

# Profile of Nagoya University Hospital 2013-2014



*Profile 2013-2014*



**Certificate of Accreditation**  
**Japan Council for Quality Health Care**

## Idea

We will contribute to society through medical care, education and research.

## Basic Decision

We will strive:

- To provide high-quality, safe, state-of-the-art medical care
- To foster prominent medical professionals
- To pioneer next generation medical technologies and care
- To contribute to the community and society

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## Declaration Regarding Patients' Rights and Responsibilities

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We, the personnel of Nagoya University Hospital, will respect the wishes of our patients and their families and provide the best possible medical care. Patients have the following rights:

1. To receive safe, high-quality, state-of-the-art medical care.
2. To have your individuality respected and receive medical care with dignity, in any situation.
3. To be fully informed about your illness and prognosis.
4. To be fully informed of all the names of your medical staff (including intern doctors and students) and their roles in your care.
5. To expect a comprehensive explanation about your medical care plan, and either consent to or refuse the proposal.
6. To tell your physician or the hospital what kind of treatment you want to receive.
7. To delegate judgment to your family member or another person by designating you when you cannot express your wishes/opinion for some reason. You do not necessarily have to obey your family member or designated person's decision.
8. To freely select another doctor or hospital and seek other opinions regarding the diagnosis and treatment of your illness.
9. To access your medical records through a designated procedure.
10. To be assured that we will not disclose your personal information to a third party without your permission.
11. To participate in a clinical trial based on your personal decision. Also, you can refuse a proposal to participate in a clinical trial.
12. To tell our staff if you have a problem or complaint about your treatment or care during hospitalization. If you cannot directly tell about the problem or complaint yourself, you can have your family or a person designated by you do so. You will not be subjected to any disadvantage by doing so.

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We ask for your full cooperation so as to provide you with the best possible medical care. Based on this principle, we would like to make the following requests.

1. Tell us honestly what you know about your current illness.
2. Tell us if you do not understand what we, the staff, tell you. Also, tell us if you feel you cannot follow our treatment instructions.
3. Refrain from behavior that would disturb others or violate other patients' rights.
4. Follow instructions/rules during your hospitalization.
5. We ask for your cooperate in our bedside teaching program so that we can achieve our role as a primary education hospital.

## Message From the Director



**ISHIGURO, Naoki**

M.D., Director, Nagoya University Hospital

Nagoya University Hospital was founded as a temporary public hospital in 1871 on the site of a law court of Nagoya Han, a feudal domain. After having served as a public hospital, it became Nagoya Imperial University Hospital in 1939 and made a new start as Nagoya University Hospital in 1949 under the nation's new education system, before obtaining the status of an incorporated entity in 2004 like all other national universities. As a result, the temporary hospital that was established 140 years ago transformed into the National University Corporation Nagoya University Hospital. The understanding and support received from many people have enabled us to grow during this period.

In 2009, we decided that our mission is “to contribute to society through clinical care, education and research”. All these activities need “human power and creativity”. Therefore, in order to achieve the missions of Nagoya University Hospital, we will focus on “human resource training”. More precisely, we have established the following goals: provide safe and secure medical care, conduct state-of-the-art care, study and develop new medical technologies, and support community medicine through personnel exchange. Through these activities, we aim to train a variety of human resources who will contribute to medical care in Japan and ensure that our hospital continues to support the local community and the entire country, while remaining a hospital that is relied upon by local people.

The functions of Nagoya University Hospital have rapidly improved in recent years. We have expanded the operating rooms and ICUs, and improved hardware including state-of-the-art medical facilities and equipment such as surgical robots and devices for intensity-modulated radiation therapies. These sophisticated medical facilities play an important role not only in providing medical care but also in human resource training. In addition, we have reinforced the system of maintaining medical quality and safety by employing specialized professors at the Department for Medical Quality and Security Management. The enhancement of medical safety education is crucial to ensure that medical staff positively embrace safety and take thorough safety measures. Regarding research, Nagoya University Hospital has been elected as a base for conducting translational research which ranges from developing seed technologies to preclinical studies, as well as a clinical trial core base to support activities ranging from human clinical research to practical application. Namely, Nagoya University Hospital is able to develop state-of-the-art medical technologies that extend from developing seed technologies to clinical application. These elements constitute the firmware necessary for hospital management. In addition, the most important software aspect is human resources. Although the development of next-generation medical technologies is an important task that determines the fate of our nation, the lack of human resources in this field has remained unaddressed for a long time. We hope to promote the training of next-generation staff in charge of clinical research who can use the abovementioned hardware and firmware to research and develop new medical technologies. This is a key mission of university hospitals.

Medical care is always provided by humans. Therefore, human resources are a true asset and resource. Going forward, we will increasingly focus on human resources development. Good medical personnel can only be trained in a good environment, so we are striving to contribute to the community as a center of medical education and medical care in central Japan and to strengthen the system for publicizing information worldwide. It is our mission to meticulously train competent and committed personnel working at our hospital in a working environment which provides safe, secure and high-quality medical services. In this increasingly harsh environment for medicine, the medical and safety levels expected by society are constantly rising. We recognize this as a sign of trust, and will meet this expectation by achieving our mission as members of Nagoya University Hospital.

This brochure describes Nagoya University Hospital as it is today. We would greatly appreciate your continued support.

Idea/Basic Decision	
Declaration Regarding Patients' Rights and Responsibilities	01
Message From the Director	
ISHIGURO, Naoki M.D., Director, Nagoya University Hospital	02

## Part.1 History and Organization

1-1 History	06
1-2 Organization Chart of University Hospital	07
1-3 Organization Chart of Administration Office	08
1-4 University Hospital Executives, Number of Staffs	09

## Part.2 Information on Departments / Facilities, etc.

2-1 Department of Quality and Patient Safety	12
2-2 Clinical Departments	13
Hematology	13
Cardiology	13
Gastroenterology and Hepatology	14
Respirology	14
Endocrinology and Diabetes	15
Nephrology	15
Vascular Surgery	16
Transplantation Surgery	16

Gastroenterological Surgery 1	17
Gastroenterological Surgery 2	17
Breast and Endocrine Surgery	18
Orthopedic Surgery	18
Obstetrics and Gynecology	19
Ophthalmology	19
Psychiatry	20
Pediatrics	20
Dermatology	21
Urology	21
Otorhinolaryngology	22
Radiology	22
Anesthesiology	23
Oral and Maxillofacial Surgery	23
Neurosurgery	24
Geriatrics	24
Neurology	25
Thoracic Surgery	25
Cardiac Surgery	26
Plastic and Reconstructive Surgery	26
Pediatric Surgery	27
General Medicine	27
Rheumatology	28
Hand Surgery	28
Child and Adolescent Psychiatry	29

2-3 Central Clinical Facilities, etc.	30
Department of Clinical Laboratory	30
Department of Surgical Center	30
Central Block of Radiology	31
Department of Medical Supplies	31
Department of Blood Transfusion Service	32
Department of Pathology and Laboratory Medicine	32

Department of Emergency and Critical Care Medicine .....	33
Surgical Intensive Care Unit .....	33
Emergency and Medical Intensive Care Unit .....	34
Department of Blood Purification .....	34
Center for Maternal - Neonatal Care .....	35
Center of National University Hospital for Infection Control .....	35
Department of Endoscopy .....	36
Department of Rehabilitation .....	36
Center for Advanced Medicine and Clinical Research .....	37
Department of Clinical Oncology and Chemotherapy .....	37
Department of Clinical Engineering .....	38
Stroke Care Managing Center .....	38
Continence Information Center .....	39
Medical IT Center .....	39
Center for Postgraduate Clinical Training and Career Development .....	40
Community Liaison Center .....	40
Clinical Nutrition .....	41
Transplant Coordination Service .....	41
 2-4 Department of Hospital Pharmacy .....	 42
Department of Nursing .....	42
Department of Medical Technique .....	43
Administration Office .....	43



### Part.3 Facilities and Access

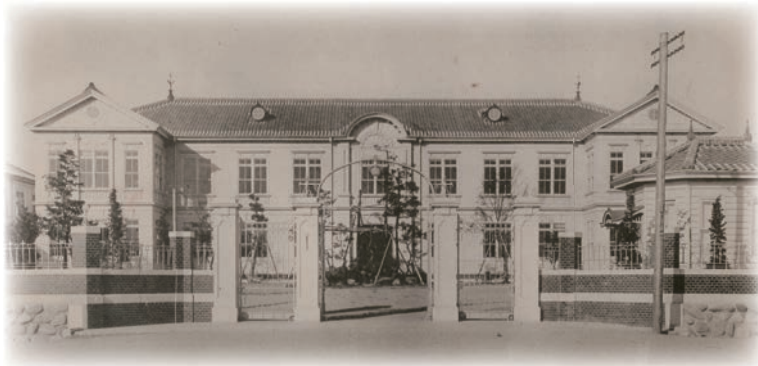
3-1 Site Map in Tsurumai District .....	46
3-2 Floor Guide Map .....	47
3-3 Ward Building .....	48
3-4 Outpatient Building and Amenities .....	49

