Mentor Assessment 4

Name of Mentor: Dr. John Mansour

Profession: Surgical Oncologist

Location: Parkland Hospital

Date of Visit: March 2, 2017

Time: 12:30 - 3:00 p.m.

Assessment:

Dr. Mansour and I spent the afternoon in the operating rooms at Parkland viewing various surgeries and procedures. This was my first time in the operating rooms, so I had done some background research over the cases Dr. Mansour was going to take me to see. Once we got to the hospital, we decided it would be better if we jumped around from case to case rather than just watching one surgery, so in the end I was able to see a wider variety of surgeries than I originally anticipated. We saw three different surgeries, but we caught each case in a different stage.

The first case we saw was the removal of a lipoma in the medial thigh of the patient. This procedure was performed by Dr. Rohit Sharma, a surgical oncologist who specializes in soft tissue malignancies such as sarcomas, melanomas, and lipomas. We walked into the operating room just as they had removed the lipoma from the patient's thigh, so I was able to see a tumor in real life, which was interesting because I had only previously seen them on CT scans or MRIs. I was also able to watch them close the incision which was interesting, because they have to stitch up the patient in layers. Dr. Sharma also explained to me that they use a type of absorbable stitch so the patient doesn't have to get them removed. This also means they stitch underneath the skin and use a layer of glue to close the remaining incision.

The second case was the removal of a tumor in the patient's rectum. We walked in just as they had removed the tumor, so I was able to look at the tumor up close which was quite interesting. This tumor was different than the lipoma in the sense that it wasn't a soft tissue tumor, so it was hard and looked fairly similar to what I expected a tumor to look like. We weren't in this operating room for very long, however it was still interesting to see and learn about tumors such as these that I don't see in clinic often.

The third case was by far the most interesting. We were in the room as Dr. Porembka was marking the incision and I was able to palpate the tumor on this patient which was pretty exciting. This patient had a mass that was nearly 140 millimeters extending from her pancreas encompassing the spleen, colon, kidney, and pancreas, so it was a fairly complicated surgery. I

was able to watch them perform the laparoscopic to scan for mets, which was neat because I was able to see the patient's heart beating through the diaphragm. That was an incredibly humbling moment, and it helped to remind me that this was a real patients that was being operated on, but it also reminded me that surgeons have their patients lives in their hands. We were able to stay to watch Dr. Porembka open the patient up which was pretty wild to watch. Overall, I was pretty grateful that I didn't pass out or get lightheaded and I look forward to getting this opportunity again.