

July 2020

Dr. Zwi Steiger

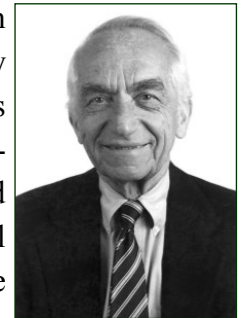
The Convoluted Pathway To Success

Part II



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Dr. Zwi Steiger

The surgical residents who trained in the WSU surgical program during the mid 1960s through the early 1990s had the opportunity to be influenced by a surgical giant, Dr. Zwi Steiger. During his career at WSU, he trained many surgeons in abdominal and thoracic surgery. He was a very skillful technical surgeon who had great wisdom about when and how to operate and was a masterful teacher in transferring his knowledge to his surgical residents. He supervised the general and thoracic surgical residents at the Allen Park Veterans Administration Hospital primarily but also contributed significantly to their training at the Harper Hospital and provided in-house night call supervision once a month at the old Detroit Receiving Hospital. Technically difficult cases tended to flow in his direction. In the midst of all of his outstanding teaching and patient care, he had a tremendous sense of humor, and each time anyone encountered him, he would provide a new joke and somehow never had the need to repeat a joke twice. He must have had a repertoire of over a 1000 jokes with which he could entertain friends and colleagues.

Dr. Thomas Siegel (WSU/GS/VS 1977/82/83) had the opportunity to come across an interview that Dr. Steiger gave in the early 1980s. This interview highlights some of the difficulties that Dr. Steiger had to overcome during his early years prior to World War II, his survival through this awful conflict until Germany was conquered, and then his struggles to complete his education before coming to Detroit, where he completed his illustrious career. Like most memoirs, this interview provides insight into some of the national and international difficulties that threatened Dr. Steiger’s homeland and teaches us how to try to avoid causing similar challenges and sufferings by our fellow international citizens.

INTERVIEW:

Well, when you left your parents in February of 1944, was there any feeling that you wouldn’t see them again?

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The Convoluted Pathway To Success, cont..

That was difficult to assess because it was always on the mind, “Who will survive this war?” We were talking about the destruction, during the war, of property and buildings from the medieval times. People were not talking about human life, how many will survive, who will survive, how will you survive. The Warsaw Ghetto was liquidated, and we didn’t have any news about that. We had heard some vague rumors, and that was in the spring of 1944. A 17-year-old man who was passing through our home town had said he escaped from the Warsaw Ghetto. He was making his way to Budapest to try to get out of Europe. It was difficult to get out; it was impossible to make any move. You could go into hiding. How do you go into hiding? You know everybody knows you. In your own town, everybody knows you. If you move to another town, you have to have papers. You have to have papers if you’re a Hungarian, if you’re a Gentile; you’re obliged to serve in the army. You would be asked, “How come you’re not serving in the army?” You have to have a job. You have to survive. But to leave, there was no way to; there was no way to go on foot or by boat or by train.

My parents wanted to go to Israel. My brother went there as a student. You know, he had to be legal. You couldn’t go to Israel even if you wanted to go. There were only a limited number of certificates that people were getting that allowed you to go to Israel. I remember people trying to go illegally and getting stuck somewhere in Greece, or Syria, or Lebanon and never being able to get to Israel. My brother got a student visa to go to the Hebrew University in Jerusalem. He was waiting for it in 1940. He left for Israel through Budapest on the train to Venice and took a boat to Palestine. I can’t remember how he got the Hungarian passport, if it was by a brief that he got a Hungarian passport to go to Israel. Did dad encourage him? I’m sure he wanted him to go. This was the only way out for people.

What happened to you after you escaped the labor camp in 1944?

I spent three weeks in the forest. While in that village, we slept in the square in the open. My two friends and I snuck behind the sentry. We contacted some local guy who promised that he would bring us food out to the forest. Thus, we spent three weeks in the forest lying quietly and, once in a while, the guy brought us some food.

Was this still in Romania?

Yes, that was in Transylvania in a small town. Eventually, one day he came and told us that the Germans left and that we can come in to the town at night. We made our way that night into town, but we heard some shooting. We were picked up by two Germans. I still don’t know how we escaped from them. They checked us; maybe they were two decent guys. But, they were looking for Jews, and they were looking to see if we had any weapons, so they frisked us.

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And they just let you go?

They told us to stay there until the morning. They made a comment that we were lucky that the military police didn't catch us because they were shooting people on sight who were fleeing, especially the young guys.

They were soldiers. I asked one of them where he was from, and he said he was from Linz, from Austria. The other one spoke a little bit Romanian and walked into the house of the man who provided us with food. Eventually, they came back an hour later, and they checked us out again and asked if we were Jewish. We said no. We didn't want to stay there for them to come back a third time. During the night, shortly after, we walked out and lay in some bushes for about two, maybe three days. We saw the Germans passing us. They were not far, so we could hear them, and we could see them as we were lying flat. Eventually, on the 16th of October, the Russians came into that hamlet.

How do you remember the date?

How do I remember the date? That's an amazing question because, for some reason, I have an affinity to remember dates in history. When I studied history, central Europe, I could remember any date; when somebody was crowned or when he was killed or poisoned, and I remember the date that I escaped. It was September 25th on Rosh Hashanah.

We were in a forest area. On occasion you could hear some gunfire and some whistles of bullets. If somebody saw us passing, they fired. But eventually, we made our way to Klausenberg, one of the towns in Transylvania. From there I made my way to Bucharest and looked up where the Czech Consulate was established and I tried to get into the Czech Army. This was so cumbersome, and eventually I gave up.

Were you alone at this time?

Yes. Then I made my way back to our hometown in Berezny, but Velký Berezny was liberated; it was the end of November 1944. From there I made my way back to Cluj, but on the way I stopped and looked up the Hungarian who managed the bank and then who became mayor of Sárospatak. I stopped at his place because our neighbor, who was working with our father in the bank, told me that he took my father's golden watch and some money that was in the bank. So I stopped by, and I demanded it. He denied it. He told a doctor sitting in his house to go to the Russian commander of the city. He agreed to dig it out, and he did and gave me my father's golden watch. He denied taking any money and, for some reason, I never pushed it too hard. It wasn't about money. I got the watch, and I went back to Cluj, where I started medical school.



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Do you still have the watch?

Yes. After being caught by the Russians, who thought I was a spy, and then having it with me while escaping Czechoslovakia; I never thought I would be able to get the watch out of Czechoslovakia. So I gave the watch and the chain to a cousin of mine who was working as a governess with the Canadian military attaché in Prague. I gave her the watch, and she gave it to him. He served together with my cousin who served in the Canadian Air Force during the war. He gave it to the attaché when he came back to Canada. I gave the chain to a clerk in the Israeli embassy who I knew from school.

When you were in Velký Berezný afterwards, did you try to find out exactly what happened to your family?

I knew that they were taken to Ungvár to the ghetto in Ungvár. From there I knew that they were taken to Poland. I didn't know what happened to them because this was in December of 1944, towards the end of December, and not many people who were transported to Auschwitz were liberated at this point. And what happened, actually what happened, the extermination part of it, we found out about only around April of 1945.

By people coming back?

You know, from somebody who survived the concentration camps in eastern Poland and in Germany, in Austria, you know, that came to back from Auschwitz and were eventually dispersed to concentration camps. They started coming back around April, after the war, and that's when you realized what it was that you lost, the extent of it. Because the extent of it, I don't think anybody had any idea that something like this could happen, that the Germans could do such a thing. You encountered viciousness and degrading by the Hungarian soldiers, or you knew that people who were clearing minefields got killed from an explosion or from crossfire, but the extent of the extermination, the intended extermination, factory-like management, I don't think anybody had any idea. The people living in Hungary, who were living in camps, they were isolated from the news; you couldn't get a local paper.

Was this contained in the local paper?

Sometimes you grabbed some piece of paper if it was thrown out by somebody like a Hungarian or a Hungarian soldier. You tried to grab that because you could get an idea of what was happening on the front, or wherever you're standing, but they were trying to block out any news. There were no radios that you could listen to. People were saying that the Jews were taken to Poland or to Germany. People thought this was for resettlement or for working in some factories, mines, or farm settlements.



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From all the travels that you had experienced up to that point, and any rumors or other things that you'd seen up until that point, did you have any feeling that your, your parents would survive?

It was very difficult because you know that there are losses during the war, that there were Allies who were bombing Germany, and that shells were flying when the cities were taken over. But, in retrospect now, I was always afraid that I would lose my family during the war. Just from the elimination or annihilation of people. You know that if the soldiers passed you by, one would take a shot at somebody; it always happened. But the extent of it, I don't think anybody was aware, unless he saw and talked to people who experienced it, who survived the extermination in Kamenets-Podolski.

So you went to Cluj after that?

I stayed in Cluj for about 10 months, and then I went to Prague to continue my studies. The war was over in May, I mean the European war was over, and there were still some shootings in Cluj. There continued to be frictions between the Hungarians and the Romanians.

I stayed there until September, and then I made my way to Prague. It was still extremely difficult to commute, but by that time I had made contact with my brother who was in Italy in the British Army. He was part of a Jewish Brigade in the British Army. He sent a letter to me in Cluj, but before I had a chance to answer him, I went to Prague. It took months to get a letter. Getting to Prague was extremely difficult. I had to cross the Romanian and Hungarian border and then the Hungarian and Czech border without any documentation. Our part of Czechoslovakia was, by that time, unofficially annexed to the Soviet Union, and I had documents to enter Czechoslovakia. Eventually, I got to Prague. My brother visited me in Prague, after he went AWOL from his unit and came to see me. We had a good visit.

Later, I went to the flat of my father's brother-in-law in Budapest. The flat was empty, and his mother was in her 80s and was crippled and kept crying in the empty apartment. Most of my relatives there did not survive the war. My uncle's son was taken earlier to a concentration camp but survived the war in Germany. I had crossed the border illegally and restarted my medical studies.

Did there ever come a time in that period where you found out what happened to your parents and your brother?

