



Chang Gung Memorial Hospital Reconstructive Microsurgery Fellowship

ASRM 2021

Young Microsurgeons Roundtable

February 1, 2021





TEXAS Roadhouse

GO everyday FOOD 新鮮現做帶著走!
預訂專線 (02)2718-3011

Fellowship Structure

- **Fellowship Director: Dr. Fu-Chan Wei**
 - 4 Microsurgery Divisions
 - 2 month rotations – all core microsurgical approaches
- **Resident and/or Fellow focused program: Fellow**
- **Number of Fellows per year: 8**
- **Number of Faculty: 17**
 - David Chuang – Functioning free muscle/Facial Palsy/Brachial Plexus/Peripheral nerve
 - Chih-Hung Lin – LE trauma/H&N
 - Ming Huei Cheng – Lymphedema/EC-IC bypass
 - CK Tsao – Voice tube reconstruction
 - Yu-Te Lin – Vascularized Joint Transfer/Upper Extremity
- **Number/Name of Hospitals covered: 1**
 - 4,000 + bed hospital

2020 PRS Research Day

CHANG GUNG MEMORIAL HOSPITAL

2020 PRS RESEARCH DAY

A TRIBUTE TO M. SAMUEL NOORDHOFF

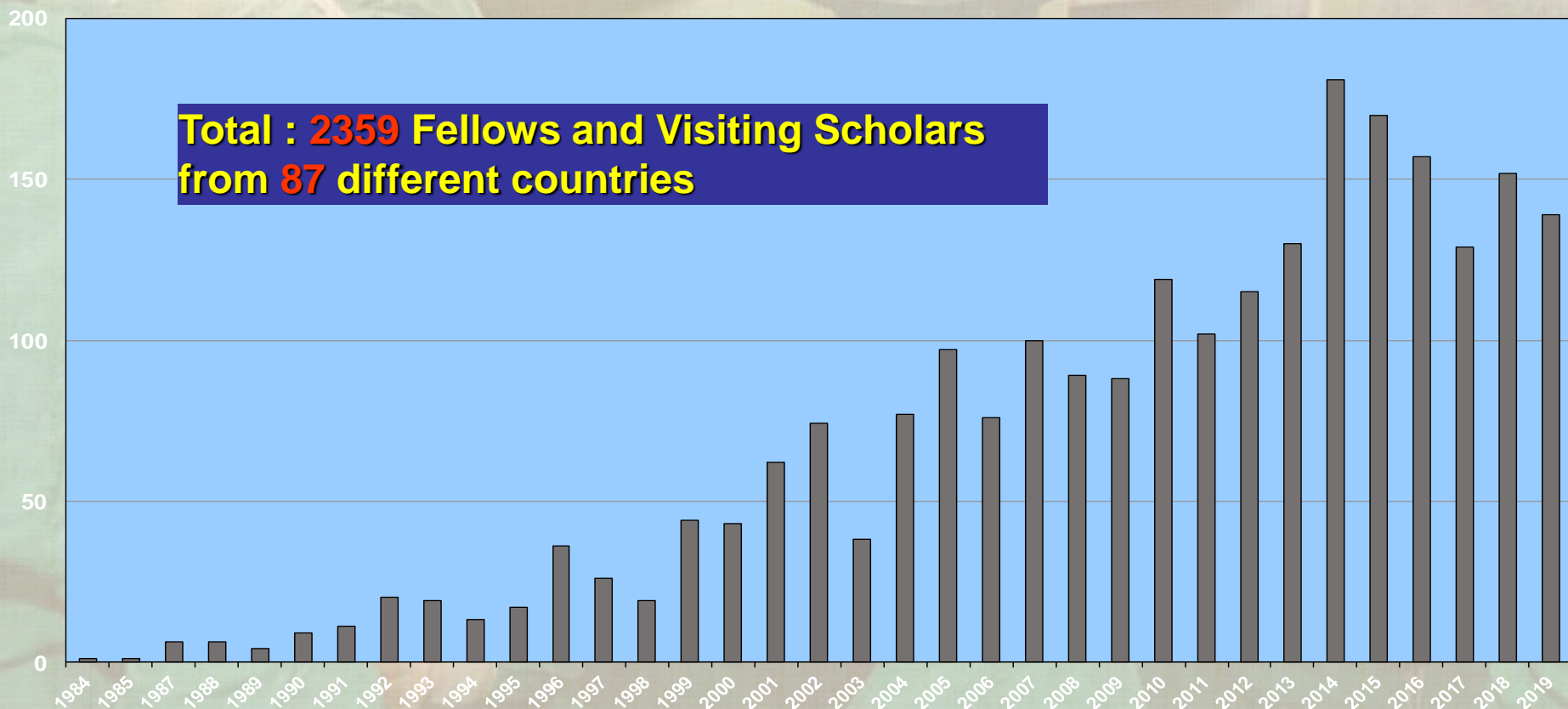


Visiting Professors



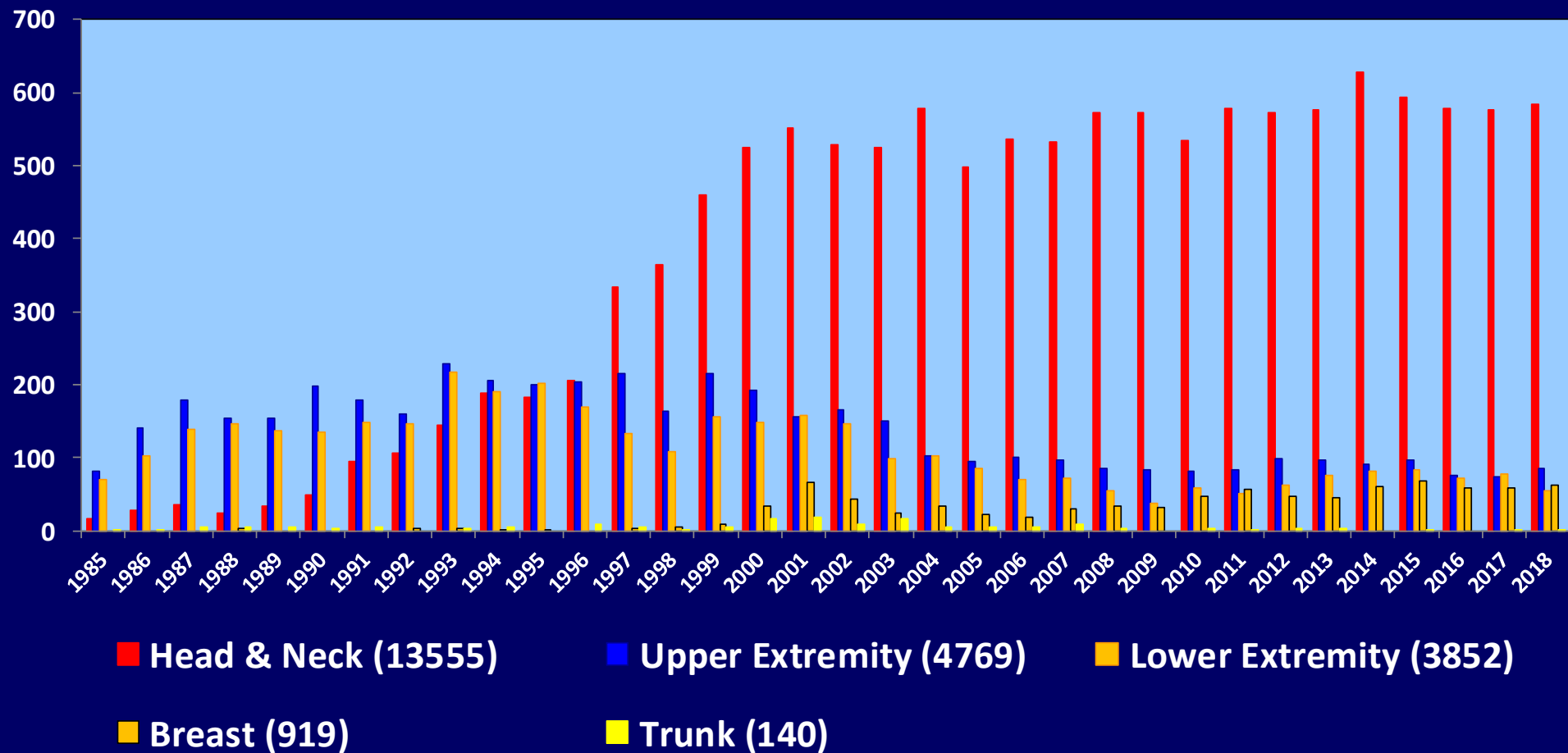
Past Fellows

**Total : 2359 Fellows and Visiting Scholars
from 87 different countries**






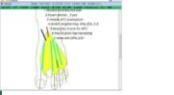






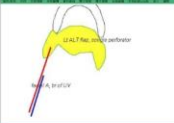


Last 10 U.S. Fellows – Georgetown, UCLA, Mayo Jacksonville, MSK, Mt. Sinai, USC, Cleveland Clinic, Stanford, University of Washington

Case Totals



Case Log

J1 Details

	J	K	L	M	N	O	P	Q
	Details	Diagram	Pics	Date	ID	Attending	Post-Op/Misc	Pearls
