

LOYOLA

MEDICAL NEWS

FALL 2018
VOLUME 20 | NUMBER 2

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the Southwest Suburbs



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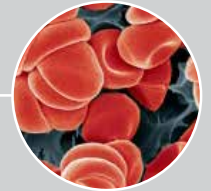
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NEW PHYSICIANS

Rethinking “Time is Brain”



Camilo R. Gomez, MD

Loyola Neurologist Who Coined the Phrase Says Stroke Message Is Not So Simple Anymore

In 1993, neurologist Camilo R. Gomez, MD, coined a phrase that for a quarter century has been a fundamental rule of stroke care: “Time is brain!”

“Unquestionably, the longer therapy is delayed, the lesser the chance that it will be successful,” Dr. Gomez wrote in an editorial 25 years ago. “Simply stated: *time is brain!*”

But the “time is brain” rule is not as simple as it once seemed, Dr. Gomez now writes in the *Journal of Stroke & Cerebrovascular Diseases*. Dr. Gomez is a Loyola Medicine stroke specialist and nationally known expert in neuroendovascular surgery.

It’s still true that stroke outcomes generally are worse the longer treatment is delayed. But, Dr. Gomez reports, the effect of time can vary greatly among patients. Depending on collateral circulation, emergency treatment could greatly help one patient, but be too late for another patient treated at the same time.

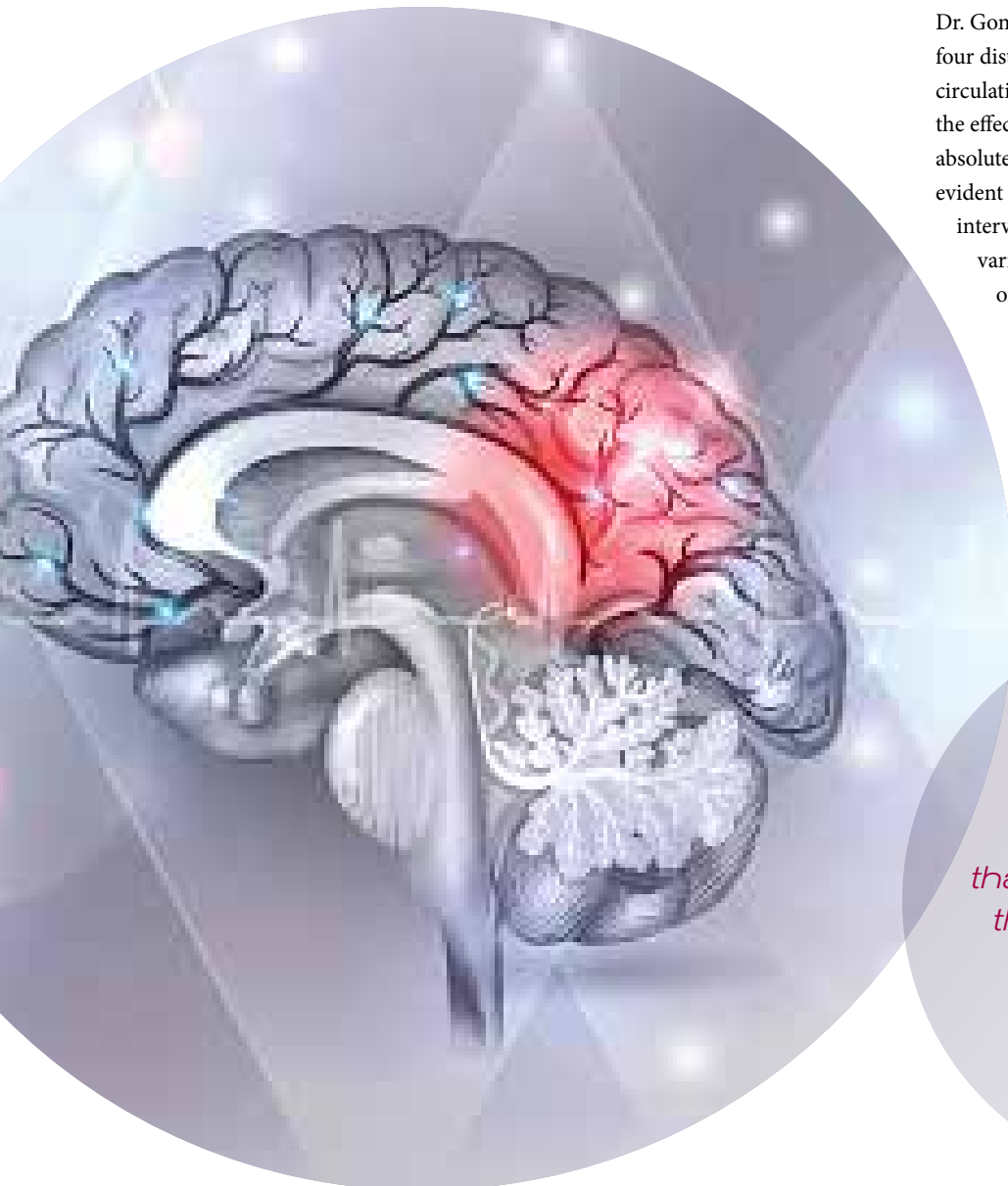
“It’s clearly evident that the effect of time on the ischemic process is relative,” Dr. Gomez writes.

After an ischemic stroke, a core of brain tissue begins to die. Around this core is a penumbra of cells that continue to receive blood from surrounding arteries. This collateral circulation can keep cells in the penumbra alive for a time before they too begin to die.

Dr. Gomez used computational modeling to identify four distinct types of ischemic stroke based on collateral circulation. “It is no longer reasonable to believe that the effect of time on the ischemic process represents an absolute paradigm,” Dr. Gomez writes. “It is increasingly evident that the volume of injured tissue within a given interval after the time of onset shows considerable variability, in large part due to the beneficial effect of a robust collateral circulation.”

Dr. Gomez added that this computational modeling “represents a first step in our journey to enhance clinical decisions and predictions under conditions of considerable uncertainty.”

Dr. Gomez’s paper is titled “Time Is Brain: The Stroke Theory of Relativity.” ■



“ It’s clearly evident that the effect of time on the ischemic process is relative. ”

- Camilo R. Gomez, MD

Bringing Academic Care to the Southwest Suburbs

Loyola Medicine at Palos Health South Campus Opens in Orland Park

An innovative relationship between Loyola Medicine and Palos Health is bringing nationally ranked care closer to home for residents of the southwest suburbs.

Loyola Medicine at Palos Health South Campus in Orland Park now offers academic-level care by 40 Loyola physicians in 18 specialties.

Loyola's presence in Orland Park has been growing since 2015, when Loyola Medicine and Palos Health launched a unique affiliation. In August, 2018, Palos opened a three-story, 83,000-square-foot expansion at 15300 West Avenue in Orland Park to accommodate, in part, Loyola Medicine's physicians and services.

The new building includes:

- A 25,000-square-foot Loyola Medicine specialty and primary care clinic, with 47 exam rooms, two procedure rooms, an X-ray suite and spaces for hearing testing, blood draws and other services.
- A 17,000-square-foot outpatient surgery center featuring four operating suites and 15 pre-op and post-op bays.

- A 13,000-square-foot radiation oncology center that includes ViewRay MRIdian®, the first in Illinois and the 10th worldwide. The radiotherapy system is guided in real time by MRI imaging and targets tumors with millimeter precision.

In 2015, Loyola University Health System and Palos Community Hospital began their affiliation to collaborate on the coordinated delivery of clinical programs and patient services in the southwest suburbs.

The first collaboration at the Orland Park location was the Loyola Center for Cancer Care & Research at the Palos Health South Campus, which offers chemotherapy infusion and subspecialty cancer care.

The Loyola-Palos clinical affiliation also includes a telestroke partnership, compatible electronic medical record systems and streamlined trauma transfers and subspecialty referrals.

"We are excited to provide Loyola's nationally ranked specialists, access to advanced clinical trials, expanded cancer care and physician services at the state-of-the-art outpatient surgery center to the Palos Health South Campus," said Daniel Post, regional executive vice president, strategy and business development, Loyola Medicine.

Loyola Medicine is a quaternary care system that includes Loyola University Medical Center in Maywood, Gottlieb Memorial Hospital in Melrose Park, MacNeal Hospital in Berwyn and convenient primary and specialty care clinics throughout Cook, Will and DuPage counties.

Palos Health is a fully integrated, community-based healthcare system consisting of Palos Hospital, Palos Medical Group, Palos South Campus in Orland Park, Palos Home Care and Hospice and Chicago Health Colleagues, a clinically integrated physician network.

