WEBVTT

NOTE duration: "00:02:58.6880000"

NOTE language:en-us

NOTE Confidence: 0.78668594

00:00:00.000 --> 00:00:03.934 I'm Harry is Laney, and I'm advancing.

NOTE Confidence: 0.78668594

 $00:00:03.940 \longrightarrow 00:00:06.915$ Tosca ***** as part of the Yale

NOTE Confidence: 0.78668594

 $00:00:06.915 \longrightarrow 00:00:08.684$ Gastroenterology Department and we

NOTE Confidence: 0.78668594

00:00:08.684 --> 00:00:11.234 treat a variety of patients with

NOTE Confidence: 0.78668594

 $00:00:11.234 \longrightarrow 00:00:12.994$ gastrointestinal problems in our

NOTE Confidence: 0.78668594

00:00:12.994 --> 00:00:15.280 field of advancement. OSCA, P.

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 $00:00:15.280 \longrightarrow 00:00:18.400$ We're usually faced with a fairly

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 $00:00:18.400 \longrightarrow 00:00:21.470$ focused question that often deals with.

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 $00:00:21.470 \longrightarrow 00:00:23.588$ A diagnostic problem looking at getting

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 $00:00:23.588 \longrightarrow 00:00:26.190$ a biopsy or a sampling or getting

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 $00:00:26.190 \longrightarrow 00:00:28.801$ more information or seeing if we can

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 $00:00:28.872 \longrightarrow 00:00:30.576$ possibly treat something completely

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 $00:00:30.576 \longrightarrow 00:00:33.834$ through the scope so we look to have

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 $00:00:33.834 \longrightarrow 00:00:36.263$ as much information up to that point

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 $00:00:36.263 \longrightarrow 00:00:38.767$ as possible and then formulate a plan

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 $00{:}00{:}38.767 {\:\dashrightarrow\:} 00{:}00{:}41.602$ as part of a multidisciplinary team to

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 $00:00:41.602 \longrightarrow 00:00:44.801$ see how we can provide some answers.

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 $00:00:44.810 \longrightarrow 00:00:47.682$ We always find it helpful to have caregiver

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 $00{:}00{:}47.682 \dashrightarrow 00{:}00{:}50.647$ or family member present during a meeting.

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 $00:00:50.650 \longrightarrow 00:00:52.522$ They often can provide.

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 $00:00:52.522 \longrightarrow 00:00:53.926$ Important historical information

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 $00{:}00{:}53.926 \dashrightarrow 00{:}00{:}56.280$ about symptoms or prior testing.

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 $00:00:56.280 \longrightarrow 00:00:58.695$ If we are performing a

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00:00:58.695 --> 00:01:00.144 procedure after sedation,

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 $00:01:00.150 \longrightarrow 00:01:02.929$ it's necessary to have a ride home

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 $00{:}01{:}02.929 \dashrightarrow 00{:}01{:}06.334$ an when we discuss the results after

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 $00{:}01{:}06.334 \dashrightarrow 00{:}01{:}09.514$ procedure is often helpful to have

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 $00{:}01{:}09.604 \longrightarrow 00{:}01{:}12.622$ another person there to help remember

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 $00:01:12.622 \longrightarrow 00:01:15.616$ some of the details if needed.

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00:01:15.616 --> 00:01:19.032 The part of endoscopy that I enjoy

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 $00:01:19.032 \longrightarrow 00:01:22.495$ the most is having a visual

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 $00{:}01{:}22.495 \dashrightarrow 00{:}01{:}24.795$ representation of a problem.

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 $00:01:24.800 \longrightarrow 00:01:26.850$ And the chance to to

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 $00:01:26.850 \longrightarrow 00:01:28.490$ make an immediate impact,

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 $00:01:28.490 \longrightarrow 00:01:31.633$ either with a diagnosis and in many

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 $00:01:31.633 \longrightarrow 00:01:33.831$ cases potentially with the treatment

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 $00:01:33.831 \longrightarrow 00:01:36.927$ that can remove a problem such as an

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00:01:37.005 --> 00:01:39.560 early cancer or polyp of the say,

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 $00:01:39.560 \longrightarrow 00:01:41.332$ esophagus, stomach or colon.

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 $00{:}01{:}41.332 \dashrightarrow 00{:}01{:}43.547$ Part of the Smilow advanced

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 $00{:}01{:}43.547 \dashrightarrow 00{:}01{:}45.884$ Endoscopy Team we work as part

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 $00{:}01{:}45.884 \dashrightarrow 00{:}01{:}47.344$ of a multidisciplinary team.

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 $00:01:47.350 \longrightarrow 00:01:50.707$ So many of the questions that we face have

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 $00:01:50.707 \longrightarrow 00:01:54.399$ to do with the question of something that.

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00:01:54.400 --> 00:01:55.729 Could be precancerous,

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00:01:55.729 --> 00:01:59.130 or what the current state of something is,

NOTE Confidence: 0.78668594

 $00{:}01{:}59.130 \dashrightarrow 00{:}02{:}01.874$ so it's it's a great pleasure to work

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 $00:02:01.874 \longrightarrow 00:02:04.375$ as part of a multidisciplinary team

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00:02:04.375 --> 00:02:07.827 of variety of very expert and talented

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00:02:07.827 --> 00:02:09.450 physicians, including surgeons,

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00:02:09.450 --> 00:02:10.310 radiologists, pathologists,

NOTE Confidence: 0.78668594

 $00:02:10.310 \longrightarrow 00:02:11.170$ an oncologist.

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00:02:11.170 --> 00:02:13.893 So knowing that the patient is getting

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00:02:13.893 --> 00:02:16.876 the best care possible and it's going

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 $00:02:16.876 \longrightarrow 00:02:19.480$ to have the best outcomes possible

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 $00:02:19.559 \longrightarrow 00:02:22.779$ from each specialty is is really rewarding.

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 $00{:}02{:}22.780 \dashrightarrow 00{:}02{:}25.510$ My research interests center around.

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 $00{:}02{:}25.510 \dashrightarrow 00{:}02{:}29.654$ Advance into Osca P in the care of

NOTE Confidence: 0.78668594

 $00:02:29.654 \longrightarrow 00:02:33.278$ patients with problems that we treat,

NOTE Confidence: 0.78668594

 $00:02:33.280 \longrightarrow 00:02:37.136$ so we have a variety of ongoing research

NOTE Confidence: 0.78668594

 $00{:}02{:}37.136 \dashrightarrow 00{:}02{:}40.069$ studies that involve sometimes the

NOTE Confidence: 0.78668594

 $00:02:40.069 \longrightarrow 00:02:43.825$ details of the performance of endoscopy,

NOTE Confidence: 0.78668594

 $00{:}02{:}43.830 \dashrightarrow 00{:}02{:}47.295$ applying new technology or new

NOTE Confidence: 0.78668594

 $00:02:47.295 \longrightarrow 00:02:50.067$ techniques and also optimizing.

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 $00{:}02{:}50.070 \dashrightarrow 00{:}02{:}51.660$ The techniques that we used to

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 $00:02:51.660 \longrightarrow 00:02:53.450$ get the best results for patients.