



(l. to r.) Fabrizio Michelassi, Surgery, WCMC; Caren Heller, assistant dean, Intercampus Initiatives, WCMC; Michael Shuler, Biomedical Engineering

An Opportunity to Think Outside the Box

Cornell Surgeons and Biomedical Engineers Connect

The mission of the Department of Surgery at Weill Cornell Medical College (WCMC) is threefold: to provide the highest quality, state-of-the-art, personalized patient care; to train tomorrow's surgeons; and to conduct important research to discover new medical knowledge and develop new procedures and techniques. The superior clinical services offered by the department's faculty are enhanced by an extensive and innovative research program. Our physicians and faculty are actively involved in a broad range of basic, translational, and clinical research.

When 50 WCMC surgeons and Cornell-Ithaca biomedical engineers met for a two-day research retreat hosted by the Biomedical Engineering Department (BME) this past July in Ithaca, it was for the expressed purpose of encouraging surgeons and biomedical engineers to further explore, develop, and pursue a wide array of collaborative research projects. These types of bi-campus collaborative research efforts have been identified as a major priority for President David J. Skorton and Dean Antonio M. Gotto Jr. The generous gift to BME by James C. and

Rebecca Morgan, along with support from friends and grateful patients of the Department of Surgery, will be used as seed money for collaborative research projects proposed by the retreat's participants.

Michael L. Shuler, chair of BME, Caren Heller, assistant dean for Intercampus Initiatives, and I spent months in advance of the retreat meeting with our faculty and brainstorming potential areas of mutual research interest. The BME/Surgery research retreat offered faculty of both campuses the

unique opportunity to hear about each other's areas of interest and expertise and to think outside the box for creative new solutions to difficult surgical challenges.

The retreat was an essential part of the process for stimulating open dialogue and encouraging faculty interactions that would result in creating new areas of collaborative research. This robust program included faculty presentations and discussions on areas such as wound healing, tissue engineering and new materials; drug delivery systems and therapeutic strategies to control neovascularization; surgical devices for minimally invasive surgery; biosensors; predictive modeling and diagnostics; and vascular and cancer imaging. Cornell's intellectual property policies and the patent process were outlined in a presentation by Alan S. Paau, vice provost of Technology Transfer and Economic Development.

Many exciting new ideas were generated through a series of lectures, discussions, informal networking, and social events that enabled an open exchange of information and creative brainstorming among faculty from our Cornell campuses. We encouraged participants during the retreat to stretch their imaginations, to reach well beyond the normal, expected collaborative opportunities, and to seek innovative solutions to the many surgical problems and challenges discussed during the retreat.

We planned the next BME/Surgery research retreat for winter 2008 to be hosted by the Department of Surgery on the WCMC campus. We look forward to building on and expanding the important work done so far and to engendering more collaborative research.

Fabrizio Michelassi, Chairman, Department of Surgery, Weill Cornell Medical College Surgeon-in-Chief, NewYork-Presbyterian Hospital/Weill Cornell Medical Center



Cornell Bioengineers and Surgeons Converge

“Engineers love to solve problems.
What problems can engineers solve for surgeons?”

- Michael L. Shuler, Chairman, Biomedical Engineering

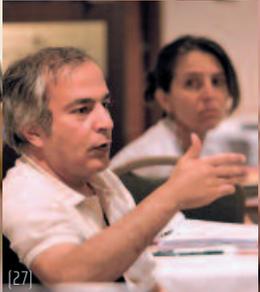


Photos

- [01] Anthony Reeves, Electrical and Computer Engineering
- [02] Yi Wang, Radiology/Biomedical Engineering
- [03] John Boockvar, Neurological Surgery
- [04] Moonsoo Jin, Biomedical Engineering
- [05] Rache Simmons, Surgery (breast cancer)
- [06] Chi-Chang Chu, Fiber Science and Apparel Design
- [07] (l.) Fabrizio Michelassi, chair, Surgery,
(r.) David Putnam, Biomedical Engineering
- [08] Rebecca Williams, Biomedical Engineering
- [09] Philip Barie, Surgery (critical care and trauma)
- [10] Jonathan Butcher, Biomedical Engineering
- [11] Suzanne Schwartz, Surgery (research in surgery)
- [12] (l.) Peter Doerschuk, Biomedical Engineering,
(r.) David Lipson, Biomedical Engineering
(senior lecturer)
- [13] Eleni Tousimis, Surgery (breast)
- [14] (l.) Chris Schaffer, Biomedical Engineering,
(r.) Theodore Schwartz, Neurological Surgery
- [15] Lawrence Bonassar, Biomedical Engineering/
Mechanical and Aerospace Engineering
- [16] (l.) Sunil Singh (medical student working with
Spector), (r.) Jason Spector, Surgery (reconstructive
microsurgery/plastic surgery)
- [17] Thomas Fahey, Surgery (endocrine/minimally
invasive)
- [18] Watt Webb, Applied and Engineering Physics
- [19] Susan Pannullo, Neurological Surgery
- [20] Michael Stewart, chair, Otorhinolaryngology
- [21] Warren Zipfel, Biomedical Engineering
- [22] Shivaun Archer, Biomedical Engineering
(senior lecturer)
- [23] Palmer Bessey, Surgery (burns/critical
care/trauma)
- [24] Craig Kent, Surgery (vascular)
- [25] Michael Shuler, chair, Biomedical Engineering
- [26] Roger Yurt, Surgery (burn surgery)
- [27] Nasser Altorki, Cardiothoracic Surgery
- [28] Fabrizio Michelassi, Chair, Surgery
- [29] Rasa Zarnegar, Surgery
- [30] Claudia Fischbach-Teschl, Biomedical Engineering
- [31] Theodore Schwartz, Neurological Surgery
- [32] Michael Kaplitt, Neurological Surgery
- [33] Abraham Stroock, Chemical and Biomolecular
Engineering
- [34] Jeffrey Milsom, Surgery (minimally invasive/
colorectal diseases)
- [35] Michael Lieberman, Surgical Oncology
- [36] Robert Ward, Otorhinolaryngology
- [37] William Olbricht, Chemical and Biomolecular
Engineering

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In two dynamic retreats, Cornell bioengineers and surgeons dealt with topics such as wound healing, tissue engineering, drug delivery systems, imaging, biosensors, surgical devices for minimally invasive procedures, and more.