Palos Health remains independent from Loyola. Each organization maintains its own culture, mission and commitment to the community. ■

LEFT TO RIGHT:

Raymond Wynn, MD, FACR, radiation oncology; Muaiad Kittaneh, MD, hematology/oncology; Hanh Mai, DO, hematology/oncology





“ We are excited to provide Loyola’s nationally ranked specialists, access to advanced clinical trials, expanded cancer care and physician services at the state-of-the-art outpatient surgery center to the Palos Health South Campus. ”

- Daniel Post, regional executive vice president, strategy and business development, Loyola Medicine



Chemotherapy Care Close to Home



Muaiad Kittaneh, MD

Cancer is never easy, but colon cancer patient Jeanne Modelski said Loyola Medicine's affiliation with Palos Health made her treatment as convenient as possible.

Ms. Modelski was relieved to be able to see her oncologist and complete her chemotherapy close to home at the Loyola Center for Cancer Care & Research at Palos Health South Campus in Orland Park. Ms. Modelski lives in Palos Heights, just a 10-minute drive from the center.

"Instead of patients driving to see us at Loyola University Medical Center in Maywood, we come to them," said Ms. Modelski's oncologist, Muaiad Kittaneh, MD. "We can offer a patient everything they need in one visit."

The cancer center is designed for the patient's comfort, and includes an indoor garden and individual bays for chemotherapy infusion.

In addition to the convenience, Ms. Modelski appreciates the quality of care she has received. "I can't say enough about how great they are there," she said. ■



www.loyolamedicine.org/palos-south-campus



Loyola, Palos First in Illinois to Offer MRI-guided Radiotherapy



William Small, Jr., MD, FACRO, FACR, FASTRO

The Loyola Medicine and Palos Health initiative at Palos Health South Campus is the first center in Illinois – and only the fifth in the country – to offer a groundbreaking MRI-guided radiotherapy that targets tumors with millimeter precision.

Called ViewRay MRIdian®, the FDA-cleared, state-of-the-art system delivers radiation precisely to the tumor, even if body functions such as breathing cause the tumor to move during the radiation treatment. The ultra-sharp beam of radiation minimizes damage to surrounding tissue.

“This is the most advanced radiation system on the market, and we are pleased that it will be offered at Palos Health South Campus to the southwest suburban community,” said William Small, Jr., MD, FACRO, FACR, FASTRO,

director of Loyola’s Cardinal Bernardin Cancer Center and chair of the department of radiation oncology. “This is an example of how Loyola Medicine’s innovative affiliation with Palos Health is bringing academic-level care close to patients’ homes.”

The system precisely locates, targets and tracks the position and shape of tumors as they move in the body.

The system is a type of linear accelerator. The linac shoots electrons at a metal target, transforming them into photons, which are aimed at the tumor. Traditional linacs employ CT scans to align the tumor with the radiation beam. The new system employs MR imaging, which is far superior to CT scans in showing soft tissues. And unlike CT scans, MR imaging is done in real time, allowing the clinician to continually reshape the radiation beam to match the patient.

“We can deliver more radiation, in fewer sessions, while sparing normal tissues,” said Raymond Wynn, MD, FACR, medical director for radiation oncology at the new Palos Health South Campus facility.

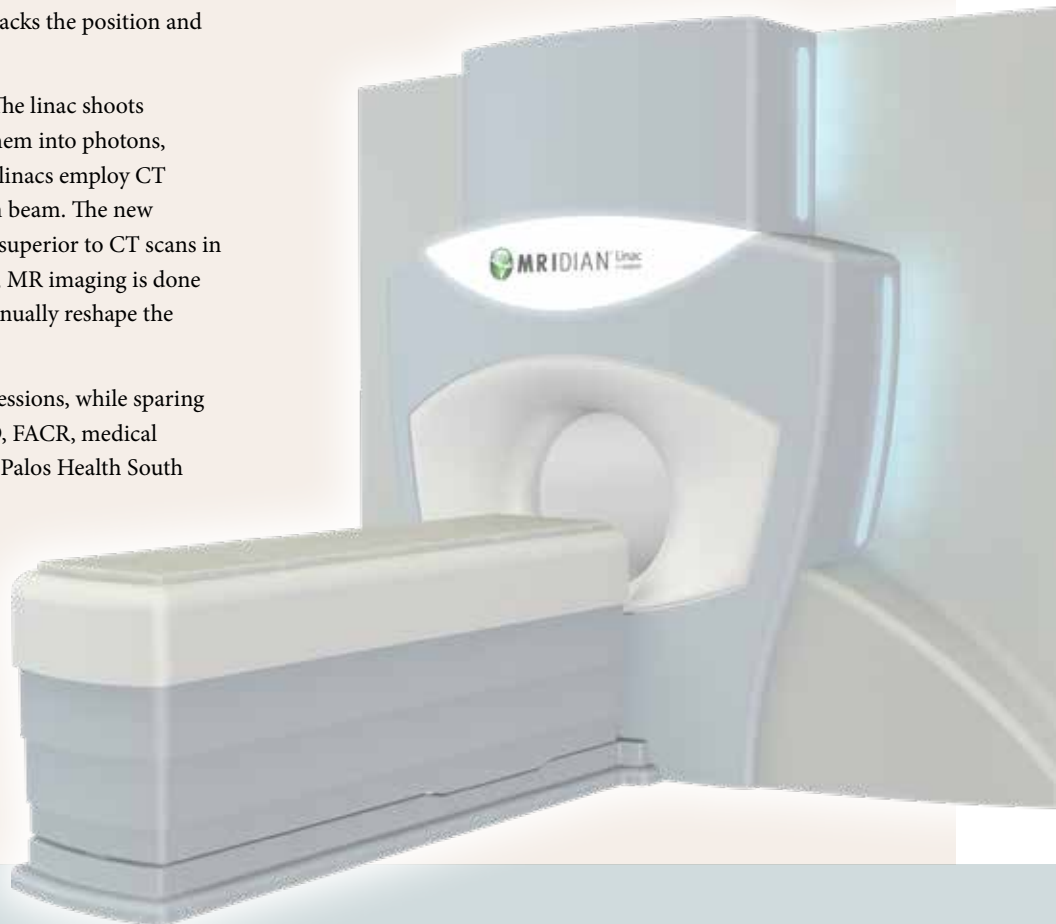
The system can be used to create treatment plans for three-dimensional conformal radiation therapy (3D-CRT), intensity modulated radiation therapy (IMRT), stereotactic radiosurgery (SRS), stereotactic body radiation therapy (SBRT) and image-guided radiation therapy (IGRT).

The MRI-guided system can treat any solid tumor, and is especially effective in treating soft tissue tumors in the pancreas, kidney, adrenal glands, liver, brain and central nervous system.

The 13,000-square-foot Radiation Oncology Center also offers a Philips Brilliance Big Bore® CT scanner and a high-precision Varian TrueBeam® linac that is designed from the ground up to treat moving targets with advanced speed and accuracy.

The image-guided system treats cancer anywhere in the body where radiation treatment is indicated, including breast, head and neck, lung and prostate.

The radiation oncology center has its own lower-level entrance and 20 dedicated, covered parking spots for radiation oncology patients. ■



Loyola Neurologists Offer Telestroke Care to Palos Health Patients



Michael Schneck, MD

Chris Scholten was sitting on the couch with his wife Crystal when he felt something pop in the back of his head.

His blood pressure spiked and he began throwing up and talking like a child. At age 30, he was having a cerebellar stroke.

An ambulance took Mr. Scholten to Palos Community Hospital, where physicians ordered tests and did a telemedicine consult with Loyola Medicine vascular neurologist Michael Schneck, MD.

Dr. Schneck recommended Mr. Scholten be transferred to Loyola University Medical Center, where neurosurgeon G. Alexander Jones, MD, performed a craniectomy to relieve pressure on the brain stem. The surgery, along with other treatments and rehabilitation, enabled Mr. Scholten to make a full recovery.

“This is a story of teamwork,” Dr. Schneck said.