I found out in July, toward the end of the war, when people were coming home from the concentration camps. Jews from the city of Cluj that were coming home or passing through Cluj going to Palestine through



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Bucharest and through the Black Sea, they were saying that people were exterminated. I learned the same thing from returnees in Budapest. They reported that the older people were exterminated in September, 1945. I knew what happened to my parents. During the summer of 1945, I found out that somebody saw my younger brother a few days before the liberation, but he disappeared and was probably killed too. He was put on a transport going toward Dachau and, apparently, nobody survived on that transport. My parents never left Auschwitz. They were killed in Auschwitz.

They were exterminated as soon as they got to Auschwitz?

They got there the same day, and the next day there were no survivors. From the area where I lived, there were one or two people over 50 who passed Auschwitz. There was one physician over 50 who survived Auschwitz. My father's brother, who was about five or six years younger than my father, he passed through Auschwitz along with his son and my younger brother; they survived.

So you completed your medical education in Prague?

Yes, I completed my medical education in Prague and then, after three months, I escaped Czechoslovakia and went to Israel. This was in 1949. I stayed in Vienna in order to escape through Czechoslovakia through the Russian zone to get to the American occupied zone. From there, I again went through the Russian occupied zone to Salzburg and from there to Israel, where I arrived in February of 1950.

Why is it that you had to escape from Czechoslovakia?

They felt that it was an insult to leave their communist-socialist paradise, and they didn't want people to leave, so I had to escape; to leave legally required a passport through the bureaucracy. It was an impossible task. Their bureaucracy was a nightmare. You continuously had to carry a suitcase of documents and paper and certified copies of where you went to school, where you were born, that you behaved, that you didn't misbehave, that you paid your taxes, and so forth and so forth. So it was an impossible solution to, to leave with a passport. In addition, I had finished medical school, and they could have used me. They claimed that they took care of my education, so they wouldn't let me go. I was feeling closed in, that I had no free communications with anyone and that I would never be able to leave in the future. In addition, they continuously harassed people. You had to do what you were told. That was discouraging, and I felt that life was impossible.

Did your brother know you were coming to Israel?

Did my brother know? After I got to Vienna, I sent him a message that I was coming but that I couldn't get



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a passport. No way! I wouldn't have even tried to get a passport. I couldn't even apply for a passport. So, without a passport, I arrived in Israel in February of 1950.

I went to work in a government hospital in Jaffa and then, after a while, I served my stint in the army on a regular tour of duty for a year and a half, from 1953 to 1955. I wanted to go to the United States in order to train in chest surgery. Eventually, after the Sinai campaign in 1957, I came to the States.

I first came to Chicago to take some training, and eventually I went to Detroit where I met Amelia, and we were married in 1964; this is my reason for staying in Detroit. Amelia didn't want to move as she had family here. So we stayed in Detroit. You wanted to ask me something? I'm sorry?

And how many children do you have now?

I have two children, and they are both named after family members. The older one is named David, after my father, and the younger one is named Jacob, after my brother. David is 15 years old now and Jacob is 8 years. (Note: This interview was done in 1982)

And what are you doing now for a living?

I am working for the medical school (Wayne State), and I'm teaching and working at the Veteran's Administration Hospital in Allen Park.

I never lost interest in Eastern Europe. I never lost interest in what happened to us in the Second World War. Sometime, in retrospect, things seem very easy to understand. The questions always come through, why didn't I do this or why didn't I do that? Again, in retrospect, some things are very clear. I remember when I was 16; I was ready to defend the Republic of Czechoslovakia. I volunteered for militia duty, and I remember there was a schoolmate who left Czechoslovakia for Sweden. I considered him a traitor, you know, because he was leaving the ship. To me, it's amazing, that in 1938 I was ready to fight, and in the 1940s, when I was two or three years older and under different conditions, under occupation, there was no possibility of an armed resistance. In 1939, there was a question of the local Ukrainian populations in Munkacs, when the Hungarians took over Munkacs; there were questions if the local population would want to keep those areas as the Ukraine. I remember having some duty in a Jewish home to be on watch in case the local population would create any violence. We had a handgun.

So the question is why didn't we resist in 1938? I think it was an impossible situation when there aren't any weapons or when you're not trained in military affairs. When a gun is held to your head or to your parent's



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head, or to your sibling's head, or your wife's head, then it is a difficult thing to try to resist. Always ask about how the American POWs, that were in North Korea, how after four or five days of marching 25 miles and not being given any food, why they were betraying their officers? What did 20 million Russians do when they were being slowly polished off by Stalin in concentration camps? They were not ghetto Jews being killed but Russian soldiers and army men and officers. You have seen the same guys who came out from the ghettos and from concentration camps, when they were in Israel during the War for Independence; they were fighting as good as any soldier. So, when you stay home, and you're not trained, and when the enemy is so overpowering, then you cannot put up resistance. In addition, you don't know what's happening and what's going to happen. You know you are being deceived continuously. It isn't that you are standing in front of your enemy. He's trying to give you a picture of his humanness, that everything is according to the law, and if you work with the law, nothing will happen to you.

Have you discussed your experience during the war with your children at all?

With my children? Occasionally I tell them some things. They're aware, and they know what happened. They know that their grandparents and parts of there family were destroyed or killed in the Second World War. I don't think I have anything to hide from them. It is difficult for them to comprehend, especially for the little one. He comes up with questions, "How did it happen?, and "How?" and "Why did it happen?" It is difficult to give an answer, and I never try to withhold any facts.

Do you have any documents of any kind from that period?

The postcard that my brother sent me was from Auschwitz. I left Czechoslovakia because it had my name on it. When I was escaping Czechoslovakia, I didn't have anything with my name on it and, I left it there, and I'm sure that it no longer exists.

I had my papers; I also had a graduation paper from the Hebrew high school that I went to. My mother sent a note to me when they were taken, before they were taken away to the ghetto, to Ungvár. She sent it to me, and I had it with me. I had an identification paper from the labor camp that I left in Prague because I didn't want to carry it on me. While I was in Prague, I was trying to get some compensation for property destroyed at home, and I started the so-called bureaucratic procedures to declare my parents as dead, which was the first step in Czechoslovakia to establish some claims. When I left Czechoslovakia, everything turned into nothing. Nothing came out of it in Czechoslovakia, so I don't have any documentation. That's amazing. You ask me



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about documents. I remember when I went to Prague after the war, and I tried to get into school, and they always asked for your documents, birth certificate, domicile, and school documents. When they asked me, "Do you have your birth certificate?" I said, "I don't."

You came in possession recently of a record book from a mohel (an expert in circumcision)?

Yes, that was from my great grandfather on my mother's side who lived in Velký Berezny. He lived in the second half of the 19th century. He was a mohel in town and he kept records of the circumcisions that he made there. He mentions some of the people that I knew and some of the people that were born, and he circumcised them. In addition, this book was apparently, for a while, in the hands of his older son, who was my mother's father and he had an entry there of the birth of my mother. This notebook and prayer book was eventually taken to the States by another son of his who was an uncle to my mother. His children gave that book to me a few years back. They didn't realize what it was all about until I read it and reread it and studied it for days to figure it out. I had a hard time reading his handwriting, but eventually I figured it out, and I realized that I had two brothers who apparently died in childhood because I was never aware that they existed. Then I called my brother and he told me and another cousin told me that we had another book at home where the family history dates back much farther on my mother's side, to the Spanish Inquisition, when they fled to Holland to avoid being killed.

Do you have any thoughts, in retrospect, about what you experienced?

I remember when I was probably 9 years old and I was in the Czech public school, writing an essay on whatever topic we wanted. I remember writing on "Why do the Jews need a state of their own?" It was ingrained in me that we needed an independent state where we could control our destiny in a certain way. You can never control all your destiny. During the war and after the war, I realized it even more. There is no question that we have to have a state of our own because of the injustices that were done to us and are being done now. We need to have a place where we can, in a certain way, control how we live, a place that would serve as a refuge for those Jews who are being persecuted. You know, your property and your life were always controlled by somebody else. There were periods where we lived very well in the area in Europe where we were, but then later we were killed off. This is why I always have a strong feeling about the independence of Israel.

Do you think that's being transmitted to your children?

Yes, yes. I will tell you that I have a strong feeling about the United States. During the Second World War, I



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realized that Europe would never be able to defeat Hitler until the United States entered the war and with its power was able to defeat Nazi Germany. After the war, I remember while in Prague, I was passing by the American Embassy and seeing that flag, the American flag, and the freedom that I saw in the Americans, the way they moved in Europe, that in their background, there was something that gave them dignity. I met friends that came out just at the beginning of the war, who were able to get to the United States and serve in the United States Army and then came back to Prague for a visit. I remember what they told us about the United States, about the opportunities, about freedom of movement, of people, and freedom of expression. That was so impressive to a guy who was brought up in Eastern Europe. In addition, all the freedom of thought and expression that we dreamed of in Eastern Europe was thought of as a utopia, but it was already being materialized in the United States. I'm biased towards the United States. They saved Europe on two occasions, the First World War and in the Second World War.

In the First World War, I had not yet been born, but subsequently it resulted in an independent Czechoslovakia. Maybe for Austria-Hungary there was more freedom. Some people would say there was even more freedom than in the democratic Czechoslovakia. Again, I think it was the result of the United States intervening in the First World War and then, of course, in the Second World War that these freedoms occurred. I doubt that Germany would have been defeated without the United States entering the war. I am grateful to the United States. When I came to the United States to train in chest surgery, I had planned to go back to Europe, and then I met Amelia. Once I married Amelia, I had to stay in the United States.

Before the war, you were, you said you were from a religious family.

We were religious and observant. My father didn't have a beard, but he was religious; my mother was deeply religious. But at the same time, my father and my mother had a broad education. I remember that we had art books in our home, books in general literature, in German or Hungarian. They were well read, and I'm sure that my father and my mother would have had no problems adjusting to life in London, England, or in New York.

