



## DEPARTMENT OF UROLOGY'S FIRST EXTERNAL SCIENTIFIC ADVISORY REVIEW

The Department of Urology's 1<sup>st</sup> External Advisory Committee met March 1-2, 2006, at Thomas Jefferson University. The purpose of this meeting was to provide our faculty with a critical assessment of our current and future research activities. The day focused on our basic science and translational research projects along with an overview of our clinical trials. Dan Theodorescu, MD, Professor of Urology from the University of Virginia served as chair of this committee. Other members of the this advisory committee included Shiv Srivastava, PhD, Co-Director and Scientific Director of the Center for Prostate Disease Research at Walter Reed Army Medical Center, and Drs. Renato Baserga (TJU Professor Microbiology and Immunology) and Renato Iozzo (TJU Professor Pathology, Anatomy and Cell Biology) from the Kimmel Cancer Center.

The itinerary for the meeting included the following presentations:

- Overview Of the department and the Kimmel Cancer Center –Leonard G Gomella, MD, Chairman, Department of Urology
- Prostate Diagnostic Center Trials –Ethan Halpern, MD, Professor of Radiology and Urology
- Micro metastasis research (RT-PCR, Immunicon Collaborations) –Jose Moreno, MD, Clinical Assistant Professor of Urology



**External Scientific Advisory Committee:  
S. Srivastava, D. Theodorescu, R. Iozzo and R Baserga**

- Molecular Research Program: FHIT/FETZ gene, TS12Q, Chemoprevention, Urovysion, prostate cancer DOD grant collaboration –Raffaele Baffa, Director of Urology Research
- Cellular Biology Program: Proepithelin, IGFR signaling pathways –Andrea Morrione, PhD, Director of Urology Research Laboratories
- Clinical Trials Portfolio –Christine Hubert, BA, Clinical Trials Coordinator
- Clinical and Research Databases, Dolores Byrne, PhD

## ILIA S. ZELTSER, MD, CHIEF RESIDENT AWARDED 1<sup>ST</sup> PRIZE

Ilia S. Zeltser presented “*In Vitro* Assessment of Flow Rates Achievable with Basket Retrieval Devices in Flexible Ureteroscopes and was awarded 1st place in the Basic Science Category at the “Resident’s Night Competition” on March 27, 2006. This competition was sponsored by the Philadelphia Urologic Society. Over Twenty



**Ilia S Zeltser, MD**

urology residents and fellows representing seven medical schools from Pennsylvania and New Jersey

participated in this night of competition. These residents had to submit a manuscript as well as a slide presentation, six weeks prior to the competition night for review by the appointed judge. A podium presentation was given the night of, followed by a brief open discussion.

The awards were judged and presented by Barry Stein, MD, Professor and Chairman of Urology at the Brown University School of Medicine

Our department was proudly represented by Eric D. Nelson, MD, who presented “Targeted Biopsy of the Prostate: The Impact of Color Doppler and Elastography on Prostate Cancer Detection and Gleason Score.”

## LETTER FROM THE CHAIRMAN'S DESK

### Dear Colleagues,

As we end our academic year, we wish our new graduates well in their future medical careers. Drs. Chang and Zeltser will be completing lap/endo fellowships next year in New York Medical College and UT Dallas respectively and our Fellow Dr. Chawla will enter an UNC affiliated practice at Wake Med in Raleigh, North Carolina. Dr. Andriole, Chief of Urology at Washington University in St. Louis, will be our David M. Davis Visiting professor as part of our year end celebration of our program graduates. Drs. Merriam and Ramey are looking forward to their new roles as Chief residents and Dr. Brent Yanke from Downstate Medical Center in New York will be our next Bard-Bagley Endourology Fellow.

Our robotic surgery program is growing rapidly with Dr. Trabulsi and Lallas performing on average 3 cases a week in addition to all other open and laparoscopic cases. Dr. Hubosky will be joining us in July and Dr. Glassman will be completing her robotic training in the coming months. With the new renovations to room 14, our capacity to handle the growing demand for robotic surgery will also increase.

