MISSION STATEMENT

Our vision is to promote, develop, and train students to become competent research professionals, while mentoring them in their professional and educational goals.

RESURG
Research Experience in SURGery

CURRENT PROJECTS

Pre-operative Prophylactic Antibiotics in Appendicitis
Research Classification: Prospective
Principal Investigator: Erin Brown, MD
Research Assistants: Alexis Chirco (lead)
Anticipated Enrollment #: 1000
This is a prospective, multi-site study that seeks to evaluate the effects of administering pre-operative prophylactic antibiotics to pediatric patients undergoing laparoscopic appendectomy. The aim of this study is to determine whether the administration of these antibiotics decreases rates of surgical site infection.

Colorectal Surgery Outcomes Database
Research Classification: Quality Improvement
Principal Investigator: Deborah Keller, MD
Research Assistants: Amanda Aquilio (Lead)
Anticipated Enrollment #: 100
The aim of this study is to determine the effect body mass index (BMI) has on mortality and other critical-care outcomes in patients with COVID-19. Evaluating connections between morbidity and readmission / prolonged symptoms is done as well.

AAST Vascular Trauma Registry: Prospective Observational Vascular Injury Trial (PROOVIT):
Research Classification: Retrospective
Principal Investigator: Joseph Galante, MD
Research Assistants: Kar Shrikantham (Lead)
Anticipated Enrollment #: 300
PROOVIT aims to capture key elements of vascular trauma presentation, diagnosis, management, and outcomes from leading trauma institutions in the US. The objective is to establish an aggregate database of information for vascular trauma outcomes by subcategorizing the data into anatomic patterns of vascular trauma.

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NEW STUDIES FROM THIS QUARTER:
- Evaluation and Validation of Current Blunt Traumatic Aortic Injury (BTAI) Grading Systems
  - Principal Investigator: Matthew Mell, M.D
- Cognitive Impairment, Obesity, and the Effects of Bariatric Surgery
  - Principal Investigator: Victoria Lyo, M.D

HOW IS RESURG CURRENTLY DOING?
# Physicians RESURG is Currently Assisting: 12
# RESURG RAs Assisting on Research Studies: 16
# Research Studies RESURG is Assisting on: 24
Divisions RESURG Currently Supports: Vascular, Oncology, Pediatrics, Trauma, Cardiothoracic, and Foregut, Metabolic and General Surgery
Q: What are some of your future career goals and future post-grad plans?

A: My post-grad plans are to take a gap-year where I plan to work a job and study for/take the GRE exam. Although I am not completely certain about where my future endeavors will lead to, I am certain that it will remain in a field where I contribute to improving patient care by studying human physiology and helping develop better treatments through research.

Q: Can you tell us about your position as Vascular RA?

A: As VRA, I support research studies conducted by the Vascular Division at the UCDMC, work with the Vascular Clinical Research Coordinator (CRC) to help maintain regulatory documents and maintain correspondence with Vascular Physicians. I am responsible for collecting monthly updates on vascular studies and presenting information about the screening/enrollment rates to the vascular division. I work with the RESURG team on the vascular studies' screening process, data collection, and IRB submissions. I have also had the opportunity to lead RESURG classes training new RAs on how to use the Electronic Medical Records (EMR) system and on how to identify possibly qualifying patients for our active vascular studies.

Q: Can you tell us about the studies you are currently working on and your current responsibilities?

A: I currently aid in 4 vascular studies: BEST-Registry Study, Abdominal Aortic Aneurysm (AAA) Study, SCOPE-CLI Study, and the Implementation of Telemedicine for patients with wounds and ulcers (K23) Study. BEST-Registry and SCOPE-CLI are studies that focus on the level of patient care that patients with Critical Limb Ischemia (CLI) receive and aim to determine whether there are improvements that can be made in providing resources and/or better treatments. The AAA Study is a quality improvement program that aims to increase AAA screening through EMR for patients at the UCDMC. For these three studies, I help with data collection by reviewing their medical chart and record imaging results, and I help with IRB submissions when needed. The K23 Study is another quality improvement study that focuses on improving the patient care that telemedicine patients with Peripheral Artery Disease and Diabetes Mellitus in Rural Health Clinics receive. For the K23 Study, I help compile the telemedicine patient’s appointment notes and then will later use them for data collection and analysis.

Q: Are you in any other extracurricular activities and how do you balance your RESURG responsibilities on top of these other activities and school?

A: I am also a lab assistant at the Huising Lab where we research the islet of Langerhans in the pancreas to understand its mechanisms with the goal of finding a cure for diabetes. In my free time, I also enjoy going on bike rides around Davis, experimenting with new baking recipes, and spending time with friends. A big shoutout to my mentor Andrea Sommer who has taught me so many tips and tricks on how to remain organized whilst balancing my RESURG responsibilities with my extracurriculars. Applications such as Google Calendar, and color-coding methods when it comes to emails and events have allowed me to prioritize my responsibilities. Additionally, taking time once a day for self-care is crucial in remaining whole as a person, whether that be cooking a delicious meal for oneself or going outside on a walk or bike ride.
Adherence to Best Practice Guidelines for Palliative Care in Trauma and Acute Care Surgery ICU patients/ PC Study

Research Classification: Retrospective
Principal Investigator: Misty Humphries, M.D, Jennifer Geiger, M.D (Lead Resident)
Research Assistants: Rafael Ricon (Lead), Samveda Rukmangadhan

Why Study This?
Identifying a seriously ill patient’s long-term interests is critical in determining how to care for them— for example, whether to pursue intense treatments that may lead to living with a decreased quality of life post-injury or illness or to pursue comfort care, as well as to include the family and other involved parties in coming to terms with the results and aftermath of the desired course. As such, studying whether seriously ill patients are receiving these much-needed discussions is critical in assessing the specificity and efficacy of care provided to them.

FEATURED RA

“Hi, my name is Rafael, and I am the lead research assistant of the Palliative Care study, the PI of which is Dr. Humphries, and the lead resident is Dr. Geiger. I am also working with Samveda, who is a research assistant, and Matthew Kim, who is a data specialist helping us out. To collect data, we go in EMR, and we look for if the patient qualifies for goals of care documentation via serious illness criteria such as comorbidities; and if they qualify, we search for the most recent goals of care note. What I’ve learned through the study is that you must be really adaptable with a lot of little unforeseen problems that can add up over time to build inaccuracies in data or an inefficient data collection process. You have to be in constant communication with people you're working with to make sure that your process is refined, efficient, and will give you the best data in the shortest amount of time.” – Rafael Ricon

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