1	<p>POD 0 distal (extra-oral) paddle mottled, takeback, pedicle okay, recovered with unfolding, peripheral mottling with refolding *POD5 clear demarcation of extra-oral peripheral skin, intra-oral uneffected *POD13 debrided peripheral demarcated skin</p>							
2				9/2/20	22041179	CH Lin	<p>1-2mm peripheral necrotic margin by POD 5, req revision in OR/1' closed, continued peripheral necrosis, also +margin, *POD 26 progressive dehisc</p> 	
3				9/3/20	3526377	CH Lin	<p>Dangle protocols as outpatient starting at 2w, some swelling on 2w f/u (1w after d/c), ACE prescribed, *proximal peripheral necrosis on 3w f/u, *POD4w</p>	*scallop inset to base of digits to prevent transverse contracture
4				9/3/20	20206336	CH Lin	I did proximal vessel dissection of harvest, *POD 26	
5				9/2/20	92634648	CH Lin		
6	<p>*waited on table x30min after closure, brisk bleeding observed, very mildly congested, neck reopened, hematoma and leak at venous anastomosis, repaired. *POD1 decreased skin paddle bleeding, darker in color, "negative re-exploration" per CH Lin, erroneous revision of artery - no clot, brisk pulsatile bleeding. Inadvertent venotomy apart from anastomosis, repaired. *POD3 takeback arterial thrombus, facial a. no forward flow, 10cc urokinase artery and vein, arterial anastomosis revised, paddle bleeding, no venous outflow, CH Lin informed, vein reanastomosed, 2nd vein to EJV br, heparin gtt started *POD6 no paddle bleeding despite hep gtt - plan POD7 debridement</p>			9/9/20	2203309	CH Lin	 <p>*'banked' on back table for 4h while CH Lin at meeting. *I did proximal vessel dissection of harvest *artery overlying