3-5 Central Consultation Building .....	50
3-6 Daiko District Site Map .....	52
■ Access	



# Part. 1

## History and Organization



1-1	History .....	06
1-2	Organization Chart of University Hospital .....	07
1-3	Organization Chart of Administration Office .....	08
1-4	University Hospital Executives, Number of Staffs .....	09

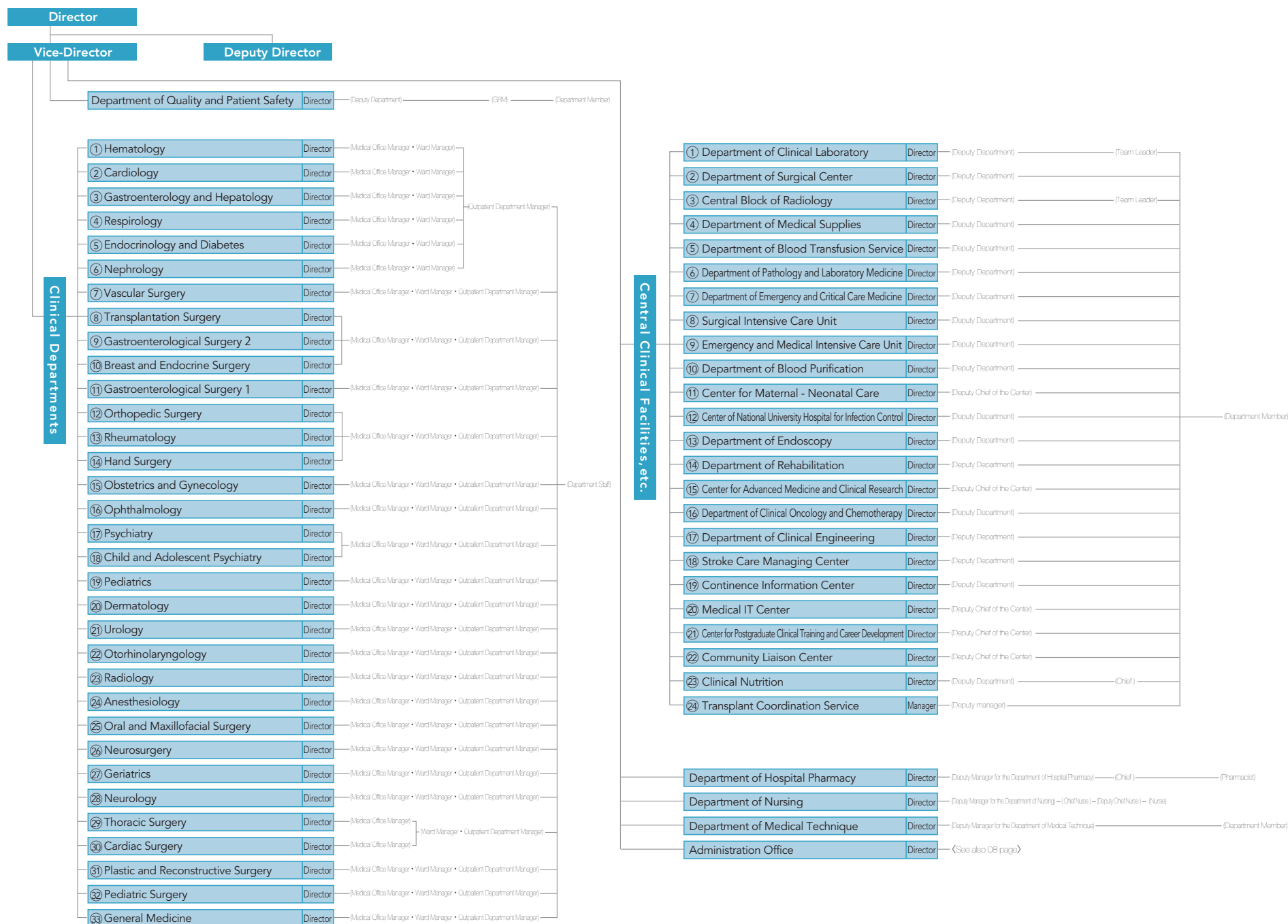


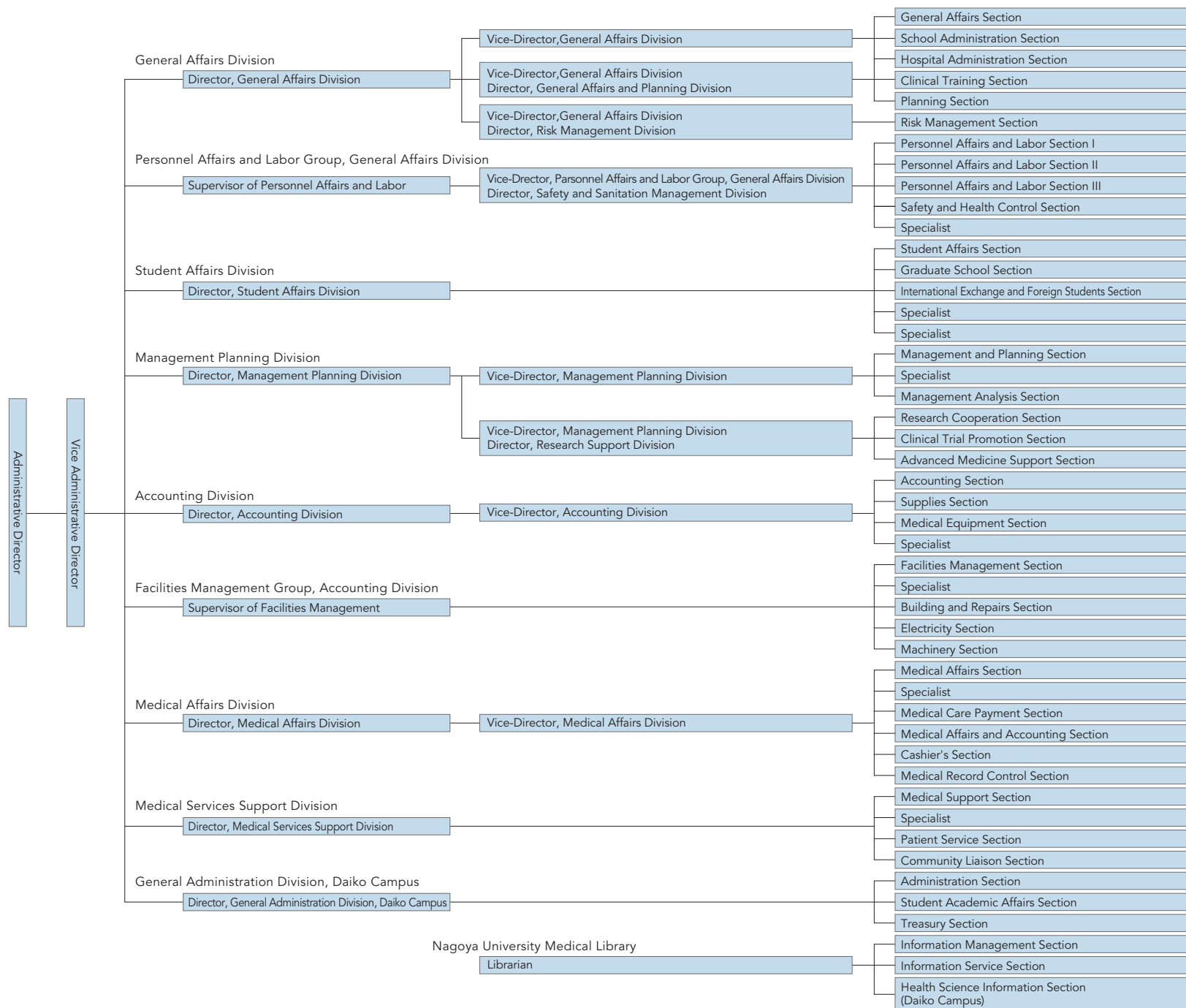
Month / Year	Event
May 1871	A temporary public hospital (closed in February 1872) was established at the former site of the Nagoya Clan's judicial council (currently 1, Marunouchi 3-chome, Naka-ku), and a temporary medical school was established at a former town hall (abolished in August 1872).
April 1872	Managed as a charity hospital based on donations, accompanying the abolition of the clan (closed in February 1873).
May 1873	Managed as a temporary hospital with prefectural citizens' donations (at the separate temple of Nishi Honganji Temple; currently 1, Monzencho, Naka-ku)
November 1873	A medical training site was established (at the separate temple of Nishi Honganji Temple).
January 1875	The name was changed to Aichi Prefecture Hospital.
April 1876	The name was changed to Public Medical Training Site and Public Hospital.
June 1876	The name was changed to Public Medical Center.
July 1877	The Center was relocated to Tenosaki-cho (currently 17 and 18, Sakae 1-chome, Naka-ku) (hospital opening ceremony on July 1).
April 1878	The name was changed to Public Medical School
October 1881	The name was changed to Aichi Medical School and Aichi Hospital.
August 1901	The name Aichi Medical School was changed to Aichi Prefectural Medical School.
July 1903	Aichi Prefectural Medical School was newly started as Aichi Prefectural Medical Professional School.
March 1914	A new building was built in Tsuruma-cho, Naka-ku (currently Showa-ku) and the school was relocated.
July 1920	Promoted to Aichi Medical University status.
July 1922	The name of Aichi Hospital was changed to Aichi Medical University Hospital.
June 1924	The name was changed to Aichi Medical University Affiliated Hospital.
May 1931	The jurisdiction was transferred; the names were respectively changed to Nagoya Medical University and Nagoya Medical University Affiliated Hospital.
April 1939	Nagoya Imperial University School of Medicine was started, and the name of the hospital was changed to Nagoya Imperial University School of Medicine-Affiliated Hospital.
May 1939	Nagoya Imperial University Provisional Affiliated Medical Division was established.
February 1943	Nagoya Imperial University Aviation Medicine Research Institute was established (abolished in January 1946).
April 1944	The name was changed to Nagoya Imperial University Affiliated Medical Division.
July 1944	A separate hospital of Nagoya Imperial University School of Medicine-Affiliated Hospital was established (integrated to the main Hospital in May 1996).
April 1946	Nagoya Imperial University Environmental Medicine Research Institute was established.
October 1947	The names were respectively changed to Nagoya University School of Medicine and Nagoya University School of Medicine-Affiliated Hospital.
October 1947	The name was changed to Nagoya University Affiliated Medical Division (abolished in March 1948).
May 1949	New Nagoya University was started. The names were respectively changed and Nagoya University School of Medicine and Nagoya University Hospital were started.
April 1951	School of Medicine-Affiliated Nursing School was established (abolished in March 1980).
July 1955	School of Medicine-Affiliated X-ray Technician School was established.
April 1959	School of Medicine-Affiliated Midwife School was established (abolished in March 1981).
April 1959	School of Medicine-Affiliated Axenic Animal Research Facility was established (reorganized in April 1983).