“Teamwork between Loyola and Palos. Teamwork

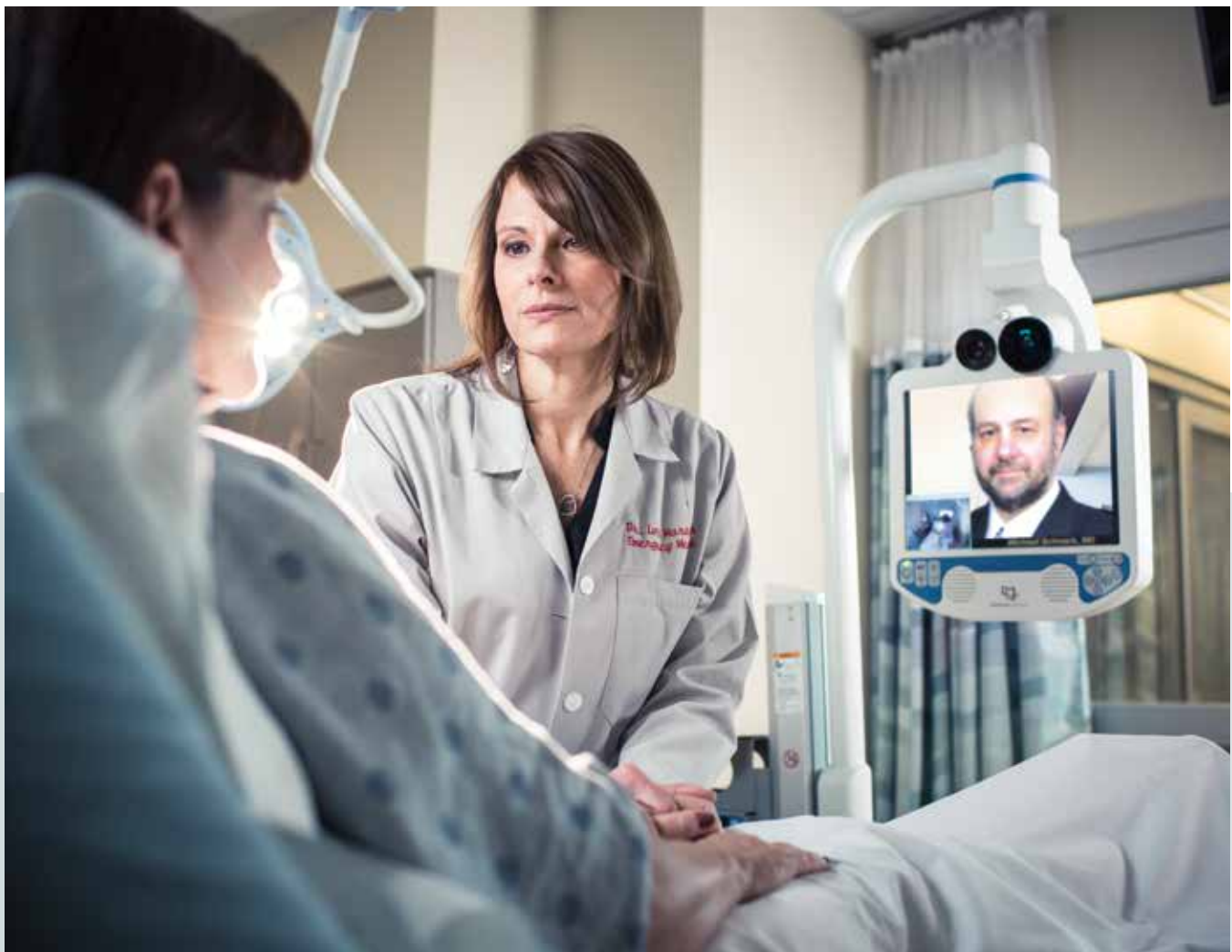
between neurology and neurosurgery. Teamwork among doctors, nurses and therapists. And, most importantly, [the teamwork of] Chris and his wife.”

Loyola’s telestroke program is among the patient-care initiatives of the Loyola-Palos affiliation, which focuses on coordinated and collaborative patient care. Palos patients receive greater access to Loyola’s specialty care services, such as neurosciences and oncology, while having continued access to Palos’ primary care network.

Loyola is among the leaders in the Midwest in telemedicine care and one of a few hospitals nationwide to provide specialized stroke care 24 hours a day, seven days a week. ■



www.loyolamedicine.org/telestroke-palos



Loyola Medicine at Palos Health South Campus

FAST FACTS

Size 83,000 sq. feet	Procedure rooms 2
Loyola physicians 40	Outpatient operating suites 4
Specialties 18	Pre-op and post-op bays 15
Exam rooms 47	Cancer clinical trials 180



Loyola Medicine at Palos Health South Campus

SPECIALTY SERVICES

- Audiology
- Bariatrics and Weight Loss
- Cancer Care
 - Chemotherapy and Infusion Therapy
 - Medical Oncology
 - Radiation Oncology
 - Surgical Oncology
- Digestive Health
- Endocrinology
- Hepatology
- Neurology
- Neurosurgery
- Ophthalmology
- Orthopaedic Care
 - Orthopaedic Surgery
 - Podiatry
 - Shoulder Care
 - Spine Care
 - Sports Medicine
- Otolaryngology
- Pain Management
- Plastic and Reconstructive Surgery
- Primary Care
- Pulmonology
- Women's Health

After TAVR, One Antiplatelet Drug May Work as Well as Two, With Fewer Complications



Verghese Mathew, MD

Treatment guidelines say patients who undergo transcatheter aortic valve replacement (TAVR) should receive two antiplatelet drugs to reduce the risk of blood clots.

A Loyola Medicine study has found that mono-antiplatelet therapy may work as well as dual-antiplatelet therapy, with significantly lower risks of bleeding and other complications.

The meta-analysis by senior author Verghese Mathew, MD, and colleagues is published in the *American Journal of Cardiology*. Dr. Mathew is chair of Loyola's division of cardiology.

TAVR has been commercially available in the United States since 2011. A catheter typically is inserted into an artery in the groin and guided up to the heart, where the valve is deployed. To reduce the risk of clots that may form on the new valve, cardiologists prescribe antiplatelet drugs such as aspirin and clopidogrel (Plavix).

Current guidelines recommend TAVR patients receive dual-antiplatelet therapy, but treatments vary. Some cardiologists prescribe mono-antiplatelet therapy in certain patients when there's an increased concern of bleeding from using two drugs.

Dr. Mathew and colleagues pooled the results of eight previous studies that compared mono-antiplatelet

therapy to dual-antiplatelet therapy. The studies included 2,439 patients. In four studies, patients received the Sapien aortic valve. In two studies, they received the CoreValve device. In two studies, both valves were used.

At 30 days, patients who received dual-antiplatelet agents were 2.06 times more likely to die, 2.04 times more likely to have major or life-threatening bleeding and 2.15 times more likely to have major vascular complications. There were no statistically significant differences between the single-drug and dual-drug groups in stroke, heart attack or transient ischemic attack.

"These data suggest a safety concern with dual-antiplatelet therapy and underscore the need for a large randomized trial to definitely address this question," Dr. Mathew and colleagues wrote.

Dr. Mathew said that when deciding the intensity of anti-platelet/anticoagulation therapies, clinicians should consider individualized patient factors that affect the risks of bleeding versus thrombotic events. ■



*At 30 days, patients who received dual-antiplatelet agents were **2.06 times** more likely to die, **2.04 times** more likely to have major or life-threatening bleeding and **2.15 times** more likely to have major vascular complications.*

Rare Surgery Repairs Traumatic Shoulder Injury



Dane Salazar, MD

A car accident left college student James Brod with a severe shoulder injury that normally would require a joint replacement.

Mr. Brod was too young for a total shoulder arthroplasty, so Loyola Medicine orthopaedic surgeon Dane Salazar, MD, performed an alternative procedure that is done on only a handful of patients at academic medical centers: partial humeral head fresh-frozen allograft transplantation.

Mr. Brod suffered a compression fracture in the humeral head, causing him to dislocate his shoulder every time he tried to turn his shoulder inward. Dr. Salazar replaced the smashed-in portion of James' shoulder with a bone graft from a deceased donor.

The rare outpatient surgery, which took about two hours, recreated the natural anatomy of the shoulder, enabling normal, pain-free

function. Over time, James' own tissue and bone will grow in and replace the donor tissue.

Dr. Salazar specializes in shoulder and elbow surgery. The surgery he performed on Mr. Brod is an example of the complex orthopaedic procedures performed at Loyola that require a team with extensive experience and resources. ■



Tendon Transfer Surgery Restores Upper Extremity Functions to Spinal Cord Injury Patient



Michael Bednar, MD

After suffering a severe cervical spinal cord injury, Scott McConnell had little function remaining in his hands and arms.

Loyola Medicine orthopaedic surgeon Michael Bednar, MD, was able to restore key functions with four tendon transfer operations.

