

PASSAGES AND PROGRESS

THE HISTORY OF THE DEPARTMENT OF SURGERY

UNIVERSITY OF UTAH

1942 - 2022

EDWARD W. NELSON, MD

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Evolution Timeline of the Department of Surgery Chairmen, Divisions, Departments



INTRODUCTION

In documenting the history of the Department of Surgery at the University of Utah providing an accurate and worthwhile reference has been the goal. Perhaps the author and historian, David McCollough, said it best; "history is why we are the way we are." That alone seems reason enough, uncovering the roots from which our department has grown.

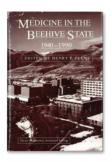
Inspiration for documenting a written history of our department began with my last, swan song grand rounds in May 2019. Almost a year later, when I retired from clinical practice, I was encouraged by the chairman at that time, Sam Finlayson, to "put words to the music" and expand on what had been a 45-minute PowerPoint presentation to a written history in electronic form, thus making it more available and less costly than a hard cover book. What follows is my best attempt at an honest and complete review of the first 80 years of the Department of Surgery at Utah with apologies in advance for any unintended oversights, exaggerations, or personal prejudices that may have crept into the story.

Our history begins with the recruitment of Phillip Price, MD, as the first Chairman of Surgery in 1942 and follows a succession of nine full-time chairs, each with their own unique contributions and legacy. This review was originally organized chronologically according to those who have served as chairman of the Department of Surgery to now include the individuals and events who have also made significant contributions. There is an admitted bias toward general surgery and the general surgery residency, but hopefully with a successful effort to include all who contributed as leaders, builders, and visionaries. Obviously, this summary can only partially represent the accomplishments of all those who have contributed to the success, growth, and legacy of the department over the last eight decades. Compiling this record of our surgical ancestors has been inspiring and humbling. From the outset, the goal has been to connect their stories with surgeons who trained in our department and the past and current faculty, while serving as an inspiration to current and future trainees.



REFERENCES & ACKNOWLEDGEMENTS

There have been three publications dealing with the history of medicine in Utah, two of which focused exclusively on the University of Utah School of Medicine and the University Medical Center.



MEDICINE IN THE BEEHIVE STATE

Henry P. Plenk, MD, editor. Utah Medical Association, LDS Hospital - Deseret Foundation, and University of Utah Health Science Center publishers, 1992.



THE GIFT OF HEALTH GOES ON

A History of the University of Utah Medical Center. Mary Pappasideris Chachas, editor. Office of Community Relations, University of Utah Health Science Center, publisher, 1990.



HOW THE WEST WON MEDICINE

Kimberly Grob, MFA, and Jennifer Jackson editors, Vivian S. Lee, MD, PhD, MBA, executive editor. University of Utah publisher, 2015.

Although each gives reference to the Department of Surgery, none devotes exclusive attention to historical detail and chronology attempted here. Dr. Frank Moody's autobiographical book, Frank Reflections of an Academic Surgeon, was also used, especially the sections referring to his early history and tenure at Utah. Other not formally published detailed histories of specific subspecialties from former faculty include:

HISTORY OF THE TRANSPLANT PROGRAM, John Gary Maxwell, Edward W. Nelson, et al

HISTORY OF THE CARDIOTHORACIC PROGRAM, Stephen McKellar
HISTORY OF THE HEAD AND NECK SURGERY DIVISION, Leland Johnson

These books and manuscripts combined with personal interviews and the remembrances of past members of the department provided the majority of information for this review. This history does not include a formal bibliography or reference list. It has not been written for profit or formal publication. Photos and illustrations were compiled from those used in my May 2019 Grand Rounds, the University of Utah Archives, and from my personal collection complied over the course of my residency and my four decades on the faculty. While every effort has been made to be as complete and accurate as possible, any errors or omissions are unintentional and will hopefully be forgiven. While not necessarily intentional, more detail on general surgery and my personal mentors and closest colleagues is purely a result of my own history and biases.

Conversion of a PowerPoint presentation to a manuscript that could be widely distributed in book form and electronically did require a commitment of resources and help from the department which I most gratefully acknowledge came from our long-standing administrative leader, Larry Mauck and the interim Chairman of Surgery, Rob Glasgow. Their support for this project is just another example of their friendship and support over many years.

In addition, my sincere appreciation to Clare Duignan, Editorial Specialist in the University of Utah Marketing and Communications Department for her help and expertise in reviewing the final versions of this memoir. Her attention to detail and corrections for form and consistency were invaluable.

Finally, it has only been with the expertise, help, and patience of Courtney Lauer, associate director of marketing, that this project has been completed. She was an amazing asset to have in the department and a truly wonderful person to work with. Thank you also to my life-long personal friend and "proof reader extraordinaire," Mary Mone, for one last time enduring constant requests for advice and help with a manuscript. Lastly, thanks to my colleagues Gary Maxwell and Courtney Scaife for providing my bio for the notables section thus sparing me the awkward task of writing my own epitaph.



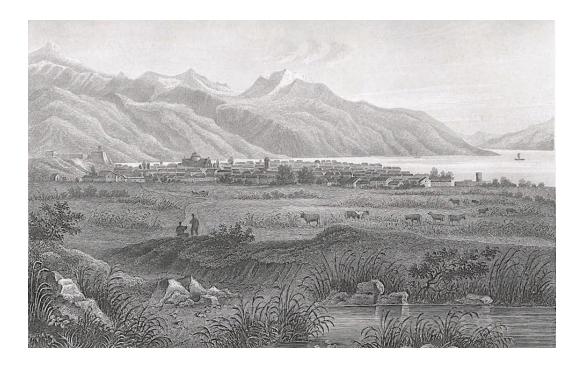


MEDICAL EDUCATION IN UTAH

STATE OF DESERET MAP

1849-1851

Before the arrival of the Mormon pioneers in 1847, what is now the state of Utah was part of Mexico, later renamed the State of Deseret by the Mormon settlers.



LINE DRAWING OF SALT LAKE VALLEY

In 1849, President Zachary Taylor sent John Wilson, who later became Commissioner of the Utah Territory, to the area with a proposal to combine California with what was later to become the Utah Territory. This was an effort to keep the balance of slave and free states that later became known as the Compromise of 1850.



OLD PHOTO OF UNIVERSITY OF DESERET

The same year, the University of Deseret was founded, eventually renamed the University of Utah in 1892. After unsuccessful attempts in 1856, 1862, and 1872, Utah was granted statehood in 1896.

In the late 1800s, medical schools in the United States were largely proprietary or sectarian with as many as 500 schools turning out physicians with purchased educations of variable quality. In 1882, Fredrick S. Kohler, MD, a 43-year-old graduate of the "Eclectic Medical College of Pennsylvania" established a proprietary medical college in the small village of Morgan, Utah. Like many of the for-profit medical schools of that time, his two-year school quickly and predictably closed after "graduating" its first and only class of six students in 1883.

As was the case in many U.S. cities in the late 1800s, medical care in the Salt Lake Valley was largely centered around religiously supported hospitals including; the Episcopalian St. Mark's Hospital (1872), the Catholic Holy Cross Hospital (1875), and the W.H. Gross Latter-Day Saints Hospital (1905). Although, there was interest in establishing a medical school at the University of Utah, the combined lack of support from the local leaders and the general suspicion of poorly trained doctors and medical care at the turn of the 20th century

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SCHOOL OF MEDICINE HALF-SCHOOL, GROUP OF STUDENTS

By standards established in 1904 by the Council of Medical Education of the American Medical Association, Dr. Chamberlin was appointed dean of the "medical department" and in April 1906 with a budget of \$10,000/year, enrolled 14 students, most of whom had only a high school education.

The University of Utah joined eight other "half-schools" in the United States offering an initial two-year course with the possibility for students to later transfer to a full four-year school. In the spring of 1906, after inspection by the Association of American Medical Colleges, Utah's two-year school was given an "A" rating, confirming the possibility that students could transfer with full credit to four-year schools.

As the United States emerged from 30 years of significant and turbulent events including World War I, the "Spanish flu" pandemic, the Great Depression, and the start of World War II, progress toward advancement into a four-year school



MEDICAL SCHOOL BUILDING 1920

The "half-school" as it was called was on the second floor of the university's biology building. Over the next 37 years, it moved through a series of locations that included an old army barracks, a two-story building hauled in from Dugway, Utah, and a stable brought from the nearby old Fort Douglas army base. Nonetheless, in the 1910 Flexner Report on Medical Education in the United States and Canada, the two-year school was described as "adequately equipped for the routine instruction of small classes." Starting in 1910–1911, two years of premedical studies were added to the entrance requirements.

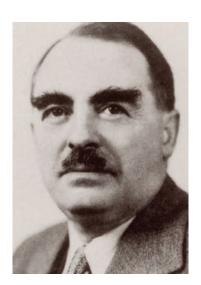
was minimal. It was further limited by dissension within the university from the deans of other colleges who saw added faculty salaries and the \$135,000 per year budget for expansion to a four-year curriculum as a threat. Finally, with the combination of new, more supportive university President Leroy E. Cowles, and the urgent need for more doctors during World War II, the formation of a four-year medical school was approved by the Board of Regents on May 18, 1942.

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September 24, 1894 – February 9, 1961

As the first dean of the four-year school,

A. Cyril Callister, MD, a local practicing surgeon,
turned out to be a fortunate choice and a
harbinger of the legacy of surgeons as leaders
and builders at Utah.



Harvard educated, he had the determination and connections to begin recruitment of an academic faculty from prestigious institutions like Johns Hopkins and the University of Minnesota. Described as a man of great energy, Dr. Callister proved to be a colorful and, at times, feisty leader. From the outset, the fledging four-year school faced significant friction from "town/gown" concerns over existing private residency programs and competition for patients. Within the university, there were financial conflicts between the medical college and the remainder of campus, largely because the new department heads at the Medical School averaged \$8,000/year compared to \$4,500/year for the top university faculty. Worse yet, the first visit for accreditation by the American Association of Medical Colleges in 1944 concluded that there was inadequate funding for research, inadequate space, and improvements were needed in the basic sciences. Dr. Callister responded to these challenges as a leader who could grasp the situation without being too sensitive to criticism or setbacks.

Often traveling at his own expense, Dr. Callister set about recruiting top academic faculty from around the country; "I promised many things at Utah which we did not have but I was determined we would get."



COLLEGE OF MEDICINE SEPTEMBER 10, 1944

In June of 1944, 45 new MD graduated from the fully accredited four-year University of Utah College of Medicine. Notably, 27 of the 41 male graduates were immediately inducted into the Armed Services.

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SALT LAKE COUNTY HOSPITAL

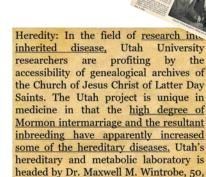
Built 1911-1912 Cost \$200,000 Teaching Hospital 1942-1965

When faculty arrived, they found significant challenges to the new school including an arrangement with the Salt Lake County commissioners that the teaching staff would assume clinical operation of the county hospital and provide care to indigent patients.



Nonetheless, working with the sometimes headstrong dean, the new clinical department leaders in surgery, Phillip Price—Hopkins; obstetrics and gynecology, A. Louis Dippel—Minnesota; pediatrics, John A. Anderson—Minnesota; and medicine, Maxwell M. Wintrobe—Hopkins, were successful in recruiting additional department heads in pharmacology, Louis S. Goodman—Vermont; biochemistry, Leo T. Samuels—Minnesota; bacteriology, Louis P. Gebhardt—Stanford; and pathology, Ernst J. Eichwald—Harvard/Boston Children's.





chief of the department of medicine.

AEC Health: In Utah's radiobiology laboratory, supervised by Dean Bowers, a key project is under way to protect the present and future health of all workers in the AEC projects. In Dr. Bower's words: "We are trying to pin-point the harmful effects of plutonium, radium, and mesothorium on the animal body, to determine the effects of atomic radiation on the body, and to develop methods for the diagnosis and treatment of injury by atomic radiation."

NEWSWEEK ARTICLE JUNE 9, 1952

"Rough and Ready, Utah Medical School Emerges as Johns Hopkins of the West"

This impressive list was recognized nationally in the "medicine" section of Newsweek magazine's June 9, 1952, edition with a three-page article entitled: "Rough and Ready, Utah Medical School emerges as the Johns Hopkins of the West."

In retrospect, Utah was ideally suited as the location for a new medical school with world-class skiing and outdoor recreation activities and no competition from other schools from Canada to the Mexican border and from Denver to the Pacific Coast. Despite a limited recruiting budget from a small population and tax base, Utah offered opportunities to the young faculty with careers in the future. In the beginning, the faculty was all full-time and had agreed to see patients only on referral and to limit their clinical work to the county hospital. These restrictions combined with the lack of support from the county eventually gave way to a more stable working environment but only after several episodes of near financial crisis.

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PROMINENT SURGEONS, LEADERS, & BUILDERS

July 29, 1903 – October 10, 1993



A Salt Lake City native who graduated from the University of Utah at age 19, went on to become instrumental in the creation of the University Medical Center.

After medical school at the University of Pennsylvania and surgical training at the Mayo Clinic, Kenneth B. Castleton, MD, returned to Salt Lake in 1933 and went into private practice. After almost three decades, he returned to academia in 1962 when he was appointed Dean of the Medical School.





UNIVERSITY MEDICAL CENTER Vision to groundbreaking

Dr. Castleton has been justifiably credited with being a prime force in the drive to raise funds for the new medical center and became the chief administrator while it was still under construction.

He retired in 1971 having served as the university's Vice President for Medical Affairs and president of the Utah Medical Association. He then pursued studies on Native American rock art and carvings, and in 1978 published a classic reference on the subject in two volumes titled, *Petroglyphs and Pictographs* of Utah. On July 10, 1965, Dr. Castleton joined Utah Governor Calvin Rampton greeting the first 93 patients transferred from the old Salt Lake County Hospital to the new University Medical Center in the foothills above main campus.

JOHN ALDOUS DIXON

July 29, 1903 – February 15, 1992



John Aldous Dixon, MD, was a native Utahn, born in Provo and raised in Ogden, who rose to serve in multiple administrative positions at the University of Utah including on the Board of Regents, as Executive Vice President, Dean of the Medical School, and Vice President for Health Sciences.

Dr. Dixon's premedical education included time at Weber State College, Idaho State University, and the University of Washington before obtaining his MD from the University of Utah. After surgical training at the University of Rochester and the Salt Lake Veterans Administration Medical Center, Dr. Dixon served as Chief of Surgery at Johnson Air Force Base in Honshu, Japan, before returning to private practice in Ogden for 18 years. Much like the contributions in the 1950s and 1960s of his predecessor, Dr. Castleton, Dr. Dixon followed a career in private practice surgery with a second chapter in the 1970s and 1980s as surgical innovator and administrative leader at the University of Utah. His career at the University of Utah was most notable for the unlimited energy and enthusiasm he devoted to the \$63 million medical center expansion with building 525 in 1981 and founding of the Endoscopic Laser Surgery Unit. A consummate administrator, surgical leader, and visionary builder, Dr. Dixon died of heart disease on February 15, 1992.



GROWTH OF THE MEDICAL CENTER COMPLEX

The county facility to serve the medical needs of the poor and indigent of the Salt Lake valley was originally constructed in 1911–1912 for a cost of \$200,000 as the County Infirmary Hospital. After serving as the medical school clinical training facility from 1942–1965, it became painfully obvious that the old Salt Lake County Hospital at 2100 South State Street was outdated and overdue for replacement. Located several miles from the university campus, with its leaky ceilings, lack of air conditioning, and surrounding panhandlers, Maxwell Wintrobe, MD, described the old hospital as "an awful dump and even more badly run." Added evidence for the need of a true medical center came in 1954 when the Joint Commission for Accreditation of Hospitals visited, and temporarily disapproved the residency programs based on their findings at the near 50-year-old clinical facility and the ongoing friction over indigent patient care and funding between the medical school faculty and county commissioners.

As an instrumental leader in pushing for action was the first Chairman of Surgery, Philip Price, MD, with a vision for a medical center that "would not be palatial or fancy" but would facilitate research and clinical excellence in serving the whole Intermountain West.

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In 1955, along with Dr. Wintrobe and Louis Goodman, MD, Dr. Price was able to convince the University of Utah Board of Regents to approve the project based on funding from state, private, and federal sources. Dr. Castleton was a leader in the drive for public donations, which, along with federal funds, eventually drove the budget to \$15.6 million. Because \$425,000 from the "miners fund" was transferred to the building project, the first groundbreaking on July 14, 1959, was for the rehabilitation center followed by an initial excavation for Building 521 in January of 1962, an event that featured Dr. Price as a member of the groundbreaking team.



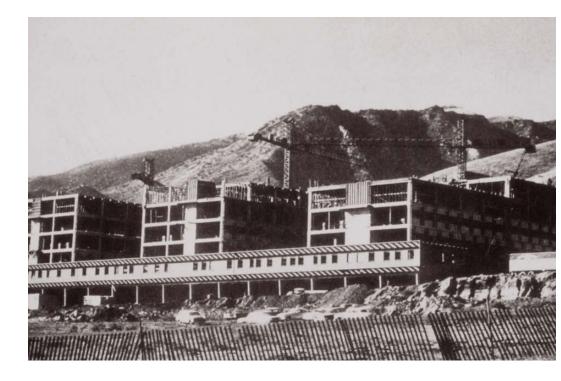
PHILIP PRICE

Nine months later, as Dean of the Medical School, Dr. Price laid the cornerstone for the seven story, 50,000 square foot "E" shaped medical center.