Since I left home, and even before, I was never deeply religious. I read and I enjoyed reading prayers, but I wasn't religious. The war itself made me less religious; both the experiences of the war and the bestiality of people, and there is no account for those that perpetrated the killings. I have always felt that there is one justice in life and that death evens us out, because if there is a supreme being, the way I was brought up in cheder, you know that there is justice and there is somebody who controls things and that somebody can do



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anything he wants. If there is, I would be an omnipotent, I would control evil, and I would do a better job than He.

During the war nobody gave a damn. These grownups sinned. There were infants that were not yet born who later experienced the cruelty and the viciousness, and the way they were killed, I can't even imagine. So, I am less religious than I was, although my cultural background is a religious one. I enjoy reading a nice prayer or the Psalms. But for organized religion and the people that believe, maybe they're right. Maybe they're right because it's an escape from reality; because reality is terrible, and you know that there is really nobody that controls it. But here's a promise, if you're righteous, you will get into heaven, and you will have it good, but if you're bad, you'll have to give an account. As I say, those are good ideas, and maybe you can, in a certain way, control people's behavior, but no matter what, you'll have to give an account for your deeds. The idea is good but you know the reality is different. This is why I have some reservations. Don't misunderstand me. I go to services once in a while, and I go through the motions, and I enjoy reading the Tora, but there is nobody who controls it. It's all haphazard. I'm sure your father told you how life in a small town was for a Jewish boy. There was always something to do. At the age of 3, sometimes even 2-1/2, you started going to cheder. In the morning you had to pray. You came home and you had to say prayers before and after dinner. There was continuously something to do. Then the holidays came, and they kept you busy. Maybe it is good. You know, there were no juvenile crimes. There was a certain authority, your father or the rabbi, or God Himself, that taught you there was nothing free. You couldn't do whatever you wanted. There is a control on this part of life, and there's control after life. So, in a way, maybe this is the way to bring up people. But there is no question it's a big disappointment. How could He let us down if He is omnipotent?



Dr. Zwi Steiger with his two sons, Drs. Jacob and David Steiger

You're doing all the things.

If there is really such a God and He was supposed to be a God who is supposed to be somebody who has mercy, who has understanding, who remembers the good deeds of your ancestors, I shouldn't complain because, personally, I survived. So, maybe He did do something? I escaped those two Germans, but that was an accident like so many other things.

To what do you attribute your survival?

An accident, a sheer accident, because classmates, schoolmates, family members that were good, that were



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far better than I am, and much stronger both physically and mentally, they didn't make it. Why? One picked me out and said "Save this guy." This is how I imagined, you know, how life is, that somebody is controlling things, you know.

How do you think that feeling translates into your everyday occupation as a surgeon?

You do certain things because it makes you feel good or it is accepted because it's your job. You don't add salt or put in too much butter. Most of the time, you cannot control your own destiny. To a certain extent, I always say it is all chance. You go on the street, you're in Manhattan, and you run into somebody that you didn't see in Detroit for five years and he's there at the same time and on the same street with you. And what a chance that you meet. I say, by some token, there are many people that just miss you by a second that are on the other street, that you didn't meet. It's all, you know, chance. You make it or you don't make it. Things happen. You survive, or you don't get a certain disease because of your physical makeup. There is no way that you can, that you can predict it and no way can you control it.

FAST FORWARD:

The opportunities provided by our strong educational and cosmopolitan environment in the USA allowed David and Jacob Steiger to thrive:

Dr. David Steiger

My parent's devoted considerable effort to shaping my character, my intellect, my world view, and my path to medicine, the latter of which started when they presented me with a candy-filled "physician's bag" before I was even five years old. I followed my parents' teachings, their examples, and their advice as best I could, and after a short series of diversions (three years of law school, nine years as a trial and appellate attorney, and two years as an options market maker), I attended medical school at Wayne State, followed by a residency in internal medicine at the University of Florida, and my fellowship in critical care medicine at Oregon Health Sciences University



Dr. David Steiger

My approach to learning and practicing medicine, both of which are lifelong pursuits, has been guided, almost in its entirety, by the examples that Zwi set for me. His perseverance, his dedication to his craft, and his devotion to his parents were at the essence of his character, and he always endeavored to model the credos of the profession. He always maintained a calm focus and a gentle manner, both of which are essential traits.



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I am currently an attending intensivist at Borgess Hospital in Kalamazoo, MI, and a Clinical Assistant Professor of Medicine at the Western Michigan/Homer Striker Medical School. I enjoy a great mix of hands-on critical care and also of teaching intensive care medicine to residents. I also have a joint appointment to the Program for Medical Ethics, Humanities and the Law. Things came full circle for me, in a sense, when I found out that one of the cardiac surgeons with whom I share patients, Dr. David Martin, was also a Wayne State graduate and operated frequently with Zwi both as a resident and a fellow. He has shared some really nice stories with me about what it was like to work with Zwi. I am every grateful for my parents love and for the examples they set.

Dr. Jacob Steiger

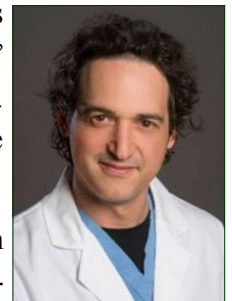
I was a little kid then. My father would come home from work and tell me he put in a chest tube, or did a bronchoscopy, or did surgery to remove cancer from someone's lung or esophagus. Quite often, his pager would start buzzing and he'd excuse himself and say, "I may have to go back to Harper." As a seven year old, I didn't know exactly what it all meant, but I knew it was serious business. He told me to memorize his pager number in case of an emergency. Even though it's been more than two decades since I've used it, I remember it was 745-0203 followed by 1309.

One Saturday afternoon (I was probably in second grade), he took me with him to the VA in Allen Park to check on a patient. The VA back then was everything but what we consider a modern-day facility. To this day, I never forgot the overwhelming smell of hospital disinfectant swirled together with the human smells that were there. More importantly, I saw how my father was in his element.

My father's story, his escape from the Nazis, his prolific career as a surgeon and teacher is always with me. It's a miracle how things worked out in the face of impossible odds. I never take that for granted.

During my first year of dental school, my father became ill with cancer. He's always given me sage-like advice on life. I often wish I'd followed it more closely. His last bit of guidance to me was as follows: "If you're going to be a dentist, you should further your education and be the kind who places implants." So, following graduation, I completed a three year residency in periodontology through the University of Detroit Mercy and St John Riverview Hospital. I've been in practice in Farmington Hills since then. I taught for a number of years in U of D's dental clinic, which was located inside UHC. It's always nice to run into one of my dad's former students or colleagues who share memories and stories and say what a kind gentleman he was. He cherished all of you just as much.

Finally, Dr. Lucas wanted to share information about my family. At the moment, I don't have one. But, if I'm following in my father's footsteps, maybe I'll be changing diapers in my 50s.



Dr. Jacob Steiger



MEMORIES OF DR. ZWI STEIGER

Dr. S. Amjad Husain (WSUGS 1970) shared his memories of Dr. Steiger in a past report stating: I had to go to the VA Hospital for a weekly conference within a few days of starting my training in cardiovascular surgery. During the conference, I answered one of the questions being discussed. A surgeon named Dr. Robert Wilson (WSUGS/TS 1963/65) was outraged and said that the point I had made was completely wrong, ridiculous, and foolish. The discussion continued, but I felt angry and regretful. However, I could not say much, being one of the junior-most members of the group.



Dr. S. Amjad
Hussain

When the conference ended, a surgeon of short height came up to me and said, “Please don’t mind the comments of Dr. Wilson. He can sound a bit rude but is not actually a mean person. He is a very sincere guy. I am sure you’ll soon become a fans of his.” Then he introduced himself as Dr. Zwi Steiger and told me that he was a cardiovascular surgeon at the hospital. He was not just a cardiovascular surgeon in the hospital, but he was also the director of training for cardiovascular surgery. He was short, white-skinned, balding with a few scattered strands, clean-shaven, calm-faced, and always wearing an endearing smile on his lips. He was seemingly a very harmless person who appeared to be an ordinary, insignificant man from his demeanor. They say the first impression about a person is always the right one. In the case of Dr. Steiger, every impression I formed in the first meeting turned out to be correct except that he was not an ordinary man. His greatness was hidden behind his mild manners and humble façade.

I spent two years at the University. Out of those two years, six months were spent in the company of his personality. There is a saying, “Still waters run deep.” I think Dr. Steiger was the perfect embodiment of this saying.

Dr. Steiger came to the hospital every morning wearing a very fine suit. In the hospital, he would change into scrubs. Scrubs resembled the clothes that Chinese porters used to wear in old times - a loose lower tied with a string at the waist and a buttonless short-sleeved upper. Since the VA Hospital belonged to the federal government, there was often a shortage of supplies. Scrubs used to come in various sizes, but at the VAH, only large and extra-large could be found. Most of us could fit into the large size but Dr. Steiger, who was short and skinny, had to fold the trousers around his waist and at the hem, just like Muslim men, who when offering prayers wearing western trousers, fold them at the bottom to expose their ankles. (This is to comply with the requirement of having the ankles exposed while praying.) The top of the scrubs hung loosely on his frame. He would make rounds and perform surgery wearing those scrubs with the folded hems the entire day he was in the hospital.

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MEMORIES OF DR. ZWI STEIGER

He was a very accomplished surgeon. He was always present at the time of surgery, but he would let us perform the surgery. He would guide and teach us at every step. If we were not able to understand a step, he would hold our hands to show us how to do it. He was like an army instructor who guides inexperienced recruits through a field full of landmines. If we committed a mistake during the operation, he would very calmly help us fix it. In this sense, he was unique among all the other surgeons because most of them were generally lacking in patience and humility.

In 1957, he came to the United States where he settled down permanently after receiving further training in surgery. He started working as an associate professor at Wayne State University in 1967, and we met there in 1970.

