

Basic Scientist: From Resident to Faculty

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Disclosures







General Surgery Residency at Cornell 2005-2012

- Two year dedicated Basic Science Research Fellowship at MSKCC after PGY3 2008-2010
 - Developed a high throughput drug screen to look for novel therapeutics for dedifferentiated liposarcoma.
 - Confirmation drug/ compound studies *in vitro* and *in vivo* murine models.



• Surgical Oncology Fellowship at MSKCC 2012-2014

- First attending job at Dartmouth-Hitchcock Medical Center, Assistant Professor of Surgery
 - Perfect clinical job: sarcoma, melanoma, gastric cancer (+breast)
 - 20% research time with opportunities for internal funding





Faculty Year	1	2	3	4	Start of 5
Clinic	2 d/wk	2 d/wk	1.5 d/wk	0.5d/wk	0.5d/wk
OR	2 d/wk	2 d/wk	1.5 d/wk	1d/wk	1d/wk
Research time	20%	20%	40%	75%	75% -> ?
Grants		DHMC surgery grant -\$ not time		KL2 CTSA - \$ and time	
			Dartmouth SYNERGY grant – time not \$		ACS-CSDG 50% R01 Co-I 10% K08 Pending





Resident life in the lab

Choosing a lab experience

- Availability
- Interests
- Funding
- Dedicated time (?moonlighting)
- PI success at mentoring residents
- Research-oriented formal education
- Who are you learning from? Grad students, postdocs, other surgical fellows





• The type and complexity of the project may dictate tangible outcomes

Well defined Feasible Preliminary data (model works)

Exciting, brand new idea High risk, good theory New techniques for the lab Abstracts Presentations Publications, likely first author

Possibility that you do not finish Share with future fellows Abstracts, presentations, maybe publications/Co-author

Productivity



Overarching goals



- To become a surgeon-scientist
- To get into a better clinical fellowship program
- To figure out if basic/ translational science is right for you

"You must have long term goals to keep you from being frustrated by short term failures." - Charles C. Noble

Make the best of your research years

Association for Academic Surgery

- FIND A RESEARCH MENTOR(s)
- Go to basic science lectures
- Learn new techniques
- Watch how your PI
 - Manages the lab
 - Runs lab meetings
 - Balances (or not) clinic/ research
- Understand core facilities

review with PI

- Set sub-goals
- Attend and present at national meetings
- HAVE FUN !!!





Persistence

So... you want to be a surgeon-scientist

Passion for research

Ability to accept failure

Resilience

Educating the surgeon-scientist: A qualitative study evaluating challenges and barriers toward becoming an academically successful surgeon. Kodadek LM et al. *Surgery* 2016



Faculty life in the lab

Choosing the right job



- Availability
- Clinical practice should parallel your research
- Funding research start up package vs individual grants
 - Basic science costs more than outcomes research
- Support and infrastructure of the hospital/ department
- Dedicated time is it truly protected?
- Resources: lab space, core facilities, \$\$\$\$
- Who will you be learning from?
- Collaborators
- MENTORS are KEY



Clinical factors to consider



- Clinical time is ALWAYS more than what is scheduled
 - Calling back patients and referring providers
- More control over your practice will allow more true protected time
 - Supportive colleagues and adequate coverage
 - Outpatient vs inpatient/ complexity of case volume
 - Associate providers
- As you get more established in your research... your surgical practice blossoms (direct referrals, now your known)

Your lab



- Integrating into a well established lab for a quicker start
 - Shared equipment and resources
 - Easy access to science discussions
 - More face time with mentors and collaborators
- Location
 - Easy back & forth to clinic/ OR



Thank you



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Hitchcock

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A National Cancer Institute Comprehensive Cancer Center