FIRST UNIVERSITY OF UTAH MEDICAL CENTER BUILDING 521

The north wing was designed for hospital space including 220 beds, the central wing as space for clinical departments, and the south wing for the basic sciences and medical school.



On July 10, 1965, the new medical center accepted its first 93 patients and almost immediately billing problems led to lawsuits against the county which were not concluded until 1971-1972 with a \$425,000 settlement saving the new medical center from the threat of closing.

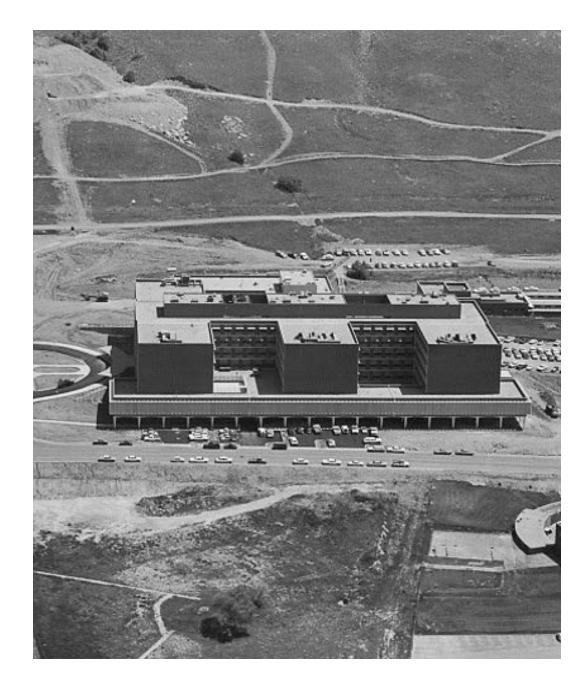
Predictably, with the near exponential growth of the Wasatch Front population in the early 1970s, more space was soon urgently needed. Dr. Dixon, first as Dean and later Vice President for Health Sciences, described the situation as "enormous activity in a little box, the place is ready to explode."



With his vison and leadership, Dr. Dixon became the prime mover for expansion, adding an additional 150 beds and 500,000 square feet, with the construction of an attached expansion to the north of building 521.

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As part of Dr. Dixon's argument, he reminded all concerned that Building 521 had been constructed to withstand high winds but was not to earthquake standards, thus justifying the new building despite the cost.



THE ORIGINAL MEDICAL CAMPUS

High in the far northeast corner of the Salt Lake Valley the medical center's original Building 521 is now surrounded and dwarfed by continued building and expansion of the medical campus.

BUILDING 525 EXCAVATION SITE

Groundbreaking for the \$62.5 million expansion took place on November 18, 1977, and Building 525 was dedicated four years later.





Over time, buildings 521 and 525, envisioned and created by surgical leaders like Drs. Price, Castleton, and Dixon have become the historical predecessors of the advanced needs and technologies of what has become a sprawling medical campus. Now, almost 70 years after the initial vision of a medical center on the hillside above the main university campus, the "E" shaped building 521 is destined for demolition. In its place the construction on the Spencer Fox Eccles School of Medicine building, which will be the hub of the health sciences campus, and the Healthcare, Educators, Leaders & Innovators Complex (HELIX) has begun.



CURRENT MEDICAL CAMPUS



CONTINUED EXPANSION

- The John A. Moran Eye Center, 1993: Rebuilt in a new location to the west of the main hospital in 2006
- The Huntsman Cancer Institute, 1999
- Eccles Critical Care Pavilion, 2003
- Huntsman Patient Care Center, 2004
- University Orthopaedic Center, 2004
- Eccles Health Sciences Education Building, 2005
- Eccles Medical Research Building, 2005
- Eccles Critical Care Expansion, 2007
- Huntsman Cancer Hospital, expansion 2008
- University Hospital Patient Care Pavilion, 2009
- Huntsman Cancer Hospital, expanded wing 2011
- Huntsman Children's Cancer Center, 2013
- Kathryn F. Kirk Center for Comprehensive Cancer Care and Women's Cancers, 2019–20
- Ambulatory Care Complex, 2019,
- Craig H. Neilsen Rehabilitation Hospital, 2019
- Healthcare, Educators, Leaders, Innovators Complex
 HELIX Building, 2023
- The Spencer Fox Eccles School of Medicine, 2025





PASSAGES AND PROGRESS PASSAGES AND PROGRESS

EVOLUTION OF THE DEPARTMENT OF SURGERY

From the beginning, general surgery has been the foundation on which the department has been constructed, harkening back to when "general" meant all types of surgery, which are now done by offspring departments and various division subspecialists. Time, progress, and necessity have gradually brought into focus what used to be a blurry distinction between the division of general surgery which is now only one of seven divisions within the department.

What began as a group of general surgeons, has become a multidisciplinary group of specialists appropriately organized in specialty departments and divisions.

DIVISIONS THAT EVOLVED TO BECOME DEPARTMENTS

DEPARTMENT OF NEUROSURGERY

The first full-time neurosurgeon hired in 1955 at the Salt Lake County Hospital was Swedish-born Petter Lindstrom, MD (1907-2000). He was trained at the University of California and came to Utah from the University of Pittsburg shortly after his infamous divorce from Hollywood actress Ingrid Bergman. In 1961, he was joined by Theodore (Ted) Roberts, MD, who had trained at the University of Wisconsin and brought new expertise in cerebral angiography. In 1965, Dr. Roberts became head of the division and established the neurosurgery residency in 1972. The previous year, M. Peter Heilbrun, MD (1937-2010),) who had trained at Washington University in St. Louis joined the division and soon helped Dr. Roberts develop programs in external carotid-internal carotid bypass and image guided neurosurgery.



PETER HEILBRUN NEUROSURGERY

Dr. Heilbrun became division chief in 1983 and then the first chairman when neurosurgery became a newly created department in 1992. When he left to join the faculty at Stanford in 2000, Ronald Apfelbaum, MD, who joined the faculty in 1986, served as interim Chairman until 2000 when William Couldwell, MD, was recruited as chairman.

WILLIAM COULDWELL NEUROSURGERY

Dr. Couldwell, a Canadian trained in Montreal,
Switzerland, and California came to Utah after
past academic appointments at the University of
Southern California and New York Medical College
and has led the Department of Neurosurgery
through two decades of growth and academic
accomplishments.



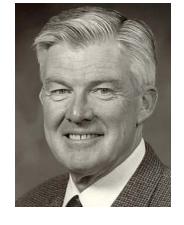
DEPARTMENT OF ORTHOPAEDIC SURGERY

In 1945, Dr. Price, asked Paul Pemberton, MD, a local orthopaedpic surgeon who had trained at the Cleveland Clinic, to accept a clinical appointment and organize an orthopaedic residency program. Along with help from Archibald Huether, MD, the chief surgeon of the Shriners unit at St. Mark's Hospital, a three year orthopaedic residency program was organized with rotations at the Salt Lake County Hospital, the Veterans Administration Hospital, and St. Mark's Hospital. Between 1945 and 1957, nine residents were trained in Dr. Pemberton's program which was certified by the American Board of Orthopaedic Surgery shortly after its inception.

Formed in 1957 as an early part of the Department of Surgery, orthopaedics first division chief was Sherman Coleman, MD (1922-2004). Dr. Coleman, was a nationally recognized expert specializing in congenital pediatric orthopaedics, leading the division from 1957 to 1981, eventually retiring in 1990.

HAROLD DUNN ORTHOPAEDIC SURGERY

His successor, Harold K. Dunn MD, led the orthopedic division for 14 years and was responsible for orthopaedics gaining departmental status in 1995. Dr. Dunn was also responsible for the creation of the \$20 million, freestanding Orthopaedic Center in 2004.



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Overall, Dr. Dunn, first as chief and then as chairman, led the department through 26 years of successful academic and clinical growth until his retirement in 2007. Dr. Dunn was replaced as chairman by Charles Saltzman, MD, an internationally recognized foot and ankle surgeon who led the department until 2020. When Dr. Saltzman announced he would be stepping down, Darrel S. Brodke, MD, an orthopaedic faculty member since 1997 and a local and nationally recognized expert in spinal surgery and biomechanics was named chair of the University of Utah's Department of Orthopaedics and CEO of Orthopaedic Musculoskeletal Services for U of U Health.

DEPARTMENT OF OPHTHALMOLOGY

In 1979, Randall J. Olsen, MD, started the division of ophthalmology as its first and only faculty member. As a graduate of the University of Utah Medical School, he trained at the University of California in ophthalmology and completed numerous specialty fellowships. In 1993, John A. Moran, a former University of Utah graduate, investor and philanthropist, along with other donors funded the first John A. Moran Eye Center. In 2006 the original center was expanded and moved to a larger site just west of the main medical center.

RANDY OLSON OPHTHALMOLOGY

When ophthalmology was granted departmental status in 1982, Dr. Olson was named as chairman, a position he has held ever since.



Under Dr. Olson's leadership, the eye center has grown to include more than 40 ophthalmologists as well as numerous researchers. Included in this growth and prestige, another University of Utah Medical School graduate, Alan S. Crandall, MD, practiced and taught and most importantly promoted the center as an international charitable presence for nearly 40 years before his sudden death in 2021. Dr. Olson, now as a distinguished professor continues as Chairman of Ophthalmology and CEO of the Moran Eye Center, which treats patients in every field of vision care and is consistently ranked in the top 20 eye centers in the country by U.S. News and World Report.

DEPARTMENT OF EMERGENCY MEDICINE

Before organized as s specific specialty, emergency department coverage was a joint effort by the Departments of Surgery and Medicine with coverage from residents provided based on the nature of the problem being seen. Divisional status came first under the Department of Medicine in 1984 under the direction of Scott Linscott, MD (1943–2014), who came from Virginia Mason as the first division chief. In 1988 the division switched from medicine to the Department of Surgery with a succession of chiefs including; Kurt Bernhisel (1992–1998), Philip Bossart (1998), and Erik Barton (1999–2014).

STEVE HARTSELL EMERGENCY MEDICINE

Appointed as division chief in 2014, Stephen Hartsell, MD, guided emergency medicine to departmental status, granted in 2022.



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CHRISTY HOPKINS
EMERGENCY MEDICINE

On June 29, 2022, Michael Good, MD, Senior Vice President for Health Sciences formally announced Christy Hopkins, MD, MPH, MBA, as the inaugural chair of the Department of Emergency Medicine.



Department faculty now represent all major subspecialties in emergency medicine. This includes critical care, EMS, global health, hospice and palliative care, informatics, toxicology, sports medicine, ultrasound, wilderness medicine, and hyperbaric medicine/wound care.





JAMES PARKIN
OTOLARYNGOLOGY - HEAD AND NECK SURGERY

In 1974, when James Parkin, MD, became chief it was a "division of one," until he recruited Michael Stevens, MD, and Leland Johnson, MD, both of whom trained at Utah, to join him on the faculty.

Dr. Parkin moved on to be appointed departmental chairman in 1994, and R. Kim Davis, MD, a fellowship trained head and neck surgeon, was chief of the division until stepping down to enter private practice in 2004. During this period, Steven D. Gray, MD (September 2, 1953–September 29, 2002) joined the division as the first fellowship trained pediatric otolaryngologist and established a practice and resident rotation at Primary Children's Hospital in 1990.

CLOUGH SHELTON

OTOLARYNGOLOGY - HEAD AND NECK SURGERY

Clough Shelton, MD, joined the division in 1994 after residency training at Stanford and a neuro-otology fellowship and partnership at the House Ear Institute in Los Angeles and succeeded Dr. Davis to become division chief in 2004.



After leading the division through almost two decades of clinical growth, academic success, and national prominence, Dr. Shelton stepped down as division chief and retired to Walla Walla, Washington where he and his wife, Kay now own and run Los Oidos ("the ears") vineyard.



JASON HUNT
OTOLARYNGOLOGY - HEAD AND NECK SURGERY

Named as interim chief in February 2021, Jason
Hunt, MD, joined the faculty in 2006 after residency
training at LSU followed by a head and neck
oncology and microvascular surgery fellowship
at Vanderbilt University. Appointed as the Interim
Chairman on October 1, 2022, Dr. Hunt now leads the
newly announced Department of Otolaryngology –
Head and Neck Surgery, the latest former division to
be granted departmental status.

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DIVISIONS WITHIN THE DEPARTMENT OF SURGERY

DIVISION OF UROLOGY

The Division of Urology at Utah was officially established in 1965 when the new University Hospital opened and Robert G. Weaver, MD, who trained at the University of California, San Francisco was appointed as the first full-time chief.

RICHARD MIDDLETON UROLOGY

When Dr. Weaver retired in 1968, he was replaced by Richard G. Middleton, MD, (1933–2018) a graduate of the Cornell–New York hospital urology program whose father, Richard P. Middleton, MD, had been on the faculty at the old Salt Lake County Hospital.



Dr. Richard Middleton served as division chief of urology for 35 years (1969-2004), establishing the residency training program in urology with an expanded full-time faculty and affiliated hospitals.



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JEREMY MYERS
UROLOGY

Patrick Cartwright, MD, a pediatric urologist was appointed division chief when Dr. Middleton retired in 2004 and served as acting Department Chair in 2012-13. In August 2019, he was succeeded as division chief by Jeremy Myers, MD, a specialist in urologic reconstructive surgery.

DIVISION OF PLASTIC SURGERY

World War II naval veteran, Clifford Snyder, MD, (1916–2007) was recruited from the University of Miami in 1967 as the first chief of the Division of Plastic Surgery, a position he held until 1986.

CLIFF SNYDER PLASTIC SURGERY

Dr. Snyder's varied interests included nerve regeneration, limb reimplantation, and treatment of venomous snake bites. However, he may be best remembered as part of the team of surgeons who separated cephalopagus conjoined twins, Lisa and Elisa Hansen in 1979.



Dr. Snyder was replaced by Graham Lister, MD, an internationally known hand and microsurgery expert in 1987. When Dr. Lister transferred his appointment in hand surgery to the Orthopaedic Department in 1994, Leland Chick, MD, and Dr. James Parkin provided interim leadership of plastic surgery. In 1999, Bradford Rockwell, MD, a Massachusetts native trained at Harvard, Massachusetts General Hospital, and the University of Rochester was appointed as division chief.



JAY AGARWAL
PLASTIC SURGERY

In 2014, when Dr. Rockwell stepped down, Jayant P. Agarwal, MD, a University of Chicago residency graduate, who specializes in postmastectomy breast reconstruction, became the division chief. 45

DALE JOHNSON PEDIATRIC SURGERY

As division chief from 1971 to 2001, he formalized the relationship between the Department of Surgery and Primary Children's Hospital while growing the division in size and reputation.



Rebecka Meyers, MD, who had trained in San Francisco and Philadelphia, took over as division chief from 2001 to 2011 and largely due to her interest in complex pediatric liver tumors, a pediatric liver transplant program was started at Primary Children's Medical Center. Eric Scaife, MD, a graduate of the Utah General Surgery residency in 1999 and Children's Hospital of Philadelphia fellowship joined the pediatric surgery faculty, eventually becoming division chief in 2011.



ERIC SCAIFE
PEDIATRIC SURGERY

Under Dr. Scaife's leadership, the division has graduated four pediatric surgery fellows and expanded the faculty size to 10 full-time pediatric surgeons including Utah residency graduates Mike Rollins (2005), Steve Fenton (2008), and Katie Russell (2015).



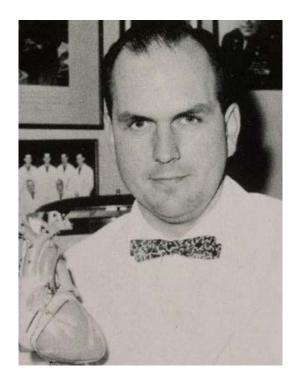
Drs. Katie Russell and Eric Scaife

CARDIOTHORACIC DIVISON

The Division of Cardiothoracic Surgery's history at the University began in 1955 when Russell Nelson, MD, a 1945 Utah medical school graduate, was recruited back to Utah by the first chairman, Dr. Phillip Price.

RUSSELL NELSON CARDIOTHORACIC DIVISION

Dr. Nelson had trained in cardiothoracic (CT) surgery at the University of Minnesota where he had extensive laboratory experience in the development of an early cardiopulmonary bypass machine. Shortly after his arrival in 1955, he and his team performed the first "open heart" procedure in Utah at the old County Hospital.