Month / Year	Event
April 1961	School of Medicine-Affiliated Health Laboratory Technician School was established.
April 1962	School of Medicine-Affiliated Cancer Research Facility was established (reorganized in April 1983).
April 1965	School of Medicine-Affiliated Medical Fungus Research Facility was established (reorganized in April 1983).
April 1966	Honors courses were set up at the School of Medicine-Affiliated X-ray Technician School.
April 1969	The name was changed to the School of Medicine-Affiliated Radiological Technician School (abolished in March 1982).
April 1972	The name was changed to the School of Medicine-Affiliated Clinical Laboratory Technician School (abolished in March 1981).
October 1977	Nagoya University Medical Technology Junior College was established (reorganized in October 1997).
April 1983	School of Medicine-Affiliated Pathological Control Research Facility was established (reorganized in April 2003).
March 1986	The School of Medicine-Affiliated Experimental Animals Facility was established (reorganized in May 2004).
May 1996	The separate hospital of the Nagoya University School of Medicine-Affiliated Hospital was integrated.
December 1996	Clinic "Nagoya University Daiko Medical Center" was established (closed in March 2011).
October 1997	Nagoya University School of Health Sciences was established.
April 2000	Prioritization of the Nagoya University Graduate School of Medicine was completed.
April 2001	Medical Science Program, Master's Course, Graduate School of Medicine was established.
April 2001	The School of Medicine-Affiliated Pathological Control Research Institute and the School of Medicine-Affiliated Experimental Animals Facility were placed under the Graduate School of Medicine.
April 2002	Nursing Science Program of Master's Course ; Medical Technology Program of Master's Course; and Rehabilitation Therapy Program of Master's Course were established at the Graduate School of Medicine.
April 2003	The Center for Neurological Diseases and Cancer, Affiliated with the Graduate School of Medicine was established.
April 2003	Medical Administration Course, Medical Science Program, Master's Course was established at the Graduate School of Medicine.
April 2004	Nursing Science Program Master's Course; Medical Technology Program Master's Course, and Rehabilitation Therapy Program Master's Course at the Graduate School of Medicine were placed under Doctoral Course (first-stage course / second-stage course).
May 2004	The Graduate School of Medicine-Affiliated Medical Education Research Support Center was established.
July 2005	The School of Medicine-Affiliated General Medicine Education Center was established.
June 2010	The School of Medicine-Affiliated Center for Advanced Medicine and Clinical Research was established.
October 2011	Brain and Mind Research Center was established.
April 2012	Curriculum of School of Medicine School of Health Sciences shifted to the department system.
April 2013	Nagoya University Clinical Simulation Center (NU-CSC) was established at the Graduate School of Medicine.









## University Hospital Executives

As of July 1, 2013

Director, University Hospital (Education and Research Council Member)	Prof.	ISHIGURO, Naoki	Deputy Director, University Hospital	Prof.	MUROHARA, Toyoaki
				Prof.	UEMURA, Kazumasa
Vice-Director, University Hospital	Prof.	GOTOH, Momokazu		Prof.	YAMADA, Kiyofumi
	Prof.	HASEGAWA, Yoshinori		Director of Medical Techniques	YONEDA, Kazuo
	Prof.	NISHIWAKI, Kimitoshi			
	Prof.	NAGAO, Yoshimasa			
	Director of Nursing	MIURA, Masako			
	Administrative Director	SHIOZAKI, Eiji			

※Chiefs of clinical departments, etc. (as of August 1, 2013), refer to Page 12 and thereafter.

## Number of Staffs

As of May 1, 2013

Classification	Number of Staff Members	
Educational Staff	Professor	35
	Associate Professor	39
	Lecturer	52
	Assistant Professor	77
	Clinical Professor	3
	Clinical Associate Professor	2
	Clinical Lecturer	23
	Clinical Assistant Professor	97
	Subtotal	328
Medical Technical Staff	Medical Technician	262
	Nurse, Assistant Nurse	1,043 (Including assistant nurses)
Administrative Staff	Administrative Staff	140
	Total	1,773

1-4

University Hospital Executives,  
Number of Staffs

# Part.2

## Information on Departments / Facilities, etc.

### 2-1 ..... 12

Department of Quality and Patient Safety

### 2-2 Clinical Departments ..... 13

Hematology	Urology
Cardiology	Otorhinolaryngology
Gastroenterology and Hepatology	Radiology
Respirology	Anesthesiology
Endocrinology and Diabetes	Oral and Maxillofacial Surgery
Nephrology	Neurosurgery
Vascular Surgery	Geriatrics
Transplantation Surgery	Neurology
Gastroenterological Surgery 1	Thoracic Surgery
Gastroenterological Surgery 2	Cardiac Surgery
Breast and Endocrine Surgery	Plastic and Reconstructive Surgery
Orthopedic Surgery	Pediatric Surgery
Obstetrics and Gynecology	General Medicine
Ophthalmology	Rheumatology
Psychiatry	Hand Surgery
Pediatrics	Child and Adolescent Psychiatry
Dermatology	



da Vinci Surgical System



### 2-3 Central Clinical Facilities, etc. .... 30

Department of Clinical Laboratory	Department of Rehabilitation
Department of Surgical Center	Center for Advanced Medicine and Clinical Research
Central Block of Radiology	Department of Clinical Oncology and Chemotherapy
Department of Medical Supplies	Department of Clinical Engineering
Department of Blood Transfusion Service	Stroke Care Managing Center
Department of Pathology and Laboratory Medicine	Continence Information Center
Department of Emergency and Critical Care Medicine	Medical IT Center
Surgical Intensive Care Unit	Center for Postgraduate Clinical Training and Career Development
Emergency and Medical Intensive Care Unit	Community Liaison Center
Department of Blood Purification	Clinical Nutrition
Center for Maternal - Neonatal Care	Transplant Coordination Service
Center of National University Hospital for Infection Control	
Department of Endoscopy	

### 2-4 ..... 42

Department of Hospital Pharmacy  
Department of Nursing  
Department of Medical Technique  
Administration Office

## Department of Quality and Patient Safety

**Director** NAGAO, Yoshimasa (Professor)

### "No advanced medicine without safe medicine"

Nagoya University Hospital practices the highest-level advanced medicine in Japan. However, medical practice by its nature is uncertain and risky. We make every effort to minimize these risks and to ensure patient safety.

### Objectives

1. Promptly detect various adverse events related to medical practice and make a collective effort to treat patients and save lives.
2. Research and analyze accident and incident reporting and provide patients with accurate information. Provide training for the staff and improve the operating system to prevent the recurrence of accidents and incidents.
3. Aiming to provide the best possible medical services by objectively measuring the quality of care. Seek the better medical system using improvement science methods.

### Operation System

The department consists of a total of 11 members: one professor, one doctor, two nurses, one lawyer and six staff members, in addition to about 120 quality and safety managers in all departments of the hospital. All these people work together for patient safety.

