liver, pancreas, and bile duct tumors. He practices at both MedStar Georgetown University Hospital and MedStar Franklin Square Medical Center.

Additionally, Dr. Hawksworth is an active researcher focused on hepatobiliary surgery outcomes and intestinal transplantation. He has published more than 40 scientific papers in journals including *Annals of Surgery*, *American Journal of Transplantation*, and *Transplantation*, as well as numerous book chapters. A graduate of the United States Military Academy, West Point, Dr. Hawksworth has served in three combat tours in Afghanistan on a Forward Surgical Team. He earned his medical degree from Wake Forest Bowman Gray School of Medicine and completed his internship and residency at Walter Reed Army Medical Center. He completed his fellowship in hepatobiliary and multi-organ transplant surgery at MedStar Georgetown University Hospital.

# The Power of **Clinical Practice Councils**

MedStar Health operates 10 hospitals and more than 120 entities across the Baltimore-Washington region. Clinical Practice Councils—or CPCs—play a critical role within the organization, as physicians and leaders strive to provide integrated and streamlined clinical care, to best serve patients who rely on MedStar Health and its distributed care delivery network for their urgent, ongoing, and chronic medical needs. The launch of MedStar Health’s CPC model was led by MedStar Medical Group (MMG), the healthcare system’s provider organization, whose charter is to support and engage all providers and teams to assure clinical practices can operate and deliver patient care in the most effective and efficient manner possible.

CPCs create unity and operational consistency for MedStar Health, while also supporting the organization’s strategic and growth initiatives. They leverage data collection and clinical research, business development opportunities, education, and innovation and new technologies to identify and implement best practices across all MedStar Health entities, with focus on:

- Quality and safety
- Clinical practice guidelines (example: disease state management)
- Clinical operational efficiency at our practice sites
- Value analysis

MedStar Health’s Integrated Surgery Department has implemented CPCs in many clinical service lines, including breast surgery, colorectal surgery, endocrine surgery, general surgery, and surgical oncology—just to name a few. Each has deployed a unique structure and style, with focus on topics that are most important to both clinical and administrative leaders. For example, most recently, the General Surgery CPC has concentrated on the development of practice standards for bariatrics, acute care/trauma care, and general surgeons. In tandem, the Endocrine CPC has been



“The surgical services team is well represented on all of the CPCs, which is important for many reasons, including that it truly helps build collaboration across the entire healthcare system.”

—David E. Stein, MD, MHCM

concentrating on multi-disciplinary approaches to care and optimizing the care continuum for patients with diseases of the endocrine glands. The Colorectal Surgery CPC has honed in on options to improve patient outcomes, from ways to increase colorectal screening rates to protocols to reduce surgical site infections.

“It is invigorating to see input and perspective coming in from our own expert surgeons from across the system. It’s a powerful model that is going a long way as MedStar Health continues to position itself as a true healthcare leader, and the best place for patients to turn for state-of-the-art medical care,” said David E. Stein, MD, MHCM, chief of surgery for the Baltimore region.

## Setting the Foundation for Quality and Safety

Over the last 12 months, under the leadership of David E. Stein, MD, MHCM, regional chief of surgery, and Nicole Chaumont, MD, regional vice chair of surgical quality, safety and outcomes, the Integrated Department of Surgery has embarked on various initiatives to set a solid foundation for operational quality and safety. One major step forward came about through the department's commitment to enhancing its weekly Morbidity and Mortality (M&M) Conference in 2021. Initial goals were to increase awareness of peri-operative complications across the department and to provide a forum for transparent discussion,



review of evidence-based best practices, and identification of recurring events. Additionally, a new set of standards were established to guide each weekly conference, designed to specify goals, clarify rules of engagement, standardize definitions for post-operative adverse events, and provide scheduling and process guidance for reporting adverse events.

The new processes were introduced in June 2021, at the beginning of the academic year. Since then, the department has continued to encourage voluntary reporting of adverse events, as a way to identify opportunities for improvement and lessons learned.