"Philosophical differences" with Utah's second Surgery Department Chair, Walter Burdette, MD, over CT surgery as an independent specialty resulted in Dr. Nelson moving his practice to the LDS Hospital in 1959. Richard Hughes, MD, was brought to the university from Los Angles by the third Surgery Department Chair, Dr. Reemtsma in 1966 but the majority of private patients and cardiac surgery continued to be done by Dr. Nelson and surgeons at LDS Hospital. When Dr. Hughes returned to California in 1975, there was no CT surgery being done at the university until 1977 when the new Department Chair, Dr. Frank Moody recruited Duke trained Kent Jones, MD, as Division

Chief in 1977. Soon, however, most of his cases were at LDS Hospital where he eventually moved his practice. After Dr. Jones' departure, another Duke alumnus, William DeVries, MD, was recruited as Division Chief in 1980. In 1982, assisted by Lyle Joyce, MD, DeVries brought national attention to the program by implanting the first ever artificial heart. In 1984, when Dr. DeVries left Utah for the Humana Heart Institute in Louisville, Kentucky, William Gay, MD, from Cornell University, was appointed as Department Chairman and also assumed the role of Cardiothoracic Division Chief. Dr. Gay became the VP for Health Sciences in 1990 and the title of division chief passed to his protégé from Cornell and Utah partner Shreekanth "K" Karwande, MD. When Dr. Karwande left for private practice in 2001, he was succeeded by pediatric congenital heart surgeon, John Hawkins, MD. Dr. Hawkins career was tragically cut short by pancreatic cancer in 2009 and David Bull, MD, a 1994 Utah CT fellowship graduate was appointed to lead the division.

CRAIG SELZMAN CARDIOTHORACIC DIVISION

The current chief, Craig Selzman, MD, came to Utah from University of North Carolina in 2008 and replaced Dr. Bull as Division Chief in 2015.



Under Dr. Selzman's leadership, the division has significantly increased the number of surgeons advancing both clinical and bench research productivity. Additionally, the program has expanded in heart and lung transplantation as well as mechanical support therapy to become nationally recognized through the development and expansion of LVAD and ECMO techniques in the advanced heart failure program.

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DIVISION OF VASCULAR SURGERY

Traditionally, vascular surgery procedures were the purview of the general surgery faculty where many of the cases fell to Dominic Albo, MD, who had joined the faculty after training in St. Louis. Affectionally labeled "the Domfather" by generations of residents, Dr. Albo also led the residency rotations at Holy Cross Hospital in downtown Salt Lake City and remained on the faculty for over three decades.



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PETER LAWRENCE
VASCULAR SURGERY

The evolution of vascular surgery as a separate division began in 1978 when Peter F. Lawrence, MD, was recruited to Utah as a member of the general surgery division.

Dr. Lawrence had completed residency and vascular fellowship at Columbia-Presbyterian Medical Center in New York and initially served as chief of surgery at the Salt Lake City VA. His desire to form a separate division was realized in 1994 when he established a vascular fellowship and created the Division of Vascular Surgery. He quickly added Larry Kraiss, MD, and Spencer Galt, MD, to the faculty. Dr. Lawrence left Utah to become Associate Dean of Clinical Affairs at UC Irvine in 1998 and then moved on to UCLA as Chief of Vascular Surgery in 2003. Dr. Galt was appointed vascular surgery division chief in 1998, later to leave for Geisinger Medical Center in Danville, Pennsylvania, in 2003.



LARRY KRAISS
VASCULAR SURGERY

Dr. Galt was succeeded by Larry Kraiss, MD, as division chief in 2003, who built the clinical and research productivity of the division and helped establish the Cardiovascular service line including Cardiology, Cardiothoracic Surgery, and Vascular Surgery in 2006.

BENJAMIN BROOKE VASCULAR SURGERY

On January 1, 2018, Dr. Kraiss was replaced by Benjamin Brooke, MD, who trained in surgery at Johns Hopkins where he also obtained a PhD in Clinical Investigation followed by vascular surgery fellowship at Dartmouth–Hitchcock.



In addition to leading the vascular surgery division, Dr. Ben Brooke is the Chief of the department's Health Services Research Section and directs the Utah Intervention Quality and Implementation Research Group (U-INQUIRE). Michelle Mueller, MD, who finished the Utah general surgery residency (2003) and the Utah vascular fellowship in 2004 was the Director of the Vascular Surgery Fellowship from 2012 to 2019, and went on to become the Chief of Vascular Surgery at the Salt Lake Department of Veterans Affairs Medical Center and where she was later promoted to the Chief of Surgery. Dr. Mueller was replaced as the vascular fellowship director by Brigitte K. Smith, MD, MHPE, FACS, FSVS from University of Wisconsin, who also serves as the Vice Chair of Education for the Department of Surgery.

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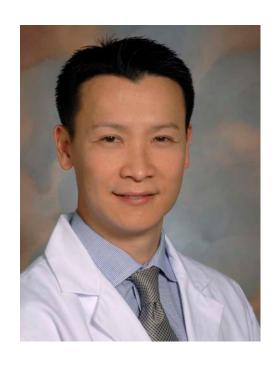
In 1965 the first renal transplant in Utah was performed at the old Salt Lake County Hospital by the second Chairman of Surgery, Dr. Walter Burdette assisted by Dr. Lawrence Stevens. During Dr. Keith Reemtsma's tenure as chairman, there was added emphasis was given to transplantation, likely based on his own interest and research in the field with cross-species transplantation and pancreatic cell transplantation.

Dr. Reemtsma also brought to the department two transplantation legends, Dr. Willem Kolff in artificial organs and Dr. Ernst Eichwald in pathology.

From 1971 until 2014, the program continued to grow as part of general surgery under Gary Maxwell, MD, Edward Nelson, MD, and included deceased donors and living related transplants in adults and pediatric patients. Documentation of the history of kidney transplantation as part of the division of general surgery has been recently completed by Drs. Maxwell and Nelson. John Holman, MD, who completed the Utah residency in 1982 followed by a PhD and transplant fellowship in Albany, New York, returned to become an integral part of the program. Dr. Holman's contributions to research efforts, new immunosuppression protocols, and leadership of the local organ procurement organization continued until 2004 when he left to become medical director of Fujisawa Healthcare Inc. in Deerfield, Illinois. John Sorenson, MD, and Jason Schwartz, MD, began the initial program in liver transplantation in 2005 and it matured and expanded afterward with the addition of Robin Kim, MD (2010), and Jeff Campsen, MD (2011).

ROBIN KIM
TRANSPLANTATION AND ADVANCED
HEPATOBILIARY SURGERY

On September 1, 2014, the Division of Transplantation and Advanced Hepatobiliary Surgery formally separated from general surgery with Robin Kim, MD, as the first division chief.



TALIA BAKER
TRANSPLANTATION AND ADVANCED
HEPATOBILIARY SURGERY

In October 2021, Talia Baker, MD, an accomplished liver transplant surgeon from the University of Chicago assumed the role as the chief of the division.



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THE CURRENT GENERAL SURGERY DIVISION

The Division of General Surgery, historically the core of the Department of Surgery, has been the foundation from which other specialties have evolved to become independent divisions. The current Division Chief, Raminder Nirula, MD, received his MD in Manitoba, Canada, and general surgery training at the Santa Barbara Cottage Hospital and trauma/critical care fellowship at University of Washington, Harborview Medical Center. With a faculty that now totals 39 full-time members, general surgery is organized into sections that reflect the subspecialization and diversity that all fit under the umbrella of "general surgery."



ACUTE CARE, TRAUMA, CRITICAL CARE



RAM NIRULA
ACUTE CARE, TRAUMA, CRITICAL CARE

Led by Division Chief, Ram Nirula, MD, this section goes by the clever although questionably politically correct acronym "UTES" – Utah Trauma and Emergency Surgery.

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All faculty are Advanced Trauma Life Support (ATLS) certified and have critical care board certification consistent with the University Hospital's designation as a Level 1 Trauma Center. Toby Enniss, MD, leads trauma surgery within the section and Assistant Program Director, Jason Young, MD, is the Director of the Surgical Intensive Care Unit. Edward Kimball, MD, is a leader in the university's telehealth outreach program and an expert in intraabdominal hypertension who practices in the ICUs at the university and Salt Lake Veterans Affairs Hospital. Alex Colonna, MD, leads the acute care surgery side of the UTES service which also includes Jade Nunez, MD, and Marta McCrum, MD. Newest additions to this section's faculty include: Joanna Grudziak, MD, MPH, from North Carolina; Sarah Lombardo, MD, a University of Utah Residency graduate in 2018; and Sudha Jayaraman, MD, MSc, who is also the new director of the department's Center for Global Surgery. Steve Morris, MD, was director of the Intermountain Burn Center until his retirement in 2020 when Giavonni Lewis, MD, succeeded him. Dr. Lewis has been recently joined by three new burn surgeons, Irma Fleming, MD, from Vanderbilt, Callie Thompson, MD, from the University of Washington, and Christopher LaChappelle, MD from Parkland Hospital in Dallas.

Courtney Scaife, MD, is the head of the surgical oncology section, which includes specialists in gastrointestinal malignancies, melanoma, and breast cancer.



COURTNEY SCAIFE
SURGICAL ONCOLOGY

A 2001 graduate of the Utah general surgery residency and a two-year fellowship in Surgical Oncology at the MD Anderson Cancer Center in Houston, Texas, Dr. Scaife is recognized as The Huntsman Cancer Gastrointestinal Disease Center Leader, Department of Surgery Vice Chair for Cancer Affairs, and beginning in 2020, the Chief Value Officer for the Department of Surgery.

In 2020, Rebecca Y. Kim, MD, completed pancreatic hepatobiliary fellowship at the Medical College of Wisconsin to join Dr. Scaife as a surgical oncologist specializing in upper GI malignancies. Additional fellowship trained surgeons within the section include John Hyngstrom, MD, and Elliot Asare, MD, for melanoma and the General Surgery Residency Director, Laura Lambert, MD, who specializes in surgical treatment of peritoneal carcinomatosis (HIPEC) and palliative care. Newly recruited to the oncology section and HIPEC program, Erin Ward, MD, trained in surgical oncology at Medical College of Wisconsin and has research interests in the psychosocial health of cancer patients.



Cindy Matsen, MD, a Memorial Sloan Kettering Breast Fellowship graduate leads a group of breast cancer surgeons that includes (left to right) Regina Rosenthal, MD, Jane Porretta, MD, Cindy Matsen, MD, and Kirstyn Brownson, MD, and breast surgery nurse practitioner, Victoria Serpico, APRN, MS. (not shown)

COLORECTAL SURGERY AND ABDOMINAL WALL

Under the leadership of Daniel Vargo, MD, colorectal surgery and abdominal wall surgery are combined in a section affectionately known as the "CRAB Service," this section also includes elective general surgery.

DANIEL VARGO

COLORECTAL SURGERY AND

ABDOMINAL WALL

Within the same section, Dr. Dan Vargo, an expert in complex abdominal wall hernias and repairs, has organized a general surgery service including former surgical chairman, Sam Finlayson, MD, Rod Barker, MD, and Mark Savarise, MD.



BARTLEY PICKRON
COLORECTAL SURGERY



The senior leader of the colorectal surgery group is Bartley Pickron, MD, who came to Utah after colorectal fellowship at University of Southern California and practice at the Texas Medical Center in Houston. Lyen Huang, MD, Jessica Cohan, MD, and Luke Martin, MD, complete the group of fellowship-trained surgeons that offer surgical care for the complete spectrum of colorectal diseases.

UPPER GI ADVANCED LAPAROSCOPIC BARIATRIC SURGERY

ROBERT GLASGOW

Organized and led by Robert Glasgow, MD, interim department chairman (2020–2022) and departmental Chief Value Officer, this group is comprised of fellowship trained minimally invasive surgery (MIS) surgeons specializing in upper GI procedures including anti–reflux surgery, bariatric surgery, and treatment of gastric and esophageal malignancies.

ERIC VOLCKMANN

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Eric Volckmann, MD, who founded the bariatric surgery program, has expanded the service into Comprehensive Weight Management which now includes dieticians, gastroenterologists, nurses, pharmacists, psychologists and additional MIS trained surgeons including Ellen Morrow, MD, Anna Ibele, MD, and Jennwood Chen, MD.





ELLEN MORROW



ANNA IBELE



JENNWOOD CHEN

UNIVERSITY'S COMMUNITY CLINICS AND THE SALT LAKE CITY VETERANS ADMINISTRATION

MARK SAVARISE

Surgeons assigned to these two areas are also organized into a section led by Mark Savarise, MD, who completed the Utah residency in 1996 and returned to join the faculty after leaving private practice in Idaho.



Along with Rod Barker, MD, another surgeon recruited from private practice, they provide outpatient surgical care at the University Community Clinics at South Jordan and Farmington. They are both also active on the surgical service at the Salt Lake VA along with full-time VA surgeons, Greg Livers, MD, and William Peche, MD, both Utah general surgery residency graduates.





GREG LIVERS & WILLIAM PECHE VA SURGEONS

INTERMOUNTAIN BURN CENTER

While not an independent or separate section from trauma, acute care and surgical intensive care, the Intermountain Burn Unit and its founders and leaders deserve special mention as a unique part of the Division of General Surgery.

The earliest efforts at providing burn care in the 1960s and 1970s at the University of Utah consisted of a makeshift, closet sized area on the rehab floor of building 521 staffed by Fred Chang, MD, and other "volunteer" members of the general surgery faculty, none of whom had specific training or long-term career ambitions in burn care.

GLENN DONALD WARDEN

That all changed in 1976 when the first well designed, organized, and staffed burn unit (the Intermountain Burn Center) was established by Glenn Donald Warden, MD.



More than just a physical space, the burn unit evolved and has remained a center for excellence for burn and soft tissue injury care through more than four decades and multiple generations of outstanding leadership.

A graduate of the Utah general surgery residency in 1976, Dr. Warden went to the Brooke Army Medical Center in San Antonio for burn training (1971-1974) and, in 1982 created the Intermountain Burn Center, a "mini hospital within a hospital" with its own operating room, specialized staff, and unique culture. Warden was initially joined by 1980 residency graduate Scott R. Peterson, MD, who later went onto a long career in trauma surgery and critical care as residency director at university-affiliated program in Phoenix, Arizona.



JEFF SAFFLE

Jeffrey Roy Saffle, MD, the first burn fellow at Utah (1978–79), finished the general surgery residency in 1982 and joined the faculty as a second burn unit attending surgeon.

6.3

A graduate of Salt Lake City's Granite High School, Dr. Saffle received his undergraduate degree (1972) and MD (1976) from the University of Chicago. In addition to his 30-year career based in burn care, he was instrumental in developing the trauma and critical care services within general surgery.

Along with Melva Kravitz, RN, MS, Dr. Warden and Dr. Saffle built the burn unit into a clinical and research juggernaut, with multiple American Burn Association presentations culminating in Dr. Warden's election as ABA President in 1993 and Dr. Saffle's in 2002. Dr. Warden left the University of Utah in 1985 to become Professor of Surgery and Vice Chairman at the Shriners Burn Center in Cincinnati, Ohio, and he is now Chief Medical Officer of Pluro Gen Therapeutics, focused on advanced burn care products.

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STEPHEN MORRIS

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With Dr. Warden's departure, Dr. Saffle became burn unit director, soon recruiting Stephen Morris, MD, a 1987 graduate of the Utah residency to join him as surgical faculty in the burn unit after Dr. Morris returned from fellowship at the Shriners Burn Institute in Galveston, Texas, 1987–1989.



For the next 25+ years, the Saffle/Morris combination maintained the high standards of patient care, research productivity, and national status of the Intermountain Burn Center. In 2005, Amalia Cochran, MD, joined the team. Dr. Cochran had finished the Utah residency, graduating in 2004 and then spent a year at UTMB/Shriners-Galveston burn fellowship. Dr. Cochran became an expert in frostbite injuries, and was part of the team until 2018 when she left to join the faculty at the Ohio State University. She has since accepted an appointment as a Clinical Professor specializing in burn care in the Division of Critical Care Surgery at the University of Florida, Gainesville. At Florida, Dr. Cochran has joined Department Chair, Leigh A. Neumayer, MD, her former colleague at Utah. Dr. Saffle retired in 2012, and the leadership reins as burn unit director were passed to Dr. Morris who was then joined by Giavonni Lewis MD, who had completed fellowship training at the University of Washington Burn Center in 2010. To complement the changes in faculty, the burn unit was physically transformed in 2013 after 18 months of extensive renovation and remodeling, expanding in size from 9,000 to 23,000 square feet with 15 private patient rooms staffed by over 100 employees.

After retiring, Dr. Saffle moved to Minnesota where he continued to be active in the American Burn Association as Chairman of the Multicenter Trials group as well as in pursuit of his other "ABA" passion, the American Birding Association. To cap off his career and recognize his many achievements and contributions, Dr. Jeffrey R. Saffle was awarded a Lifetime Achievement Award at the 51st Annual meeting of the American Burn Association held in 2019.

IRMA D. FLEMING, GIOVANNI LEWIS, AND CALLIE THOMPSON

After more than three decades of devoted service to the Department of Surgery, Dr. Morris retired in 2019 and Giovanni Lewis, MD (center) moved up to become the latest burn unit director. Along with Dr. Lewis, the burn unit is once again fully staffed with surgical faculty after recruitment of two more fellowship trained burn surgeons. Irma D. Fleming, MD (left) a graduate of the burn fellowship at Vanderbilt University and critical care fellowship at the University of Chicago joined the faculty in 2018 and Callie Thompson, MD (right) in 2020 after fellowship at the University of Washington in burns and critical care.