### Scope of Medical Services

To provide patients with safe, high-quality medical services, we do the following:

1. Establish a hospital-wide system to deal with any matters arising during medical practice.
2. Gather and analyze incident reporting from all the departments and improve medical quality.
3. Give guidance on third-party objective research into adverse events and on measures to identify the causes and prevent recurrence.
4. Compile safety manuals for practice and equipment in the hospital, guides to standards and other necessary literature, and facilitate coordination between departments.
5. Provide training to the hospital staff and students to foster safety-conscious medical professionals and create a safety culture.

–Ensure that patients can receive satisfying care  
with a sense of security–





## Hematology

**Director** KIYOI, Hitoshi (Associate Professor)

3W • 12E

### Challenge intractable blood diseases with advanced clinical techniques

We provide the best medical care for blood diseases requiring high expertise as well as promote the development of new diagnostic and therapeutic techniques.

#### Medical Care System

Our department has four dispensaries, 35 beds for inpatients (of which 10 are bioclean beds), and 10 to 15 staff always on duty to provide expert medical care. Every effort is made to develop new diagnostic and therapeutic techniques and to conduct high-quality clinical research to establish evidence based medicine (EBM).



#### Target Diseases

We provide medical care to patients with hematological disorders including malignant diseases, such as leukemia, lymphoma, multiple myeloma, myelodysplastic syndromes (MDS), and hemorrhagic diseases such as hemophilia and Von Willebrand's disease.

#### Strong Fields

In the therapeutic field of hematopoietic malignancies, we provide the best possible treatment based on informed consent consisting mainly of standard chemotherapies. In addition, we are actively involved in clinical studies and the development of new therapies such as molecular targeting therapies, and the development of new hematopoietic stem cell transplantation processes.

#### Clinical Results

We aim to provide medical care of the highest quality, safety and satisfaction. We accept more than 50 new patients with hematopoietic tumors, perform more than 20 hematopoietic stem cell transplantations, and provide medical care to more than 400 patients with congenital hemorrhagic diseases per year.

#### Specialized Outpatient Clinic

We provide medical care at the "specialized outpatient hemophilia clinic," which is responsible for comprehensive medical care for patients with hemorrhagic disease such as hemophilia and Von Willebrand's disease, at "long-term follow-up program" for transplant patients after they leave the hospital, and at "outpatient transplant donor clinic" for follow-up of hematopoietic stem cell transplant donors.

#### Advanced Medicine and Research

Our department is involved in basic research on topics such as maintenance and disorder of the hematopoietic system and in the development of a wide range of advanced clinical techniques including molecular targeting therapies, clinical application of transplantation and regenerative medicine, and control of thrombosis.



## Cardiology

**Director** MUROHARA, Toyooki (Professor)

12W

### From bench to bedside to prevent life-style related cardiovascular diseases by advanced medicine such as therapeutic angiogenesis

We provide medical care to patients with ischemic heart disease (angina pectoris and myocardial infarction), arrhythmia, valvular heart disease, cardiomyopathy, and pulmonary hypertension and various vascular diseases such as peripheral arterial disease. Also, we provide medical care to treat life-style related disease such as hypertension and hyperlipidemia, which may cause heart disease. We are also involved in the prevention and management of cardiovascular disease including medical care provided in the smoking cessation outpatient clinic.

#### Medical Care System

Our department presents outpatient clinic in examination rooms No. 11, 12, 13, 17, and 18 on the 2nd floor of the outpatient clinic (and in the smoking cessation outpatient clinic). Since our hospital has introduced an appointment system in the outpatient clinic, you can make an appointment for the first visit by having your medical institution fax an application form for treatment to our hospital.

#### Target Disease

Ischemic heart disease (angina pectoris and myocardial infarction), arrhythmia, valvular heart disease, cardiomyopathy, pulmonary hypertension, and various vascular diseases such as peripheral arterial disease. Medical care to treat life-style related disease such as hypertension and hyperlipidemia, which may cause heart disease, as well as the prevention and management of cardiovascular disease including medical care provided in the smoking cessation outpatient clinic. Refractory peripheral arterial disease (arteriosclerosis obliterans and Buerger's disease), refractory ischemic heart disease, etc.

#### Strong Fields

We perform coronary angioplasty for ischemic heart disease (angina pectoris and myocardial infarction) and drug therapy and non-drug therapy for arrhythmia. We also perform diagnosis of diseases such as valvular heart disease, cardiomyopathy, pulmonary hypertension, and peripheral arterial disease. In addition, we perform revascularization therapy, which is an advanced medicine beneficial for patients who are difficult to treat by conventional methods, including patients with refractory peripheral arterial disease (arteriosclerosis obliterans and Buerger's disease).

#### Clinical Results

Annually, we perform heart catheterization in about 800 patients, coronary angioplasty (catheterization) in about 200 patients, acute treatment in about 50 patients with acute myocardial infarction, and catheter ablation treatment for arrhythmia in about 300 patients.

#### Specialized Outpatient Clinic

Specialists in the fields such as ischemic heart disease, arrhythmia, heart failure, and smoking cessation provide medical care in the outpatient clinic. For patients with an implanted pacemaker, we provide medical care in the "outpatient pacemaker clinic" where mechanical conditions of the pacemaker are checked regularly.

#### Advanced Medicine and Research

We have achievements in basic and clinical research in the field of regenerative medicine, especially in vascular regenerative medicine. We actually perform revascularization therapy in clinical settings. Also, we perform advanced catheter ablation treatment for complicated arrhythmia.



## Gastroenterology and Hepatology

**Director** GOTO, Hidemi (Professor)

11E • 12E

We proud to offer innovative prevention, diagnosis and treatment of digestive diseases. Our state-of-the-art technology enables early detection of gastrointestinal, liver, pancreas cancer and improves the life

We provide the highest quality patient care for a wide spectrum of diseases for the esophagus, stomach, small intestine, colon, rectum, liver, gallbladder, pancreas, and biliary tract.

### Medical Care System

In the outpatient clinic, specialists of the gastrointestinal tract, biliary tract, pancreas, and liver provide medical care every day. Also, we perform screening tests such as upper and lower endoscopy and abdominal ultrasound every day. In the inpatient department, specialists provide medical care to inpatients as the attending physician.

### Target Disease

Benign diseases (e.g. reflux esophagitis, gastric ulcer, inflammatory bowel disease) and malignant diseases such as cancer of the gastrointestinal tract (esophagus, stomach, small intestine, and large intestine), acute / chronic hepatitis, liver cirrhosis, liver cancer, benign disease (bile duct / gallbladder stone and acute / chronic pancreatitis) and malignant disease such as cancer of the biliary tract and pancreas.

### Strong Fields

We are actively involved in early detection and endoscopic therapy of gastrointestinal cancer. Also, we are confident in performing capsule endoscopy for small-bowel disease, diagnostic treatment using small intestinal endoscope, diagnostic treatment of viral hepatitis and liver cancer, ultrasonography for the biliary tract and pancreatic disease, and diagnostic treatment using endoscopes.

### Clinical Results

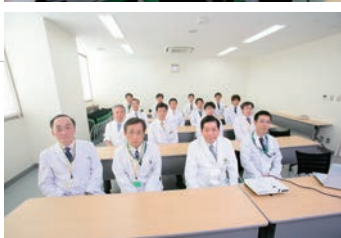
We provide medical care to more than 200 patients with inflammatory disease a year. We perform endoscopic therapy in 250 or more patients with early gastrointestinal cancer a year; capsule endoscopy in 300 or more patients a year and small intestinal endoscopy in 200 or more patients a year; interferon therapy in dozens of patients a year; and, perform diagnosis and treatment of biliary / pancreatic cancer in 30 or more patients a year.

### Specialized Outpatient Clinic

Since two gastrointestinal tract specialists, two liver specialists, and one biliary tract and pancreas specialist provide medical care in the outpatient clinic every day, all patients will be examined by a specialist wherever they visit the clinic.

### Advanced Medicine and Research

We conduct research on the diagnosis and treatment of early gastrointestinal cancer, polypectomy and balloon dilation using small intestinal endoscope, and immunotherapy for pancreatic cancer.



## Respirology

**Director** HASEGAWA, Yoshinori (Professor)

11W

We accept patients with various conditions and have made extensive clinical achievements

We provide medical care for a wide range of pulmonary and pleural diseases including lung cancer, bronchial asthma, pneumonia, and respiratory failure.

### Medical Care System

With 11 full-time doctors (academic personnel) including Professor Yoshinori Hasegawa (Director) and eight part-time doctors, we provide medical care in the outpatient clinic every day in three examination rooms (one room in the outpatient clinic for new patients and two rooms for specialized respiratory outpatient clinic). Number of beds: 42. Respiratory endoscopy (bronchoscopy): twice a week.

### Target Disease

Thoracic malignant tumor (e.g. lung cancer, pleural mesothelioma), bronchial asthma, chronic obstructive pulmonary disease (COPD), diffuse pulmonary disease (e.g. interstitial pneumonia, sarcoidosis), pulmonary infection (e.g. pneumonia, pulmonary tuberculosis, pulmonary mycosis), acute and chronic respiratory failure, etc.