Mr. McConnell can open his fingers much more than he could before, and close them in a tight grip. He can pinch with his thumb and extend his arms outward. He is able

to more easily perform everyday tasks such as grasping a cup, brushing his teeth and using his cell phone.

In a tendon transfer, muscles that still work are redirected to do the jobs of muscles that are paralyzed. For example, the surgeon may detach one of the working muscles that flexes the elbow and reattach it to a nonworking muscle that flexes the thumb.

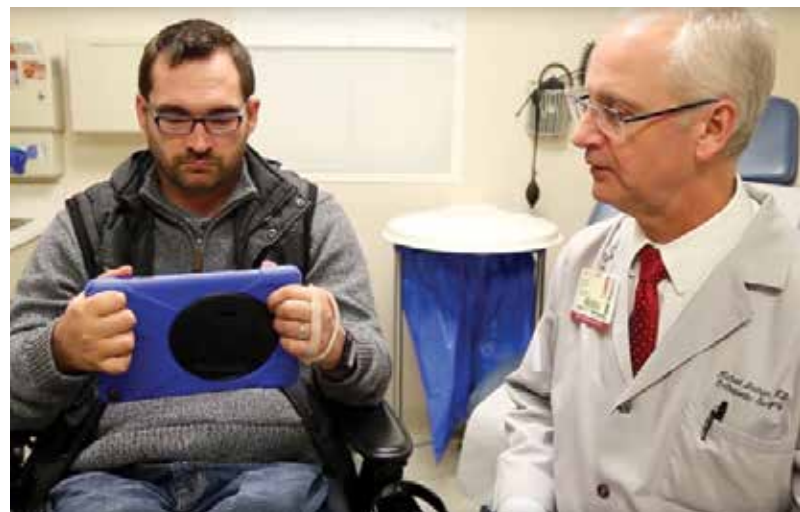
The number of functioning muscles a patient has will determine what tendon transfers the surgeon will perform. The more working muscles available for transfer, the more functions can be restored. Tendon transfers typically involve two surgeries on each arm, performed three months apart. Arms are done one at a time. During rehabilitation, patients learn how to use the transferred muscles.

Dr. Bednar has performed tendon transfers on about 75 patients and is among the most skilled and experienced surgeons in the country doing the procedure.

Patients who potentially can benefit the most from tendon transfers have spinal cord injuries in the C5-C8 cervical nerves.

Mr. McConnell's injury was C5-C6.

"To do the operation and have them activate a muscle for the first time since their injury, and see the look in their eyes and their face light up when they realize the function is back, is one of the most rewarding things I get to do as a surgeon," Dr. Bednar said. ■



Loyola Offering Scalp Cooling to Reduce Chemotherapy Hair Loss

Loyola Medicine's Cardinal Bernardin Cancer Center is the first center in Illinois to offer cancer patients the Paxman Scalp Cooling System to minimize chemotherapy hair loss.



Before, during and after chemotherapy sessions, the patient wears a silicone cap containing a circulating coolant that reduces the temperature of the scalp by a few degrees. Scalp cooling constricts blood vessels and blood flow to hair follicles, reducing delivery of chemotherapy agents to the scalp, along with the metabolic rate.

The cooling method used by Loyola recently was cleared by the FDA for patients with breast and other solid tumors.

A multicenter clinical trial, published in the *Journal of the American Medical Association*, found that among 101 breast cancer patients who underwent Paxman scalp cooling, 66.3 percent experienced hair loss of 50 percent or less. None of the 16 patients in the control group experienced hair preservation. In the cooling group, 3.8 percent of patients experienced mild headaches and 2.8 percent discontinued the treatment due to feeling cold.

Scalp cooling does not work with some chemotherapy drugs, and results vary according to the patient's age, hair, cancer and other factors. The treatment costs as much as \$2,200 and it is not covered by insurance. ■

More Breast Cancer Patients Can Safely Forgo Chemotherapy



Kathy Albain, MD

A 21-gene test performed on tumors could enable most patients with the most common type of early breast cancer to safely forgo chemotherapy, according to a landmark study published in the *New England Journal of Medicine*.

Loyola Medicine oncologist Kathy Albain, MD, was among the main co-authors and a member of the clinical trial's steering committee. Dr. Albain has conducted research on the gene test and has used it in her practice for years.

The study enrolled 10,273 women who had hormone-receptor positive, HER-2 negative breast cancer that had not spread to lymph nodes. Researchers examined outcomes of the 69 percent of patients who had intermediate scores. Patients were randomly assigned to receive chemotherapy followed by hormonal therapy or hormone therapy alone.

"With results of this ground-breaking study, we now can safely avoid chemotherapy in about 70 percent of patients with the most common form of breast cancer," Dr. Albain said. "We are de-escalating toxic therapy."

“ We are de-escalating toxic therapy. ”

- Kathy Albain, MD

Researchers examined the chemotherapy and nonchemotherapy groups for several outcomes, including being cancer-free, having cancer recur locally or to distant sites in the body and overall survival.

The test examines 21 genes from a patient's breast cancer biopsy sample to determine how active they are. The tumor is assigned a "recurrence score" from 0 to 100. Previous studies demonstrated that patients with low scores (10 or lower) did not need chemotherapy, while women with high scores (above 25) did require and benefitted from chemotherapy. The new study examined the majority of women who fall in the intermediate range of 11 to 25.

For the entire study population with gene test scores between 11 and 25 – and especially among women aged 50 to 75 – there was no significant difference between the chemotherapy and nonchemotherapy groups. Among women younger than 50, outcomes were similar when gene test scores were 15 or lower. Among younger women with scores 16 to 25, outcomes were slightly better in the chemotherapy group. ■

Loyola to Pursue NCI Cancer Center Designation



William Small, Jr., MD, FACRO, FACR, FASTRO

Loyola Medicine's Cardinal Bernardin Cancer Center and Loyola University Chicago Stritch School of Medicine are expanding their renowned cancer program in their continued pursuit to be named a National Cancer Institute-Designated Cancer Center.

As a major part of this initiative, Stritch has recently created a new department of cancer biology to study cancer at the molecular level.

National Cancer Institute Cancer Centers are recognized for their scientific leadership, resources and depth and breadth of research. An elite subgroup of cancer centers, these institutions demonstrate their substantial transdisciplinary research that bridges scientific areas.

To achieve this goal, cancer program leaders have transitioned to new roles.

William Small, Jr., MD, FACRO, FACR, FASTRO, chair of the department of radiation oncology, is now director of the Cardinal Bernardin Cancer Center and will lead the effort to achieve Cancer Center designation.

Patrick Stiff, MD, Coleman Professor of Oncology, transitioned from director of the cancer center in order to focus more intently on clinical care and research. Dr. Stiff remains director of the division of hematology/oncology, leader of Loyola's bone marrow transplant program and chair of the SWOG Blood and Marrow Transplant Committee. Dr. Stiff also will continue as co-leader of the oncology service line for the medical center.

Dr. Stiff is co-investigator of two recent National Institutes of Health grants. The first, from the National Heart, Lung and Blood Institute, establishes Loyola as the only center in Illinois to be named a Blood and Marrow Clinical Trials Network clinical core center.

The second grant, from the National Cancer Institute, will help establish survivorship programs for bone marrow transplant patients.

Dr. Small has earned an international reputation for research and treatment of gynecological malignancies and gastrointestinal and breast cancers. The leader of numerous national and international clinical trials, Dr. Small is co-chair of the NRG Oncology Gynecologic Committee, former chair of the NCI-funded Radiation Therapy Oncology Group Gynecologic Working Group and past chair of the Gynecologic Cancer InterGroup. He is a fellow of the American College of Radiation Oncology, American College of Radiology and American Society for Radiation Oncology.

The Cardinal Bernardin Cancer Center, located on Loyola Medicine's main campus in Maywood, is named after the late archbishop of Chicago, Cardinal Joseph Bernardin. It is among the first centers to bring together in one building researchers and clinicians from all cancer service lines.

Nancy Zeleznik-Le, PhD, former interim director of Loyola's Oncology Research Institute, will serve as interim chair of the new department of cancer biology. The department will work collaboratively with researchers and clinicians at the Cardinal Bernardin Cancer Center. As interim chair, Dr. Zeleznik-Le also will serve as deputy director and associate director for basic research at the Cardinal Bernardin Cancer Center. ■



Patrick Stiff, MD



Six Loyola Specialties Nationally Ranked by *U.S. News & World Report*

Ranked Among Top Three Hospitals in Illinois

Loyola Medicine ranks among the top three Illinois hospitals (among 200 hospitals) and has six nationally ranked specialties in *U.S. News & World Report's* 2018-19 Best Hospitals rankings.