In October 2022, Christopher LaChapelle, MD, DPT, will be joining the group having trained in general surgery at Mt. Sinai New York and a burn critical care fellowship at Southwestern Parkland Memorial Hospital in Dallas, Texas.



DEPARTMENT OF SURGERY CHAIRMAN

CHAIRMAN OF SURGERY

1943-1955	PHILLIP PRICE
1957-1965	WALTER BURDETTE
1966-1971	KEITH REEMTSMA
1971-1982	FRANK MOODY
1984-1992	WILLIAM GAY
1994-1996	JAMES PARKIN
2000-2012	SEAN MULVIHILL
2013-2020	SAM FINLAYSON
2022-PRESENT	FIEMU NWARIAKU

The first Chairman of Surgery and another surgeon who became a leader and builder at Utah was Philip Barbour Price, MD, recruited from Johns Hopkins Hospital in 1943.



PHILIP PRICE

The son of Protestant missionaries, Dr. Price was born in Kashing, Chekiang, China, in 1897 and was home schooled until the age of 13 when he returned to the United Sates for high school followed by undergraduate studies at Davidson College in North Carolina.

He went on to first study medicine at the University of Virginia (1917–1919) and then at Johns Hopkins where he completed his MD in 1921. While in Baltimore, he met and married the former Octavia Howard. After an internship at the Union Protestant Infirmary, Dr. Price completed surgical residency at the Union Memorial Hospital in Baltimore and then returned to China in 1925 as a medical missionary and teaching surgeon in several Chinese university hospitals. His surgical career in China began during the civil war between Mao Zedong's Communists and the Nationalists leader of the Republic of China, Chiang Kai–shek (1927–1949) and ended in 1938 after Japan invaded mainland China impelling his return to the safety of the United States.

Upon returning to Hopkins, Dr. Price rose from assistant to associate professor and was recruited as the first Chairman of Surgery at Utah in 1943. In his letter of response to the search committee, he laid the foundation for the financial support via an endowment to support the new department of surgery and his ambitious plans for a new University Hospital as part of his negotiation to become the first chairman. Kind and soft-spoken, he was meticulous and gentle in the operating room with emphasis on precise technique and the gentle handling of tissue which has characterized "the Utah way of surgery"

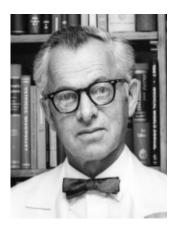
for generations. His colleagues and trainees described his demeanor as "almost enigmatic," a kind gentleman yet demanding chief. His research interests included wound healing, burns, and shock and he authored over 100 peer-reviewed articles, and awarded membership in multiple surgical associations including the American Surgical Association. Most notably, he was instrumental as a leader in the medical school and advocate for a true University Hospital.

Only three months after arriving at Utah, Dr. Price wrote to a former colleague at Hopkins, Maxwell Wintrobe, MD, urging him to consider coming to Utah to become Chairman of Medicine. Dr. Price emphasized "the possibilities of organizing a school without the restrictions of time-honored conventions and traditions", undoubtedly a reference to the established quota system at prominent East Coast medical schools, which limited advancement of Jewish physicians to leadership positions. Appointment as a Professor and Chairman of Medicine along with Dr. Price's promise of a new university hospital were pivotal in the recruitment of an academic leader of Dr. Wintrobe's stature and reputation.

Dr. Price's response to Dean Callister's offer to come to Utah as first Chair of the Department of Surgery in 1943.

This institution would facilitate carrying on the highest grade of scientific work; it would require no apologies to visitors, and by the quality of its reputation and clinical work would attract patients from the whole Mountain Region irrespective of their economic status; by its standing it would attract the best physicians and surgeons of the city to join its visiting staff. I do not think it is too early to begin planning and working for such a hospital. In my humble opinion, it is more important for your medical school than any other one thing - even an endowment. Briefly then, if you can assure me that the income of the Medical School will be in the neighborhood of \$170,000 a year and that there will be \$25,000 to \$30,000 a year available for the Department of Surgery, and that the idea of an adequate University Hospital, or its equivalent, will have your interest and support, and at least the sympathy of President Cowles, I will gladly accept your invitation to the chair of Surgery.

Born in Austria, Dr. Wintrobe's family immigrated to Canada where he attended the University of Manitoba and obtained his medical degree, later obtaining a PhD at Tulane and joining the faculty at Hopkins before his recruitment to Utah in 1943.



MAXWELL WINTROBE

He is considered responsible for developing the quantitative measures of red blood cells (MCV, MCH, and MCHC), still used today, as well as his namesake the Wintrobe method to measure sedimentation rate.

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He was the principal editor of Clinical Hematology and a founding editor of *Harrison's Principles of Internal Medicine*, now in its 21st edition. For all the academic prowess and reputation that Dr. Wintrobe brought to the new school, it was Utah's first surgical chair, Dr. Price who was responsible for his recruitment and in fact loaned Dr. Wintrobe a temporary office in the surgery department when he arrived.

In March 1943, Dr. Price started the surgical residency at Utah bringing Wallace Brooke, MD, from Hopkins as the self-described chief resident, and in fact, the first and only resident at Utah. Thus began a ladder of assistant residents rotating from Hopkins to train at Utah with the help of local surgeons like Kenneth Castleton, Philip Howard, and Ralph T. Richards. That same year, Vincent Rees, MD, was recruited from the University of Michigan as a full-time assistant professor. He left in 1947 for private practice and was replaced by William Moretz, MD, from the University of Rochester who was described by Dr. Brooke as "a pillar of support and a great asset: he was a good teacher, inspiring personality, and technically a splendid surgeon." In 1955, Dr. Moretz left to become Professor and Chair of Surgery at the Medical College of Georgia, later serving as president of that school from 1972 until 1983.

The growth and potential at Utah coming from notable East Coast recruits was brought to national attention by Newsweek magazine in a 1952 article, "Rough and Ready, Utah Medical School Emerges as the Johns Hopkins of the West." Somewhat prophetically for the future "downwinders" in southern Utah, collaboration with the Atomic Energy Commission on the medical effects of radiation was highlighted in this article. Additional predictive quotes from the article for future research strengths of the new medical school were – "research into inherited diseases," "profiting by the accessibility of genealogic archives of the Church of Jesus Christ of Latter Day Saints," and "the high degree of Mormon intermarriage and the resultant inbreeding."

The 13 years that Dr. Price was Chairman of Surgery were not without friction between the department and local private practice surgeons. These were the times that general surgeons "did it all" including orthopaedics, head and neck, urology and thoracic surgery and some of those in private practice felt they should not have to compete with tax supported medical school faculty. This "town gown" issue was most evident by Dr. Price's resistance to acknowledge cardiothoracic surgery as a separate specialty from general surgery despite academically productive and well trained local CT surgeons like Drs. Ray Rummell, J. D. Mortenson, and Russell M. Nelson. Resolution of this long-standing point of dissension has gradually eroded over the decades because of progressive cooperation and understanding between the university and private practice cardiothoracic surgeons for the benefit of both trainees and patients.

In 1955, Dr. Price stepped down as Chairman of Surgery and assumed the role of Dean of the Medical School where he was instrumental in the planning for building a true University Medical Center above the University of Utah campus. His vision for the new medical center had been clear since he first responded to Dr. Callister's offer letter to recruit him as Chair of Surgery in November 1942. He helped convince the Board of Regents to proceed with funding with commitments of \$4 million from the State of Utah, \$2 million from the Federal Government, and \$4 million from public fundraising. In recognition of his visionary efforts, Dr. Price was a featured speaker at the groundbreaking ceremonies on July 13, 1959, and laid the cornerstone for the University Hospital

THE HISTORY OF THE DEPARTMENT OF SURGERY UNIVERSITY OF UTAH 1942 - 2022



WALTER JAMES BURDETTE

The second Chairman of Surgery, Walter James
Burdette, MD, PhD, is remembered by early faculty
members like Drs. Gary Maxwell and Dominic Albo,
as being "stern and austere, always in a dark suit...
reserved and pretentious."

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To more fully complete the story of his eight-year tenure at Utah, in 1999, Dr. Burdette was once contacted by letter and phone, and he promptly sent a detailed, three-page letter and CV from Houston where he was Professor of Surgery and Associate Director of Research at the University of Texas, MD Anderson Hospital. Both verbally and in writing, Dr. Burdette was formal, professional, and detailed in relating his accomplishments as chairman at Utah. Throughout all his communications with this author, there was a tone very consistent with what his Utah colleagues remembered.

Born on February 15, 1915, in Hillsboro, Texas, Dr. Burdette received his BA from Baylor in 1935, PhD in genetics and mathematics at Texas A&M in 1936, and MD with the award of Alpha Omega Alpha at Yale in 1942. After completing his internship at Hopkins, he returned to Yale for residency and

went on to his first academic appointment as an assistant professor at Louisiana State University (1946). After short stays at the University of Missouri (1955-56), and St. Louis University (1956-57) he was appointed as Professor and Chairman at the University of Utah in 1957. As he described in his letter, when Dr. Burdette arrived in Salt Lake City, "there was no comprehensive research program" and his immediate emphasis was on establishing basic science labs and establishing a research platform for the department. His own lab, initially housed in an old barracks building from the nearby Fort Douglas, involved a colony of mice susceptible or resistant to cancer, germ free rats that developed cholelithiasis, and drosophila mutant stocks that had inherited tumors. To this eclectic mix of research, Dr. Burdette added collaboration on various projects with universities in Japan, traveled to South Africa to study their high incidence of various cancers, and to Germany to study the new art of organ transplantation. While at Utah, he hosted national meetings on genetic research, published widely, edited numerous texts, and was appointed the first chairman of the genetics study section at the National Institute of Health. By his own account, his appointment at the NIH and his role in preparing the 1964 Surgeon General's Report on Smoking and Health were his greatest academic professional accomplishments.

Dr. Burdette's surgical practice at the Salt Lake General Hospital reflected his wide ranging interests and the variety of surgeries done by general surgeons at that time. To a long list of cardiothoracic and oncologic procedures, he added performing an open cholecystectomy on Dr. Wintrobe.



FIRST RENAL TRANSPLANT

Together with Lawrence Stevens, MD, a young assistant professor on the faculty, Dr. Burdette is credited with performing the first renal transplant in Utah on January 25, 1965, at the time a novel and complex procedure that the two surgeons had literally "trained themselves" to do.

In 1971, Dr. Stevens went on to further training and practice in transplantation at Columbia Presbyterian Hospital in New York, later to return to the University of Utah program in 1975. Eventually, he left the university and formed a competing organ transplantation program at the LDS Hospital in Salt Lake City.

Dr. Burdette's summary letter of his chairmanship at Utah did reflect regret that he never completely solved the "persistent and stubborn problem" of financial support for a surgical staff with "all salaries meager and income from private practice minimal." It was also during his chairmanship, tensions with the thoracic training program eventually resulted in Russell Nelson, MD, leaving the university and forming an independent CT program at the LDS Hospital, which lasted until 1967.

Dr. Burdette died at home in Houston on April 18, 2006, at the age of 91. His obituary describes a man of boundless energy, accomplished as a surgeon, geneticist, mathematician, cancer researcher, and musician. Happily, in his 1999 correspondence outlining his many achievements, Dr. Burdette noted that he had recently fulfilled his "lifelong ambition to play the pipe organ at Notre Dame Cathedral in Paris."

KEITH REEMTSMA



Like Dr. Price, the third Chairman of Surgery at Utah, Keith Reemtsma, MD, was the son of missionaries and who left a notable legacy at the University of Utah. However, compared to the reserved, enigmatic Dr. Price, Dr. Reemtsma was charismatic, a fearless innovator of xenotransplantation, and the chair who organized the department by divisions while establishing affiliations with surrounding facilities.

Dr. Reemtsma was born on December 5, 1925, in Madera, a small town in central California, the son of Presbyterian missionaries who traveled between Arizona, Oklahoma, and Texas. As a child, he attended a one-room schoolhouse on the Navajo reservation and later enrolled at the Wasatch Academy, a private Presbyterian school in rural, Mount Pleasant, Utah, which is now self-proclaimed as "America's boarding school for generation Z". For a

man who was usually straightforward and open, his early education on the reservations of the southwest and how his interest in medicine and surgery developed is not something he well documented. At age 18, Reemtsma enlisted in the U.S. Navy and while a participant in the V-12 Navy College Training Program, he attended Idaho State University in Pocatello, Idaho. This program was designed to train more officers during World War II in fields such as engineering, medicine and the ministry. Between 1943 and 1946 the program included 125,000 students from 131 colleges and universities, including such notables as Robert F. Kennedy and Paul Newman. When he completed the program in 1945 and was offered the choice of becoming a chaplain or a physician, Dr. Reemtsma later recalled, "I knew god damn well I didn't want to be a chaplain" and so he enrolled in the University of Pennsylvania Medical School. There, he was influenced by C. Everett Koop, MD, a future Surgeon General of the United States, to pursue an internship at Columbia Presbyterian in New York, where he trained in cardiac and pediatric surgery under George Humphries, MD.

Completing internship in 1951, Marine Lieutenant
Reemtsma was assigned to E Company, First Medical
Battalion, First Marine Division MASH unit during the
Korean War. From that experience and based on his
personality and physical appearance, he laid claim to
have been the inspiration for the character of Hawkeye
Pierce in the movie and television series "M*A*S*H."

After returning to the states, he completed his residency at Columbia in 1957, and accepted a faculty position at Tulane University in New Orleans as a cardiovascular surgeon, under Oscar Creech, MD. Soon, however, Dr. Reemtsma developed an interest and passion for the new field of organ transplantation. At that time, the specialty of renal transplantation was in its infancy and without available dialysis, patients in renal failure had no

alternatives to death. After organizing a team including immuno-geneticists

and veterinarians, he performed a series of xenotransplants impossible

In 1966, Keith Reemtsma left Tulane to become the third Chairman of Surgery at the University of Utah. He brought with him a continuing interest in pancreatic islet cell transplantation as a treatment for Type 1 diabetes and a desire to develop a program in artificial organs and heart transplantation. To support those areas, in 1967, he recruited Willem Kolff, MD, "inventor of the artificial kidney" from the Cleveland Clinic.

WILLEM KOLFF

Dr. Kolff was appointed the head of the Division of Artificial Organs in the Department of Surgery. He went on to national prominence 17 years later when an artificial heart he designed with a team of medical and surgical researchers including Cliff Kwan–Gett, MD, was transplanted into retired dentist, Barney Clark.

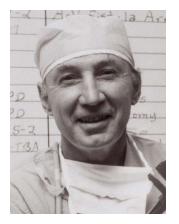


Beyond his clinical interests, Dr. Reemtsma's tenure as Chair of Surgery was significant for growth of the full-time faculty, organization of the department into a divisional structure, and affiliation with surrounding private institutions. To augment the clinical programs and training of residents, Dr. Reemtsma made Dr. Dominic Albo head of the service at the Holy Cross Hospital in Salt Lake City and Dr. John Dixon the chief at the McKay Dee Hospital in Ogden, Utah. He also convinced Dr. Charles Smart to close the fledgling independent residency program at the LDS Hospital and lead the university surgical service at that facility.

After a short but remarkably productive six years, Dr. Reemtsma left Utah to become Chairman at his residency alma mater, Columbia Presbyterian in New York. He took with him, Larry Stevens, MD, a member of the Utah surgical faculty, who later returned in 1976 and established a transplant program at the LDS Hospital. During his 23-year tenure as Chair at Columbia, Dr. Reemtsma collaborated with Mark Hardy, MD, to establish a multidisciplinary approach to organ transplantation and a world-class heart transplant program. After stepping down at Columbia, Reemtsma founded an international center for health outcomes research. He remained active in transplantation up until his death from liver cancer on June 23, 2000, shortly after returning to New York from a xenotransplant meeting in Japan.

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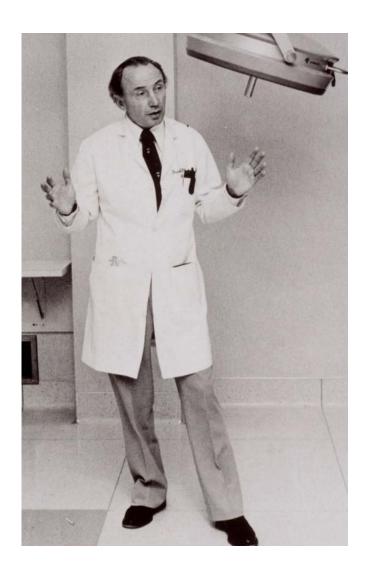
Described in eulogies as both a man of warmth and humanity and an articulate and loquacious raconteur, Dr. Keith Reemtsma's visionary and courageous approach to surgical innovation was the hallmark of his remarkable career in surgery.