### Strong Fields

Multimodality therapy for lung cancer (comprehensive treatment in cooperation with Thoracic Surgery, Radiology, and Department of Clinical Oncology and Chemotherapy), endoscopic diagnosis of the respiratory system, diagnosis and treatment of diffuse pulmonary disease, treatment of chronic obstructive pulmonary disease, and diagnosis and treatment of pulmonary infection.

### Clinical Results

Clinical results for fiscal year 2012: 796 new inpatients; 16,778 outpatients; 331 patients who underwent bronchoscopy.

### Specialized Outpatient Clinic

Every day, we provide medical care in three examination rooms of the specialized outpatient respiratory clinic (one examination room in the outpatient respiratory clinic for new patients). We provide medical care in the smoking cessation outpatient clinic (once a week; in cooperation with Cardiology and Department of General Medicine).

### Advanced Medicine and Research

A multicenter clinical study of chemotherapy for lung cancer, genetic testing related to adverse reactions due to anticancer drugs, diagnosis of and pathological research on various respiratory diseases using inhalation-induced sputum, endoscopic ultrasound under bronchoscopy, and argon plasma coagulation for endotracheal malignant tumors.



## Endocrinology and Diabetes

**Director** OISO, Yutaka (Professor)

12W

Professional diagnosis and treatment of diabetes and endocrine disease

We are energetically involved in the diagnosis and treatment of diabetes and a wide range of endocrine diseases.

### Medical Care System

Our department has 34 consulting doctors, nine diabetologists, four supervising doctor, eight endocrine specialists, and three supervising doctors; we provide medical care every day in five examination rooms in the outpatient clinic and 22 beds in the inpatient department.

### Target Disease

Pituitary disease (e.g. acromegaly, Cushing's disease, hypopituitarism, diabetes insipidus), thyroid disease (e.g. Basedow's disease, Hashimoto's disease), adrenal disease (e.g. Cushing's syndrome, primary hyperaldosteronism, pheochromocytoma), diabetes, and diabetic complications.

### Strong Fields

We perform professional diagnosis and treatment of all endocrine diseases such as diabetes insipidus. As for thyroid diseases, we perform echo-guided fine-needle aspiration cytology; for Basedow's disease, we perform internal radiation therapy and retro-orbital radiation in cooperation with Radiology. For diabetes, we conduct blood sugar control that incorporates insulin pump therapy (CSII) and continuous glucose monitoring (CGM). Also, we promote the treatment of diabetes through a comprehensive approach based on team medical care for diabetes in cooperation with nurses, pharmacists, registered dietitians, and physical therapists.

### Clinical Results

The number of outpatients (total number) is about 28,000 a year; the number of inpatients (total number) is about 350 a year.

### Specialized Outpatient Clinic

For medical care for endocrine disease, we perform a professional diagnosis and treatment in all pituitary, thyroid, and adrenal diseases. For medical care for diabetes, we are actively involved in providing recuperation guidance such as nutritional guidance and foot care.

### Advanced Medicine and Research

We conduct research on central diabetes insipidus, obesity, new therapies for SIADH, lymphocytic hypophysitis, and functions of pancreatic  $\beta$  cells, fat cells, and intestinal tract in diabetes.



## Nephrology

**Director** MATSUO, Seiichi (Professor)

10E

We provide medical care for all diseases related to the kidney with the latest therapies

We treat various renal diseases after carefully examining information based on accurate evidence and obtaining full understanding from the patient and family.

### Medical Care System

Our department consists of about 15 full-time and part-time doctors. Medical care is provided mainly by professors who are nephrology specialists. We hold a conference twice a week and determine the course of treatment.

### Target Disease

All diseases related to the kidney including renal disease such as nephritis, nephrotic syndrome, renal failure, hypertensive renal disorder, diabetic nephropathy, collagen disorder, systemic vasculitis syndrome and management after renal transplantation and electrolyte and acid-base balance disorder.

### Strong Fields

We are actively involved in renal pathological diagnosis, renal replacement therapy, and new immunosuppressive therapies using ciclosporin, tacrolimus, etc. and alpha-glucosidase replacement therapy for diseases such as refractory nephrotic syndrome, collagen disorder, and hereditary diseases.

### Clinical Results

Annual number of inpatients: 388; number of pathological diagnoses by renal biopsy: 634 (our hospital: 58, affiliated facilities: 576); number of patients in whom dialysis was newly introduced: 62 (hemodialysis: 50, peritoneal dialysis 12); number of patients who underwent PD+HD combination therapy: 4; other patients (plasma exchange therapy and selective blood cell component adsorption therapy; total number of patients: 254).

### Specialized Outpatient Clinic

The outpatient clinic for peritoneal dialysis and the outpatient clinic for chronic kidney disease (CKD) are now open to the public.

### Advanced Medicine and Research

We are involved in laparoscopic renal biopsy (in cooperation with Urology) for high-risk patients, research on renal regeneration using adipose stem cells, development of urinary biomarkers for acute renal disorders, development of antihypertensive drugs using RAS inhibitory molecules, and elucidation of the mechanism of peritoneal fibrosis.





## Vascular Surgery

**Director** KOMORI, Kimihiro (Professor)

6E

Vascular disease specialists hold a full-time position and have high expertise

We perform diagnosis and treatment of vascular diseases (e.g. arteries, veins, lymph vessels), aneurysm, and peripheral arterial disease (surgical treatment, stent graft, and endovascular treatment).

### Medical Care System

A total of seven personnel consisting of six academic personnel including Professor Kimihiro Komori and other hospital staff, etc. perform diagnosis of and provide medical care for all vascular diseases. The outpatient clinic days are Monday, Wednesday, and Friday, and treatment days are Monday, Tuesday, and Thursday; however, we also accept emergency patients every day.



### Target Disease

All vascular diseases. Arterial disease includes aortic aneurysm (thoracic, thoracoabdominal, and abdominal), arteriosclerosis obliterans, Buerger's disease, carotid artery stenosis, and renal artery stenosis; venous disease includes varicose veins of the lower extremities and deep vein thrombosis; lymphatic disease includes lymphedema.



### Strong Fields

For thoracic and abdominal aortic aneurysm, we have performed stent graft implantations as well as surgery. For patients with peripheral arterial occlusive disease, we perform bypass surgery and endovascular treatment suitable for the clinical conditions; for patients in whom revascularization is difficult, we perform angiogenic therapy. We also conduct laser therapy for varicosis.

### Clinical Results

In 2012, we treated 124 patients with abdominal (iliac) aortic aneurysm (stent graft implantation: 63 patients), performed stent graft implantation for thoracic aortic aneurysm in 44 patients, PAD in 152 patients (of whom 69 patients received bypass surgery), and treated varices in 37 patients.

### Specialized Outpatient Clinic

The expertise of vascular surgery specialists is extremely high because not all hospitals have the department of vascular surgery: five cardiovascular surgery specialists; five vascular specialists; and, four stent graft supervising doctors hold full-time positions in our department.

### Advanced Medicine and Research

For advanced medicine, we perform angiogenic therapy using autologous bone marrow cell transplantation. We are involved in the elucidation of the origin of vascular intimal hypertrophy and its control by gene therapy, elucidation of the origin of aneurysm, improvement of treatment results of stent graft implantation, and molecular biological research on inflammatory vascular disease.

## Transplantation Surgery

**Director** OGURA, Yasuhiro (Clinical Associate Professor)

6W

The best system accommodating the ever-growing transplantation therapy

We treat advanced liver disease mainly by liver transplantation from live and brain-dead donors. We also provide management of donors and transplantation counseling.

### Medical Care System

Based on the treatment information and interviews with the patient and family, we evaluate the necessity, safety, and efficacy of transplantation therapy. In cooperation with the personnel in each field and with the support of transplant coordinators, we perform liver transplantation from live and brain-dead donors, establishing a lifelong medical care system for donors.

### Target Disease

Liver transplantation for fulminant hepatitis, hepatic cirrhosis, hepatocellular carcinoma, primary biliary cirrhosis, primary sclerosing cholangitis, progressive intrahepatic cholestasis, multiple hepatic cysts, biliary atresia, Caroli's disease, congenital metabolic liver disease, Alagille syndrome, Budd-Chiari syndrome, etc.

### Strong Fields

Our technique of liver transplantation therapy for adults and children is highly evaluated, and we receive many inquiries from other facilities regarding issues such as blood type incompatible transplantation. We provide a care system that takes into account mental and social aspects as well as physical aspects of living donors.

### Clinical Results

Our department is a certified facility for liver transplantation from brain-dead donors (22 facilities nationwide) as well as a facility for liver transplantation from live donors, and we regularly perform liver transplantation therapy for various liver diseases. Although treatment results differ depending on the condition of the disease, recently, the one-year survival rate has been more than 90%.

### Specialized Outpatient Clinic

In addition to the "postoperative outpatient clinic for liver transplant recipients," we have a "postoperative outpatient clinic for living Liver donors," where we accept patients who underwent surgery at other facilities. In addition to the ordinary outpatient clinic, our department has a reservation-based "outpatient clinic for transplantation counseling" and provides counseling of about two hours for each session.