"Anecdotally, I feel that we are all paying more attention to the unintended outcomes of our care, and the team is reporting and discussing

them openly," said Dr. Chaumont. "Being open, honest, and transparent can be difficult in some cases, but I truly believe it's necessary. These discussions are the first step we can take as a team to improving quality and safety, for ourselves as well as our patients."



Upcoming priorities for the M&M conference include finalizing a database to collect and organize adverse events that are reported more efficiently. The database will facilitate identification of recurrent quality and safety issues that warrant further investigation. Additionally, it will support the advancement of quality improvement initiatives in alignment with patient outcomes data.

Another major accomplishment in 2021 was the launch of the Integrated Department of Surgery's first quality improvement curriculum. The curriculum educates trainees on improvement thinking, engages trainees and faculty on quality improvement projects, and provides practical guidance for implementing improvement initiatives. The department assembled a Surgical Professional Standards Committee (SPSC) to oversee quality and safety at the regional level. The SPSC has been an instrumental resource for departmental and hospital-based quality improvement activities related to peer review and provider performance improvement.

"Now that the Integrated Department of Surgery has set the foundation for its quality and safety program, we are making a shift toward metric-driven initiatives," said Dr. Chaumont. "As just one example, to decrease colectomy-related surgical site infections, we have begun standardizing pre-operative bowel preps as well as intra-operative processes for providing fascial wound protectors and wound closure trays. These new processes will be deployed for all colon cases, regionally."

# Surgical Education News & Notes

Perspective from Maggie Arnold, MD



I believed, as many people did, that as we came through 2021, we would start to be back to “the way things were before.” Of course, we aren’t quite there yet. But as we have continued to adapt and innovate with the COVID-19 pandemic, we have maintained our pursuit of excellence in education with enthusiasm and resiliency.

One of the greatest alterations caused by the COVID-19 pandemic was the transition to an all virtual recruiting season for the general surgery residency applicants. We conducted a lively “cocktail party” on Zoom the night before interview day, which allowed us to get to know the applicants. Through it all, we were able to match an outstanding intern class who has been a great addition to our team.

We continued our regional mock oral exams in conjunction with our neighboring institutions: Johns Hopkins, York Medical Center, and Sinai Hospital. We were able to expand the dates and exams offered, and really gave our residents good practice for the ABS Certifying Examination, which remains conducted virtually as well.

One highlight of the year was the addition of MedStar Franklin Square Medical Center as an official Georgetown University School of Medicine Fourth Year Acting-Internship site. We were fortunate to have several top-notch Georgetown medical students rotate with us. We look forward to strengthening our collaboration with Georgetown as we increase our educational offerings for their medical students.

In June, we said goodbye to our departing chiefs, David Blitzer, MD, and Kristy Hawley, MD. Lucky for us, they didn’t go too far as they are both pursuing fellowship training in Baltimore. Dr. Hawley is working at the Shock Trauma Center at the University of Maryland, completing a trauma/critical care fellowship. Dr. Blitzer is at the University of Maryland for a vascular surgery fellowship. Our newly appointed chief residents are Jason Howard, MD, and Alberto Parra-Vitela, MD.



Virtual Grand Rounds have been a big success. We have had some outstanding speakers including Schlomit Schaal, MD, president of the University of Massachusetts Medical Group, and Bruce Perler, MD, former president of the Society for Vascular Surgery.

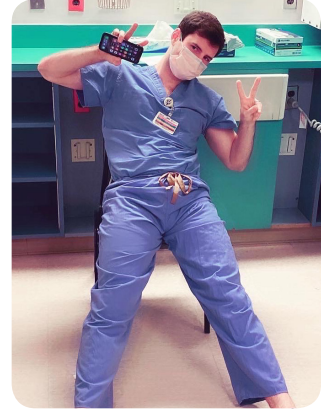
Our didactic curriculum has been enhanced with the addition of more hands-on simulation training, including our first ever Fundamentals of Laparoscopic Surgery Bracketology, where residents faced off on our laparoscopic simulators for fame and glory.