I have already spoken about his prowess in surgery, but he was also a top-notch researcher. Dr. Steiger was always focused on finding new methods of surgery, improving surgical instruments, and making the treatment of cancer more effective. He made significant contributions in all these areas including the last one mentioned above. Cancer of the esophagus can be very dangerous and often fatal. It can be cured by surgery only if the disease is in its initial stages. If the disease is more advanced, it must be treated with radiation or chemotherapy. In all these cases, the chances of success are not very high. Dr. Steiger came up with the idea that if such patients were treated with radiation and chemotherapy first and then operated upon to remove the esophagus, it could be a more effective way of treatment. Dr. Steiger started experimenting with this new method under a research protocol in collaboration with a radiology specialist and a chemotherapy specialist. Within a year or so, it was clear that this new method was noticeably better than the previous methods. When the results of this new method of treatment were published in medical journals, Dr. Steiger became famous over all the country.

When I read his articles in the surgical journals, I would call him to congratulate him. He was very pleased but, in his usual humble manner, attributed the success of research to the efforts of the whole team in which he only had a minor contribution. I asked him if he could spare some time to visit Toledo and deliver a lecture on this topic at my hospital. He agreed immediately and said he could always spare time for me. He came to Toledo and gave a wonderful lecture to the medical staff at our hospital. The audience could not believe this quiet and unassuming person in front of them was the very same surgeon whose achievements were respected all over the country.

Dr. Steiger had been diagnosed with blood cancer a few years ago. I did not learn about it in time; I would have paid him a visit to kiss his feet (an Urdu expression to metaphorically express great devotion). I read about his death in the University's newsletter. It saddened me that a man, who taught me so much in addition to surgery, had departed from this world and I couldn't be there to attend his funeral and say the final goodbye.



MEMORIES OF DR. ZWI STEIGER

Dr. Donald Weaver (WSUGS 1979)

Dr. Steiger was one of a kind - given the travails of his early life, you might have expected bitterness, resentment, or callousness. What you got instead was simplicity, good humor, and grace. He was full of one-liners and reductionist speech. Any day that you asked how he was, he'd answer "medium" with a twinkle in his eye. Once he told me, in reference to bleeding from the pulmonary vein, "If that lets loose, you'd wish you were never born." He was full of life, joy, and mischief. He was easy to love and admired by all.



Dr. Donald Weaver

Dr. Anna Ledgerwood (WSUGS 1972)

I began my surgery rotation as a first-year resident at the VA Hospital in 1968. We had a patient with a rather large right indirect inguinal hernia, and Dr. Steiger was to staff the repair. The surgical resident had to place the spinal as the anesthesiologist at the VA Hospital had suffered acute cholecystitis and had undergone an emergency cholecystectomy. On the particular day of this patient's scheduled repair, I had placed a spinal and went to scrub for the case. Dr. Peter Baute (WSUGS 1969), the chief resident on this service, told me I had better hurry up as Dr. Steiger was already scrubbed. I made the incision through the skin and the external oblique, at which time Dr. Steiger gave that famous statement "Let me see." Over the next 20 minutes, he rapidly dissected the sac from the spermatic cord, replaced the bowel in the peritoneal cavity, and ligated the sac. He then asked for the suture to do the Cooper ligament repair and, having realized what he had done - essentially stole my case - he gave the needle holder to me and said, "Here, you go ahead." I replied "No, you finish this. If it comes back, we'll know who did it." Dr. Steiger and I always had a superb relationship following that episode. He went out of his way to be certain they found another inguinal hernia that he could help me repair. This was an example of how Dr. Steiger truly loved to operate. During the latter years of my residency, I was assisting Dr. Steiger with a mediastinoscopy at the VA. He had biopsied the pulmonary artery. That was an impressive scenario, which led to a very quick thoracotomy and repair. The patient survived. Dr. Steiger had the ability to get into a lot of trouble but always the ability to get out of it successfully. I remember two of his famous quotations. The day that it seemed to be taking a long time putting the patient to sleep, he would state, "Anesthesia thinks the patient came to the operating room for anesthesia." Lastly, I remember the day we were doing a procedure and the patient began to move. Dr. Steiger calmly stated, "The only person awake in the operating room is the patient." In short, any day you were working with Dr. Steiger was a good day. You might have gotten into a lot of trouble, but he could always get out of trouble. For Dr. Steiger, the one thing that counted was the patient.



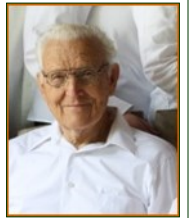
Dr. Anna Ledgerwood



MEMORIES OF DR. ZWI STEIGER

Dr. Arthur Weaver

When I returned from mission service in Pakistan in the summer of 1966 and joined the surgical faculty, Dr. Walt (the new acting chairman of the department) assigned Zwi and myself to the B5 surgical service. We both did general surgery, and he additionally staffed any thoracic cases, and I did those with head and neck malignancies. He had innumerable stories that were shared with all those rounding with us. He was a great teacher, much appreciated by residents and students. He was always in good humor but knew how to embarrass those showing any lack of attention or neglect in patient diagnosis or care. In short, he was a premier surgeon, always calm and unflappable in the OR. I was fortunate to spend several years working with Zwi Steiger.

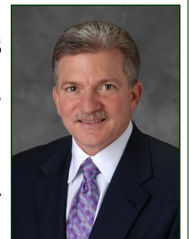


Dr. Arthur Weaver

Dr. Harold Gallick (WSU/GS 1982/87)

I enjoyed reading the interview with Dr. Steiger. I had heard pieces of the stories and rumors about his life but never in such detail as in the interview being shared with us. The more I learn, the more I respect him.

He was a tremendous mentor to all of us in both the GS and CVT programs and a huge influence on my career, second only to L&L. I miss him and often quote his aphorisms to this day. We were fortunate to know and learn from him. The attendance of friends and acquaintances at his funeral was testament to his impact beyond the Department of Surgery. A truly great surgeon and greater man!



Dr. Harold Gallick

Below is a picture from the last case we did together in 1990. He asked me why I wanted his picture, then in his own unique way answered his own question: "In case you can't find me, you'll hang my picture instead."

Thanks again for sharing this interview.



Dr. Harold Gallick (left) operating his last case as a resident with Dr. Zwi Steiger (right)





The Virus and Surgical Grand Rounds

Subsequent to the shutdown, all of the teaching rounds, including the Wednesday morning Grand Rounds, have been conducted in a “virtual” manner. The first Grand Rounds to be conducted on site was Wednesday, June 10, 2020, with appropriate social distancing. The members in attendance wore the surgical masks, and there was only one seat per six foot long table in the auditorium.

The preparation for the Grand Rounds included setting up the computer system, not only for the presenters, but also for those who would be attending the conference from remote areas. This pre-Grand Rounds function was performed by Dr. Michael White (WSU/GS 1990/97), Dr. Nina Delavari (WSUGS 2021), and Dr. David Edelman (WSU/GS 2002/09), our Surgical Resident Program Director. Following their setup, the Grand Rounds began as each of the senior residents summarized their experiences during their training.

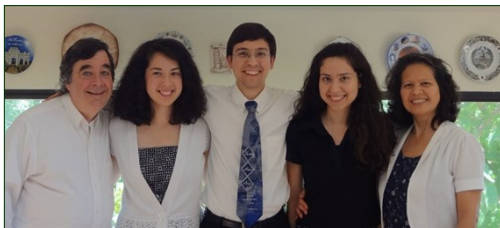


(Left to right) Dr. Michael White, Dr. Nina Delavari, and Dr. David Edelman preparing the computer system for Grand Rounds

Dr. Edelman, our surgical program director, introduced each of the residents. The first resident to be introduced was Dr. Jonathan Martin (WSUGS 2020). Dr. Martin presented some humorous anecdotes regarding the years of residency training. During his first year, he learned that when you spill blood on your clothes, the treatment is to use hydrogen peroxide (H_2O_2) in order to get the bloodstains out. He also emphasized the importance of having a life outside of the hospital in order to prevent resident burnout. He showed pictures of his bride and their offspring. He described different types of operations where you can have complications, including patients who present with hollow viscus injuries. He emphasized that he was taught to never “sell” an operation to a patient, particularly as it relates to carotid artery occlusive disease, since the patient may end up with a postoperative stroke. Dr. Martin highlighted how, when one does an emergency department thoracotomy; there is often no aortic pulsation, so that cross-clamping the aorta may result in a cross-clamping of the esophagus. He emphasized that one of the major principles he learned during his training is that little things are truly important.



Dr. Jonathan Martin

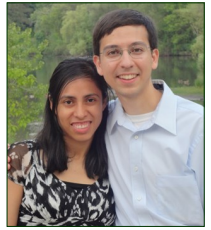


From left to right: My father, John; my youngest sister, Jeandra; myself; my middle sister, Jaime; my mother, Phebe



The Virus and Surgical Grand Rounds

Following the conclusion of his residency, Dr. Martin and his wife’s long-term goal is still to help with international mission work. They plan on staying in Detroit for the near future. His wife graduated this June as well after a PICU Fellowship and will be working as a PICU attending at Children’s Hospital here in Detroit. Dr. Martin is currently looking for general surgery positions within a 100 mile radius of Detroit.



Dr. Jonathan Martin and his bride, Andy, at Cranbrook

Dr. Edelman then introduced Dr. Mia Miller (WSUGS 2020) who presented a variety of cases during her years of training. Her presentation was also humorous in that when she was asked to clear a C-spine in an injured patient, she called upon the chief resident for guidance since the patient was complaining of pain. The chief resident initially criticized her for not being able to clear a C-spine but then recognized that the patient had to have imaging studies because of the tenderness along the back of the neck.



Dr. Mia Miller



Nicole Kasten (mother), Mia Miller (me), Natasha Miller (sister), Norman Miller (father)

Dr. Miller described some of the technical difficulties encountered in performing the Whipple operation and how a successful Whipple operation requires a combination of technical skill and patience. Dr. Miller will be moving to Minneapolis, Minnesota, for a Vascular Surgery Fellowship at the University of Minnesota.