### Advanced Medicine and Research

Transplantation therapy itself is advanced medicine; in addition to making efforts to improve the technical aspects of surgery, for example, we conduct research on issues such as control of implant infection, post-transplant vaccination, control of post-transplant viral hepatitis, control of recurrence of hepatocellular carcinoma, control of fibrosis of transplanted liver, and blood type incompatible transplantation.



## Gastroenterological Surgery 1

**Director** NAGINO, Masato (Professor)

7W • 13E

Experienced staff do their utmost to treat diseases, mainly tumors

Digestive Surgery 1 provides medical care mainly for tumors in the gastrointestinal tract including stomach, duodenum, small intestine, and large intestine and liver, biliary tract (gallbladder and bile duct), and pancreas.

### Medical Care System

A total of 28 surgeons with eight years or more of experience provide medical care. In the outpatient clinic, 10 surgeons with special expertise provide medical care three times a week (Monday, Wednesday, and Friday). In the inpatient department, at least two surgeons mainly provide medical care for each patient, but the treatment strategy and clinical course are always discussed with all members in our department.



### Target Disease

We perform preoperative diagnosis, surgical therapy, perioperative management, postoperative chemotherapy, and therapy for recurrent cancer. We treat diseases such as hepatobiliary and pancreatic malignant tumor, chronic pancreatitis, benign biliary tract disease (such as gallstones), esophageal tumor, stomach tumor, large intestine / colorectal tumor, and pelvic tumor.

### Strong Fields

We are confident in performing difficult surgery such as hepatopancreatoduodenectomy, hepatectomy with combined vascular resection for far-advanced biliary cancer and pelvic exenteration, and thoracolumbotomy esophagectomy. Especially, our department has the best treatment results for hilar cholangiocarcinoma regardless of whether in or outside of Japan. Recently we have also actively conducted non-invasive surgeries, such as laparoscopic liver resection, laparoscopic pancreatic resection, and single incision laparoscopic cholecystectomy, as well as robot-assisted surgeries for colorectal cancer using the da Vinci Surgical System.

### Clinical Results

The total number of surgeries in 2012 was 679. Of those, hepatectomy for biliary cancer: 58; other hepatectomies: 33 (of those, 18 are laparoscopic surgery); laparoscopic cholecystectomy: 53 (of those, 45 are single incision type); pancreaticoduodenectomy: 37; distal pancreatectomy: 11 (of those, 1 are laparoscopic surgery); surgery for esophageal cancer: 28; other esophageal surgery: 12; gastric cancer: 29 (of those, 6 are laparoscopic surgery); surgery for colon cancer: 65 (of those, 37 are laparoscopic surgery); surgery for rectal cancer: 76 (of those, 45 are laparoscopic surgery, 8 are robot-assisted surgery, and 8 are pelvic exenteration). The number of resections for hilar cholangiocarcinoma is the largest in Japan.

### Advanced Medicine and Research

Robot-assisted surgery for colorectal cancer using the da Vinci Surgical System. A phase III comparative study in patients with resected cholangiocarcinoma is conducted comparing the group receiving postoperative adjuvant chemotherapy with gemcitabine and the group receiving surgery alone; a phase II clinical study of postoperative adjuvant chemotherapy with TS-1 in patients who underwent resection for liver metastasis resulting from colorectal cancer. Research on the safety and utility of laparoscopic pancreaticoduodenectomy and hepatic lobectomy.



Website of the Department  
<http://www.med.nagoya-u.ac.jp/tumor/>

## Gastroenterological Surgery 2

**Director** KODERA, Yasuhiro (Professor)

6W • 13W

Globally acclaimed for expertise in multidisciplinary approach and minimally invasive approach in all fields of gastrointestinal and hepatobiliary-pancreatic surgery

Multidisciplinary treatment with surgery at the core for neoplasms of the digestive system has been tailored for each patient and delivered with care.

### Medical Care System

11 academic and 23 medical members provide outpatient and inpatient medical care. The outpatient clinic is open on Tuesdays, Thursdays, and Fridays, staffed by specialists in esophageal, gastric, colon, hepatobiliary pancreatic, and endoscopic surgery. For inpatients, professors and doctors collaborate to provide medical care as a team.



### Target Disease

Patients with neoplasms and other intractable disorders of the digestive system including esophagus, stomach, colon, rectum, pancreas, liver and biliary system are treated. This would include cancer of all stages, gastroesophageal reflux disease, achalasia, Crohn's disease and ulcerative colitis. Laparoscopic approach has been selected where applicable.

### Strong Fields

We are one of the world's leading institutions in the combined resection of the pancreas and portal vein in pancreatic surgery using portal vein catheter bypass. A significant number of operations have been performed and it is now established as a safe procedure. For esophageal, gastric, colon, and other digestive tract cancers, we take a minimally invasive approach like endoscopic surgery whenever possible, as well as pursuing radical cure.

### Clinical Results

The numbers of resections performed per year are as follows: esophagus 60; stomach 80; large intestine 130; pancreas 80; liver 50. Over half of stomach cancer and large intestine cancer have been treated endoscopically. The number of pancreatectomies performed in the department has been outstanding in Japan.

### Advanced Medicine and Research

Our class operates an organization called Chubu Clinical Oncology Group (CCOG), and actively conducts clinical studies on surgery and chemotherapy in the fields of gastric cancer, colorectal cancer, and pancreatic cancer at many facilities including hospitals affiliated to Nagoya University Hospital.



Website of the Department  
<http://www.med.nagoya-u.ac.jp/surgery2/clinical/index.html>



## Breast and Endocrine Surgery

**Director** KIKUMORI, Toyone (Lecturer)

7E

We provide optimum treatment in cooperation with other fields, which is only possible in university hospitals

Our department mainly performs surgical treatment for breast cancer and neoplastic lesions in sites such as the thyroid gland, parathyroid gland, adrenal gland, and pancreas.

### Medical Care System

We make efforts to provide optimum treatment based on global standard therapy and the most advanced techniques that are only possible in university hospitals. In addition, we actively use a clinical path to ensure efficiency and equalization of treatment.

### Target Disease

Breast cancer, thyroid cancer, Cushing's syndrome, primary hyperaldosteronism, pheochromocytoma, adrenal cancer, adrenal tumor, primary and secondary hyperparathyroidism, endocrine pancreatic tumor, and multiple endocrine neoplasia.

### Strong Fields

For breast cancer, we perform a high level of diagnostic imaging, surgical treatment, and drug therapy in cooperation with specialists of many fields, which is only possible in university hospitals. We have performed an outstanding number of total thyroidectomies for thyroid cancer and laparoscopic surgeries for adrenal tumors in Japan.

### Clinical Results

In the previous year, we performed surgery on 190 patients with breast cancer, 60 patients with thyroid cancer, 40 patients with an adrenal tumor, and 15 patients with parathyroid disease. We perform a mammotome biopsy, which is a minimally invasive mammary gland biopsy, three or more times a week.

### Specialized Outpatient Clinic

Breast and endocrine surgery outpatient clinic  
Second opinion outpatient clinic of Breast and Endocrine Surgery

### Advanced Medicine and Research

We conduct a phase I clinical study of hyperthermic immunotherapy using a magnetic heat generator for recurrent tumors (approved by the advanced biological clinical research review board of our hospital).



Website of the Department  
<http://www.med.nagoya-u.ac.jp/nyusen/>

## Orthopedic Surgery

**Director** NISHIDA, Yoshihiro (Extraordinary Professor)

5W • 8W

A wide range of advanced medical care not limited to surgical treatment

Our department treats diseases related to motor organs (i.e. bone, cartilage, ligament, muscle).

### Medical Care System

Our department has seven surgical groups (rheumatism, hip joint, spine, tumor, children, knee and shoulder, and hand surgery), and each group actively provides a high level of specialized medical care.

### Target Disease

We provide medical care to cover all fields of orthopedics including trauma surgery, joint surgery, spine surgery, hand surgery, locomotor tumor surgery, sports medicine, and rehabilitation medicine. In addition to surgical treatment, we also perform medical treatment and rehabilitation for a wide range of diseases.

### Strong Fields

We perform treatment to achieve functional preservation of motor organs. We perform surgery including minimally invasive surgery in a way that original joint and neurologic functions are conserved as much as possible. We also actively perform medical treatment as well as surgery. In addition, we promote therapeutic modalities using the techniques in regenerative medicine.

### Clinical Results

We perform an outstanding numbers of surgeries including 200 or more joint replacement surgeries a year, 120 or more spinal surgeries a year, arthroplastic surgeries, bone and soft tissue tumor surgeries, pediatric orthopedic surgeries, arthroscopic surgeries, and upper extremity function reconstructive surgeries.

### Specialized Outpatient Clinic

Seven surgical groups (rheumatism, hip joint, spine, tumor, children, knee and shoulder, and hand) provide medical care in their specialized outpatient clinics.