Our GU Multidisciplinary Program of the Kimmel Cancer Center celebrated their 10 year anniversary with several special celebrations that will be reported on in this and subsequent newsletters. We are proud of this program and look forward to the program expanding with the arrival of our new Cancer Director Dr. Rick Pestell. Dr. Pestell has strong interest and expertise in prostate cancer and we are looking forward to developing a program project dedicated to prostate cancer for the next cancer center core grant submission.

Lastly, two important changes to let everyone know about. Effective July 1, 2006 Dr. Mulholland and Dr. Frank will no longer be involved in direct patient care. The good news is that they will continue to be engaged in the Department with Dr. Mulholland continuing to help foster Departmental philanthropy and Dr. Frank will be actively involved in our undergraduate educational programs. On behalf of us all and all their patients, we thank them for their years of dedicated service to Jefferson

**Lenny Gomella, MD**

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## CLINICAL TRIAL HIGHLIGHTS

**Title:** Correlation of Contrast-enhanced Sonography to ProstaScint Images of the Prostate

**Principal Investigator:** Ethan Halpern, MD

**Co-Investigators:** Leonard G. Gomella, MD  
Edouard J. Trabulsi, MD

**Sponsor:** Cytogen

Microbubble contrast agents have demonstrated promising results to enhance sonographic visualization of vasculature within the prostate. Microbubbles increase the echogenicity of the intravascular space, and provide a dramatic visible increase in the color Doppler signal from blood vessels. Modern ultrasound contrast agents have intravascular residence times of several minutes and may be used for intravascular or parenchymal organ enhancement. Several clinical studies have demonstrated selective Doppler enhancement of regions with increased microvessel density within the prostate. Also, the cancer detection rate of contrast-enhanced targeted cores was significantly higher in comparison to sextant biopsy.

The microbubble agent to be used in this study is Definity™ (DuPont Pharmaceuticals; Billerica, MA -now part of Bristol Myers Squibb). Definity™ is a sterile, non-pyrogenic suspension of liposome-encapsulated perfluoropropane microbubbles. The contrast agent is composed of a blend of three phospholipids contained in a matrix of sodium chloride, propylene glycol, and glycerin in water. The usage of Definity™ has shown a statistically significant increase in the presence of various pathological findings in portions of the prostate identified as hypervascular.

ProstaScint® (Capromab Pendetide) is a monoclonal antibody (7EII-C5.3) directed against a glycoprotein expressed by prostate epithelium known as Prostate Specific Membrane Antigen (PSMA). The PSMA epitope recognized by monoclonal antibody (MAb) 7EII-C5.3 is located in the cytoplasmic domain. ProstaScint® is radiolabeled with Indium-111 prior to intravenous injection for imaging. ProstaScint is generally used in the setting of suspected metastatic disease to localize the presence of

prostate epithelial tissue outside of the prostate. In order for the ProstaScint® to bind to prostate epithelium, it passes through the circulation into the microvasculature. The relative amount of ProstaScint® that arrives in any area should be proportional to blood flow. Thus, one would expect that areas within the prostate that are defined as hypervascular by contrast-enhanced-ultrasound would also demonstrate increased uptake of ProstaScint®.

**Purpose:** This study is to compare areas of hypervascularity in the prostate as demonstrated by contrast-enhanced sonography with areas of increased radiotracer uptake on ProstaScint® SPECT scans of the prostate. The primary objective is to compare the regions of focal areas of uptake on ProstaScint scans to pathology findings determined from the standard biopsy procedure. The secondary objective is to compare areas of focal uptake on ProstaScint scans to contrast-enhanced ultrasound to determine if the registration and fusion of contrast-enhanced ultrasound images to ProstaScint® images can further refine the targeting of gland biopsies and image-guided treatment planning

**Protocol Treatment:** This is an open-label, non-randomized trial. All subjects (approximately 60 subjects) will receive an IV infusion of Definity™, and will undergo an unenhanced (baseline) and Definity™-enhanced transrectal ultrasound Imaging study followed by a clinically indicated biopsy of the prostate. Ten subjects found to have prostate cancer with intermediate to high risk of extraprostatic disease will be scheduled to have a ProstaScint® scan of the prostate. The usage of ProstaScint® is considered standard of care in subjects with suspected extraprostatic spread of cancer, and is used routinely for this indication in many parts of the country. The ProstaScint® scan is FDA approved for this application.

