

Isabella Rosa Nanini

Mr. Speice

Independent Study and Mentorship II 3A

12 October 2017

Observation Assessment

Type of Observation: Observed a tricuspid valvuloplasty vs. valve replacement, atrial reduction, closure of ASD/PFO, and intraoperative cryoablation with Dr. Robert Jaquiss

Mentor: Dr. Timothy Pirolli

Location: Children's Health Medical Center- Dallas 1935 Medical District Drive Dallas, Texas 75235

Date: Friday October 6, 2017

Time: 9:00am to 4:15pm

Deep in Surgery

In this surgical observation I got to observe first hand the work of the chief of pediatric cardiothoracic surgery, Dr. Jaquiss. Unlike the congenital malformation repairs I had seen before this patient had a large number of congenital heart diseases that resulted in a long and fairly complicated surgery. This surgery also included a complicated valve repair which I had never seen first hand before, and although this valve repair was not the exact repair I am currently studying in my research on mitral valvuloplasty and mitral valve repairs in infants less than one year old, this valve repair helped me visualize the process of valve repair and increase my understanding on my own research. This surgery is one I found unpredictable, I did not really know what I expected to see.

Now in Independent Study and Mentorship II, this is not my first time in the operating room. Now I know the drill and the more observation days I go on the more comfortable I find myself at Children's Health Medical Center Dallas. However, this surgery carried a sense of uncertainty since I was not watching my own mentor's work and many of the procedures carried in this surgery were new to me. Unlike my past observation days in this one I only observed the actual surgery and did not stay any longer to observe the post-operative care or to follow Dr. Jaquiss as he spoke with the family. As the surgery began it was not any different than anything I had experienced before. The first hour of surgery is usually standard in pediatric cardiothoracic surgery, but as soon as the heart was cannulated and the repair procedure began the atmosphere of the operating room changed. Although music was playing in the background this surgery was felt far from casual.

My experiences in the past contrasted this surgery and this surgery highlighted for me the more challenging side of pediatric cardiothoracic surgery. Although this could have brought uncertainty in wanting to choose to follow this career it only made me more passionate to follow it. I believe complicated surgeries like these are what will push me as a surgeon and I want to follow a career where I am pushed and challenged everyday. It almost made me see pediatric cardiothoracic surgery as an art. Through scientific innovation and careful planning the surgeon is reconstructing a small fragile heart and that carries a sense of creativity and beauty into the operating room I had yet to notice before this observation day. Throughout my observation I get to see a heart be completely changed and the impact of having someone lives in your hands in that way is something I crave. The adrenaline rush from just simply observing a complicated surgery is something I continue to crave in my Independent Study and Mentorship journey and I

cannot imagine how much greater this adrenaline rush is as a surgeon and that is a feeling I want to explore in my future career.

Overall, this observation continued to fuel my passion for pediatric cardiothoracic surgery and I hope to continue to find more observation days where I can experience more complicated congenital heart malformation repairs like this one. This observation also increased my interest for my research on mitral valve repair and I hope this interest fuels my motivation to complete this research successfully.