FRANK MOODY

Dr. Frank Gordan Moody's concise life view is made emphatically clear in the introduction of his autobiographical book, Frank Reflections of an Academic Surgeon: "The path through life has numerous twists and turns and the final outcome is more or less a game of chance. One's personal journey relates to a complex interaction between their genes, the environment, opportunity, and relationships to other people."

While Drs. Price and Reemtsma were both sons of missionaries and Dr. Burdette was remembered as being austere and reserved, Dr. Frank Gordan Moody, the son of poor parents from Franklin, New Hampshire, became a truly self-made man with an energetic, charismatic, colorful, and sometimes unpredictable personality that defined his tenure as the fourth Surgical Chair at Utah.



Born on May 3, 1928, in the "flat dweller" side of Franklin, a hardscrabble woolen mill town during the great depression, Dr. Moody was appointed Chairman at Utah in 1971. In just over a decade, he led a department that became noted for the training of many future chairs of surgery in academic departments around the country. Growing up with "poverty as a way of life," Dr. Moody's mother, Elsie, worked as a burler in the town's woolen mill while his father, Fred, suffered many health challenges secondary to obesity dying at the young age of 52. Frank and his older sister, Alice Etta Moody Seaward, were "brought up by Mrs. Meisterfield, a German lady who in fact was the owner of the flat". In his book, Dr. Moody describes his scholarship and acceptance to the premier northeastern prep school, the Phillips Exeter Academy, in 1946 as the turning point in his life. Rather than be drafted, he volunteered for the army the day after graduation from the academy, but before he could return home to Massachusetts to prepare, he was sent to Fort Bragg, North Carolina, and become a paratrooper with the 82nd Airborne. In May 1947, he was sent to Sapporo, Japan, where most of his duty was spent racing for the ski team. Later, Dr. Moody credited his acceptance at the Exeter Academy as the key to propelling him to Dartmouth in 1948 and then on to his medical degree and surgical residency at Cornell (1956-1963).

In 1950, he married Barbara Schmelzer and they had three children, Anne, Frank, and Jane before divorcing in 1964 after an unusually strained relationship. Originally starting as an intern in medicine and psychiatry, he was influenced by Frank Glenn, MD, to enter the seven year pyramidal surgical residency at the New York Hospital where he began a lifelong interest in mindgut interactions with emphasis on gastric and biliary physiology. In 1963, Dr. Moody was recruited by J. Englebert Dunphy, MD, to San Francisco to work in Dr. Dick Durban's lab and join other future giants in American surgery as one of "The Dunphy's boys." That group included Folkert Belzer, MD, Thomas Hunt, MD, and Donald Trunkey, MD. In June of 1964, Dr. Moody's life hit what he described as a "rough spot in the road" when his first wife, Barbara left to seek a quick divorce after spending six weeks with their children in Reno, Nevada. Almost simultaneously, Dr. Moody had been introduced by a

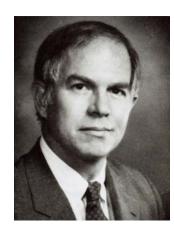
colleague to a beautiful Swedish woman, Maja Charlotta Stolpe to whom he was immediately attracted. His divorce from Barbara was completed on a Saturday morning, he returned to take call in San Francisco that night, and he married Maja the next day, a supportive union that lasted until her death in 2003.

John Kirklin, MD, who had just relocated to Alabama from the Mayo Clinic, recruited Dr. Moody to help in building the department of surgery at the University of Alabama in Birmingham. There, Frank Moody was nicknamed "the dancing bear" because of his animated personality and descriptive mannerisms. In 1972, Dr. Moody hopscotched the country once more to assume Chairmanship of the Department of Surgery at Utah. Over the next decade, he generated a legacy notable for innovative gastrointestinal research, continuous NIH funding, and fostering the training of future leaders in surgery. Training at Utah during Dr. Moody's tenure has become like those who claim to have had ancestors on the Mayflower. Nonetheless, the list is long and impressive, including those that finished the residency during or shortly after Moody was Chariman and went on to become surgical chairs themselves including; Drs. Lawrence Chung, Layton Rikkers, James Goodnight, James Becker, Stephen Lowery, Byers Shaw, Nathanial Soper, and John Hunter. Other outstanding surgeons and academic leaders associated with "the Moody years" include Drs. Bruce Houtchens, James McGreevy, John Potts, Glenn Warden, Dirk Noyes, and Jeffrey Saffle.

Despite incredible success in building the department and training surgical leaders over a decade at Utah and his "addiction" to Utah skiing and hiking, Dr. Moody considered it "almost a mandate" to move on to remain academically productive. Accordingly, in 1983 he left Utah to become the Denton A. Cooley Professor and Chairman at the University of Texas, Houston, where he remained as Chair until 1994 and stayed on the faculty until his death in 2016. He remained active in academic surgery, continuing his interest and research of digestive system diseases including peptic ulcer, the biliary tract, and surgical treatment of obesity. Over his 55-year career,

Dr. Frank Moody authored 155 refereed and 43 invited articles, authored or co-authored 100 book chapters and was honored with the Lifetime Achievement Award of the Society of University Surgeons and the American Surgical Association Medallion for the Advancement of Surgical Care. Dr. Moody is survived by his three children, Anne, Frank and Jane, and his loving companion, Inger Arden. At the University of Utah and throughout the entire country, Dr. Frank Moody's legacy as academic surgeon and educator lives on through the hundreds he mentored and trained. The final chapter of his autobiography is appropriately titled *Summing Up a Privileged Life*.

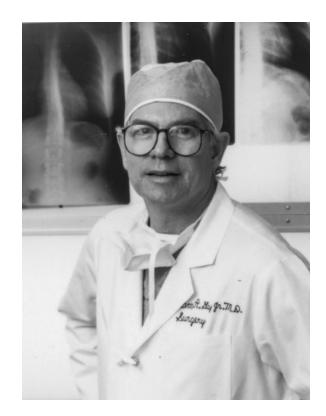
The fifth Chairman of Surgery at the University of Utah, William Arthur Gay Jr., MD, arrived in October of 1984 from the New York Hospital–Cornell University Medical Center where he had been in charge of cardiothoracic surgery and Professor of Surgery.



WILLIAM GAY

A native of Richmond, Virginia, William Gay, MD, attended high school in Gaffney, South Carolina followed by his undergraduate degree from the Virginia Military Institute and his MD from Duke in 1961. He went on to train from 1961–1971 in general and thoracic surgery at Duke under David C. Sabiston, MD, whose fame and reputation for developing academic surgeons and future leaders in surgery was legendary.

While a Duke resident, he married Frances Louise Adkins in Durham, North Carolina, on December 17, 1969. During his Duke residency, Dr. Gay served two years as a Clinical Associate at the NIH where he collaborated with Dr. Paul A. Ebert in basic research on cardioplegia solutions eventually resulting in their 1973 seminal publication, *Functional, metabolic, and morphologic effects*



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UTAH'S FIRST CARDIAC TRANSPLANT

Shortly after arriving as
Chairman at Utah, Dr. Gay
performed Utah's first cardiac
transplant, placing a donor
heart into an Idaho teenager,
Tony Shepard, in March 1985.

He went on to organize and direct a uniquely collaborative effort in cardiac transplantation aptly named "UTAH Cardiac" (Utah Affiliated Transplant Hospitals), a cooperative effort between surgeons at the University and LDS Hospitals. In doing so, he was instrumental in creating one of the earliest, largest, and most successful cardiac transplant programs in the country, as the crosstown coalition performed 396 cardiac transplants between 1985 and 1991 with a near 90% one year patient survival rate.

DONALD DETMER

Dr. Gay's tenure as Chairman overlapped briefly with that of his Duke colleague, Donald Detmer, MD, who served as Vice President for Health Sciences at Utah from 1984 to 1988.



The Department of Surgery at Utah had long been known for its "Division of Artificial Organs" originally founded and organized in 1967 by Dr. Kolff, who is credited as the inventor of the first dialysis machines during World War II.



WILLIAM DEVRIES

Shortly before Dr. Gay became
Chairman at Utah, William DeVries, MD,
a former Utah medical student who had
worked with Dr. Kolff and then gone on
to the Duke thoracic program, implanted
the Jarvik-7 into retired Seattle dentist,
Barney Clark on December 2, 1982.

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While this "first artificial heart" only sustained the patient for 112 days, it captured worldwide attention and made the cover of Time magazine. This team continued to lead the way to Utah's development of an Advanced Heart Failure Program with devices based on the original artificial organ program as well as offering bridges to recovery via various cardiac assist devices.

In the summer of 1990, Dr. Gay was appointed as the University of Utah's

role that he fulfilled until his resignation in 1992 to accept Chairmanship of

Medical Center in New York City. In his own words, Dr. Gay left Utah "for

greater involvement in the clinical and investigative challenges that exist in

the area of my greatest interest, cardiothoracic surgery." In 1994, he joined

of Thoracic Surgery and remains active, publishing articles on graduate

education, resident work hours, and maintenance of certification.

the faculty at Washington University, St. Louis, where he is Professor Emeritus

Vice President for Health Sciences, a complex and demanding administrative

Cardiovascular Surgery at the Albert Einstein College of Medicine-Montefiore

JAMES PARKIN

Utah native, James Lamar Parkin, MD, has the unique distinction of having served as interim Chairman of Surgery twice (1982–1984 and 1993–1994) and sixth permanent Chair from 1994–1996. Born in Salt Lake City and raised in northern Utah, he graduated from Bountiful High School in 1957 after which he served a mission for the Church of Jesus Christ of Latter-day Saints.

After experience in the Army Reserve, Dr. Parkin enrolled at the University of Utah where he received his BS in 1963 and medical degree in 1966 after serving as the medical school's student body president. He completed his post-graduate training at the University of Washington where he earned an MS in physiology and biophysics in 1970 and completed a straight medicine internship (1968–1969) at University of Washington Affiliated Hospitals as well as an otolaryngology residency at the University of Washington from 1969 to 1972. Dr. Parkin returned to Utah with appointment as an assistant professor in 1972 and rapidly advanced to become Professor and Chief of the Division of

Otolaryngology-Head and Neck Surgery in 1974. During his academic career, he authored numerous peer-reviewed publications, books and reviews in his specific areas of interest including cochlear implantation and head and neck neoplasms. He was also invited as visiting professor to a long list of national and international academic institutions, and was awarded numerous external grants for his research. Nationally, Dr. Parkin was recognized as a member of multiple professional societies and held leadership positions that included: President of the Association of Academic Departments of Otolaryngology-Head and Neck Surgery, President of Collegium Aesculapium, and the Society of University Otolaryngologists – Head and Neck Surgeons.

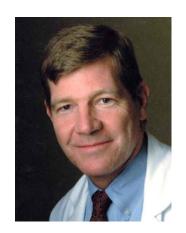
After serving as division chief from 1974 to 1992, Dr. Parkin was selected as Department Chair in 1994 and simultaneously assumed Chairmanship of the Health Science Center's Faculty Practice Organization (FPO), a committee of seven representatives from clinical departments. Using his connections through the Association of Academic Departments of Otolaryngology, Parkin researched numerous faculty pay plans from around the country and modelled the FPO version at Utah after the one at UCLA. As FPO Chair, he also assumed responsibility for negotiating insurance contracts for the faculty, which at the time, largely involved "on the job" training and relying on what seemed fair and best for his colleagues. In 1996, he stepped down as Chairman and retired from clinical practice when he was diagnosed with multiple sclerosis. He was initially considered for Dean of the Medical School but declined and instead continued to serve the University of Utah as Associated Vice President for Health Sciences from 1996-1997. In that position, Dr. Parkin met with all the departmental chairmen and developed the institutional five-year plan. After leaving the university, he and his wife, Bonnie continued to serve his church when called as the President of the London South Mission in England for the Church of Jesus Christ of Latter-day Saints. Now, 25 years after stepping down as Chair of Surgery, Jim Parkin still lives in Salt Lake City, is active in the department's "University of Utah Surgical Society," and proudly follows the successful careers of his four sons.

The seventh Chair of Surgery at Utah, Sean J. Mulvihill MD, came as a product of education and training in California, starting with an undergraduate degree at UC Davis in 1976 and rising to Professor and General Surgery Division Chief at UC San Francisco from 1997-2000.

SEAN MULVIHILL

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Sean Mulvihill, MD, graduated from the Keck School of Medicine at the University of Southern California in 1981 and completed residency and fellowship at the University of California Los Angles in 1987. He was appointed as Chairman of Surgery in the summer of 2000 after a stellar academic tenure during his 13 years on the surgical faculty at UCSF.



There, he was mentored and influenced by his chairman, Haile Debas, MD, to become an expert in upper gastrointestinal surgery, the physiology of gastrointestinal peptide hormones, and "the power of mentorship by senior leaders." Once at Utah, Dr. Mulvihill's tenure as chair was marked by significant growth in the clinical productivity of the faculty through the development of new programs in liver transplantation, advanced laparoscopic surgery, and complex pancreatic surgery. His record of academic productivity includes authoring over 150 scientific papers and as an editor of the surgical text; Surgery: Basic Science and Clinical Evidence. He has been recognized by membership and leadership positions in multiple prestigious surgical societies including past President of the American Hepato-Pancreato-Biliary Association.

To lead the relatively new field of advanced laparoscopic surgery, Dr. Mulvihill brought with him his former mentee and colleague from San Francisco, Dr. Robert Glasgow. Following in Dr. Mulvihill's footsteps, Dr. Glasgow has excelled both clinically and administratively, with appointments as the department's Chief Value Officer and Vice Chair for Clinical Operations and

Quality. On December 1, 2020, Dr. Glasgow was appointed to serve as interim chair of the department when Dr. Sam Finlayson stepped down as Chairman of Surgery and was appointed as Associate Vice President for Clinical Affairs and Chief Clinical Officer for University of Utah Health.

Dr. Mulvihill's tenure from 2000–2012, was notable for spectacular growth of the department. One hundred twenty new faculty were recruited, clinical revenue productivity grew by an average of 13% per year, and the department was established as a national leader in patient safety as a result of being an early member of the National Surgical Quality Improvement Program of the American College of Surgeons (NSQIP). Building further on these efforts for better patient outcomes, Dr. Mulvihill was instrumental in the development of innovative efforts to increase patient satisfaction by linking web-based patient survey data with individual provider pages in a transparent fashion.

From 2002 to 2012, Mulvihill served as Senior Director of Clinical Affairs for the Huntsman Cancer Institute where, under his direction, the clinical programs grew by 18% per year, helping to establish the Huntsman Cancer Institute as an NCI designated Comprehensive Cancer Care Center in 2015. Both his research and clinical focus remained centered on the early detection and treatment of pancreatic malignancies. With this focus, Dr. Mulvihill maintained a surgical practice involving complex pancreatic and GI malignancies, coincident with developing a pancreas cancer research group, creating a database of clinical samples, and continuing basic science research aimed at identifying specific prognostic biomarkers for early detection of pancreatic cancer.

Dr. Mulvihill stepped down as Chairman of Surgery in 2012, to assume the role of Associate Vice President for Clinical Affairs for the University Health Sciences Center where he became responsible for the allocation of \$100 million in health system support to the academic departments. Serving in this key institutional leadership role from 2012 to 2016, he led the health science center's efforts in population based expansion by creating 10 community-based ambulatory care centers, affiliating with seven regional hospitals, and establishing University Health-based insurance plans.

To compliment his professional accomplishments, Dr. Mulvihill has added an enviable list of personal and family accomplishments. He and his wife Kimberly, who is also a physician, have raised three sons all of whom have completed medical school and embarked on career paths in surgery or basic science research. With various combinations of the family serving as crew for their J-120 sailboat "Jamini," the Mulvihill's have completed multiple times in the 2200-mile, TRANSPAC sailing race between California and Hawaii. On July 1, 2021, Dr. Mulvihill retired from clinical practice. Emphasis on family, sailing, and enjoying their ski retreat in Kirkwood near Lake Tahoe, California, will undoubtedly compliment what has been a truly outstanding academic career in surgery.

On December 1, 2020, after serving for seven years as the eighth Chair of Surgery at Utah, Samuel R. G. Finlayson, MD, MPH, MBA, was appointed as Associate Vice President for Clinical Affairs and Chief Clinical Officer for University of Utah Health.



SAM FINLAYSON

During his tenure as Chairman, as the Department of Surgery faculty grew in both numbers and diversity, the clinical enterprise expanded at 7% per year and the sponsored research portfolio expanded by 400%. As Michael L. Good, MD, Senior Vice President for Health Sciences and CEO of U of U Health noted in announcing Finlayson's new appointment: "Impressive accomplishments indeed."