### Advanced Medicine and Research

For advanced medicine, we perform cell culture and transplantation therapies based on regenerative medicine technology and conduct various clinical trials. In addition, we have conducted numerous cooperative studies with other universities and companies.



## Obstetrics and Gynecology

**Director** KIKKAWA, Fumitaka (Professor)

4W • 4E

Provide relief through treatment to the outstanding number of patients possible in Japan

In addition to the main fields of obstetrics and gynecology (gynecologic oncology, perinatal medicine, and reproductive medicine), we provide medical care for all fields of obstetrics and gynecology

### Medical Care System

16 academic personnel including professors and 14 consulting doctors provide inpatient medical care in the general outpatient clinic, specialized outpatient clinics, 4W ward (gynecology), 4E ward (perinatal medicine), and center for maternal-neonatal care (MFICU and reproductive technique). Two on-duty doctors are present for childbirth and emergency surgery.

### Target Disease

Malignant tumor (e.g. cervical cancer, endometrial cancer, ovarian cancer), trophoblastic disease (e.g. hydatidiform mole, choriocarcinoma), high-risk pregnancy (e.g. pregnancy-induced hypertension syndrome, complicated pregnancy, placenta previa, fetal abnormality), infertility, gynecologic disease for which endoscopic surgery is indicated (endometriosis and uterine myoma), and climacteric disturbance.

### Strong Fields

We have treated an outstanding number of patients with ovarian cancer in Japan. We also make efforts for fertility preservation treatment of early-stage malignant tumor in younger patients. In addition, we have broad experience in cases of trophoblastic disease, fetal abnormality, placenta previa accreta, endoscopic surgery, and in vitro fertilization / microinsemination.

### Clinical Results

Cervical cancer: 99, endometrial cancer: 65, ovarian cancer: 50, trophoblastic disease: 19, childbirth: 478 (cesarean section: 200), maternal transport: 59, fetal congenital anomaly: 60, endoscopic surgery: 123, in vitro fertilization: 120 egg collection cycles (2012).

### Specialized Outpatient Clinic

As a core hospital in the Chubu District, we provide the most advanced medical care in each of the following specialized outpatient clinics: tumor, high-risk pregnant women, reproductive medicine, endoscopic surgery, and menopause. We also provide second opinions.

### Advanced Medicine and Research

We perform radical trachelectomy, which is a fertility preservation surgery, for early invasive cervical cancer. We develop ALA-PDT (photodynamic therapy) and immunotherapy targeting the novel carcinoembryonic antigen and aim at their clinical application. We have introduced robot-assisted laparoscopic surgery for hysterectomy.



## Ophthalmology

**Director** TERASAKI, Hiroko (Professor)

9W

Efforts in the most advanced treatment demonstrated by excellent treatment results

Our department specializes particularly in retinal and vitreous disease and actively performs advanced, high-quality treatment for diseases such as age-related macular degeneration, diabetic retinopathy, and retinal detachment. We have achieved excellent treatment results including more than 700 retinal and vitreous surgeries in a year.

### Medical Care System

Professor (Terasaki, Hiroko); one associate professor; two lecturers; one clinical lecturer; three assistant professors; one designated assistant professor; four clinical assistant professors, and nine part-time doctors.

### Target Disease

Retinal and vitreous disease, macular degeneration, retinal degeneration, cataract, uveitis, dry eye, corneal disease, strabismus / amblyopia, pediatric eye disease, eye tumor, and ophthalmoplasty.

### Strong Fields

Retinal and vitreous surgery for diseases such as diabetic retinopathy, retinal detachment, macular hole, and premacular membrane. Photodynamic therapy and new drug therapies including molecular targeted drugs such as anti-VEGF agents, and so forth, for age-related macular degeneration and macular edema.

### Clinical Results

The annual number of first-visit patients is about 3,500, and the annual total number of revisit patients is about 36,000. The annual total number of surgeries is about 1,400, of which 700 surgeries are for retinal and vitreous diseases. We have achieved excellent treatment results for about 480 patients a year with age-related macular degeneration who are treated with photodynamic therapy and drug infusion.

### Specialized Outpatient Clinic

Retinal and vitreous disease, corneal disease, strabismic amblyopia / pediatric eye disease, uveal disease, eye tumor, ophthalmoplasty, and low vision.

### Advanced Medicine and Research

We promote elucidation of the pathology of diseases such as age-related macular degeneration, diabetic retinopathy, and retinal pigment degeneration and the development of new therapies. Especially, we are highly reputed worldwide in the fields of diagnosis and assessment of retinal disease using electroretinographic techniques.



## Psychiatry

**Director** OZAKI, Norio (Professor)

2E

We provide multidimensional treatment for patients and cases that have been increasing every year

From the standpoint of mental health care, we provide an appropriate assessment, advice, and treatment of patients with psychological problems in adulthood.

### Medical Care System

To ensure sufficient time for consultation and interview, we have introduced a complete appointment system for first-visit and revisit patients. All first-visit patients are required to either telephone or visit the outpatient clinic of our department to make an appointment.

### Target Disease

We accept patients with various psychological problems such as schizophrenia, depression, manic-depressive illness, dementia, anxiety disorder, panic disorder, eating disorder, and sleep disorder.



### Strong Fields

Our staff is familiar with psychological problems in each life stage from adolescence to older age. We perform multidimensional treatment consisting of drug therapy, psychotherapy, and so forth. Also, we actively perform assessment of the brain function using neuroimaging tests such as brain MRI and SPECT, psychological tests, etc.

### Clinical Results

We provide the latest medical care for psychological problems, whose demand for medical support is increasing year by year, in the inpatient department (50 beds) and outpatient clinic. In addition, we also make efforts in hospital-clinic cooperation (with mental clinics in the community) and cooperation between hospitals (with mental hospitals in the community).

### Specialized Outpatient Clinic

Although we do not have specialized outpatient clinics for specific diseases, we will make an appointment with the most appropriate doctor after asking about the patient's condition and other information at the time of initial consultation.

### Advanced Medicine and Research

Our basic policy is "to determine the most appropriate diagnostic and therapeutic techniques" and "to identify the pathology and to aim at developing treatment and prevention methods appropriate for the pathology." We work and study hard every day to maintain the medical care we provide at the highest level so that we can utilize the most recent findings on psychological problems in daily clinical settings.



## Pediatrics

**Director** KOJIMA, Seiji (Professor)

5E

Promotion of multidisciplinary treatments for rare diseases in children

We provide medical care, mainly intensive medical service, utilizing the expertise in each doctor's specialized field of pediatrics.

### Medical Care System

We have two types of outpatient clinics: reservation-based specialized outpatient clinics (Hematology/Oncology, Neurology, Infectious Diseases, Neonatology, Cardiology, Endocrinology, Genomics) and the general outpatient clinic. In inpatient, we provide medical care mainly to patients with hematologic and neoplastic disease, neonates, patients with neurological disorder, and so forth.



### Target Disease

Blood disease such as leukemia, lymphoma, and aplastic anemia, neoplastic disease such as neuroblastoma, newborn disease such as congenital diaphragmatic hernia, pediatric neurologic disorder such as intractable epilepsy, and other diseases including congenital immunodeficiency, chronic EBV infection, and so forth.

### Strong Fields

Our department is one of the pediatric institutions that have performed the largest number of hematopoietic stem cell transplantations in Japan. For neonates, we focus on neonatal surgical disease such as congenital diaphragmatic hernia; for patients with intractable epilepsy, we make diagnoses using simultaneous video and EEG recording and PET.

### Clinical Results

In 2011, we provided medical care for 60 new patients with hematologic and neoplastic disease and performed hematopoietic stem cell transplantation in 31 patients. The annual total number of outpatients with neurological disorder such as epilepsy is about 3,000; the annual number of neonatal inpatients in NICU is 259 (2012); the number of patients with congenital diaphragmatic hernia is 16 (2012).

### Specialized Outpatient Clinic

We provide medical care in the following outpatient clinics: pediatric blood and tumor outpatient clinic, pediatric neurologic outpatient clinic, congenital immunodeficiency outpatient clinic, neonatal outpatient clinic, virus outpatient clinic, pediatric circulatory organ outpatient clinic, pediatric endocrine outpatient clinic, genetic disease outpatient clinic.



### Advanced Medicine and Research

We are involved in the following: clinical research to overcome complications associated with hematopoietic stem cell transplantation using cell therapies such as virus-specific CTL and mesenchymal stem cell electroencephalographic monitoring in neonatal epilepsy, brain hypothermia therapy for neonatal encephalopathy, and clinical research on the identification of epileptic focus by PET and high magnetic field MRI.



## Dermatology

**Director** AKIYAMA, Masashi (Professor)

6E

### All skin problems are within our field

All the symptoms and changes on the skin fall within the domain of dermatologists. Even if such symptoms or changes are the result of systemic diseases, our department will treat them as long as they are on the skin.

#### Medical Care System

General outpatient clinic: Monday through Friday  
Skin tumor outpatient clinic: Monday, Tuesday, Wednesday, and Friday  
Collagen disorder outpatient clinic: Monday and Tuesday  
Outpatient clinic for ichthyosis and inherited dyskeratosis: Wednesday  
Pigmentation disorder outpatient clinic: Thursday  
(All these indications are for the first visit.)