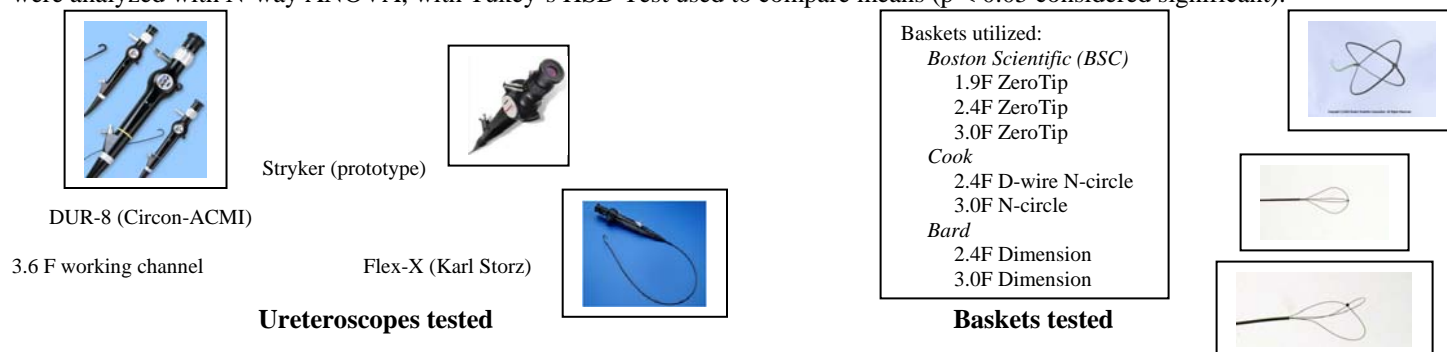
**Patient Eligibility:** Male at least 18 years of age or older, who is scheduled to have a clinically indicated ultrasound guided prostate biopsy.

# In Vitro Assessment of Flow Rates Achievable with Basket Retrieval Devices in Flexible Ureteroscopes

Ilia S. Zeltser, MD (Chief Resident)

**Introduction.** Retrieval baskets are essential for the manipulation and extraction of stone fragments during and following ureteroscopic lithotripsy. However, passage of endoscopic devices through the working channel of flexible ureteroscopes results in deterioration in the deflection and irrigant flow and thus, may compromise the success of stone extraction. Although it is well known that the irrigant flow rate is inversely proportional to the size of the working instrument placed through the working channel,<sup>1</sup> correlation between the flow rates achievable with different basket sizes and designs and the type of the flexible ureteroscopes has not been evaluated. We wished to assess the irrigant flow rates achievable with various basket designs through currently available flexible ureteroscopes.

**Materials and Method.** The flow rates through the three currently available flexible ureteroscopes (DUR 8, Flex-X and Stryker) were analyzed. 7 baskets were tested: 1.9, 2.4 and 3.0F Zero tip (Boston Scientific), 2.4F D-wire and 3.0F N-Circle (Cook) and 2.4 and 3.0F Dimension (Bard). Pressurized irrigant (150 mm Hg) was run through the working channel of undeflected flexible ureteroscopes for one minute with baskets in place. 5 separate measurements were obtained using each basket and the mean flow rates calculated. Data were analyzed with N-way ANOVA, with Tukey's HSD Test used to compare means ( $p < 0.05$  considered significant).



**Results:** The best overall flow rates ( $p < 0.05$ ) were achieved with the 1.9F Zero Tip basket using any ureteroscope (Figure 1-3). The Cook 2.4F D-wire and 3.0F NCircle baskets allowed the best flow rates in all ureteroscopes when compared to their identically sized counterparts (Zero Tip or Dimension). 3.0F baskets allowed very poor flow rates using all ureteroscopes tested.