Dr. Edelman than introduced Dr. Jessica Pochedly (WSUGS 2020), who summarized her five years of training. She described the different levels of responsibility that one encounters with each year of greater maturity. She highlighted some of the experiences when working in the intensive care unit as a third-year resident, where each orifice of every patient has some type of



Dr. Jessica Pochedly



Dr. Jessica Pochedly with her husband, Mr. Joseph Pochedly, and their daughters, Lara and Amelia

tube in it. Dr. Pochedly described the increasing technical challenges as one progresses through the residency and described an interesting patient who had a duodenal mass, which ended up being a foreign body, which was attached to the duodenal wall. This was actually a bone shard. She described the laparoscopic approach followed by the robotic removal of the bone shard, pointing out

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The Virus and Surgical Grand Rounds

that the operation took some time and could have been much shortened by doing an open procedure. She, likewise, emphasized the importance of camaraderie and having a life outside of the hospital. Following the conclusion of her residency in June, Dr. Pochedly will be joining Bronson Digestive Endocrine and General Surgery over in Kalamazoo later this year.

Dr. Edelman then presented the “Award for Academic Excellence.” This is determined by the resident who scores the highest on the in-training examination. This year, the award went to Dr. Jose Wilson Mesquite Neto (WSUGS 2023), affectionately known as Dr. Wilson.



Dr. Jose Wilson

Dr. Edelman next introduced Dr. Rohan Policherla (WSUGS 2020). Dr. Policherla summarized some of the cases that he saw during his five years. He emphasized, humorously, about one of the cases that he was consulted to see; a 23-year-old patient with a “broken penis.” He also emphasized the importance of camaraderie and the importance of having a life outside of the hospital. It was during his residency years that he met his future wife. He described how the later years allow for the resident to be exposed to more difficult and challenging cases. He also emphasized the fact that he had an excellent year of training in critical care surgery under the leadership of Dr. Phillip Barie at Cornell University.



Dr. Rohan Policherla



From left to right: Dr. Policherla’s father, Dr. Haranath Policherla, Dr. Policherla and his bride, - Dr. Hannah Ferenchick, his mother, Dr. Bhagyalakshmi Policherla, and his brother, Mr. Pavan Policherla

Dr. Policherla, like the other senior residents, thanked the many faculty members for contributing to his education. Following the conclusion of his residency, Dr. Policherla and his bride, Hannah, will be moving to Miami. He will continue training in plastic and reconstructive surgery at the University of Miami/Jackson Memorial Hospital. His wife, Hannah, will be joining the faculty at the same institution as a cardiothoracic intensivist.



Dr. Steve Kim

Dr. Edelman then presented the “Resident Teaching Award” to Dr. Miguel Tobon (WSUGS 2020). This award is given to the resident who is identified as being the best teacher. He then introduced Dr. Steve Kim, who received the “Theodore McGraw Award” for being the best faculty teacher of the residents.



Dr. Miguel Tobon

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The Virus and Surgical Grand Rounds

Next, Dr. Edelman introduced Dr. Anastasia Stevens-Chase (WSUGS 2020), who presented her experiences during her five years of training. She described the different levels of technical difficulties that one encounters as one progresses through the residency training. She also emphasized out-of-hospital activities, and she became a runner, or jogger, during her later years of residency training and became involved in the different races in the Detroit area, including the 10K, which goes between Detroit and Windsor. She also thanked the many faculty members who were important in her training. Following the conclusion of her residency, Dr. Stevens-Chase will be doing the Minimally Invasive and Bariatric Surgery Fellowship at Harper Hospital, but for the summer, she will be spending time out on the water with her family and friends.



Dr. Anastasia Steven-Chase and her husband, Mr. Scott Chase



Dr. Anastasia Stevens-Chase

Dr. Larry Diebel (WSU/GS 1980/86) then presented each of the chief residents a medallion with the inscription “The impediment to action advances action. What stands in the way becomes the way,” quoted by Marcus Aurelius in 176 AD, who believed the obstacles to your goal can become the way forward to achieving your goal. Along with the medallion he read the following poem.



Dr. Larry Diebel



“Fire and Rain” by James Taylor....revisited DMC Style

*It seemed like yesterday morning and now you are gone.
I thought I would remember you with this song.
I wrote you a letter but now too it is gone,
Lost in my office, where too many things no longer belong.*

*There was a fire and then there was rain
In the DRH OR that seemed quite insane.
We thought the turmoil was over, then COVID began.
Hoping that we can be one in the OR once again.*



The Virus and Surgical Grand Rounds

*Hope you can look fondly on Detroit once again.
Your memories of your time here will never end.
My heart aches for the times ahead.
Could there be better days instead?*

*'Cause we've seen fire and we've seen rain
In the DRH OR that seemed quite insane.
We thought the turmoil was over, then COVID began.
Hoping for the day we could be in the OR together again.*

*Keep the hope up, 'til we meet in the OR again.
If I could tell you anything at your moment this day,
It would be to keep your heart in the future and your head in your day.
There will be obstacles in the way.
Don't give up..go forward..to you this is what I would say.*

*We've seen fire and we've seen rain
In the DRH OR that seemed quite insane.
Our road was blocked and then life started 'til COVID began.
Keep the hope up, 'til we meet in the OR again.*

By Larry Diebel

After this, Dr. Edelman then introduced Dr. Miguel Tobon (WSUGS 2020). Dr. Tobon began with his experiences in Detroit when he had his interview. He de-



Dr. Miguel Tobon



Left to right: Dr. Tobon's brother, Mr. Andres Tobon, his mother, Mrs. Maria Christina Tobon, his father, Mr. Jorge Tobon, his sister, Ms. Isabel Tobon, and Dr. Miguel Tobon

scribed how one of the residents with whom he met, Dr. Gary Martinowski (WSUGS 2018), acted as "an associate professor" with his wisdom and advice for the future residents. He described one of his first-year experiences as a consult, where he was requested to remove handcuffs on a prisoner because the key had been lost. This led to some exciting discussions, and

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The Virus and Surgical Grand Rounds

Dr. Mark Diebel (WSU/GS 2012/17) was very helpful in finding a solution. He then talked about another person who kept asking about “Fluffy,” and that turned out to be the patient’s cat. Fortunately, Fluffy did quite well. He discussed the humor as to what type of shoes one should wear when you are working in the emergency department where there is the potential for contamination by blood and other human materials. He finally settled on a slip-on rubber shoe, which is easily washable. He described the different types of abscesses that a resident may be called to take care of, beginning with a very tiny superficial abscess and ending with a deep abscess involving necrotic tissue for the skin and underlying tissues. He humorously presented a patient who he was treating for hyperkalemia (6.7 mEq/L), when in reality the electrolyte abnormality was really hypocalcemia with a level of 6.7 mEq/L. This taught him the importance of checking the chart and not just looking at the report given verbally. He described a very challenging case of a patient who was transferred over from Windsor with blunt rupture of the mesentery requiring multiple operations in order to try to preserve some degree of gut function. Miguel described the frustrations experienced by Dr. Martin Tuma, one of our senior vascular surgeons, who related to Dr. Tobon that he was getting decubiti on his buttock because of the long times that he has to sit in the surgical lounge between cases. Dr. Tobon also emphasized the importance of camaraderie and presented many humorous pictures of him and his colleagues. Following the conclusion of his residency, Dr. Tobon will be going for a two-year fellowship at Lahey Clinic/Tufts University in Burlington, Massachusetts, for hepatopancreaticobiliary and liver transplant surgery.

Dr. Edelman then announced the “Surgical Intern of the Year Award,” which was awarded to Dr. Paige Aiello (WSUGS 2024).



Dr. Paige Aiello

The constrictions related to the current virus pandemic stimulated some of our senior residents to avoid the presentation because of concerns for social distancing.

Dr. Amy Nielsen will be going into private practice at the OSF HealthCare, St. Francis Hospital and Medical Group in Escanaba, Michigan.



Dr. Amy Nielsen



The Virus and Surgical Grand Rounds

Dr. Lester Laddaran (WSUGS 2020) will be starting a Critical Care Fellowship at the Detroit Medical Center this fall.



Dr. Lester Laddaran



Dr. Michael Perry, his wife, Lacy, their son Noah, and their daughter, Eleanora

Dr. Michael Perry (WSUGS 2020) will be starting a Vascular Surgery Fellowship at the Detroit Medical Center this month.

Dr. Jayanth Manoharan (WSUGS 2020) will be joining a private practice in general surgery in Tucson, Arizona. The group he will be joining is called Saguaro Surgical. He and his family had planned to visit India for the summer, but those plans have fallen through due to COVID. They, instead, are going to spend a month here in Michigan and then a month in Arizona before he starts his new position. He is very grateful for his family whose support, he feels, helped him through his surgical residency.



Dr. Jayanth Manoharan, his wife, Janavi Tara Rao, their 3 year old daughter, Anya Meera, and their infant daughter, Alana Maya



“Senior skip day” at the Detroit Yacht Club – left to right: Lester Laddaran, Annie Stevens-Chase, Miguel Tobon, Luke (Michael) Perry, Jay Manoharan, Rohan Policherla, Mia Miller, Jessica Pochedly, and Amy Nielsen



THE INCOMING 2020 RESIDENTS BEGIN

This residency year, we have 18 PGY-1 residents in the Detroit Medical Center/Wayne State University Program in Surgery who joined us in July. When you see them in the hall of the Detroit Medical Center, join us in welcoming them to the family. The New Faces for 2020-2021 are listed below:



Dr. Ryan Berry, Michigan State University College of Human Medicine



Dr. Justin Bria, Wayne State University School of Medicine



Dr. Brianna Chu, Campbell University School of Osteopathic Medicine



Dr. Amanda Dooley, Wayne State University School of Medicine



Dr. Mohamed Fakih, Wayne State University School of Medicine



Dr. Lindsay Howard, Medical College of Wisconsin



Dr. Benjamin James, Wayne State University School of Medicine



Dr. Alex Lynch, Midwestern University Chicago College of Osteopathic Medicine



Dr. Erica Maduakolam, Southern Illinois School of Medicine



Dr. Rachelle Moore, Wayne State University School of Medicine



Dr. Matthew O'Brien, Midwestern University Chicago College of Osteopathic Medicine



THE INCOMING 2020 RESIDENTS BEGIN



Dr. Ucheze Ononuju, Wayne State University School of Medicine



Dr. Sarah Ottum, Wayne State University School of Medicine



Dr. Monica Ramaswamy, Ross University School of Medicine



Dr. Madyson Riddell, Midwestern University Chicago College of Osteopathic Medicine



Dr. Ryan Rosen, Michigan State University College of Osteopathic Medicine



Dr. Kyle Strouse, Wayne State University School of Medicine



Dr. Joseph Track, American University of the Caribbean

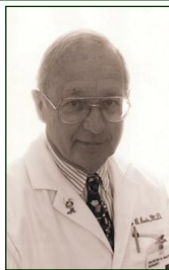




Addendum: Peter B. Baute, MD (1934-2020)

The WSU Alumni Newsletter had a very nice obituary on Dr. Peter Baute (WSUGS 1969) with some fascinating information the editor missed. The following is that article.