Loyola's six nationally ranked specialties are Cardiology & Heart Surgery (27th), Urology (31st), Orthopaedics (36th), Gastroenterology and GI Surgery (37th), Neurology and Neurosurgery (37th) and Pulmonology (49th). Three Loyola specialties are high performing: Cancer, Geriatrics and Nephrology.

U.S. News evaluated more than 4,500 hospitals nationwide. To achieve a national ranking, a hospital must be ranked among the nation's top 50 hospitals in a given specialty. A high-performing specialty is among the top 10 percent in the nation.

Loyola also was rated high performing in aortic valve surgery, colon cancer surgery, heart bypass surgery and heart failure.

U.S. News's Best Hospitals rankings assess hospital performance across 16 specialty areas based on an extensive data-driven analysis that looks at structural characteristics and processes of

care, outcomes and mortality, patient safety, hospital reputation among physicians and number of patients treated within the specialty. For the 2018-19 rankings, only 158 hospitals out of more than 4,500 evaluated across the U.S. were ranked in at least one specialty area. ■



Loyola Is the Only ACS-Certified Level 1 Trauma Center in Illinois

Loyola University Medical Center has been reverified by the American College of Surgeons (ACS) Committee on Trauma as a Level 1 Trauma Center.

Loyola is the only ACS-verified Level 1 trauma center in Illinois. Verification helps ensure optimal quality care and excellent patient outcomes. Loyola's reverification is for three years.

The ACS verification, review and consultation program helps hospitals evaluate and improve trauma care. It provides an objective, external review of a trauma center's resources and quality performance. A team of trauma experts completes an on-site review of the hospital. The team assesses relevant features of the program, including commitment, readiness, resources, policies, patient care and performance improvement. ■

Twelve Loyola Physicians Named Top Heart Doctors

Chicago magazine has named 12 Loyola Medicine physicians to its 2018 list of top heart doctors.

The list, which includes eight Loyola cardiologists and four Loyola heart surgeons, was compiled by Castle Connolly Medical Ltd., a healthcare research and information company. ■

CARDIAC ELECTROPHYSIOLOGY



David Wilber, MD

CARDIOVASCULAR DISEASE



John Barron, MD, PhD



Alain Heroux, MD



Thomas McKiernan, MD



Ivan Pacold, MD



Mushabbar Syed, MD

INTERVENTIONAL CARDIOLOGY



Fred Leya, MD



John Lopez, MD

THORACIC & CARDIAC



Mamdouh Bakhos, MD



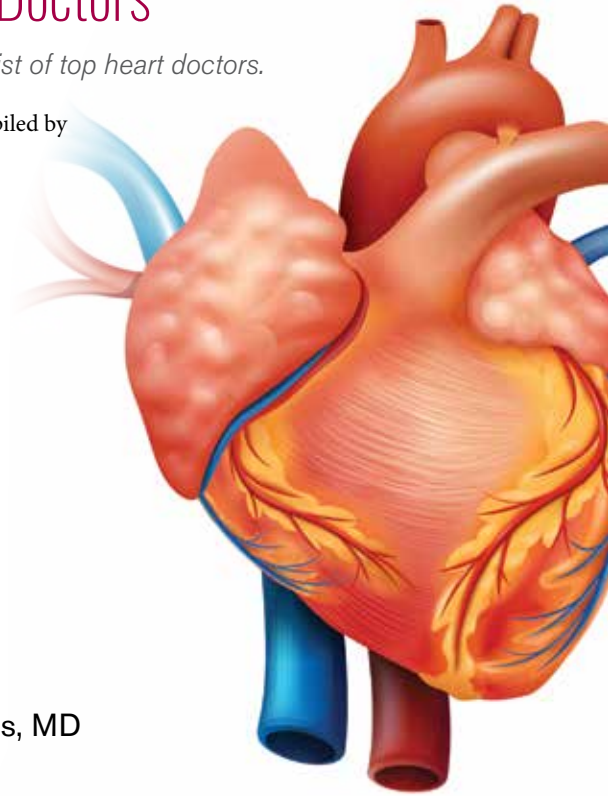
Bryan Foy, MD



Edwin McGee Jr., MD



Jeffrey Schwartz, MD



Castle Connolly's online nomination process is open to all licensed physicians in the United States. The doctors' educational and professional experience are carefully screened before final selection is made among those physicians most highly regarded by their peers. Doctors cannot nominate themselves, nor may they appear on the list.

Loyola Named to Pulmonary Fibrosis Foundation Care Center Network

The Pulmonary Fibrosis Foundation has added Loyola University Medical Center to its Care Center Network of centers with expertise in accurately diagnosing and treating patients with pulmonary fibrosis.

Loyola is among 60 centers in 30 states that are part of the network.

Loyola's application to become part of the Care Center Network was strengthened by its large volume of pulmonary fibrosis patients, participation in multiple clinical trials and operation of the largest lung transplant program in Illinois.

Loyola also provides comprehensive, multidisciplinary care for other advanced and rare lung diseases, including cystic fibrosis, lymphangioleiomyomatosis (LAM), alpha-1 antitrypsin deficiency, sarcoidosis, Sjögren's syndrome and Hermansky-Pudlak syndrome.

Loyola also is recognized as a center of excellence by the Cystic Fibrosis Foundation, LAM Foundation, Alpha-1 Foundation and Rare Lung Diseases Consortium. ■

Shawn P. Vincent Named President & Chief Executive Officer of Loyola Medicine



Shawn P. Vincent

Loyola Medicine has announced Shawn P. Vincent as the new president & chief executive officer of the regional system. He will also become a member of the Loyola Medicine board of directors.

Mr. Vincent joins Loyola Medicine from Augusta University Health, where he served as chief operating officer. There, he was responsible for establishing executive vision and strategic direction for the 632-bed academic health center containing a 478-bed adult hospital, a 154-bed children's hospital, an ambulatory care center with more than 80 outpatient clinics, an inpatient rehabilitation hospital and a 13-county Level I regional trauma center.

Previously, as vice president for partnerships and international healthcare and strategic affiliations at Augusta University Health, Mr. Vincent was responsible for the development of relationships and programs, including hospitals, physicians, clinics, foundations, community leaders, research

endeavors, international entities, philanthropic opportunities and branch campus opportunities. Prior to Augusta University Health, he held leadership positions with Hospital Corporation of America, PhyMatrix Corporation, Wentz Wellness Centers and Children's Healthcare of Atlanta.

Mr. Vincent served in the United States Marine Corps and holds a master's degree in business administration from the University of Georgia. He is an executive fellow of the Advisory Board Company on Healthcare in Washington, D.C.

Mr. Vincent is a member of the American College of Healthcare Executives and has served in leadership positions with several philanthropic organizations, including the American Cancer Society, American Heart Association Heart Ball and the Leukemia and Lymphoma Society. ■

Chris M. Gonzalez, MD, Named Urology Chair



Chris M. Gonzalez, MD, MBA, FACS

Chris M. Gonzalez, MD, MBA, FACS, has been named the Albert J. Jr. and Claire R. Speth professor and chair of Loyola's department of urology.

Before joining Loyola, Dr. Gonzalez was the Lester Persky professor and chair of the department of urology and director of the Urologic Institute for University Hospitals of Cleveland.

Dr. Gonzalez earned a medical degree from the University of Iowa College of Medicine and completed a urologic residency at McGaw Medical Center of Northwestern University. He joined Northwestern's faculty in 2000 and was appointed professor in 2011. He served as chief of urology for VA Lakeside from 2003 to 2006 and earned an MBA from Northwestern in 2006. He was director of surgery for the Northwestern Medicine surgical services department from 2014 to 2015.

During his more than 20 years at Northwestern, Dr. Gonzalez established strong ties to area urologists, serving as president of the Chicago Urologic Society in 2014. He also has held multiple national leadership positions, including chair of public policy and practice support for the American Urologic Association.

Dr. Gonzalez is associate editor for the genitourinary reconstruction section of *Urology* and a section editor of *Urology Times*.

Dr. Gonzalez served in the U.S. Army National Guard from January, 1991 to January, 2001. He is a member of the American Association of Genitourinary Surgeons. ■

Glyn R. Morgan, MD, Named Director of Intra-Abdominal Transplant



Glyn R. Morgan, MD, MSc, FRCSC, FACS

Glyn R. Morgan, MD, MSc, FRCSC, FACS, one of the nation's leading liver and kidney transplant surgeons, has been named director of Loyola's division of intra-abdominal transplant.