The N-way ANOVA model showed a significant interaction between both basket type and ureteroscope model, revealing that model of the endoscope also affects the flow rate. Of the three ureteroscopes tested, the DUR 8 model provided significantly better ( $p < 0.05$ ) flow than the Storz and Stryker models.

**Conclusion:** Many different baskets are available for stone manipulation and extraction from the ureter and the intrarenal collecting system. The basket consists of a metal device deployed within a flexible outer sheath. The newest designs are made of nitinol, an alloy of nickel and aluminum and are available in sizes ranging from 1.9F to 3.2F. These baskets can all fit through the working channel of currently available flexible ureteroscopes which employ a 3.6F working channel. However, instruments placed through the working channel usually significantly limit deflection and irrigant flow. Even the smallest instruments such as a 200  $\mu\text{m}$  laser, while only minimally limiting active deflection, can reduce the irrigation flow from 50 to 28 ml/min.<sup>2</sup> In contrast, baskets can reduce the flow rate to as low as 2 cc/min.

The development of the new generation of flexible endoscopes centered around the decrease of the overall diameter of the instrument and enhancement of active deflection to facilitate access to the lower pole infundibula. Where older models had to rely on passive deflection to reach the lower pole, new instruments utilize either a 270° primary active deflection in either direction or a secondary actively deflecting segment allowing for a 360° downward deflection.<sup>3</sup> Yet, despite improvement in deflection, the size of the working channel remains the same at approximately 3.6F.

Our objective was to assess irrigant flow rates achieved with Storz Flex-X, ACMI DUR-8 and Stryker prototype when utilizing commonly used 1.9F, 2.4F and 3.0F nitinol baskets. We constructed a statistical model with N-way analysis of variance (ANOVA) to assess the effect of both basket type and ureteroscope model on flow rate results.

As expected the best overall irrigant flow rates were achieved with the smallest diameter basket, the BSC 1.9F ZeroTip using any ureteroscope. Surprisingly, the Cook 2.4F D-wire and 3.0F NCircle baskets allowed the best flow rates using ureteroscopes when compared to other basket models of the same size. This advantage in flow rates may be explained by the difference in the manufacturing process, where Cook baskets are outfitted with a sheath that is slightly smaller than 2.4F.

The N-way ANOVA model showed a significant interaction between both basket type and ureteroscope model, indicating that the scope model also has a significant impact on irrigant flow rate. Of the three ureteroscopes tested, the DUR 8 model provided significantly better flow than the Storz and Stryker models. We hypothesize that this is secondary to a greater axial rigidity of the scope shaft, which maintains working channel integrity, thus preventing flow fluctuations. The observed difference may also be due to a slight variation in the diameter of the working channel. A direct analysis of the shaft rigidity and measurement of the actual diameter of the working channel of various ureteroscopes would be required to confirm our observations.

## FAREWELL TO 2005-2006 CHIEF RESIDENTS

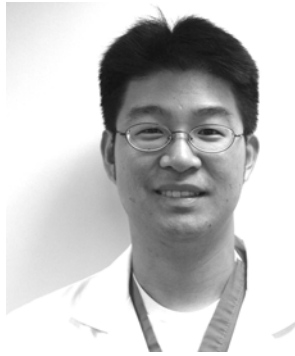
Our Department congratulates Mark F. Chang, M.D. and Ilia S. Zeltser, M.D. upon their completion of TJUH Surgery Resident Program in Urology. The members of the department are honored to have played a role in the development of both Mark and Ilia's diagnostic and surgical skills in care of the urological patient.

Mark F. Chang, M.D. was born in Taiwan and raised in Cherry Hill, NJ as a US Citizen. He graduated cum laude from Pennsylvania State University with a BS in Bioscience and completed his M.D. at Jefferson Medical College.