Dr. Peter B. Baute, of Block Island and Wakefield, RI, died at home on April 4, 2020, at the age of 86. He was the beloved husband of Cynthia (Cindy) Baute.



Dr. Peter Baute

Peter was born in Providence, RI on July 27, 1934, to Helen Bruckner Baute and Joseph A. Baute, MD. He was a graduate of Lockwood High School and the University of New Hampshire. After receiving his medical degree from the Hahnemann School of Medicine in Philadelphia in 1960, he completed a fellowship in tropical medicine at Gorgas Memorial Laboratory in Panama. He then served as a Lieutenant in the United States Navy Medical Corps from 1961-1964, spending two years in South Vietnam and one at the Newport, RI Naval Hospital. Peter pursued his residency in general surgery at the Wayne State University Hospitals in Detroit, serving as Chief Resident from 1968-1969. He was Board Certified by the American Board of Surgery and a Fellow of the American College of Surgeons.

Peter joined the staff of Kent County Memorial Hospital in 1968, where he was Assistant Chief of Surgery from 1979-1981 and Chief of Surgery from 1981-1984. With Dr.'s Arthur Hardy and Richard Dyer, he formed Toll Gate Surgical Associates, Inc. Their practice expanded to include Dr.'s Daniel Reardon, David Luz, Candace Dyer, and John Isaac. Peter was the managing partner of Toll Gate Associates, a medi-

cal office building partnership.

Throughout his career, Peter engaged extensively in research, teaching, and professional leadership. He published journal articles on breast cancer research in Surgery, Gynecology & Obstetrics, and Radiology, and delivered numerous presentations on cancer care. He twice directed the American College of Surgeons (ACS) Courses on Cancer Management and served as State Chairman for the ACS Commission on Cancer. He chaired the Kent County Hospital Cancer Committee and developed a model community cancer program, which received accreditation by the ACS Commission on Cancer. He was President of the Providence Surgical Society from 1985-1986, served on the Executive Committee of the New England Surgical Society, and was a Cancer Program Surveyor for the Commission on Cancer. Peter also volunteered on surgical teams in Honduras and Nepal. In retirement, he was a volunteer physician at the Rhode Island Free Clinic for eight years.

Peter determined that he would stop doing surgery when he turned 65, and he did, but he could not give up the practice of medicine. Instead, in 2001, he accepted a position as Co-Medical Director at Block Island Health Services. For many years, Peter had covered for island doctors on leave. He and Cindy had fallen in love with Block Island and built a home on

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Addendum: Peter B. Baute, MD (1934-2020), continued...

the island. He confessed to a friend that retooling from surgery to primary care was a major challenge in late career, but he loved getting to know each patient, their family members, even their pets, a few of which were also seen “professionally” in emergencies. After retiring in 2006, Peter completed URI’s Master Gardening Program and volunteered at the Roget Williams Botanical Gardens. He was elected to the New Shoreham Town Council in 2006 and served for three terms, where he successfully championed the wind farm and expanded solar power on the island. His passionate efforts to create bike paths on the island did not come to fruition, but he retained hope in that quest.

In addition to his wife, Cindy, Peter is survived by siblings, Joseph Baute and his wife, Stephanie, Barbara Dowd MD, and Robert Baute MD and his wife, Barbara J. Baute. He was predeceased by brother-in-law, Thomas Dowd MD, and sister-in-law, Cynthia F.

Baute. Peter is also survived by four children, Linda Crosette, Peter Baute Jr, Barbara Baute, and Michael Baute, six grandchildren, several nieces and nephews, and by Cindy’s daughters, Kimberly Cardarelli and Jennifer Kosiol and grandson, Colby Cardarelli.

Peter will be remembered for his sharp powers of observation and analysis, his quiet wit, his dedication to public service, and his devotion to the promotion of health care in a wide range of settings. In 2018, Block Island Health Services established an endowment for the Peter Baute Award to recognize individuals who demonstrate the traits that are Peter’s legacy: exceptional interpersonal skills and compassion coupled with a higher level of acumen in delivering healthcare on Block Island and also to support health education and research advancing knowledge and awareness of wellness on Block Island.

For guest book and condolences, visit averystorti-



Dr. Mark Horness

Update

In the June Monthly Email Report Dr. Mark Horness (WSUGS 1978) shared with us his experience with the Midland Floods. Inserted is a picture of Dr. Horness with his wife, Sarah, and their two daughters.





Dr. Shiva Maralani and Dr. Mark A. Herman

Dr. Mark A. Herman (WSU/GS 1994/2001) met his future wife, Dr. Shiva Maralani during one of the parties that Dr. Ledgerwood has for the residents and students finishing their rotations as a way of relaxing and getting to know one another after months of working at Detroit Receiving Hospital and the Harper University Hospital. The following is an article on the new appointment for Dr. Maralani.

After working at Ascension St. John Hospital for 16 years, Dr. Shiva Maralani became the first woman to be chief of urology, joining other recently appointed women to high positions, including the chief of transplant, head of breast cancer, and head of gynecology.

The Grosse Pointe Farms resident fell into her love for urology nearly by accident during her time in medical school. She had been intrigued by general surgery, but found all such electives booked after procrastinating until the last second to sign up. "Nobody took urology," she remembered. "So my adviser said, 'Okay, well you've got to do three rotations.'"

She met her husband, Mark Herman - currently a general surgeon at Troy Beaumont but at the time also a resident - a week after moving to Detroit; the two married a couple months after she finished her residency. "Here I am now, first woman in (The Wayne State Urology) residency, first woman to graduate the residency (and) first woman to come into the east side practicing," she estimated there were probably 200 women urologists in the country. Today, only 8% of urologists are women.

"It's kind of funny because even back then we had some issues with getting women into urology programs, so I didn't send a picture," Maralani said. "It wasn't required. It was optional, so I didn't send a picture when I applied for residency. Nobody could tell whether I was male or female, so I just showed up on my interviews and it worked out OK." Now, 26 year later, urology has turned out to be the best of both worlds. "You're a surgeon, but you also see some of



Dr. Shiva Maralani prepares to see a patient with COVID-19



Dr. Shiva Maralani and Dr. Mark A. Herman, cont...

your patients in long-term follow-up, so you really have a chance to get to know some of your patients long term and take care of their children or their parents," she explained, "and then if you've been around long enough, you end up taking care of maybe multiple generations of a family."

Having been chief of urology at Ascension St. John four years, she considers every day a good day when you like what you do. "I have to say, I love working for her," said Stacie Borowicz, executive medical assistant, "not only as my boss and someone I respect, but also someone that has become my friend. She is one of a kind, and I'm forever grateful for her." Through her additional position as a clinical instructor for the Wayne State Urology Program, Maralani also has worked to make women in urology more visible. She has been boarded in urology, as well as female pelvic medicine and reconstructive surgery, and was involved in training the robotics team at Ascension St. John. "I always tell my kids you have to always remain curious, because curiosity is what makes you improve," she said. "The way we practice now might not be the way we practiced 20 years ago or the way we're going to practice in 20 years. When I was a resident, there was no robotic surgery. That's been around since I was a resident, and if we weren't curious, I wouldn't have been out there learning it ten years ago, so I think you have to remain curious so that you remain updated with your skills." However, the chief of urology looks past accolades when considering her greatest accomplishments in the medical field. "When other physicians send you their family members....then you feel like you have gained their trust," she noted.



Maralani along with her husband, Mark, and daughters, Ariana and Sophia, during a 2019 trip to China.

Outside of her career, Maralani loves to ski and garden and is the mother of two high school students, Ariana and Sophia. "For me, being a physician is part of who I am," she said. "Being a mom and a wife is a very major part of it as well."



DOWN MEMORY LANE

Anna M. Ledgerwood, MD

Chief resident on nights—Dr. Ingida Asfaw.

7/01/71—Staff—Dr. Gordon Shannon

1. 26 year old—shotgun wound to the left chest, left upper quadrant, abdomen with 10cm defect, lower left anterior lateral chest wall. Injuries included laceration left ventricle, left diaphragm, left lower lobe lung, spleen, left lobe liver, distal 1/4th pancreas, left kidney, transverse, splenic flexure and descending and sigmoid colon, entire body and antrum of the stomach, and fracture ribs 6-12. Operation included suture of the heart, wedge resection lung, repair diaphragm, distal pancreatectomy, splenectomy, left nephrectomy, and 90% gastrectomy with gastric jejunostomy, left partial hepatectomy, resection transverse splenic flexure and 75% of the sigmoid colon with mucous fistula of the distal sigmoid and right colostomy, resection rib #8, a tracheostomy, and a left chest tube. "This case was a hell of a starter. First case, first night."



Dr. Anna Ledgerwood

7/02/71—Staff—Dr. J.C. Rosenberg

1. 55 year old, stab wound right neck with laceration right carotid artery, internal jugular vein, and vagus nerve. Operation included ligation of the internal carotid artery and jugular vein with end-to-end anastomosis attempted twice, but because of marked narrowing and fragmentation from atherosclerosis, the artery kept tearing.
2. 21 year old, gunshot wound left neck with laceration carotid artery and spinal cord injury with quadriplegia. Carotid repair with end-to-end anastomosis.
3. 24 year old, stab wound left upper quadrant with 3cm laceration left lobe of the liver, which was bleeding. Repaired with suture.

Continued page 32



DOWN MEMORY LANE, cont...