Before joining Loyola, Dr. Morgan was director of liver transplantation at the NYU Langone Transplant Institute, where he co-founded the NYU living donor liver transplant program. Dr. Morgan

has performed nearly 700 liver transplants – including more than 100 living donor liver transplants – and more than 200 kidney transplants.

Dr. Morgan plans to recruit new transplant surgeons; enhance clinical excellence and outcomes; increase the number of kidney, liver and pancreas transplants; create and grow a living donor liver program; advance the educational profile of the intra-abdominal transplant division for medical students and residents; establish an American Society of Transplant Surgeons fellowship program; and elevate clinical and translational research.

Dr. Morgan earned his MD and MSc degrees from the University of Toronto, where he also completed a residency in surgery. He completed a fellowship in pediatric liver transplantation at the Hospital for Sick Children in Toronto and an ASTS-accredited transplant surgery fellowship in liver transplantation and hepatobiliary surgery at Cedars-Sinai Medical Center in Los Angeles. ■

Loyola Physicians in the News

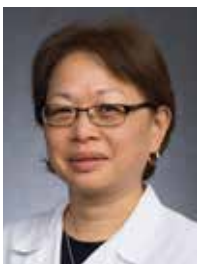


Anand V. Germanwala, MD, is among an elite group of 10 neurosurgeons in the country recognized as emerging neurosurgical leaders. The Congress of Neurological Surgeons selected Dr. Germanwala and nine other neurosurgeons to participate in the Vanguard Leadership in Healthcare program. The advanced fellowship program is designed to empower neurosurgeons with the information and skills they need for leadership positions.



Nephrologist **Susan Hou, MD**, who co-founded a clinic that provides free medical care to indigent people in the Bolivian rain forest, is co-recipient of the 2018 American Association of Clinical Endocrinologists Excellence in Humanities and Medical Ethics Award.

The other recipient is Dr. Hou's husband, Mark Molitch, MD, who co-founded the Centro Medico Humberto Parra along with Dr. Hou and a Bolivian physician. The clinic has cared for more than 50,000 patients.



Radiologist **Jennifer Lim-Dunham, MD**, has received the Society for Pediatric Radiology's prestigious Walter. E. Berdon Award for best clinical research paper appearing in *Pediatric Radiology* in 2017. The study is titled, "Ultrasound risk stratification for malignancy using the 2015 American Thyroid Association Management Guidelines for Children with Thyroid Nodules and Differentiated Thyroid Cancer."



Kathy Albain, MD, FACP, has been named vice chair of SWOG, a National Cancer Institute-funded cancer clinical trials network. Dr. Albain will direct SWOG's new Clinical Trials Partnerships initiative. Dr. Albain is a leader in national clinical trials of new treatments for breast and lung cancer, and her research has changed the standard of care of both diseases.



Mark Cichon, DO, FACEP, FACOEP, chair of emergency medicine, received the Meritorious Service Award from the Illinois College of Emergency Physicians. The award was given for Dr. Cichon's significant contributions to the advancement of emergency medicine by exemplary service. Dr. Cichon is medical director and chair of the Region 8 Emergency Medical Services Advisory Committee and has served on the Illinois Department of Public Health State Trauma Advisory Committee.



Ongoing Clinical Trials

GASTROENTEROLOGY

208480: Multicenter, Prospective, Randomized Study Comparing PillCam® SBC Capsule Endoscopy to Standard of Care for Detection of Active CD in the Small Bowel and Colon in Subjects with Known CD and Mucosal Disease (the BLINK study)

PRINCIPAL INVESTIGATOR:

Mukund Venu, MD

ENROLLMENT PHONE: 708-216-2057

HEMATOLOGY – AML

210037: A Multi-Center, Randomized, Double-Blind, Placebo-Controlled Phase III trial of the FLT3 Inhibitor Gilteritinib Administered as Maintenance Therapy Following Allogeneic Transplant for Patients with FLT3-ITD AML

PRINCIPAL INVESTIGATOR:

Patrick Stiff, MD

ENROLLMENT PHONE: 708-327-3306

HEMATOLOGY – LEUKEMIA

210692: A Randomized Phase II/III Trial of Novel Therapeutics Versus Azacitidine in Newly Diagnosed Patients with Acute Myeloid Leukemia (AML) or High-Risk Myelodysplastic Syndrome (MDS), Age 60 or Older (LEAP: Intergroup Less Intense AML Platform Trial)

PRINCIPAL INVESTIGATOR:

Kathleen Phelan, MD

ENROLLMENT PHONE: 708-327-3306

HEMATOLOGY – LYMPHOMA

210004: A Phase 2b Randomized Study to Assess the Efficacy and Safety of the Combination of Ublituximab + TGR-1202 with or without Bendamustine and TGR-1202 alone in Patients with Previously Treated Non-Hodgkin's Lymphoma

PRINCIPAL INVESTIGATOR:

Patrick Stiff, MD

ENROLLMENT PHONE: 708-327-3228

208594: A Phase 2 Multicenter Study Evaluating the Efficacy of KTE-C19 in Subjects with Relapsed/Refractory Mantle Cell Lymphoma (r/r MCL)(Amendment 1; 27Oct2015)KTE-C19-102

PRINCIPAL INVESTIGATOR:

Patrick Stiff, MD

ENROLLMENT PHONE: 708-327-3228

210186: Randomized Phase II Trial in Early Relapsing or Refractory Follicular Lymphoma (SWOG 1608)

PRINCIPAL INVESTIGATOR:

Scott Smith, MD

ENROLLMENT PHONE: 708-327-3228

209039: Phase II Trial of Pembrolizumab in Combination with ICE Salvage Chemotherapy for Relapsed/Refractory Hodgkin Lymphoma (NU 16H07) Amendment 2 February 15, 2017

PRINCIPAL INVESTIGATOR:

Scott Smith, MD

ENROLLMENT PHONE: 708-327-3228

210352: A Phase 2, Open-Label, 2-Cohort, Multicenter Study of INCB050465, a PI3Kd Inhibitor, in Relapsed or Refractory Mantle Cell Lymphoma Previously Treated With or Without a BTK Inhibitor (INCB 50465-205)

PRINCIPAL INVESTIGATOR:

Scott Smith, MD, PhD

ENROLLMENT PHONE: 708-327-3228

HEMATOLOGY – STEM CELL TRANSPLANT

209611: A Phase 3, Multicenter, Randomized, Double-blind, Double-dummy, Active-controlled Study to Assess the Efficacy and Safety of Maribavir Compared to Valganciclovir for the Treatment of Cytomegalovirus (CMV) Infection in Hematopoietic Stem Cell Transplant Recipients

PRINCIPAL INVESTIGATOR:

Patrick Hagen, MD

ENROLLMENT PHONE: 708-327-2336

INFECTIOUS DISEASES – RECURRENT CLOSTRIDIUM DIFFICILE INFECTION

209609: A Phase 3 Prospective, Randomized, Double-blinded, Placebo-controlled Clinical Study Demonstrating the Efficacy and Safety of Rebiotix RBX2660 (microbiota suspension) for the Prevention of Recurrent Clostridium difficile Infection

PRINCIPAL INVESTIGATOR:

Gail Hecht, MD

ENROLLMENT PHONE: 708-216-2057

NEUROLOGY – ANEURYSMS

208777: Coiling Of Aneurysms Smaller Than 5 Mm With Hypersoft®

PRINCIPAL INVESTIGATOR:

Camilo Gomez, MD

ENROLLMENT PHONE:708-216-8663

NUCLEAR MEDICINE

210184: A Comparison of Technegas and Xenon 133 Planar Lung Imaging in Subjects Referred for Ventilation Scintigraphy

PRINCIPAL INVESTIGATOR:

Robert Wagner, MD

ENROLLMENT PHONE: 708-216-5744

ONCOLOGY – AL AMYLOIDOSIS

210857: REGISTRATION CIRB: S1702: A Phase II Study of Isatuximab (SAR650984) for Patients with Previously Treated AL Amyloidosis NCT# 03499808

PRINCIPAL INVESTIGATOR:

Kevin Barton, MD

ENROLLMENT PHONE:708-327-3306

ONCOLOGY – BREAST CANCER

210298: Single Arm, Open Label Phase 1b/2 Study of SGN-LIV1A in Combination with Pembrolizumab for First-Line Treatment of Patients with Unresectable Locally-Advanced or Metastatic Triple-Negative Breast Cancer

PRINCIPAL INVESTIGATOR:

Kathy Albain, MD

ENROLLMENT PHONE:708-327-3306

210507: S1501: Prospective Evaluation of Carvedilol in Prevention of Cardiac Toxicity in Patients with Metastatic HER-2+ Breast Cancer, Phase III