Dr. Chang has accepted a New York Medical College Fellowship in Endourology and Laparoscopy, Valhalla, New York.

Mark wishes to thank the attendings for stimulating his growth and interest in urology and to thank his fellow residents for their companionship, support and hard work. Mark is also grateful to his wife Jennifer as they start their new life together

Ilia S. Zeltser, M.D. was born in Rybinsk, Russia and was granted political asylum in the USA at age 19. Ilia lived and worked in Brooklyn, NY. He put himself through college and medical school and funded his family's immigration to this country. He attended Brooklyn College, New York, graduating Summa Cum Laude with a BS in Biology and Film Studies. He earned his medical degree from State University of New York at Stony Brook, School of Medicine. His future plans include a Minimally Invasive Urology Fellowship at University of Texas Southwestern, Dallas, Texas. All will miss Ilia's



**MARK F. CHANG, MD**

eagerness to learn, tireless dedication and his remarkable talent as a urological surgeon.

Ilia is most grateful to all of his fellow residents, for their camaraderie; the Urology attendings, for the effort and dedication they gave on a daily basis; his wife, Melissa, for the daily encouragement and support she provides, and all who have made memories worth keeping. Also, to Jacob who always gives Ilia a reason to smile.

Sam Chawla, M.D. grew up in Bala Cynwyd, PA. He obtained his BA degree in Psychology Neurobiology from the University of Pennsylvania, his Medical Degree from Temple University School of Medicine, and his urology residency from Temple University Medical Center. Dr. Chawla is a recipient of the Pfizer Scholars in Urology Award.



**SAMEER N. CHAWLA, MD**



**ILIA S. ZELTSER, MD**

On completion of his residency training, Dr. Chawla was accepted to the CR Bard/Bagley Endourology and Laparoscopy fellowship at Thomas Jefferson University. He now plans on joining a University of North Carolina affiliated practice at Wake Med in Raleigh, North Carolina.

Dr. Chawla would like to thank his wife, Cynamon, daughter, Naya and son, Jayden for their continued support throughout his training. He would also like to express his appreciation to the faculty and residents at the Jefferson Department of Urology for making his fellowship both a valuable and enjoyable experience. He hopes to maintain a close relationship with the program throughout his medical career.

All of the Urology staff will attend a farewell party for the chief residents and the CR Bard/Bagley, Endourology and Laparoscopic Fellow 2005-2006. This will be held on June 16, 2006. The evening will celebrate good-byes and best wishes for their new adventures in life.

*Ilia, Mark and Sam,  
Best of luck and return often to us!*

*Urology Department*

## THE 101<sup>TH</sup> ANNUAL AUA SCIENTIFIC MEETING

The 101th Annual Scientific Meeting of the American Urological Association was held at The Georgia World Congress Center in Atlanta, Georgia, May 20-25. This is the largest meeting of urologic professionals in the world. Our attendings and residents had the opportunity to learn about the latest advances in urology and present their scientific endeavors. Alumni and Faculty of Jefferson Medical College were cordially welcomed at a reception during the AUA Meeting hosted by Leonard G. Gomella, MD and on Sunday, May 21, 2006 at the Hickory Room, Omni Hotel at CNN Center, Atlanta, Georgia.