Anna M. Ledgerwood, MD

7/03/71—Staff—Dr. T. Grifka

Dr. Sankaran covering for Dr. Asfaw on Saturday.

1. GSW abdomen with laceration left lobe of the liver, hepatic vein and inferior vena cava. Right hepatectomy with repair of holes in IVC and suturing of bleeding liver wounds. Patient expired in recovery room.
2. GSW chest and abdomen with laceration of the diaphragm, stomach, and transverse colon. Operation was repair of stomach and exteriorization of lacerated colon.

7/04/71—Staff—Dr. Carrasquilla

1. 18 year old, shotgun wound left distal arm, proximal forearm with laceration radial and ulnar arteries, radial and ulnar nerve, comminuted fracture of the proximal radius, with severe devitalized muscle of anterior and posterior compartments. Operation was amputation at the distal humerus.
2. 51 year old with GSW left distal thigh with laceration distal superficial femoral artery and femoral vein. Operation was resection and end-to-end anastomosis of artery and vein.

7/05/71—Staff—Dr. Birks

1. 22 year old with laceration right forearm with median nerve and flexor digitorum superficialis tendon to the second finger as well as transection profunda tendon to the third finger and flexor digitorum superficialis to the second finger. Operation was primary repair of nerve and tendons.
2. 24 year with gunshot wound to abdomen with injury to hollow viscus and liver. There was a large tangential laceration to the anterior surface of the stomach, laceration and contusion of the anterior surface of the inferior head of the pancreas, a

Continue page 33



DOWN MEMORY LANE, cont...

Anna M. Ledgerwood, MD

through-and-through laceration of the liver and gallbladder. Operation was an-
trectomy with gastroduodenostomy, suture of bleeding liver, cholecystectomy, su-
ture laceration of head of the pancreas and t-tube in common duct for liver study.

3. 20 year old with gunshot wound left flank with laceration sigmoid colon. Operation was closure of laceration and exteriorization of the repair.

7/06/71—Staff—Dr. Allaben

1. 21 year old with gunshot wound chest and abdomen with laceration right lobe of the liver 5cm, right kidney, and middle 1/3rd of the right axillary artery. Operation was suture liver, repair of axillary artery with end-to-end anastomosis with t-tube in common duct for liver study.
2. 47 year old acute appendicitis, preoperative diagnosis with the findings of acquired right diaphragmatic hernia with strangulated gangrenous mid-transverse colon. Operation was resection of the colon with end colostomy and mucous fistula.
3. 55 year old with stab wound right flank with laceration to the liver 2cm and right diaphragm. Operation was repair of diaphragm.
4. Previous pedestrian struck by vehicle that had a ruptured bladder, fracture tibia, fibula, and right femur, had respiratory insufficiency and underwent tracheostomy.

7/07/71—Staff—Dr. Joseph Bassett

1. 13 year old with GSW abdomen with multiple lacerations to the ileum and sigmoid colon. Operation was resection of the small bowel with anastomosis, closure of laceration to the sigmoid colon with proximal colostomy.

Continued page 34



DOWN MEMORY LANE, cont...

Anna M. Ledgerwood, MD

2. 24 year old with gunshot wound abdomen with tangential lacerations proximal ascending colon and a retroperitoneal hematoma. Operation was closure of laceration and exteriorization.
3. 21 year old with GSW right distal thigh with a laceration of muscular branch of the anterior tibial artery, posterior compartment hematoma and fractured fibula. Operation was exploration of the popliteal artery and fasciotomy.
4. GSW left hand. Operation was debridement.
5. 19 year old with laceration right distal forearm with transection radial artery, extensor carpi radialis, policis longus and brevis, brachial radialis, flexor carpi radialis, flexor digitorum sublimis to second and third fingers and palmeris longus. Operation was ligation of the artery and primary repair of the tendons.



Chief Resident, Dr. Anna Ledgerwood (standing second from right) and Dr. Ingida Asfaw (standing first on the right) and the graduating class of 1972 with Dr. Alexander Walt (sitting second from right)



WSU MONTHLY CONFERENCES

2020

Death & Complications Conference
Every Wednesday from 7-8



Didactic Lectures — 8 am
Kresge Auditorium

GRAND ROUNDS WEBINAR

The WSU Alumni is invited to be part of our Grand Rounds Webinar each month. The WebEx application that is used for Grand Rounds allows 100 users to sign in at a time.

This is a great way to stay connected with the WSU family and friends and, perhaps, eventually be part of the Grand Rounds by presenting remotely.

Details on connecting are as follows:

1. **WebEx app**—Recommended

Download the WebEx app ([iOS](#), [Android](#), [MacOS](#), or [PC](#)) and join meeting number **626 407 145**. Follow this link once you have the app: <https://davidedelman.my.webex.com/meet/dedelman>

2. **Phone in**

Dial [+1 \(415\) 655-0001](tel:+14156550001) and enter access code **126 753 2549**.

For more information or if you have any questions, please contact Dr. David Edelman at dedelman@med.wayne.edu.



WSU MONTLY CONFERENCES

2020

Death & Complications Conference
Every Wednesday from 7-10 am



Didactic Lectures — 7 am
Grand Rounds — 8 am
SCORE — 9 am

*****ALL CONFERENCES DONE VIA WEBEX, 7:00 A.M.*****

(Wednesday Conferences have been extended to 10:00am to allow for a SCORE dedicated experience as requested overwhelmingly by our residents for further education)

Wednesday, July 8

Death & Complications Conference

SCORE

Samantha Tarras, MD

Wayne State University Michael & Marian Ilitch Department of Surgery

Wednesday, July 15

Death & Complications Conference

SCORE—Abdominal Wall Reconstruction

Roozbeh Mansour, MD

Wayne State University Michael & Marian Ilitch Department of Surgery

Wednesday, July 22

Death & Complications Conference

SCORE

Alfred Baylor, MD

Wayne State University Michael & Marian Ilitch Department of Surgery

Wednesday, July 29

Death & Complications Conference

SCORE—Thoracic Trauma and Rib Fixation

Andrew Isaacson, MD

Wayne State University Michael & Marian Ilitch Department of Surgery



WAYNE STATE
UNIVERSITY
School of Medicine

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wayne state surgical society

2020

Dear Wayne State Surgical Alumni and Friends,

The WSSS continues to thrive, offering support to our members and the current general surgery residents at WSU. As the new president of the Wayne State Surgical Society (WSSS), I would like to greet you in the new year and report on the Society's activities in 2019. Our annual meeting was held during the American College of Surgeons meeting in San Francisco, California at the Moscone Center. A cocktail reception was hosted by Chairman Don Weaver followed by the WSSS banquet and meeting. The banquet is free to all Society members, with current residents attending as our guests.

The Society also sponsors the annual WSSS Lectureship named in memory of Dr. Walt. The evening before society members have an opportunity to meet and question the WSSS Lecturer on the topics of the day. The discussion is typically quite interesting and wide ranging. The meal is wonderful. Last year's speaker was Dr. Roxie Mae Albrecht from the University of Oklahoma Health Science Center and the OU Medical Center in Oklahoma City, OK. She is a Professor and the Vice Chair of Quality, and the Division Chief of General Surgery, Trauma and Surgical Critical care in the Department of Surgery at OU Health Science Center. Dr. Albrecht is also the Medical Director of Trauma and Surgical Critical Care at the OU Medical Center, the only ACS verified Level I Trauma Center in Oklahoma. Dr. Albrecht is from the University of Michigan and an expert in Acute Care Surgery and Critical Care as well as a board member of the ABS and a Governor of the ACS. This year's speaker will be Dr. Joseph C. Maroon, clinical professor and vice chairman of the Department of Neurological Surgery and Heindl Scholar in Neuroscience at the University of Pittsburgh Medical Center. In addition to being a renowned neurosurgeon, he is a sports medicine expert, health and nutrition expert and Ironman triathlete. Dr. Maroon is regarded as a premiere specialist in the surgical treatment of injuries and diseases of the brain and spine, specializing in minimally invasive procedures. Consistently listed in America's Best Doctors for the past 20 years, he has an international referral base, including numerous professional athletes and celebrities. This year's annual WSSS Lectureship is scheduled for Wednesday, November 4, at the Kresge Auditorium in the Harper Hospital. Because of the current pandemic, this has to be looked upon as a tentative schedule pending the status of social mingling in November of this year.

Your WSSS membership also covers your admission to the annual Detroit Trauma Symposium (DTS). The Symposium, put together by Larry Diebel, is first rate and well worth attending. This year, the DTS is scheduled to occur on Thursday and Friday, November 5/6 at the MGM Casino in Downtown Detroit. The DTS is the oldest trauma symposium in the country and has been very successful under the leadership of Dr. Diebel, who typically attracts over 700 people to this very excellent event. The current planning for the 2020 DTS is in limbo because of the social restrictions of the pandemic and the DTS may occur, this year, in a virtual manner. This will be determined by the health guidelines later this year.

Each year, the WSSS sponsors the WSSS Alumni meeting on the Tuesday in October when the American College of Surgeons meeting takes place in Chicago. The pandemic appears to be affecting those plans in that the American College of Surgeons meeting will probably occur as a virtual meeting this year so that the annual meeting of the WSSS on the Tuesday of the ACS meeting will likely not occur. This is always an exciting meeting for our senior residents whose expenses are totally covered for attendance at the ACS annual meeting and the annual reunion of the WSSS.

The WSSS currently has 126 members including 65 Charter Life members who have or will donate \$10,000 to the Society, tax deductible! If you are not receiving the newsletter please let us know your email so that you can be included to receive this very fun and informative newsletter for all the alumni of the department of surgery. It gives me great pleasure to tell you that we have over \$189,932.70 in the bank and are in the process of investing a portion to ensure the Society will exist in perpetuity. Consider becoming a Life Member, invest in the future, and one of these outstanding residents may just become your partner!

Enclosed with this letter is a ballot for new officers and board members. Also included is the form for your annual dues. I always thought that the standards and skills learned during my residency formed the foundation for my professional career. The society offers the opportunity to continue a relationship with the program, both by continued fellowship with peers and mentors, and the support to those who will be replacing us when we retire. I think the WSSS is worthy of your support.