Although he has ancestral roots in Utah, Dr. Finlayson was born and raised in northern California before moving to the East Coast and obtaining his Bachelor of Arts, Master of Public Health, and MD at Harvard. He went on to complete surgical residency at the Massachusetts General Hospital

followed by a fellowship in health services research at Dartmouth. For the next decade, Dr. Finlayson's academic career focused on health services research in addition to serving as Vice Chair of Surgery and Director of the Surgical Residency Program at Dartmouth. In 2011, he left Dartmouth to become the Kessler Director of the Center for Surgery and Public Health, a joint health services research initiative of Brigham and Women's Hospital, Harvard Medical School, and the Harvard School of Public Health. During one of his "audition visits" to Utah he gave a presentation focused on the value equation for health care (Value=Quality/Cost), a concept and theme that has now resonated at every level in the department and throughout the institution. When appointed Chairman at Utah in 2013, Dr. Finlayson rapidly built on his health services research background to stimulate and expand clinical and research interests of the faculty in the variations in use and outcomes of surgery, surgical care innovation, surgical workforce, and access to quality care in rural versus urban settings.

In his new position, he is charged with ensuring the highest standards of quality, safety, and efficiency across the entire U of U Health enterprise as part of senior leadership including the University Hospitals and Clinics CEO, Health Plans CEO, and the departmental chairs within the School of Medicine. In addition, Dr. Finlayson will chair the University Medical Group (UUMG) Executive Committee and serve as chair pro tem of the UUMG Board of Directors. In accepting this new role, Dr. Finlayson has stated he is "determined to support an equitable, collaborative environment that promotes wellness and draws on the strength of diversity."

FIEMU NWARIAKU

On April 12, 2022, Michael L.
Good, MD, Senior Vice President
for Health Sciences, announced
the appointment of Fiemu
Nwariaku, MD, as the ninth
Chair of the Department of
Surgery at the University of Utah
effective July 1, 2022.



Dr. Nwariaku comes from the University of Texas Southwestern Medical Center in Dallas, Texas, where he has been the Malcom O. Perry Professor of Surgery, Executive Vice Chair of the Department of Surgery, and the Associate Dean for Global Health.

After medical school training at the University of Ibadan and University College Hospital in Ibadan, Nigeria, Dr. Nwariaku went on to complete a surgical residency and research fellowship at UT Southwestern where he was appointed as an Assistant Professor of Surgery in the Division of Gastrointestinal and Endocrine Surgery in 1998.

Dr. Good's announcement describes the new Chair of Surgery as "a leader, surgeon, educator, and scientist" with a focus on endocrine surgery who is known for building clinical and academic programs nationally and internationally. As an accomplished surgeon scientist, Dr. Nwariaku has

served as Principal Investigator, Co-Investigator, and Program Director for multiple peer-reviewed grants from the National Institutes of Health, Veterans Administration, and industry sponsors for over 25 years. At UTSW he was the founding Vice Chair of Research in Surgery and created a program that supports faculty with more than 20 NIH grants, 30 clinical trials as well as the Surgical Center for Outcomes, Implementation, and Novel Interventions and the Center for Organogenesis Research and Trauma (CORT).

Through his emphasis on faculty development at UTSW, Dr. Nwariaku established an office of Faculty Development, a Recruitment and Retention Advisory Committee, and a program pairing junior faculty with senior mentors for career advancement.

After a quarter century career including these many accomplishments in academic surgery at UTSW we are happy to welcome Dr. Nwariaku as the ninth Chair of Surgery at the University of Utah.



GENERAL SURGERY RESIDENCY AT THE UNIVERSITY OF UTAH

residents on weekends, on returning to the hospital they might face a caustic critique of their lack of surgical knowledge, misuse of the English language, and limited abilities in the operating room. Through it all, the surgical residency at Utah was his passion and the residents his extended family.

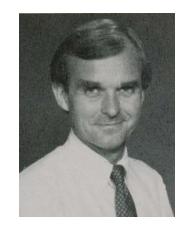
fashion. After he had skied, run mountain trails, and socialized with his

It was during a grand rounds presentation given by fighter pilots from Hill Air Force base, that Dr. McGreevy was introduced to the use of checklists and protocols in military flying to minimize errors and accidents and he immediately became a pioneering advocate for using similar systems in the operating room. Coincidently, he became equally enamored with flying, joined the Air Force Reserve, served a tour of duty in Iraq, and eventually became the local Air Force Reserve Flight Surgeon and Squadron Commander.



Partially because of this military commitment, Dr. McGreevy was a natural choice for Chief of Surgery at the Salt Lake City VA, a full-time appointment that meant stepping down as residency program director in 2009 after an amazing tenure of 26 years. Along with his VA administrative load, he continued to participate in NCI funded research, embrace the potential educational role of surgical simulation, and remained a vigorous supporter of the residency. Toward the end of his career, he became a mentor and assistant for new faculty and a reliable voice of reason and perspective for the division. For the three years prior to his death, Jim McGreevy endured the circumstances and limitations of his diagnosis and treatment with the same energy and resolve that defined his academic career and tenure as program director.

After nearly four decades on the Utah surgical faculty, James Michael McGreevy's, life ended on January 29, 2019, when he succumbed to pancreatic cancer at age 71. In many ways, it had been a life on a complicated path; full of changes, reversals, and contradictions. Born into a devout Catholic family, the son of a Pittsburg policeman, and educated in parochial schools, he seemed predestined to enter the clergy. However, Jim's plan radically revised when he left the seminary, reversed course, and to turn his intellect and talents into medicine. Returning to Pittsburg, he entered surgical training where he was influenced by Mark Ravitch, MD, and Henry Bahnson, MD, the surgical mentors he would continue to reference and quote throughout his career.



JAMES MCGREEVY

In 1981, near the end of his residency, Dr. McGreevy came to Utah to spend a year in Frank Moody's lab and made a plan to return and join the faculty as a member of the "red team," presumably destined to be Moody's mentee and protégée.

Their two quixotic personalities led to a complicated and later somewhat conflicted relationship that lasted until 1983 when Frank Dr. Moody left Utah to become Chairman at the University of Texas, Houston. Later that same year, Dr. McGreevy was appointed as the surgical residency program director by the new Chairman, Dr. Gay, thus beginning a career in postgraduate surgical education that would last for the next 26 years. With time and the experience it provided, he evolved into a consummate surgical educator; demanding, fair, and a tireless advocate for the residents. Uncompromising and sometimes seemingly unpredictable, Dr. McGreevy's personality brought a unique panache and style to the training program. Funny, entertaining, and engaging one minute, serious, imposing, and intimidating the next, Dr. McGreevy always remained completely devoted to his residents, even if in a complicated



DANIEL VARGO

When Dr. McGreevy stepped down as general surgery program director, his replacement had been "in training" as the associate program director for five years. Daniel Vargo, MD, completed general surgery residency at the University of Wisconsin in 1998 followed by a Critical Care Fellowship at UCDavis before joining the faculty at Utah in 2000 as an assistant professor.

He was appointed as Associate Program Director in 2004 and began to focus his academic career on surgical education, receiving multiple institutional teaching awards and national committee assignments in the Association for Surgical Education and the Association of Program Directors in Surgery. When Dr. Vargo took over as residency program director in 2009 he was immediately faced with significant changes and increased requirements for documentation from the RRC and all else that went into the challenges of transition to the 80 hour work week. While navigating these national changes, Dr. Vargo was also able to deal with the growth and demands of the teaching faculty despite the decreased "manpower" as subspecialty trainees were pulled from general surgery rotations.

Among Dr. Vargo's notable achievements for the residency program was the evolution of the professional development year to include rural surgery, master's programs, bio-innovations, and global surgery.

Most significantly, he managed to fulfill all the local and national requirements to increase the size of the program from five to six finishing residents per year while continuing to attract outstanding trainees ready for practice or

fellowship after training at Utah. In addition to all that he accomplished as program director from 2009 to 2020, Dr. Vargo maintained a busy surgical practice, first in trauma and critical care and later special expertise in complex abdominal wall reconstruction, teaching robotic surgery, and a leadership role in the development of surgical simulation.

LAURA LAMBERT

When Dr. Vargo announced he was planning to step down as program director, Laura Lambert, MD, a surgical oncologist trained at Harvard, Dartmouth, and MD Anderson who had joined the Utah faculty in 2018 was immediately recognized as the best possible replacement candidate.



She accepted the position noting the "honor of becoming part of the legacy of general surgery at the University of Utah" while recognizing the unique challenges of surgical training during a global pandemic. Dr. Lambert quickly established her unique surgical practice involving the treatment of peritoneal carcinomatosis and palliative medicine and, in less than two years, she made equally impressive contributions to the residency through an emphasis on humanism combined with diversity, equity, and inclusion. Jason Young, MD, a UC Irvine medical school and residency graduate, assumed the role of Associate Program Director joining Greg Livers, MD, Clinical Director, and a superb support staff that includes Lori Bybee, Janell Clements, and nurse educator, Ruth Braga, MSN, RN.

LAURENCE CHEUNG

1973, University of Kansas

JAMES GOODNIGHT

1976, University of California, Davis

LAYTON "BING" RIKKERS

1976, University of Nebraska and University of Wisconsin

JAMES BECKER

1980, Boston University

BYERS "BUD" SHAW

1981, University of Nebraska

STEPHEN LOWERY

1981, Rutgers University Medical Center

NATHANIEL "NAT" SOPER

1985, Northwestern University

JOHN HUNTER

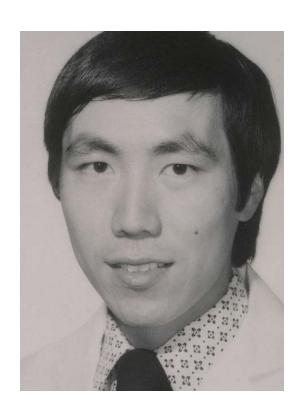
1987, Oregon Health Science University

DMITRY OLEYNIKOV

2020, Monmouth Medical Center New Jersey

RESIDENCY GRADUATES WHO BECAME DEPARTMENT CHAIRS

PASSAGES AND PROGRESS PASSAGES AND PROGRESS

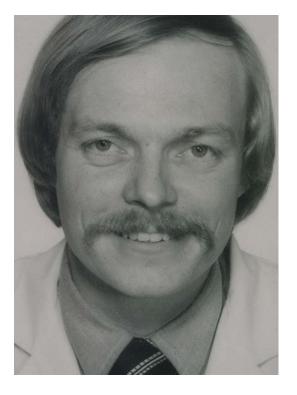


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LARRY CHEUNG

A graduate of the National Defense Medical Center in Taiwan, Laurence "Larry" Y. Cheung, MD, completed general surgery residency at Utah in 1973.

Clearly influenced by spending an additional two years in Dr. Frank Moody's lab, Dr. Cheung was a life-long "physician scientist" who was consistently NIH funded in his study of acid induced gastric injury and gastrointestinal consequences of sepsis and multi-organ system failure. After a brief stay on the Utah faculty, he was recruited by Sam Wells, MD, to Washington University School of Medicine in St. Louis in 1977 before his eventual appointment at the University of Kansas where he served as Professor and Chairman of Surgery from 1986 to 2003. In recognition of his consistent accomplishments and productivity in surgical research, Dr. Cheung received the Outstanding Scholar Award at the University of Kansas and was elected as President of the Association of Academic Surgeons in 1982. Dr. Cheung is currently Chairman of Surgery at Ascension Providence Hospital in Detroit, Michigan, a program affiliated with the College of Human Medicine, Michigan State University.



JAMES GOODNIGHT

James Goodnight, MD, grew up in Texas and received his MD in 1968, served two years with the Public Health Service, finishing the Utah general surgery residency in 1976.

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He went on to train in surgical oncology and then accept a faculty position with Don Morton, MD, at UCLA and later joined the faculty at the University of California, Davis. Dr. Goodnight served as Chairman of Surgery at Davis from 1995 to 2011 and as the first cancer center director was instrumental in obtaining NCI designation in 2002. Until his retirement in 2015, he was Associate Dean for Clinical Affairs and Executive Director of the Practice Management Board. The Cancer Center Auditorium at UC Davis has been named in Dr. Goodnight's honor and he has been appointed as Professor and Chair Emeritus.



LAYTON RIKKERS

Born midway between Madison and Green Bay in the small Wisconsin town of Fond Du Lac, Layton F. ("Bing") Rikkers, MD, is arguably the most successful and certainly the best known of the Utah residency alumni who trained during Dr. Frank Moody's tenure.

An Eagle Scout, high school valedictorian, and lifelong Green Bay Packers fan, he earned an undergraduate degree from the University of Wisconsin, his MD from Stanford, and finished the Utah general surgery residency in 1976. During residency, he also completed one year in Dr. Moody's GI lab, and additional fellowships in hepatology with Dame Shelia Sherlock, MD, at the Royal Free Hospital in London (1973–1974) and portal hypertension surgery with Dean Warren, MD, at Emory University (1976–1977). He joined the Utah faculty, became Division Chief of general surgery in 1983, and the next year moved on to the University of Nebraska where he served as Chairman from 1984–1995.

Dr. Rikkers returned full circle to the University of Wisconsin as Chairman of Surgery in 1996 and became internationally known for his expertise in portal hypertension and hepatobiliary surgery and interests in surgical education and leadership mentoring.

As a groundbreaking leader in American surgery, he was ahead of the curve in emphasizing "wellness and a balanced life" promoting a career balanced by taking time for a spouse or partner, children, and self.

His contributions to academic surgery include being the Editor-in-Chief of the Annals of Surgery (1997-2011), the SSAT Master Clinician Award named in his honor, and appointed Director and Chairman of the American Board of Surgery (1988-1995). After retirement from clinical practice in 2009, he was appointed as Professor Emeritus of Surgery at Wisconsin, elected as President of the American Surgical Association in 2013, and awarded the Society of University Surgeons Lifetime Achievement Award in 2018. As part of the SUS ceremony highlighting his numerous accomplishments and accolades, Bing Rikkers emphasized that mentoring had been the most enjoyable aspect of his career, like Norman Shumway, MD, at Stanford and Frank Moody at Utah were for him, he hopes most to be remembered as a good mentor.

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JAMES BECKER

James Becker, MD, received his MD in 1975 from Case Western Reserve in Cleveland Ohio and completed training in general surgery at Utah in 1980. After working in Frank Moody's lab studying biliary physiology, Jim became interested in academics and gastrointestinal surgery and went on to fellowship in colorectal surgery with Keith Kelly, MD, at the Mayo Clinic.

Dr. Moody recruited him back to Utah where he soon established an academic practice specializing in advance colorectal surgery and the newer technique of ileoanal pull through for ulcerative colitis and familial polyposis. He was recruited away by Dr. Wells to Washington University in St. Louis and later to the Brigham Hospital in Boston. After developing a large referral practice, Dr. Becker was appointed as Chairman of Surgery at the Boston University School of Medicine (1994–2011).



BYERS "BUD" SHAW

The son of a busy surgeon in rural Ohio, Byers "Bud" Shaw, MD, graduated from Kenyon College in 1972 and earned his MD from Case Western Reserve in Cleveland in 1976. As a general surgery resident at Utah, Bud was known best for his superb surgical skills and at times, an approach to residency that frustrated Frank Moody enough to write him a stern letter demanding that "if he did not start working up to his potential, he would have to leave."

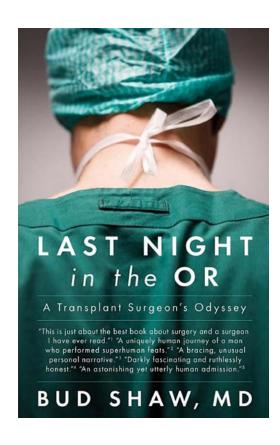
Pittsburg with the father of liver transplantation, Tom Starzl, MD, and then on to become one of the country's premier liver transplant surgeons himself. He joined Starzl's program in 1983 as an assistant professor and only two years later was recruited by Bing Rikkers to become chief of the transplant program at the University of Nebraska (1985–1997). In addition to building one of the highest volume and successful transplant programs in the country, Dr. Shaw became an active participant in the conversation about the national system of organ allocation. In 1997, Dr. Rikkers left for Wisconsin and Bud Shaw was promoted to Chairman at Nebraska, where he led the growth

and success of the Department of Surgery until stepping down in 2008. He retired from surgical practice in 2009 but remains on the Nebraska faculty as Medical Director of Advanced Computer Applications, a program to manage

Dr. Shaw more than stepped up to Moody's challenge. After completing

the Utah residency in 1981, he went on to a two-year transplant fellowship in

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His book describing the rigors of liver transplantation titled Last Night in the OR: A Transplant Surgeon's Odyssey and an editorial in the New York Times, A Doctor at his Daughter's Hospital Bed were published in 2015.



STEPHEN F. LOWRY

Shortly after his sudden and untimely death on June 4, 2011, memorials to the life and contributions of Stephen F. Lowry, MD, MBA, appeared in multiple, diverse scientific publications including Critical Reviews in Biomedical Engineering, Surgical Infections, Critical Care Medicine, and the Annals of Surgery.

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Described as a brilliant thinker with a visionary approach to research, Steve Lowry was born in Columbus, Ohio in 1947, and maintained his Midwestern values of honesty, loyalty, and persistence as he completed an undergraduate degree at Wesleyan University in Ohio and MD at the University of Michigan. After his first two years of general surgery residency at Utah, he took two years to pursue his passion for science and research while working with Murray Brennan, MD, at the Surgery Branch of the NCI in Bethesda, Maryland. After returning to Utah and completing residency in 1981, Steve joined Dr. Brennan at the Memorial Sloan-Kettering Cancer Center in New York where he finished a surgical oncology fellowship and was appointed as an assistant attending surgeon.