### AUA 2006 ABSTRACTS REPRESENTING AUTHORSHIP BY TJU FACULTY & TJUH RESIDENTS

- #86 HAND-ASSISTED LAPAROSCOPIC URETEROLYSIS TO TREAT URTERAL OBSTRUCTION SECONDARY TO RETROPERITONEAL FIBROSIS: AN ASSESSMENT OF AN INITIAL SERIES**  
*James J Brown, Christopher J Garlitz, Scott Hubosky, and Leonard G Gomella*  
Sat., May 20, 3:30 – 5:30pm, AdrenaL/Kidney/Ureter: Surgery (II), Room B401
- #153 LONG TERM FOLLOW-UP OF PATIENTS FOLLOWING AUGMENTATION CYSTOPLASTY**  
*Patrick J Shenot, Adam Tyson, and Craig B Sotoroff*  
Sun., May 21, 8:00 – 10:00am, Urinary diversion: Bladder reconstruction, Augmentation, Substitution & Diversion (I), Room B308
- #1067 RISK OF POST-OPERATIVE RHABDOMYOLYSIS IN PATIENTS UNDERGOING LAPAROSCOPIC NEPHRECTOMY**  
*William G Merriam, Deborah T Glassman Edouard J Trabulsi, Leonard G Gomella*  
Tues., May 23, 9:00am – 12:00pm, Adrenal/Kidney/Ureter: Laparoscopy, Ureteroscopy, Instruments & Technology (III), Room B314
- #1550 GREY SCALE, COLOR DOPPLER AND ELASTOGRAPHY FOR THE DETECTION OF PROSTATE CANCER**  
*Eric D Nelson, Craig B Sotoroff, Ilan Waldman, Elizabeth P Ives, Leonard G Gomella and Ethan Halpern*  
Wed., May 24, 10:00am – 12:00pm, Uroradiology, Room B206
- #V1681 MINIMALLY INVASIVE LAPAROSCOPIC PYELOPLASTY: The 5-MM THREE TROCAR TECHNIQUE**  
*Iliia s Zeltser, Robert A Linden, Sameer Chawla, John R Ramey and David E McGinnis*  
Wed. May 24, 1:00 – 3:00pm, Female Urology, Incontinence, Sidney Marcus Auditorium

### AUA POSTGRADUATE COURSES PRESENTED BY OUR ATTENDINGS

- #51 PG Operative Ureteroscopy - *Demetrius H Bagley Jr, MD, Course Director*, Mon., May 22, 9:45am – 1:00pm**
- This course is designed for urologists with experience in ureteroscopy. It will review the instruments presently available including endoscopes, lithotriptors and lasers designed specifically for ureteroscopy. The techniques for interventional ureteroscopic procedures and their appropriate applications will be discussed. The relative role of ureteroscopic procedures and other endoscopic procedures will be considered.
- #88 PG Botulinum Toxin and Desensitization Therapies for Voiding Dysfunction - *Patrick J Shenot, MD, Course Lecturer*, Tues., May 23, 9:45am – 1:00pm**
- This course is designed to provide in-depth review and practical applications currently in practice worldwide of botulinum toxin, capsaicin and resiniferatoxin therapies through the use of didactic lectures and panel discussions, interactions with course attendees, as well as the use of multimedia training. Attendees will be apprised of specific approved and non-approved off-label uses.
- #99 MC Hormonal Therapy & Prostate Cancer: New Uses for an Old Treatment. *Leonard Gomella, MD, Course Lecturer*, Wed., May 24, 6:00 – 7:00am**
- This course will provide an update on current uses of hormonal therapy, including its role in multimodal treatment regimens, the appropriate timing of therapy and the use of alternative treatment approaches.

## FROM THE ADMINISTRATOR'S CORNER

I wanted to thank everybody for the warm welcome I have received here in the Department of Urology. I have learned much from all of you regarding the clinical, academic, and research activities of the Department. Certainly, after only four months, I have a lot more to learn as well.

At the same time, I can see many ways in which we can improve the operation of the Department, for the benefit of our patients, staff, and faculty. As many of you know, we have already started to make some changes regarding a number of facets of the clinical operations, including outsourcing of our medical records copying function, new policies regarding practice initiated patient scheduling changes, break policies for staff, and the hiring of two new Medical Assistants.

We have also started to make some changes in the operation of the College office as well.

As I review all of our operations, I hope to be able to bring some changes to the Department, working with all of you, that will result in our day-to-day work lives being made easier and more productive.

I appreciate your suggestions, support, and enthusiasm. Please do not hesitate to contact me if you want to discuss some aspect of the Department of Urology's operations.