Serving as our Society president will be an honor. The WSU Michael and Marian Ilitch Department of Surgery and the WSSS is responsible for a large part of our success as surgeons. It is an organization that brings old friends together with mentors and future partners. It is worthy of our participation and support.

Sincerely yours.

Scott Davidson, MD, FACS
President, WSSS



Wayne State Surgical Society
2020 Dues Notice

Name: _____

Address: _____

City/State/Zip: Service Description

Amount

2019 Dues Payment _____ \$200 _____

My contribution for "An Operation A Year for WSU" _____

*Charter Life Member _____ \$1000 _____

Total Paid _____

Payment by Credit Card

Include your credit card information below and mail it or fax it to 313-993-7729.

Credit Card Number: _____

Type: MasterCard Visa Expiration Date: (MM/YY) _____ Code _____

Name as it appears on card: _____

Signature: _____

Billing address of card (if different from above):

Street Address _____

City _____ State _____ Zip Code _____

*I want to commit to becoming a charter life member with payment of \$1000 per year for the next ten (10) years.

Send check made payable to **Wayne State Surgical Society** to:

Charles Lucas, MD
Department of Surgery
Detroit Receiving Hospital, Room 2V
4201 St. Antoine Street
Detroit, Michigan 48201



Please Update Your Information

The WSUSOM Department of Surgery wants to stay in touch. Please email Charles Lucas at clucas@med.wayne.edu to update your contact information.



Missing Emails

Over the years the WSU Department of Surgery has lost touch with many of its alumni. If you know the email, address, or phone number of the following WSU Department of Surgery Residency Program graduates please email us at clucas@med.wayne.edu with their information so that we can get them on the distribution list for the WSU Department of Surgery Alumni Monthly Email Report.

Mohammad Ali (1973)

David B. Allen (1992)

Tayful R. Ayalp (1979)

Juan C. Calzetta (1982)

Kuan-Cheng Chen (1976)

Elizabeth Colaiuta (2001)

Fernando I. Colon (1991)

David Davis (1984)

Teoman Demir (1996)

Judy A. Emanuele (1997)

Lawrence J. Goldstein (1993)

David M. Gordon (1993)

Raghuram Gorti (2002)

Karin Haji (1973)

Morteza Hariri (1970)

Harrison, Vincent L. (2009)

Abdul A. Hassan (1971)

Rose L. Jumah (2006)

R. Kambhampati (2003)

Aftab Khan (1973)

Samuel D. Lyons (1988)

Dean R. Marson (1997)

Syed A. Mehmood (2007)

Toby Meltzer (1987)

Roberto Mendez (1997)

Mark D. Morasch (1998)

Daniel J. Olson (1993)

David Packer (1998)

Y. Park (1972)

Bhavik G. Patel (2004)

Ami Raafat (1998)

Kevin Radecki (2001)

Sudarshan R. Reddy (1984)

Renato G. Ruggiero (1994)

Parvid Sadjadi (1971)

Samson P. Samuel (1996)

Knavery D. Scaff (2003)

Steven C. Schueller (1974)

Anand G. Shah (2005)

Anil Shetty (2008)

Chanderdeep Singh (2002)

D. Sukumaran (1972)

David G. Tse (1997)

Christopher N. Vashi (2007)

Larry A. Wolk (1984)

Peter Y. Wong (2002)

Shane Yamane (2005)

Chungie Yang (2005)

Hossein A. Yazdy (1970)

Lawrence S. Zachary (1985)



Wayne State Surgical Society

The Wayne State Surgical Society (WSSS) was established during the tenure of Dr. Alexander Walt as the Chairman of the Department of Surgery. WSSS was designed to create closer contact between the current faculty and residents with the former resident members in order to create a living family of all of the WSU Department of Surgery. The WSSS also supports department activities. Charter/Life Membership in the WSSS is attained by a donation of \$1,000 per year for ten years or \$10,000 prior to ten years. Annual membership is attained by a donation of \$200 per year. WSSS supports a visiting lecturer each fall and co-sponsors the annual reception of the department at the annual meeting of the American College of Surgeons. Dr. Jeffrey Johnson (WSUGS 1984) has passed the baton of presidency to Dr. Scott Davidson (WSU/GS 1990/96). Members of the WSSS are listed on the next page. Dr. Davidson continues in the hope that all former residents will become lifetime members of the WSSS and participate in the annual sponsored lectureship and the annual reunion at the American College of Surgeons meeting.



*Members of the Wayne State Surgical Society
Charter Life Members*

Ahn, Dean	Bradley, Jennifer	Galpin, Peter A.	Kovalik, Simon G.	Nicholas, Jeffrey M.	Stassinopoulos, Jerry	Wood, Michael H.
Albaran, Renato G	Cirocco, William C.	Gayer, Christopher P.	Lange, William (Deceased)	Novakovic, Rachel L.	Sullivan, Daniel M.	Zahriya, Karim
Allaben, Robert D. (Deceased)	Clink, Douglas	Gerrick Stanley	(Deceased)	Perrone, Erin	Sugawa, Choichi	
Ames, Elliot L.	Colon, Fernando I.	Grifka Thomas J. (Deceased)	Lau, David	Ramnauth, Subhash	vonBerg, Vollrad J. (Deceased)	
Amirikia, Kathryn C.	Conway, W. Charles	(Deceased)	Ledgerwood, Anna M.	Rector, Frederick	Washington, Bruce C.	
Anslow, Richard D.	Davidson, Scott B.	Gutowski, Tomasz D.	Lim, John J.	Rose, Alexander	Walt, Alexander (Deceased)	
Auer, George	Dujon, Jay	Herman, Mark A.	Lucas, Charles E.	Rosenberg, Jerry C.	Weaver, Donald	
Babel, James B.	Edelman, David A.	Hinshaw, Keith A.	Malian, Michael S.	Sarin, Susan	Whittle, Thomas J.	
Bassett, Joseph	Francis, Wesley	Holmes, Robert J.	McIntosh, Bruce	Shapiro, Brian	Williams, Mallory	
Baylor, Alfred	Flynn, Lisa M.	Huebl, Herbert C.	Missavage, Anne	Silbergleit, Allen	Wilson, Robert F.	
Bouwman, David	Fromm, Stefan H.	Johnson, Jeffrey R.	Montenegro, Carlos E.	Smith, Daniel		
	Fromm, David G	Johnson, Pamela D.	Narkiewicz, Lawrence	Smith, Randall W.		



Members of the Wayne State Surgical Society—2019 Dues

Alpendre, Cristiano	Cirocco, William C.	Herman, Mark A.	Lloyd, Larry	Novakovic, Rachel L.	Sundaresan, Naresh	Zerfas, Dorene
Asfaw, Ingida	Dawood, Moiz	Horness, Mark D.	Lopez, Peter	Phillips, Linda G.	Tarras, Samantha	Ziegler, Daniel W.
Bailey, Colin E.	Dawson, Konrad L.	Joseph, Anthony	Mansour, Roozbeh	Prendergast, Michael	Taylor, Michael G.	Zoellner, Steven M.
Bambach, Gregory A.	Dente, Christopher J.	Kaderabek, Douglas J.	Marquette, Lauren	Reilly, Lindsay	Tennenberg, Steven	
Baute, Peter B.	Dolman, Heather	Klein, Michael D.	Marquez, Jofrances	Resto, Andy	Thomas, Gregory A.	
Baylor, Alfred E. III	Field, Erin	Knight, Anna	Masood, M. Faraz	Schwarz, Karl W.	Thoms, Norman W.	
Bucci, Lorenzo A.	Golden, Roy	Kosir, Mary A.	Mayuiers, Matthew	Shanti, Christina	Truong, William	
Busuito, Michael J.	Goltz, Christopher J.	Larson, Sarah	McAlpin, Glenn M.	Siegel, Thomas S.	Vaszuez, Julio	
Carlin, Arthur M.	Gutowski, Tomasz D.	Liebold, Walter C.	Noorily, Michael J.	Spotts-Resto, Josette	Zahriya, Osama	

*Operation-A-Year
January 1—December 31, 2020*



The WSU department of Surgery has instituted a new group of alumni who are remembering their training by donating the proceeds of one operation a year to the department. Those who join this new effort will be recognized herein as annual contributors. We hope that all of you will remember the department by donating one operation, regardless of difficulty or reimbursement, to the department to help train your replacements. Please send you donation to the Wayne State Surgical Society in care of Dr. Charles E. Lucas at Detroit Receiving Hospital, 4201 St. Antoine Street (Room 2V), Detroit, MI, 48201.

Albaran, Renato G.	Davidson, Scott	Gayer, Christopher P.	Huebel, Hubert C.	Lopez, Peter	Siegel, Thomas S.	Wood, Michael H.
Anslow, Richard D.	Dujon, Jay	Gutowski, Tomasz D.	Johnson, Jeffrey R.	McIntosh, Bruce	Silbergleit, Allen	
Bambach, Gregory A.	Edelman, David A.	Herman, Mark A.	Johnson, Pamela D.	Missavage, Anne	Sugawa, Choichi	
Bradley, Jennifer	Francis, Wesley	Hinshaw, Keith A.	Ledgerwood Anna M.	Nicholas, Jeffrey	Sullivan, Daniel M.	
Conway, W. Charles	Gallick, Harold	Holmes, Robert J.	Lim, John J.	Perrone, Erin	Whittle, Thomas J.	

WSU SOM ENDOWMENT

The Wayne State University School of Medicine provides an opportunity for alumni to create endowments in support of their institution and also support the WSSS. For example, if Dr. John Smith wished to create the “Dr. John Smith Endowment Fund”, he could donate \$25,000 to the WSU SOM and those funds would be left untouched but, by their present, help with attracting other donations. The interest at the rate of 4% per year (\$1000) could be directed to the WSSS on an annual basis to help the WSSS continue its commitment to improving the education of surgical residents. Anyone who desires to have this type of named endowment established with the interest of that endowment supporting the WSSS should contact Ms. Lori Robitaille at the WSU SOM> She can be reached by email at lrobitai@med.wayne.edu.