PRINCIPAL INVESTIGATOR:

Shelly Lo, MD

ENROLLMENT PHONE: 708-327-3306

ONCOLOGY – COLORECTAL CANCER

211353: S1613: A Randomized Phase II Study of Trastuzumab and Pertuzumab (TP) Compared to Cetuximab and Irinotecan (CETIRI) in Advanced/Metastatic Colorectal Cancer (mCRC) with HER-2 Amplification NCT03365882

PRINCIPAL INVESTIGATOR:

Asha Dhanarajan, MD

ENROLLMENT PHONE: 708-216-5766



Loyola Research News

ONCOLOGY – LUNG CANCER

211027: REGISTRATION CIRB: EA5161: Randomized Phase II Clinical Trial of Cisplatin/Carboplatin and Etoposide (CE) alone or in Combination with Nivolumab as Frontline Therapy for Extensive Stage Small Cell Lung Cancer (ED-SCLC) NCT#03382561

PRINCIPAL INVESTIGATOR:

Courtney Wagner, MD

ENROLLMENT PHONE: 708-327-3222

ONCOLOGY – PEDIATRIC

211198: APEC1621SC: NCI-COG Pediatric MATCH (Molecular Analysis for Therapy Choice) Screening Protocol NCT03155620

PRINCIPAL INVESTIGATOR:

Eugene Suh, MD

ENROLLMENT PHONE: 708-327-3640

ONCOLOGY – PROSTATE CANCER

210629: NRG GU005 Phase III IGRT and SBRT vs. IGRT and Hypofractionated IMRT for Localized Intermediate Risk Prostate Cancer NCT03367702

PRINCIPAL INVESTIGATOR:

Abhishek Solanki, MD

ENROLLMENT PHONE: 708-327-3306

PULMONARY – PULMONARY HYPERTENSION

209497: A Multicenter, Randomized, Double-blind, Placebo-controlled Study to Evaluate the Safety and Efficacy of Oral Treprostinil in Subjects with Pulmonary Hypertension (PH) in Heart Failure with Preserved Ejection Fraction (HFpEF)

PRINCIPAL INVESTIGATOR:

James Gagermeier, MD

ENROLLMENT PHONE: 708-216-5744

VASCULAR SURGERY – ABDOMINAL AORTIC ANEURYSMS

208141: Assessment of the GORE® EXCLUDER® Conformable AAA Endoprosthesis in the Treatment of Abdominal Aortic Aneurysms

PRINCIPAL INVESTIGATOR:

Pegge Halandras, MD

ENROLLMENT PHONE: 708-216-8663

NUTRITION COUNSELING IN KIDNEY DISEASE PATIENTS

Ninety percent of non-dialysis patients with chronic kidney disease never meet with a dietitian.

LOYOLA AUTHOR: Holly Kramer, MD, MPH

JOURNAL: *Journal of the Academy of Nutrition and Dietetics*

HEPATITIS C VACCINE IN INJECTING DRUG USERS

If a hepatitis C vaccine were successfully developed, it would dramatically reduce transmission among drug users – even though it's unlikely such a vaccine would provide complete immunity.

LOYOLA AUTHORS: Harel Dahari, PhD, Scott Cotler, MD

JOURNAL: *Science Translational Medicine*

EMOTIONAL INTELLIGENCE IN RESIDENTS

An educational curriculum for residents significantly increased their scores for overall intelligence, stress management and overall wellness.

LOYOLA AUTHORS: Ramzan Shahid, MD, Jerold Stirling, MD

JOURNAL: *Advances in Medical Education and Practice*

PREDICTING ARDS IN BURN PATIENTS

Extent of inhalation injury, percentage of body burned and high levels of von Willebrand factor predict burn patients most likely to develop acute respiratory distress syndrome.

LOYOLA AUTHOR: Majid Afshar, MD

JOURNAL: *Annals of Surgery*

OPEN VERSUS ROBOTIC CYSTECTOMY

Robotic surgery was associated with less blood loss and shorter hospital stays, but longer surgeries. There were no significant differences in survival without disease progression, complication rates or quality of life.

LOYOLA AUTHORS: Marcus Quek, MD, Gopal Gupta, MD, Alex Gorbonos, MD

JOURNAL: *The Lancet*

FLOPPY EYELIDS MAY SIGNAL SLEEP APNEA

Fifty-three percent of sleep apnea patients also had lax eyelid condition.

LOYOLA AUTHORS: Charles Bouchard, MD, Sunita Kumar, MD

JOURNAL: *The Ocular Surface*

PTSD IN BURN PATIENTS

Sixteen percent of adult burn patients screened positive for post-traumatic stress disorder.

LOYOLA AUTHORS: Elizabeth Simmons, PsyD, Kelly McElligott, AM

MEETING: American Burn Association

ULTRASOUND GUIDELINES FOR PEDIATRIC THYROID CANCER

American College of Radiology guidelines for grading nodules that require biopsy are accurate and reproducible.

LOYOLA AUTHOR: Jennifer Lim-Dunham, MD

MEETING: Society for Pediatric Radiology

ALCOHOL USE BEFORE LUNG TRANSPLANT

Alcohol users spent 1.5 times longer in the hospital, three times as long on ventilators and nearly three times as long in the ICU.

LOYOLA AUTHOR: Erin Lowery, MD

JOURNAL: *Clinical Transplantation*

OSTEOPOROSIS DRUG HOLIDAYS

Fifteen percent of osteoporosis patients who take drug holidays from bisphosphonates experienced bone fractures during a six-year follow-up period.

LOYOLA AUTHOR: Pauline Camacho, MD

JOURNAL: *Endocrine Practice*

RADIATION ONCOLOGY INSTRUCTION IN MEDICAL SCHOOL

Only 41 percent of radiation oncology departments at AMCs reported that at least one faculty member taught a topic related to radiation oncology.

LOYOLA AUTHOR: William Small, Jr., MD

JOURNAL: *Journal of the American College of Radiology*

DIAGNOSING CELIAC DISEASE

It takes an average of 3.5 years to diagnose celiac disease in patients who do not report gastrointestinal symptoms.

LOYOLA AUTHORS: Mukund Venu, MD

JOURNAL: *American Journal of Medicine*



Leadless Pacemaker

Loyola Medicine is now offering select pacemaker patients leadless devices that are less invasive and cause fewer complications. The leadless pacemaker is miniaturized, which allows the electronics, battery and delivery system to be contained within the unit.

www.loyolamedicine.org/leadless-pacemaker



Living Donor Liver Transplant

When Anne Doyen was placed on the liver transplant waiting list, her daughter, Katie Doyen, offered to become her living donor. Loyola Medicine surgeons removed a portion of Katie Doyen's liver and transplanted it into her mother. The livers in both women have grown back to normal size and are functioning normally.

www.loyolamedicine.org/living-donor-liver-transplant



Intraoperative Radiation Therapy

Loyola Medicine is among the select centers with the multidisciplinary expertise to offer patients with a broad range of cancers intraoperative radiation therapy (IORT), which is delivered during surgery. After the tumor is removed, a concentrated dose of radiation is delivered to the tumor bed. Higher doses can be safely given because physicians can move or shield healthy organs to protect them from the radiation.

www.loyolamedicine.org/iort-breast-cancer



Treating Bladder Cancer

Loyola Medicine uses the latest technologies to diagnose and treat bladder cancer. An integrated team of experts offers the full spectrum of treatments, including robotic and traditional open surgery, for every stage. Five years after his bladder cancer surgery, Loyola patient Charles Clark remains active and cancer free.

www.loyolamedicine.org/treating-bladder-cancer



Pediatric Rhabdomyosarcoma

When Pierson Gibis was diagnosed with rhabdomyosarcoma, a rare cancer that forms in soft tissue, he worried he would never play baseball again. But after treatment by pediatric oncologist Eugene Suh, MD, Pierson was able to return to the field and on June 6, 2018 he was drafted in the 39th round by the Chicago Cubs.

www.loyolamedicine.org/pediatric-cancer

Meet Our New Physicians



Tamer Refaat Abdelrhman, MD, PhD

*Associate Professor
Radiation Oncology*

CLINICAL EXPERTISE

Anal cancer, bile duct cancer, bladder cancer, brain cancer, breast cancer, CNS malignancies, cervical cancer, colon cancer, colorectal cancer, esophageal cancer, gastrointestinal cancer, head and neck cancer, hepatocellular carcinoma, intensity-modulated radiotherapy, kidney cancer, larynx cancer, liver cancer, lung cancer, melanoma, oral cancer, ovarian cancer, pancreas cancer, penile cancer, prostate cancer, prostate IMRT, radiosurgery, sarcomas, stereotactic body radiation therapy, testicular cancer, thyroid cancer, urological cancer