**Joshua Zissman**

## HOSPITAL LUNCHEON IN HONOR OF THE GU MULTIDISCIPLINARY CENTER 10<sup>TH</sup> ANNIVERSARY

Thomas J. Lewis, President and CEO of Thomas Jefferson University Hospital held a luncheon on March 15 in honor of the Kimmel Cancer Center GU Multidisciplinary Program as it marked its 10<sup>th</sup> anniversary. Established in 1996, the goal was to set a new standard for the delivery of care to patients diagnosed with urologic cancers. In this approach, there would be a joint consultation by multiple specialists including urology, radiation oncology and medical oncology, to evaluate and manage patients at a single out-patient visit. Since that time over 5000 patients and



**Group photo of the GU Multidisciplinary Staff.**

their families have benefited from this multidisciplinary clinic. Also participating in the luncheon celebration were Dr. Richard Pestell, Director of the Kimmel Cancer Center and Dr. Walter Curran, Clinical Director of the Cancer Center. Our next news letter will include information on the evening scientific symposium that was held on April 6.



**Drs. Richard Valicenti and Leonard Gomella are the senior and original founding members of the GU Multidisciplinary Cancer Center Clinic.**

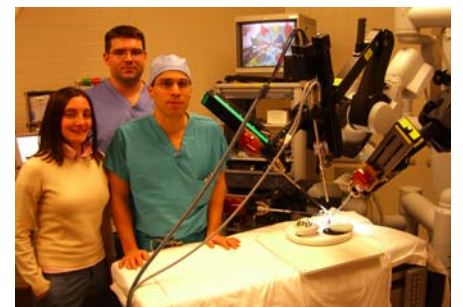
## JMC – JEFFERSON UROLOGY SOCIETY

The Jefferson Urology Society, an organization run by medical students, was back in action on March 20<sup>th</sup> as fifteen members gathered in the urology suite for a demonstration of the *daVinci*® robotic surgical system. Dr. Costas Lallas began the session with a brief history of robotic assisted surgery. An overview of the components of the system and a discussion of the technical advantages of the robotic system versus traditional laparoscopy followed. Dr. Lallas proceeded with a demonstration of the *daVinci*®'s capabilities by showing the students the versatility of the machine's four robotic arms and various suturing techniques. Dr. Gomella and Dr. Trabulsi joined the group for a lively and enjoyable question and answer session. The topics ranged from the advantages of laparoscopic versus open surgery to outcomes for different methods of performing a prostatectomy. Other urologic procedures using the system, some of the down falls, and the expanding use of the *daVinci*® system by other specialties was also discussed. For most of the members, this was the first exposure to the *daVinci*® and the operating room they have had.

The highlight of the evening was when each member had the opportunity to sit at the system's console and manipulate the robotic arms. Everyone was able to appreciate the three dimensional view the system provides as well as the manual dexterity that is required to pick up a coin or tie a simple knot. The novices were excited about the possibility of performing robotic prostatectomies in the future. The society also congratulated its 4th year members, Jodi Antonelli and Jeff Tomas, on a successful match for urology residencies. Jodi is headed south to Duke University and Jeff to the University of Pittsburgh.



**Members of the Jefferson Urology Society, Spring 2006**



**Dr. Costas Lallas who demonstrated the *daVinci*® robotic system to the Jefferson Urology Society Members is seen here with Jodi Antonelli, Past President and Joshua Sleeper President of the Society**

## DR. MIKE KOCH VISITING PROFESSOR

Dr. Mike Koch, Chairman of the Department of Urology at Indiana University served as a Visiting Professor on April 6, 2006. Dr. Koch is a member of the American Board of Urology and is an expert in Urologic oncology and prostate cancer. In addition to formal lectures and resident case presentations, Dr. Koch had an excellent discussion with the group on the future training issues being considered by the ABU and the AUA. That evening, Dr. Koch was a guest lecturer for our Kimmel Cancer Center GU Multidisciplinary Program 10<sup>th</sup> Anniversary Celebration held at the Ritz-Carlton that evening. We are grateful to Intuitive Surgical for their sponsorship of Dr. Koch's visit.