Dr. Lowry's potential as a scientist and academic surgeon was soon noted by G. Tom Shires, MD, who recruited him across the street from MSKCC to Cornell Medical College with an appointment as an Assistant Professor. There, Dr. Lowry was awarded his first RO1 eventually followed by 26 years of continuous

NIH funding and the award of NIH MERIT status. Based on groundbreaking research focused on mechanism of inflammation, he coauthored publications in Nature and Science describing tumor necrosis factor-alpha in severe sepsis eventually leading to what has been called the cytokine theory of inflammatory diseases.

In 1992, Dr. Lowry was promoted to Professor of Surgery at Cornell and five years later moved to the Robert Wood Johnson Medical School in New Jersey as Chairman of Surgery. Foremost among his many honors and career awards were: a James IV Association of Surgeons traveler award in 1987; the Flance-Karl award from the American Surgical Association in 2003, considered the most prestigious research award in surgery; Honorary Fellowship in the Royal College of Surgeons of Edinburgh, Scotland in 2005; and President of the Surgical Infection Society in 2009. At the peak of a career as the consummate physician scientist, Dr. Lowry died unexpectedly while serving as the Richard Harvey Professor of Surgery and Senior Associate Dean of Education at the Robert Wood Johnson Medical School. Chronologically, he was the last of the future chairs of surgery that trained and finished residency under Dr. Frank Moody during what Bing Rikkers has called the "golden years" of the Utah surgery residency.



NATHANIEL "NAT" SOPER

Nathaniel "Nat" Soper was one of six children born to Helene Jolas and Robert Soper, MD, longtime chief pediatric surgeon at the University of Iowa.

Nat went to the University of Victoria, British Columbia, for his undergraduate degree and returned to lowa for his MD in 1980. He was apparently influenced to train at Utah because of his father's past acquaintance with Frank Moody. Dr. Soper completed general surgery residency at the University of Utah in 1985 and complimented his training with a National Institute of Health research fellowship in digestive diseases at the Mayo Clinic (1986–1988). When he obtained his first appointment as an assistant professor at Washington University in St. Louis, he described himself as prepared to be a "maximally invasive" gastrointestinal surgeon. However, "maximal" was soon replaced by "minimal" when he had the foresight to combine his GI surgery training with willing industry support and he "jumped into" the laparoscopic surgery revolution, making it the focus of his academic career in surgery.

Having established himself as a "trailblazing pioneer" in this new area of surgery, in 2013, he joined the Feinberg School of Medicine surgical faculty at Northwestern University in Chicago as Vice Chair for Clinical Affairs and Director of Minimally Invasive Surgery. In 2005, he was promoted to division

Davis Professor and Chairman of the Department and Surgeon-in-Chief at Northwestern Memorial Hospital in 2007. While at Northwestern, Dr. Soper was elected to membership in the Society of University Surgeons and the American Surgical Association and served as President of the Central Surgical Association (2013-2014), and the Society of Surgery of the Alimentary Tract (2016-2017). Under his leadership, the Department of Surgery at Northwestern was recognized as one of the most respected academic departments in the country and honored for his commitment to surgical education with the SSAT's 2017 Andrew L. Warshaw Master Educator Award. In March 2019, Nat Soper stepped down as Chairman at Northwestern and in May 2020 was appointed as Chair of the Department of Surgery and Physician Executive Director of the General Surgery Line at Banner University Medical Center in Phoenix, Arizona. Although Nat Soper did not technically finish residency while Frank Moody was still Chairman at Utah, they overlapped enough for Frank to reminisce in his book about parties where he and Nat had headstand competitions which Moody rationalized that Nat always won because of his background as a high school wrestler.

chief of GI and endocrine surgery and was named as the Loyal and Edith



JOHN HUNTER

Born in Hanover, New Hampshire, educated at Harvard College, and with Greenleaf as a middle name, John G. Hunter, MD, has more than lived up to the successful future suggested by his pedigree.

Graduating from Harvard in 1977 with a degree in English literature, he was awarded his MD from the University of Pennsylvania in 1981 and joined the University of Utah General Surgery residency where he made Dr. Frank Moody and Dr. John Dixon his academic surgical mentors. Dr. Dixon's influence led Hunter to complete a research fellowship in laser and endoscopic surgery during residency (1983–1984) which he followed by completing fellowships in pancreaticobiliary endoscopy at the University of Western Ontario, Canada, and at the Massachusetts General Hospital endoscopic unit (1987–1988). Dr. Hunter returned to Utah as an Assistant Professor of Surgery in 1988 just as the laparoscopic surgery revolution was beginning and immediately became the lead of our minimally invasive surgery program.

In 1993, he was recruited to Emory University in Atlanta as an Associate Professor and by 2001 had advanced to tenured Professor, Chief of Gastrointestinal Surgery and Vice Chairman, Clinical Programs. Dr. Hunter's rapid academic rise as national leader in the field was fueled by the publication of numerous scientific articles, books and chapters, and the

development of training courses that advanced techniques of safe and appropriate laparoscopic surgery. In 2001, Hunter moved to Portland, Oregon to become the Kenneth A. J. Mackenzie Chair of Surgery and Surgeon-in-Chief at Oregon Health Sciences University. He stepped down as Chairman in 2016 when he was appointed as Executive Vice President and interim Dean of the School of Medicine and is currently a Professor of Surgery and the Executive Vice President and Chief Executive Officer at OHSU. Dr. Hunter's academic and administrative successes are recognized through his membership in the Society of University Surgeons and the American Surgical Association, as well as being elected as President of the Society of Gastrointestinal and Endoscopic Surgeons (1998), the Society for Surgery of the Alimentary Tract (2011–2012) and Chairman of the American Board of Surgery (2016–2017). To bring his Scottish ancestry and "Greenleaf" history full circle, Dr. John G. Hunter has also been appropriately awarded honorary fellowship in the European Surgical Association (2010) and the Royal College of Surgeons, Edinburgh (2011).



DMITRY OLEYNIKOV

From the graduating class of 2000, the most recent Utah general surgery alumnus to become a surgical program chairman is Dmitry Oelynikov, MD, named Chairman of the Department of Surgery at Monmouth Medical Center in New Jersey in June 2020.

Dmitry actually lived up to a goal he made as a resident, to become a department Chair. Prior to joining our residency, Dr. Oleynikov earned an undergraduate degree from Cornell and his MD from Albert Einstein College of Medicine in New York. After finishing general surgery training at Utah, he completed a minimally invasive surgery fellowship at the University of Washington and began his academic career at the University of Nebraska where he established a minimally invasive surgical fellowship in 2003.

Over the next two decades, Dr. Oleynikov advanced through the ranks where he was appointed the Chief of Minimally Invasive Surgery and the Director of the Center for Advanced Surgical Techniques. For his expertise and innovations in MIS and robotics, Dmitry has earned over 50 patents and been recognized by the Society American Gastrointestinal and Endoscopic Surgeons as a member of the Board of Directors, Chair of the Robotics Committee, and received an award for Excellence in Leadership. As an example of "disruptive technology," Dmitry's work on the use of miniature robots in surgery has been featured in Wired and The Economist magazines.



NOTABLES FROM THE GENERAL SURGERY FACULTY

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RALPH RICHARDS

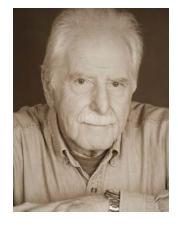
On June 6, 1980, Ralph C. Richards, MD, age 58, died suddenly of heart disease. Not surprisingly, he had a full day of surgery scheduled for the next day. At the memorial service later that month, Gary Maxwell, MD, eulogized his former colleague by describing Dr. Richards' 28-year career in the Department of Surgery as, "a pattern to follow, a standard to attain, a man to emulate."

As he emphasized, Dr. Maxwell was speaking for the many surgical faculty, residents, medical students and especially the patients who Dr. Richards had influenced and cared for as a surgical leader and stabilizing force at the University of Utah.

Dr. Richards was born in Logan, Utah on July 6, 1921, the only child of Bertie Lorin "Bert" Richards and Ella Chamberlain both of whom were native Utahns. After receiving his Bachelor of Science at the University of Utah, he went on to receive his MD and election to the Alpha Omega Alpha honorary society with the second graduating class of the new four-year Utah school in 1945. After internship and service in the U.S. Army, Dr. Richards returned to Utah and completed surgical training. In 1952, his mentor, Dr. Price, appointed him as an instructor in surgery. As he rose through the ranks, concern for his patients and service to the Department of Surgery were the hallmarks of his career. In 1956 and again in 1965 he served as acting chairman before and after the tenure of the second full-time chairman, Dr. Burdette. In between, and decades before the term "global surgery" became popular, Dr. Richards served for two years as visiting professor and head of surgery at the University of Ibadan, Nigeria, where he and his wife, Elaine, earned the love and respect of patients and colleagues.

Based on his dedication to student education, Dr. Richards started the Honors Program in Surgery for selected fourth year students who benefited from his teaching skills and empathetic approach to patient care. In 1965, the College of Medicine and Medical School alumni awarded Dr. Richards the prestigious "Fellowship of Medici Publici." In the operating room, Dr. Richards was considered a master surgeon with the skill and experience to manage the most difficult and complex cases referred from other surgeons throughout the intermountain west. He was recognized by his colleagues as "the surgeon" within the university to perform elective splenectomies, thyroidectomies, and breast cancer surgery. His experience with gastrointestinal surgery included collaboration with Eldon Gardner, a geneticist from Utah State University, and together they published one of the first descriptions of a variant of familial polyposis that was later known as Gardner's Syndrome. A kind and thoughtful mentor, Dr. Richards was responsible for the "senior honors program in surgery" and was recognized three times with the "outstanding teacher award" by the Utah medical students.

Although his death was sudden and premature, his lasting monument remains in the many department of surgery faculty, residents, and students he trained and influenced. Dr. Richards' legacy of compassionate patient care remains ingrained in the department and is recognized by the Alvin Gittens portrait outside the department library that bears his name.



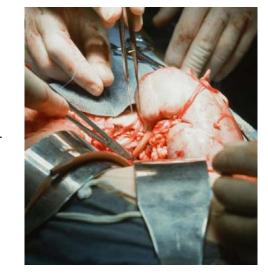
JOHN GARY MAXWELL

Born and raised in Salt Lake City, John Gary Maxwell, MD, can trace his Scottish roots to the 1856 Second Handcart Company of early Mormon pioneers. He grew up in a world of devotion and conformity to mainstream Mormonism that he later questioned, studied, and eventually, after an uneasy truce with that faith that lasted many years, abandoned.

With a Bachelor of Science from the University of Utah, Dr. Maxwell describes himself as a young man "in a hurry." Married at 19, by 22 he was in medical school and the father of twins. For surgical residents like Dr. Maxwell, general surgery was truly "general" including all organs and categories of disease. Although he finished residency as a surgeon accomplished in a wide variety of procedures, Dr. Maxwell's history in academic surgery soon became the same as the early history of renal transplantation at the University of Utah.

400 TRANSPLANTS

Starting as a a fourth year surgery resident providing the immediate post-transplant care for the recipient of the first kidney transplant ever done at Utah, he progressed to become director of renal transplantation through two decades of growth that included preforming over 400 kidney transplants and hundreds of related vascular and peritoneal access procedures.



Along the way, Dr. Maxwell created the university's Intermountain Organ Bank, served as Program Director for the general surgery residency, and as Assistant Dean of Admissions for the medical school.

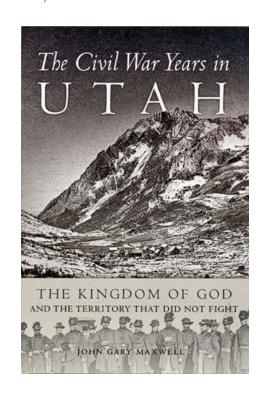
Like Dr. Richards, Dr. Maxwelll was a master surgical technician and a role model. In the operating room, he would occasionally break the tension of a long or stressful case by reciting from memory an unexpected and often off-color Scottish poem or limerick.

When medicine was still a profession of service and the demands of surgical training were sometimes the epitome of self-sacrifice, Gary Maxwell brought an element of humanity and empathy for his patients, colleagues and trainees that has only recently become recognized as mainstream.

In 1985, the Intermountain Organ Bank and transplant fellowship that he had developed were transferred to the competing program at the LDS Hospital in what Dr. Maxwell describes as an administrative "sub-rosa" decision leading him to look for other academic opportunities. In 1986, he relocated to the University of North Carolina, Chapel Hill, retaining his tenured full professor rank and appointed as Program Director for General Surgery Residency at the New Hanover Regional Medical Center in Wilmington, North Carolina. There he continued doing a wide variety of general surgical procedures, recruited faculty, expanded the residency, and continued to use his academic talents in teaching and publishing on clinical studies.

Dr. Maxwell retired from surgery in 2003 and reinvented himself as a "fourthestate contributor, a journalist, an historian, seeking facts and framing their interpretation." His 18 years as an author have been incredibly productive,

writing four books based on his research of early Mormon and Utah history. Published in 2010, *Gettysburg to the Great Salt Lake*, documents the history of Utah Territory and Latter-day Saints Church from 1849 through reconstruction. *Robert Newton Baskin and the Making of Modern Utah*, is the biography of a Harvard educated lawyer who served as Great Salt Lake City Mayor and was a pivotal figure in the Mormon's abandonment of polygamy thus opening the way to statehood in 1896.



His third book, *The Civil War Years* in Utah, presents evidence of Mormon leader's allegiance to the Confederacy thus adding to the full story of the Kingdom of God and the Territory That Did Not Fight.

His most recent book, *The Last Called Mormon Colonization* was published in 2022. In it, Dr. Maxwell documents the Latter-day Saints colonization of the Big Horn Basin, Wyoming, in 1901 which included some of his pioneer ancestors.

In both his pioneering contributions to renal transplantation as an academic surgeon and through his historical research and writing, Dr. Maxwell has been a singular success. He has obviously succeeded in his search for "the vehicle of my personal pilgrimage to review an earlier life, to a different version of myself, to happy times, to very difficult times, to an examining of how my roots have framed me."



EDWARD NELSON

Edward Nelson, MD, completed the Utah residency in 1979 and with the urging and support of Drs. Richards and Maxwell, he joined the faculty in the Division of General Surgery under the chairmanship of Frank Moody, MD.

Written by Drs. Gary Maxwell and Courtney Scaife

Born in Salt Lake City, and raised in southern California and Las Vegas, Nevada he is quick to point out that he has never lived east of his current home in the high avenues above the Medical Center. With a baccalaureate degree from Arizona State University in 1970, he received his medical degree from the University of Utah and went on to internship at Harbor General Medical Center in Torrance, California. In 1975, he returned to Utah, finished general surgery residency and became a member of the "Blue Service" inheriting a broad practice of general surgery from Dr. Richards and completing a fellowship in renal transplantation surgery in 1981 under Dr. Maxwell.

Rising through the ranks to become a tenured professor in 1995, Dr. Nelson was appointed to a number of administrative positions within the department including: emergency room and Air Med Director (1980–1983), Director of the Senior Honors Program in Surgery (1980–2008), Surgical Director of the Breast Program (1996–2007), and Director of Renal Transplantation (1986–1997 and 2005–2015). In 1989, he was appointed Division Chief of the Division of General Surgery by chairman William Gay, MD, a position he held until 2018. Concurrently, for over four years (1996–2000) he served as Acting Chairman of the Department. Nationally, he served as Chair of the United Network for

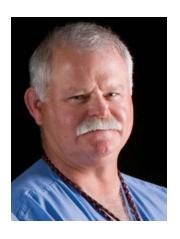
Organ Sharing Ethics Committee (1992–1993), on the Board of Governors for the American College of Surgeons (2005–2011), and as President of the Southwestern Surgical Congress (2011).

Four times (1992, 1996, 1999, 2000) Dr. Nelson was selected by the general surgery chief residents as the Teacher of the Year. In 2011, he received both the prestigious Clarke Lowe Rich Distinguished Surgeon Award and the Intermountain Donor Services Distinguished Service Award. In 2017 the residency awarded him an "Outstanding Educator Award" for teaching excellence and he received the Ralph C. Richards Excellence in Surgery "Commitment to Patients" Award from the Department of Surgery.

In his autobiography, Frank Moody spoke very highly of Dr. Nelson, saying, "He emerged as one of the top general surgeons in the Intermountain West."

His surgical career at the University of Utah has spanned over 40 years across a diverse spectrum including; breast cancer, endocrine disorders, surgery for diseases involving the spleen, trauma, vascular access, and renal transplantation. In all these endeavors, he was known to bring humility and an unflappable, steady calmness that gained trust from patients, students, administrators, and executives. As Dr. Robert Glasgow once observed, Dr. Nelson's leadership in general surgery and the Department of Surgery "cultivated a culture of kindness."