FELLOWSHIP

Lille II University – Radiation Oncology
Northwestern University Feinberg School of Medicine – Radiation Oncology

RESIDENCY

University of Alexandria – Radiation Oncology

MEDICAL SCHOOL

University of Alexandria



Sean Cahill, MD

*Associate Professor
Internal Medicine, Pediatrics*

CLINICAL EXPERTISE

Internal medicine, pediatrics

RESIDENCY

Loyola University Medical Center – Internal Medicine & Pediatrics

MEDICAL SCHOOL

Loyola University Chicago Stritch School of Medicine



Mary Eguia, MD

*Assistant Professor
Family Medicine*

CLINICAL EXPERTISE

Family medicine

RESIDENCY

Northwestern University McGaw Medical Center – Family Medicine

MEDICAL SCHOOL

University of Washington School of Medicine



Anup Alexander, MD

*Assistant Professor
Radiology*

CLINICAL EXPERTISE

Imaging of bone and joint diseases, musculoskeletal imaging, steroid injection

FELLOWSHIP

Northshore University Health System – Musculoskeletal Radiology

RESIDENCY

University of Chicago – Diagnostic Radiology

MEDICAL SCHOOL

University of Illinois at Chicago



Agnes Hurtuk, MD

*Assistant Professor
Otolaryngology*

CLINICAL EXPERTISE

Chronic cough, chronic sinusitis, endoscopic sinus surgery, fine-needle aspiration, hay fever, head and neck surgery, hearing loss, hoarseness, septoplasty, sleep disorder, strep throat, tinnitus, tonsil and adenoid problem, vertigo

RESIDENCY

Ohio State University Medical Center – Otolaryngology – Head and Neck Surgery

MEDICAL SCHOOL

Loyola University Stritch School of Medicine



Stacey Bennis, MD

*Assistant Professor
Orthopaedic Surgery and Rehabilitation*

CLINICAL EXPERTISE

Hip-knee and SI joint injection, knee injury, musculoskeletal imaging, non-surgical treatment for pain, pain in pregnancy, pelvic pain, postpartum pain, shoulder injury, sports injury, steroid injection, tendinitis

FELLOWSHIP

Northwestern University McGaw Medical Center – Spine and Sports Medicine

RESIDENCY

Northwestern University McGaw Medical Center/ Lurie Children's Hospital – Physical Medicine and Rehabilitation

MEDICAL SCHOOL

Wayne State University School of Medicine



Abid Khurshid, MD

*Assistant Professor
Pulmonary and Critical Care Medicine*

CLINICAL EXPERTISE

Sleep disorders

FELLOWSHIP

University of Illinois at Chicago Medical Center – Pulmonary Medicine

RESIDENCY

Michael Reese Hospital – Internal Medicine

MEDICAL SCHOOL

Dow Medical College, Pakistan



Kathy Kujawa, MD, PhD

*Assistant Professor
Neurology*

CLINICAL EXPERTISE

Gait disorder, Parkinson's disease, Tourette syndrome

FELLOWSHIP

Rush University Medical Center – Movement Disorders

RESIDENCY

University of Maryland at Baltimore – Neurology

MEDICAL SCHOOL

University of Health Sciences at the Chicago Medical School



Neelam Patadia, OD

*Assistant Professor
Ophthalmology*

CLINICAL EXPERTISE

Diabetic retinopathy

RESIDENCY

Portland Veterans Affairs Medical Center – Optometry

OPTOMETRY SCHOOL

Illinois College of Optometry



Charles McMahon, MD

*Assistant Professor
Gastroenterology*

CLINICAL EXPERTISE

Acid reflux, anal fissure, anemia, Barrett's esophagus, celiac disease, C. diff, colon cancer, colon, rectal and anal problems, colonoscopy, constipation, Crohn's disease, diarrheal illnesses, diverticulitis, dyspepsia, endoscopy, eosinophilic esophagitis, familial adenomatous polyposis, fecal incontinence, dysphagia, gallbladder disorder, gas and bloating, gastrointestinal bleeding, GIST, IBD, irritable bowel syndrome, liver disease, Lynch syndrome, malabsorption, pancreatitis, short bowel syndrome, ulcerative colitis, vascular malformation

FELLOWSHIP

University of Missouri-Kansas City – Gastroenterology

RESIDENCY

University of Colorado – Internal Medicine

MEDICAL SCHOOL

University of Oklahoma College of Medicine



Paul Prinz, MD

*Assistant Professor
Orthopaedic Surgery and Rehabilitation*

CLINICAL EXPERTISE

Broken bones, hand problems, knee ligament reconstruction

FELLOWSHIP

Loma Linda University Medical Center – Hand and Upper Extremity Reconstruction

RESIDENCY

University of Illinois at Chicago – Orthopaedic Surgery

MEDICAL SCHOOL

University of Chicago



Brent Rieger, MD

*Assistant Professor
Internal Medicine, Pediatrics*

CLINICAL EXPERTISE

Internal medicine, pediatrics

RESIDENCY

Loyola University Medical Center – Internal Medicine & Pediatrics

MEDICAL SCHOOL

Loyola University Chicago Stritch School of Medicine



Suguna Pappu, MD, PhD

*Associate Professor
Neurological Surgery*

CLINICAL EXPERTISE

Brain cancer, brain hemorrhage, brain trauma, carpal tunnel syndrome, CNS infection, CNS malignancies, meningioma, minimally invasive spine surgery, peripheral nerve, spina bifida, spinal cord injury, spinal disc disease, spinal stenosis, spinal tumor, spine trauma, vertebral compression fractures

FELLOWSHIP

Yale University – Diagnostic Radiology

RESIDENCY

Yale University – Surgery
University of New Mexico Health Sciences Center – Neurological Surgery

MEDICAL SCHOOL

Yale University



Faisal Saeed, MD

*Assistant Professor
Bariatric Surgery*

CLINICAL EXPERTISE

Obesity

RESIDENCY

Rosalind Franklin University of Medicine and Science
The Chicago Medical School – Internal Medicine

MEDICAL SCHOOL

Dow Medical College, Pakistan



Michael Soult, MD

*Assistant Professor
Vascular Surgery and Endovascular Therapy*

CLINICAL EXPERTISE

Abdominal aortic aneurysm, artery blockage, bypass of blocked blood vessel, carotid stenosis, endovascular therapy, leg revascularization, leg ulcer, stenting of blocked artery, thoracic surgery, varicose vein obliteration with laser, vascular diseases, venous disease

FELLOWSHIP

Northwestern University Feinberg School of Medicine – Vascular and Endovascular Surgery

RESIDENCY

Eastern Virginia Graduate Medical School – General Surgery

MEDICAL SCHOOL

Ohio State University College of Medicine



Christina Staskiewicz, DPM

*Instructor
Podiatry*

CLINICAL EXPERTISE

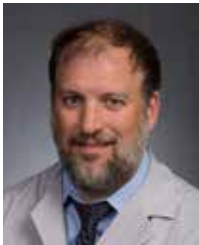
Arthritis of the feet, bone infections, bunion, congenital foot deformity, diabetic foot problems, flat feet, foot fracture, foot pain, great toe joint arthritis, hammer toe, heel pain, ingrown toenail, joint injection, tendonitis of the foot and ankle, toenail problem, wound management

RESIDENCY

Loyola University Medical Center – Podiatric Medicine & Surgery

PODIATRIC MEDICAL SCHOOL

Dr. William M. Scholl College of Podiatric Medicine



Michael Woods, MD

*Professor
Urology*

CLINICAL EXPERTISE

Advanced laparoscopic procedures, bladder cancer, kidney cancer, kidney/adrenal surgery, minimally invasive urologic surgery, pelvic surgery, penile cancer, prostate cancer, robotic cystectomy, robotic partial nephrectomy, robotic prostatectomy, testicular cancer

FELLOWSHIP

Tulane University Medical Center Hospital – Laparoscopy/Robotic Surgery

RESIDENCY

Tulane University Medical Center Hospital – Urology
Loyola University Medical Center – Urology

MEDICAL SCHOOL

Loyola University Chicago Stritch School of Medicine



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Questions? Contact Mike Jarotkiewicz, Executive Director, Network Development at 708-216-6686 or Holly Nandan, Executive Director, Community Medicine at 708-216-5108