**Drs. Waldman, Slotoroff, and Zeltser with our visiting professor Dr. Mike Koch.**

## TOWER HILL SCHOOL VISITS THE DEPARTMENT OF UROLOGY

The sixth grade science class from Tower Hill School, Wilmington, Delaware, were guests of the Department of Urology in March. Sixty students, their teachers and chaperones had the opportunity to visit the OR and learn about scrubbing and sterile technique, surgical instruments, lasers and the *daVinc*® robot. They also visited the Urology research lab in the Bluemle Building to learn about basic science research. During the lunch time program held in the Eakins Lounge, they learned about careers as a nurse and nurse practitioner from Darlene Bewick, MSN, CRNP, physician and surgeon from Paul Gittens, MD and careers as a research scientist from Dolores Byrne, PhD. The class has written many thank you notes that can be seen in poster form outside the pavilion operating room. Thanks to all members of the Department and the OR staff who made it a memorable, fun and educational experience.



**Dr. Morrione explaining cell culture techniques.**



**Learning to gown and glove with Dr. Gittens, Mary Beth and Rocio.**



**Practicing endoscopy on a bell pepper.**



**Dr. Zeltser having a good time with the Tower Hill students.**

## JOAN BECKER PRESENTS WORK AT MANGEL GALLERY

Joan Becker, Joshua Zissman's (Administrator for the Department) wife, recently showed her paintings and etchings at the Mangel Gallery (Rittenhouse Square) in Philadelphia. Joan's work includes large colorful gouaches and etchings. Her expertise is previewed by the gouache entitled "TikiBar". If you want to see her work, you can contact her at [jabecker@localnet.com](mailto:jabecker@localnet.com) or at 215.512.7328.

What is a Gouache? Pronounced: *gwash* (like squash)

"Gouaches are referred to as bodycolor and opaque watercolor, the term "gouaches" was first used during the eighteenth century in France to describe the use of a translucent water-based paint that had been rendered opaque by the addition of white pigment or chalk bound together with a binding agent such as gum arabic. Contrary to watercolor's key characteristic of transparent luminosity, gouache is defined by its matte and opaque quality." ([www.lyon-art.com/4-gouaches/gouaches.html](http://www.lyon-art.com/4-gouaches/gouaches.html))



"TikiBar"

## GIFTS IN HONOR OF

### Demetrius H. Bagley, MD

Mr. Leslie R. Clemmer  
Mr. and Mrs. Paul G. Clemson  
Mr. and Mrs. Amadeo Guglielmi  
Ms. Kelli M. Harman  
Mr. Michael C. Hrabal  
Mr. Douglas E. Jetter Sr.  
Mr. Stefan Keller  
Mr. and Mrs. Vincent N. Mancini  
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**Leonard G. Gomella, MD**  
Dr. Milton A. Wohl  
GlaxoSmithKline Foundation  
Mr. Harry F. Hight  
Mr. Clive B. Klatzkin

We thank our 2005 Benefactors who have given gifts in honor of our faculty



## TRAVELIN DOCS

February 25-27	P. J. Shenot	Speaker, Society of Urodynamics and Female Urology, Freeport, Bermuda
March 6-10	L.G. Gomella	Italian Endourology Society Meeting, Milan, Italy
March 27	L.G. Gomella	Mid-Atlantic AUA Board Meeting, Washington, DC
April 19-22	L.G. Gomella D. H. Bagley	American Association of GU Surgeons, Boca Raton, FL
April 26	L.G. Gomella	Visiting Professor, Brookdale Hospital, Brooklyn, NY

## DATES TO REMEMBER IN 2006

- AUA Annual Meeting, Atlanta GA, **May 20-25**
- David M. Davis Visiting Professor, **June 2**  
Dr. Gerald Andriole
- Residents/Fellow Farewell Reception, **June 16**
- Dr. Scott Hubosky arrives **July 17**
- Prostate Cancer Update, Philadelphia, PA, **August 11**
- Mid Atlantic AUA, Washington, DC, **October 12-16**

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<http://www.jefferson.edu/urology/>