On June 24, 2014, after over 30 years working in kidney transplantation, Dr. Nelson completed his last renal transplant and in February of 2020 he retired from clinical practice. Recognizing that part of being a surgeon means knowing when to turn the page and walk away, he can now enjoy life with his wife Barbara, time with his three children and five grandchildren, spending time on the trails near his house, and traveling between Teton Valley, Wyoming, and St. George, Utah.



RICHARD BARTON

Richard G. Barton, MD, a standout linebacker and pharmacology graduate of Ricks College in Rexburg, Idaho, completed medical school (1982) and the Utah general surgery residency (1988) followed by Critical Care Research and Fellowship at the University of Minnesota in 1990.

He returned to Utah to become the first Director of the Surgical ICU and a leader in development of the state's trauma system. Under his leadership, the number of SICU beds increased from 12 to 32 and the critical care fellowship was created. Famous for "Barton Rounds" in the SICU, Dr. Barton retired in 2020 to a dream house he built in Victor, Idaho, with close access to his long-standing avocation of hunting and fishing.



BRUCE HOUTCHENS

Bruce A. Houtchens, MD, a protégé of Dr. Moody, was an eclectic mix of surgeon, engineer, naval aviator, and astronaut candidate. 125

Although Dr. Houtchens was primarily based at the Veterans Administration Medical Center, he was instrumental in creating "Air Stars" which was the precursor to the now Air Med for rapid transport of patients and worked with NASA on the potential for surgery during space missions. Although Dr. Moody recruited him to Texas for a short while, Dr. Houtchens returned to Utah where he died at the young age of 57 while hiking Black Mountain north of the medical center.



ROBERT NOYES

Robert Dirk Noyes, MD, graduated from the University of Rochester Medical School in 1973, finished the Utah general surgery residency in 1978, and went on to surgical oncology fellowship at MD Anderson in Houston.

Dr. Noyes returned to Utah, straddling the academic and private practice fence between the university and Intermountain Health Care. He brought special expertise and participation in numerous national clinical trials in melanoma and breast cancer to both institutions. As an early advocate for global surgery, Dr. Noyes travelled extensively with faculty and residents before retiring in 2018.



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MERRIL DAYTON

Merril T. Dayton, MD, received his undergraduate degree from BYU and MD from the University of Utah in 1976. After finishing surgical residency and a gastrointestinal fellowship at UCLA, Dr. Dayton began his academic career at the University of lowa before joining the Utah faculty in 1986.

At Utah, he inherited and built upon Jim Becker's practice of colorectal surgery with special interest in surgical management of inflammatory bowel disease.

Dr. Dayton was appointed chair of the Department of Surgery at the University

of Buffalo on July 1, 2003, a position he held until stepping down and briefly returning to the Utah faculty before retiring in 2014. In 2015, he was called to serve as a mission president in Barcelona, Spain, for the Church of Jesus Christ of Latter-day Saints.



of 2020.

LEIGH NEUMAYER

Leigh A. Neumayer, MD, received her undergraduate degree from Colorado State University and MD from Baylor, Houston before completing general surgery residency at the University of Arizona in 1990.

Surgery at the University of Utah in 1992 where she developed a busy practice centered on the surgical treatment of breast cancer. Active in many surgical associations, Dr. Neumayer served in numerous national leadership roles culminating in her election as Chair of the Board of Regents of the American College of Surgeons, 2017–2018. She was appointed Chair of the Department of Surgery at the University of Arizona in 2014 and moved on to assume the

position of Chair of Surgery at the University of Florida, Jacksonville, in March

She was first on the faculty at Arizona before joining the Department of



ROBERT GLASGOW

Robert E. Glasgow, MD, was appointed as interim chair when Sam Finlayson, MD, stepped down as chairman in February of 2021, an announcement that was anticipated and universally endorsed by the entire department.

Since his arrival at Utah as part of Sean Mulvihill's, MD, recruitment in 2000, Dr. Glasgow's record of academic and administrative accomplishments made him the obvious choice to lead the department. Raised and educated in northern California, he obtained his Bachelor of Science from Stanford, his MD from the University of California, and completed general surgery residency at the University of California, San Francisco. Dr. Glasgow went on to train in advanced minimally invasive surgery at Legacy Health in Portland, Oregon before his recruitment to Utah where he rapidly established himself as the section chief of gastrointestinal surgery and the preeminent surgeon for laparoscopic surgery, specializing in esophageal, gastric, and biliary tract diseases.

Based on his abiding interest in promoting the concept of quality in surgical care, Dr. Glasgow was appointed Chief Value Officer and Vice Chair for Clinical Operations and Quality, and earned an Executive MBA from the David Eccles School of Business in 2020.

In addition to his busy referral practice, Dr. Glasgow has earned the respect of his colleagues and trainees through his constant emphasis on the importance of balancing professional goals and accomplishments with personal and family life outside the hospital. Dr. Glasgow, his wife, Tiffany Glasgow, MD, and their three children have maintained an active outdoor lifestyle of skiing, hiking, and biking that takes advantage of all that Utah has to offer.



RESIDENCY GRADUATES CURRENTLY ON THE UNIVERSITY OF UTAH FACULTY

1994

JANE PORRETTA

General Surgery/Breast Surgery

1996

MARK SAVARISE

General Surgery

1999

ERIC SCAIFE

Pediatric Surgery

2001

COURTNEY SCAIFE

Surgical Oncology

2003

MICHELLE MUELLER

Vascular Surgery

2005

MICHAEL ROLLINS

Pediatric Surgery

2006

WILLIAM PECHE

Colorectal Surgery

2008

STEPHEN FENTON

Pediatric Surgery

2009

GREGORY LIVERS

General Surgery

2013

CINDY MATSEN

Breast Surgery

2015

133

KATHRYN RUSSELL

Pediatric Surgery

2018

SARAH LOMBARDO

Trauma/Critical Care

2019

JENNWOOD CHEN

MIS General Surgery

2019

LUKE MARTIN

Colorectal Surgery



RESIDENCY GRADUATES WITH ACADEMIC APPOINTMENTS AT OTHER INSTITUTIONS

1984

DEBORAH LOEFF

University of Chicago, Pediatric Surgery

1986

ROBERT STRATTA

Wake Forest, Transplant Surgery

1988

SCOTT AMES

Mount Sinai NY, Transplant Surgery

2000

WENDY GRANT

University of Nebraska, Transplant Surgery

2001

LEE FAUCHER

University of Wisconsin, Burn/Trauma/Acute Care Surgery

2004

JULIE MAROSKY THACKER

Duke, Colorectal Surgery

2005

AMALIA COCHRAN

University of Florida, Surgery-Burn

2005

LYNNETTE SCHIFFREN

Carolinas Medical Center, Trauma/Critical Care

2005

MICHAEL DAILY

Dartmouth/Hitchcock, Transplant Surgery

2007

PATRICK MCCONNELL

The Ohio State University, CT Surgery

2010

SARAH VOGLER

Cleveland Clinic Florida, Colorectal Surgery

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2010 **ANDREW KASTENMEIER**

Medical College of Wisconsin, MIS/General Surgery

2013

KATHARINE L. JACKSON

Duke, Colorectal Surgery

2014

BJOERN SUCKOW

Dartmouth/Hitchcock, Vascular Surgery

2017

CHAD CRYER

University of Hawaii, General Surgery



UNIVERSITY OF UTAH SURGERY RESIDENCY GRADUATES 1942-2022

1947	Wallace Brooke *	1968	James Pingree	1975	E Doug Slawson	1980	James Becker	
1948	Charles Steven Hatch *	1969	Ronald Latimer	1975	John Gibney	1980	James Seeger *	
1950	Hallard Benjamin Harmon*	1969	Burdette J. Moor	1975	Wendell Smoot	1980	Lang Perdue	
1952	Ralph C. Richards *	1970	Gary Lower *	1975	David Ellertson	1980	LeGrand Belnap	
1952	Daniel Oniki *	1970	Ronald Schnier	1976	Gary Hunter	1980	Marc Levinson	
1953	Adil A. Iliya *	1971	Chris Christensen *	1976	Glenn Warden	1980	Scott Petersen	
1953	Harold B. Lamb*	1971	Gary Larsen	1976	James Goodnight	1981	Byers Shaw	
1954	Carroll Goon *	1971	C Eugene Sullivan	1976	Layton Rikkers	1981	Loren Nelson	
1956	Gilbert Dedinsky *	1971	Jan Freeman *	1976	Lyle Archibald	1981	O Layton Alldredge	
1957	Roy Sandvig *	1971	Gary Lambert	1976	Thomas Bergstrom	1981	Ronald Sharp	
1957	Lawrence Stevens	1971	Gary F. Larsen	1976	Wirt Anderson Hines	1981	Stephen G. Jolley	
1958	Edward Horsley *	1971	C. Eugene Sullivan	1977	Clifford Kwan-Gett	1981	Stephen Lowry *	
1958	Calvin Zerwick	1972	David Depp *	1977	Henry Byrd	1981	Steven J. Mintz	
1959	Orson Henry (Hank) Guymon*	1972	Gervis Galbraith	1977	Hugh Voorhees	1982	Bartley Weiss	
1960	Thomas C. King	1972	Hugh Hogle *	1977	John Tebbetts	1982	Jeff Saffle	14
1960	James Patton Neeley	1972	James Pickens	1977	Joseph Hillam	1982	John Holman	
1962	Carvel Evans *	1972	R. Chad Halversen *	1977	Kent Richards	1982	Linda Leckman	
1962	Rex Mabey Sr. *	1973	John Snyder	1978	Bruce Williams	1982	Kenneth Seifert	
1963	James Farha *	1973	Laurence Cheung	1978	Frank Fazzio	1983	David McFarland	
1963	Paul Natural	1973	Loring Helfrich	1978	George Robinson	1983	H Robert Gaddy	
1964	Robert Coda *	1973	Nathaniel Matolo	1978	James Coleman	1983	Laurie Bell	
1965	Fredrick Chang	1974	Dennis Bucko	1978	R Dirk Noyes	1983	Robert Rotering	
1966	Marion McMurtrey *	1974	James Babcock	1978	David Welling	1984	Brian Juell	
1966	John Gary Maxwell	1974	James Byrne	1978	W Michael Duff	1984	Deborah Loeff	
1966	Richard R. Price	1974	Mark Wertheimer	1979	Edward W Nelson	1984	John Wiest	
1967	Elias Khoury	1974	Milton Owens	1979	Richard Black	1984	Karen Cartwright	
1967	Alvin Harris *	1974	Swen Swensen	1979	Terence Downing	1984	Karli Kenfield *	
1968	Kanak Jain *	1975	C David Richards	1979	Thomas E. Spicer	1985	D. Joan Balcombe	

1985	David Motoki	1990	Gordon Tagge	1996	Mark Savarise	2001	Russell Reiss
1985	J. Kent Thorne	1990	Jacob Lustgarten	1996	Peter L. Baay	2002	David G. Affleck
1985	Nathaniel Soper	1990	Michael Grossman	1996	Robert M. Taylor	2002	J. Jared Speakman
1985	Raymond Ross	1991	Robert Ghelfi	1996	Terri Marty	2002	Lyn Knoblock
1985	Robert Adamson	1991	Kerry Paape	1997	Dennis Sullivan	2002	Sidney Johnson
1985	Robert Deere	1991	Terry Adkins	1997	Glenn Winslow	2002	Mark A. Harding
1986	Alton Burns	1991	Thomas White	1997	Phil Kladar	2003	Clint B. Webster
1986	J. Crayton Pruitt	1992	William E Faught	1997	Steve Carabine	2003	Jeanne H. Cleveland
1986	Jay Cook	1992	Robert Wiechmann	1997	Terry Loftus	2003	Michelle Mueller
1986	John Hawkins *	1992	Evelyn Erickson	1998	Allen T. Belshaw	2003	Stephen Bailey
1986	Robert Stratta	1992	John Rowles	1998	Alvaro H. Devia	2004	Amalia Cochran
1986	John Iliya	1992	Lamar Bushnell	1998	Ericka C. Lloyd	2004	Julie Marosky Thacker
1987	Steve Beyersdorf	1992	Margo Hendrickson	1998	Jonathan V. Giles	2004	Jeffrey Rentz
1987	John Hunter	1993	Greg Goodman	1998	Stacy A. Shackelford	2004	Kathryn F. Hatch
1987	Terry Housinger	1993	John Harris	1999	Barbara Seidel Boyer	2004	Richard P. Koehler
1987	William Geoff Williams	1993	Mary Wollmering	1999	Bruce B. Reid	2005	Kelly Nolan
1987	William Syme	1993	Richard Anderson	1999	E. Joe Eyring	2005	Michael F. Daily
1987	Steve Morris	1993	Robert Pitsch	1999	Eric R. Scaife	2005	Michael Rollins
1988	Jeffrey Gilbertson	1994	Brock Bordelon	1999	Steven M. Fass	2005	Lynnette M. Schiffern
1988	Lisa Sowder	1994	James Foxworthy	2000	Andrew C. Bourne *	2006	Diane Alonso
1988	Randolph Kessler *	1994	Jane Poretta	2000	Dmitry Oleynikov	2006	Juan C Vasquez
1988	Scott Ames	1994	Robert Price	2000	Stephen Shapiro	2006	William Peche
1988	Richard Barton	1995	Darryl Eckes	2000	Teresa Reading	2006	Seth C. Narins
1989	Alan Muskett	1995	Edwin Keith Cole	2000	Wendy J. Grant	2007	Hyong Tae Kim
1989	Edward Raines	1995	Stephanie Fine	2001	Angela Keen	2007	Matthew Whitten
1989	Scott Leckman	1995	Steve Seffense	2001	Courtney Scaife	2007	Patrick McConnell
1989	Steven Merrill	1995	Timothy (Tim) Hollingsed	2001	Lee Faucher	2007	Steven Granger
1990	Chris Tsoi	1996	Daniel (Dan) Kollmorgen	2001	Mark McCollum	2007	Michelle Strong

2008	Brian Reuben	2013	Gillian Seton
2008	Greg Stroup	2013	Katharine Louise Jackson
2008	Rafe Connors	2013	Mark Mawhinney
2008	Stephen Fenton	2014	Bethanie White
2008	Kevin Bruen	2014	Bjoern Suckow
2009	David Larsen	2014	Jorge De Amorim Filho
2009	Greg Livers	2014	Molly Gross
2009	Marcus Torgenson	2015	Andrew Singleton
2009	Peter Brant-Zawadzki	2015	Erik Pearson
2009	R. Douglas Matthews	2015	Jesse Madden
2010	Danielle Adams	2015	Katie Russell
2010	Dinhkim Le	2015	Kelly Hewitt
2010	Sarah Vogler	2016	Alice Chung
2010	Andrew Kastenmeier	2016	Kendrix Evans
2010	Heidi Jackson	2016	Kerry Baum
2011	Britani Hill	2016	Nikolas Byrge
2011	Catherine Straub	2016	Peter Bartline
2011	David Griffin	2016	Robin L. Tillery
2011	Linsey Etherington	2017	Aaron Healy
2011	Ute Gawlick	2017	Brigid O'Holleran
2012	Amy Liepert	2017	Chad Cryer
2012	Gabriela Vargas	2017	Daniel Gilsdorf
2012	Meghan Edwards Lewis	2017	Lara Senekjian
2012	Robert Wrona	2018	Kathy Schall
2012	W. Cory Johnston *	2018	Kyle Edwards
2013	Carlos Casamalhuapa	2018	Megan E. Bowen
2013	Cindy Matsen	2018	Sarah Lombardo
2013	D Millar	2019	Jennwood Chen

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2019	Luke Martin
2019	Bao Nguyen
2019	Katherine (Kate) Smiley
2019	Eric Wiesner
2019	Christopher (Chris) Williams
2020	Miloš Buhavac
2020	Lily Gutnik
2020	Micah Katz
2020	James O'Loughlin
2020	Doug Swords
2020	Felix Yong
2021	Kevin Bagley
2021	Austin Cannon
2021	Travis Corgan
2021	Nicholas Duletzke
2021	Sean Stokes
2021	Carolyn Luppens
2022	Jessica Blumhagen
2022	Maranda Pahlkotter
2022	Tyler Pender
2022	Liese Pruitt
2022	Riann Robins
2022	Mark Taylor

* Deceased







The history of the Department of Surgery at the University of Utah continues to be written by each new generation of residents and faculty. In summarizing the first 80 years of the department, the goal has been to remember, document, and celebrate our past with neither intellectual myopia nor "good old days" revisionism. As it should, our department has evolved and changed over the many decades. But as we look to the future, a cohesive narrative of the past may be one of the best ways to see what may be ahead. A department founded in 1942 under the leadership and standards set by the "greatest generation" has grown and progressed under many different leaders, all products of different times and cultures. While much has changed, recognizing the when, who, and how of the past seems especially important in a world where there is a tendency to assume, "if I wasn't there or alive it doesn't matter and maybe didn't really happen."

The strength and reputation of the University of Utah Department of Surgery will always be found in the substance of our accomplishment and the style with which they were done. We care about the past not to "live off memories" but to appreciate that as time devours the years, our department's history doesn't end, we carry it with us as it continues to be written.

Historical photography: Courtesy of the Spencer S. Eccles Health Sciences Library

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