Finally, enduring the COVID-19 pandemic has taken a toll on wellness. I believe MedStar Health has done a phenomenal job providing multiple wellness resources for our team. Rebekah Campbell, MD, was named our departmental wellness champion. Under her guidance, our residents set wellness goals each month, such as making their dentist appointments or even calling their moms. Residents who achieve their wellness goals are rewarded with small prizes in addition to having a better sense of well-being.

We look forward to making continued progress in 2022!

Maggie Arnold, MD

# Snapshots of Our Residents in Action



# Quality and Performance Improvement, Done the SMART Way



Continuous quality improvement (QI) is an organized method that allows healthcare organizations and providers to evaluate their own outcomes to make informed process changes to improve the delivery of patient care. Improvements can come in various forms—the optimization of clinical outcomes, the creation of new systems that provide better access to care, cost savings, and increased efficiency are common goals.

Performance improvement (PI) methodologies can provide the necessary framework for an organized and validated approach to improvement initiatives. At MedStar Health, these initiatives are led by David Branch, vice president of performance improvement, and Katy Robinson, performance improvement director of training and education. Together, they have developed a unique SMART process for continuous improvement—one that promotes a comprehensive approach to improvement thinking and provides practical skills applicable to improvement initiatives.

One of the common requirements for all medical graduate training programs, established by the Accreditation for Graduate Medical Education (ACGME), is that residents must receive training and experience in quality improvement processes. In spring 2021, Nicole Chaumont, MD, vice chair of surgical quality, safety, and

outcomes, and Robinson developed and implemented a QI curriculum for healthcare trainees. The curriculum was designed to provide didactic instruction on the SMART process, as well as experiential learning through participation in longitudinal QI projects. The didactic sessions provided a foundation for improvement thinking plus the practical tools necessary to progress through a QI project from concept and implementation through sustainability. The curriculum followed the SMART methodology closely (scope, measure, analyze, rethink, and track) and included the following sessions:

- Grand Rounds—"Quality Improvement at MedStar"
- Session 1—"Introduction and Project Scope"
- Session 2—"Assessing Current State"
- Session 3—"Using Data in QI"
- Session 4—"Make and Sustain Change, and Learn to Tell a Story"

Concurrently, with guidance from Dr. Chaumont and Robinson, the resident teams proposed QI projects aimed at improving various aspects of surgical care within the department. With help from experienced performance improvement coaches, Shirley Bomhoff, Ashley Davis, and Jennifer McQueeney, the resident teams progressed through the curriculum, organizing teams, investigating areas for improvement, and designing improvement interventions. Resident QI projects include:

- Reducing readmissions after new ileostomies
- Impact of a walking program on post-operative patients
- Assessing delays in discharge related to day-of-discharge lab work

Project results were presented at the Integrated Department of Surgery Grand Rounds in early 2022.

# Side-by-Side in the OR





## Recognizing the Critical Importance and Value of Surgical Nurses



Surgical services are evolving and growing rapidly at MedStar Health. Every member of the team plays an important role as new services are introduced, new surgeons join the medical staff, and new technologies are incorporated into day-to-day operations. At the center of it all is a group of dynamic and skilled nurses, working tirelessly to collaborate with and support surgeons before, during and after cases, keep operations fine-tuned and on track, and assure that every patient receives the highest quality and safest level of care possible. Their clinical skills are superb and their commitment to teamwork is firm.

“Many of our nurses have worked here for a long time, and people really do treat their colleagues like family,” said Andrea McDaniel, MSN, CNOR, RN, assistant nurse manager. “Everyone pulls together and makes sure that no one feels alone on the hard days.”

In addition to supporting one another, the OR nurses believe strongly in advocating for their patients.

“OR nurses are always looking at situations from the lens of ‘what is best for the patient’ and aren’t

afraid to speak up if they think a change is needed,” said McDaniel.