vein *floor of mouth (lingual) tunnel delivered via penrose ?c/f twisting, *thrombus in artery, vein empty, *no obvious twist in tunnel on debridement but pedicle inadvertently avulsed from flap on debridement, tunnel width confirmed 2 finger breadths. FOM defect closed partially, plan NGT feeds to avoid orocutaneous fistula, penrose to neck)</p>	

Case Volume and Breadth

- Average number of Microsurgery cases/year for institution: 1200
- Average number of Microsurgery cases/year/fellow: 120
- Case Breadth:
 - Head/Neck – 50 %
 - Extremity – 20 %
 - Breast/Lymphedema – 15 %
 - Peripheral Nerve – 15%
- Case Classification:
 - Trauma – 30 %
 - Oncology – 65 %
 - Other – 5 %

“Best & Worst”

- Best aspects of the fellowship
 - Comprehensive experience in all aspects of microsurgical practice
 - Operative Volume, Case Variety/Complexity
 - Teaching/Research Mentorship by Internationally recognized thought-leaders
 - Operative Autonomy with Excellent Mentorship/Graduated Supervision
 - Research Opportunities (Basic Science and Clinical Goldmine)
 - Masters of Medical Science
- “Worst” aspects of the fellowship
 - Stipend determined after arrival
 - (Hospital-Adjacent bachelor dormitory provided)

Additional Questions

- Double scrub with another fellow or resident? +/- Resident
- Autonomy? Yes!
- Clinic and OR time? 2-3d block time, 0.5d clinic
- Where do most fellows get jobs after graduation?
- What do you wish you knew when you were applying?





Thank you!

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