Sandy Gunesdogdu, BSN, CNOR, RN, says the commitment of MedStar Health’s surgical nursing team was evident when the organization introduced robotic hepatobiliary services, led by Jason Hawksworth, MD, this year.

“The nursing team was extremely interested and enthusiastic to have a new surgeon with new procedures in the operating room,” said Gunesdogdu. “The team truly came together to learn about Dr. Hawksworth and his preferences during the procedures, so that we could perfect our processes of care and ensure the best possible outcomes for our patients.”

### Our Operating Room Nurse Leaders

#### MedStar Health

LynneMarie Verzino, MHA, BSN, RN, NE-BC  
*VP and Chief Nursing Officer, Perioperative Services*

#### MedStar Franklin Square Medical Center

Kaylene Ross, RN, MBA, BSN, CNOR  
*Clinical Administrator, Surgical Services*

Megan Cullum, MSN, RN  
*Operating Room Nurse Manager*

Andrea McDaniel, MSN, CNOR, RN  
*Assistant Nurse Manager*

Sandy Gunesdogdu, BSN, CNOR, RN  
*Assistant Nurse Manager*

Joseph Bunker, MSN, RN  
*Assistant Nurse Manager*

Colleen Lindo, MSN, RN  
*Assistant Nurse Manager*

#### MedStar Harbor Hospital

Mahlet Ketma, RN, CNOR, CNAMB  
*Perioperative Director*

#### MedStar Good Samaritan and MedStar Union Memorial Hospitals

Audrey Dickerson, MSN Candidate, RN, CNOR

*Integrated Director of Perioperative Services*

Emily Rockwell, BSN, CNOR, RN  
*Operating Room Nurse Manager (MUMH)*

Susan Stanbury, RN  
*Operating Room PCC (MUMH)*

Cita Brown, BSN, CNOR, RN  
*Operating Room PCC (MUMH)*

Elena Guzovsky, BSN, CNOR, RN  
*Operating Room PCC (MUMH)*

Daniel Unfried, BSN, CNOR, RN  
*Operating Room PCC (MUMH)*

Bill Williams, BSN, RN  
*Operating Room PCC (MUMH)*

Jennifer Bidinger-Lyon, MSN Candidate, BSN, RN  
*Cardiovascular Operating Room PCC (MUMH)*

Sharon Griffin, BSN, RN, CNOR  
*Operating Room PCC (MGSH)*

# Faculty Directory



**David E. Stein, MD, MHCM**  
*Regional Chief of Surgery*  
*Colorectal Surgery*  
David.E.Stein@MedStar.net



**Jason Crowner, MD**  
*Vascular Surgery*  
Jason.Crowner@MedStar.net



**Maggie Arnold, MD**  
*Residency Program Director*  
*Vice Chair of Education*  
*Vascular Surgery*  
Margaret.Arnold@MedStar.net



**Gabriel Del Corral, MD**  
*Plastic and Reconstructive Surgery*  
Gabriel.A.Delcorral@MedStar.net



**Nicole Chaumont, MD**  
*Vice Chair Quality, Safety and Outcomes*  
*Colorectal Surgery*  
Nicole.Chaumont@MedStar.net



**Maen Farha, MD**  
*Breast Surgery*  
Maen.J.Farha@MedStar.net



**Christian Jones, MD**  
*Chief, MedStar Good Samaritan and*  
*Union Memorial Hospitals, Director,*  
*Acute Care Surgery Program*  
Christian.D.Jones@MedStar.net



**Jeff Ferris, MD**  
*Colon and Rectal Surgery*  
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**Alain Abdo, MD**  
*Minimally Invasive Surgery/Bariatric*  
*Surgery*  
Alain.Abdo@MedStar.net



**Ziv Gamliel, MD**  
*Thoracic Surgery*  
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**Daria Abolghasemi, DO**  
*Breast Surgery*  
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**Vinay Gupta, MD**  
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