#### Target Disease

Skin cancers (e.g., malignant melanoma, squamous cell carcinoma, basal cell carcinoma, Paget's disease), benign skin tumors, collagen disorders (e.g., lupus erythematosus, dermatomyositis, scleroderma, Sjogren's syndrome), genetic skin diseases (e.g., dyskeratosis, ichthyosis, epidermolysis bullosa and pigmentation disorder), atopic dermatitis, urticaria, and other skin diseases.

#### Strong Fields

Diagnosis and treatment of skin cancers and benign tumors, skin surgery, skin cancer metastasis testing with sentinel lymph node biopsy, diagnosis and treatment of collagen disorders, genetic testing of a variety of genetic skin diseases, and detection of pathogenic factors of atopic dermatitis and filaggrin gene mutations.

#### Clinical Results

We operated on 450 skin tumor cases per year. Of all the cases, skin cancer accounted for 180 (50 malignant melanoma, 42 squamous cell carcinoma and 44 basal cell carcinoma cases). The cumulative number of cases tested with sentinel lymph node biopsy is 200. Currently, the department has more than 200 outpatients suffering collagen disorders, such as lupus erythematosus, dermatomyositis and scleroderma. The cumulative number of genetic tests conducted on patients with severe genetic skin diseases is 300.

#### Specialized Outpatient Clinic

Skin tumor, skin surgery, collagen disorder, ichthyosis and inherited dyskeratosis, genetic pigmentation disorder and general dermatology.

#### Advanced Medicine and Research

Sentinel lymph node biopsy for the detection of lymph node metastases of malignant skin tumors (dye, RI and fluorescence methods in combination); tailor-made care of atopic dermatitis by detection of filaggrin gene mutations; research on the roles of various autoantibodies in the onset of collagen disorders; development of assay kits for diagnostic autoantibodies; and genetic testing and prenatal diagnosis for severe genetic skin diseases, such as ichthyosis, epidermolysis bullosa, pigmentation disorders and oculocutaneous albinism.



## Urology

**Director** GOTOH, Momokazu (Professor)

10E

### Extensive achievements and expertise to treat patients with various diseases

We provide comprehensive medical care including diagnosis and treatment of urogenital (kidney, ureter, bladder, urethra, prostate, penis, and testis) disease.

#### Medical Care System

One professor (Director), one associate professor, two lecturers, six assistant professors, and five doctors provide medical care. Outpatient days are Monday through Friday. Surgery days are Monday, Tuesday, Thursday, and Friday.

#### Target Disease

Benign and malignant tumors within the scope of our department, congenital malformation, all functional and organic diseases, diseases in the field of female urology (pelvic organ prolapse), urinary disturbances (neurogenic bladder, prostatic hyperplasia, and urinary incontinence), sexual and reproductive diseases including gender identity disorder and male infertility, and urinary calculus.

#### Strong Fields

Laparoscopic surgery and robotic surgery for urogenital cancer (e.g. renal cancer, prostate cancer), brachytherapy for prostate cancer, surgical treatment of pelvic organ prolapse and stress urinary incontinence, renal transplantation, medical care for urinary disturbances including neurogenic bladder, prostatic hyperplasia, and urinary incontinence, urinary calculus, and cancer chemotherapy.

#### Clinical Results

The daily number of outpatients is 120 to 150; the daily average number of inpatients is 33; the annual number of surgeries is 450 (of those, 150 are laparoscopic surgeries [surgery for renal cancer: 80, surgery for prostate cancer: 60]), the annual number of renal transplantations is 10; the annual number of brachytherapy procedures (for prostate cancer) is 45.

#### Specialized Outpatient Clinic

In addition to medical care in the general outpatient clinic, we provide medical care in the specialized outpatient clinics for renal transplantation, urinary incontinence, impaired urination, and prostate cancer.

#### Advanced Medicine and Research

For advanced medicine, we perform robotic surgery of prostate cancer, laparoscopic retroperitoneal lymph node dissection for testicular cancer. We conduct clinical studies on cell therapy for urinary incontinence using adipose-derived stem cells.



## Otorhinolaryngology

**Director** NAKASHIMA, Tsutomu (Professor)

9E

We perform advanced treatment based on a high level of expertise even for common diseases

Of the five senses, our department deals with hearing, smell, taste, and touch and is involved in communication by vocalization and hearing.

### Medical Care System

Our inpatient department consists of Group A (in charge of endoscopic paranasal sinus surgery, ear surgery, sleep apnea, inflammatory disease, inner ear disease including sudden deafness and Meniere's disease, etc.) and Group B (in charge of head and neck tumor, dysphagia, etc.).

### Target Disease

We are deeply involved in diseases related to tumors, inflammation, malformation, and injury of ear, nose, and throat, dysphagia, and skull base tumors. Otolgic vertigo is also within our field, and we are involved in the differentiation of vertigo. We also perform hearing aid fittings.



### Strong Fields

We perform differential diagnosis of deafness (especially, measurement of endolymphatic and perilymphatic space sizes and identification of the blood-labyrinth barrier by diagnostic imaging using three-Tesla MRI) and treatment of inner ear disease with intratympanic medication.

We have confidence in performing treatment of head and neck cancer aiming at functional preservation.



### Clinical Results

Our clinical results of inner ear disease such as sudden deafness and large vestibular aqueduct syndrome are published in many journals. For treatment of head and neck tumors aiming at functional preservation and treatment of sleep apnea as well, we make achievements examining data from various viewpoints.

### Specialized Outpatient Clinic

We provide medical care in specialized outpatient clinics including: tumor outpatient clinic, ultrasonography outpatient clinic, sudden deafness outpatient clinic, nose outpatient clinic, sleep apnea outpatient clinic, dizziness outpatient clinic, hearing aid outpatient clinic, and dexamethasone infusion outpatient clinic (intratympanic dexamethasone infusion for inner ear disease).

### Advanced Medicine and Research

We perform advanced treatment such as imaging study of the inner ear using three-Tesla MRI, measurement of cochlear blood flow during cochlear implant surgery, and endoscopic sinus surgery with navigation. We will make an application for approval of inner ear MRI after intratympanic gadolinium administration as advanced medicine.

## Radiology

**Director** NAGANAWA, Shinji (Professor)

3E

Our department provides medical imaging and radiation therapy for various diseases

We are responsible for diagnostic imaging, interventional radiology (IVR) and radiation therapy for cancer.

### Medical Care System

Our department consists of the diagnostic imaging group and the radiation therapy group. In the diagnostic imaging group, each specialist interprets radiological images CT, MRI, angiography, ultrasonography, and radioisotope (RI) examination and prepares diagnostic reports. In the radiation therapy group, each specialist plans and performs irradiation mainly for malignant tumors.

### Target Disease

CT, MRI, RI (including PET), and IVR are performed for various diseases of the entire body such as inflammation, tumor, and congenital anomaly. In our hospital, ultrasonography is performed mainly for breast and thyroid disease. Radiation therapy is performed for many malignant tumors and a few benign diseases.

### Strong Fields

MRI diagnosis of inner ear diseases, CT diagnosis of biliary tract and pancreas, diagnostic imaging of the breast, PET diagnosis (including methionine), radioiodine therapy for thyroid cancer and hyperthyroidism, endovascular therapy of visceral artery aneurysm, diagnostic imaging of mammary glands, and high-precision radiation therapy.

### Clinical Results

The numbers of diagnostic imaging testing performed in 2012 are as follows: CT: 44,000; MRI: 20,000; ultrasonography: 4,100; RI / PET: 5,700; IVR: 540. We performed radiotherapy for 790 patients.

### Specialized Outpatient Clinic

We provide medical care in the IVR outpatient clinic on Monday, Wednesday, and Friday morning, the outpatient clinic of radioiodine therapy for thyroid cancer on Tuesday morning, and the outpatient clinic of radioiodine therapy for hyperthyroidism on Thursday afternoon. Radiation therapy is performed by specialists every day in the outpatient clinic.



### Advanced Medicine and Research

High-resolution MRI of the inner ear, virtual bronchoscopy, sentinel lymph node scintigraphy, PET using nuclides other than FDG, ultrasonography for nonpalpable mammary gland lesions, stereotactic lung irradiation, and prostate cancer IMRT.





## Anesthesiology

**Director** NISHIWAKI, Kimitoshi (Professor)

3E

### Extensive pain treatment as well as surgical anesthesia and surgical intensive care

We perform surgical anesthesia and perioperative systemic management and provide medical care in the pain clinic mainly targeting chronic pain.

#### Medical Care System

The department consists of 38 members. We provide general anesthesia, epidural anesthesia, and spinal anesthesia for all patients undergoing surgery or examinations for 24 hours. The pain clinic is open for outpatients on Mondays, Wednesdays, and Fridays and the clinic also provides inpatient medical care. We also play an active role in the management of the Surgical Intensive Care Unit.



#### Target Disease

Surgical anesthesia is provided for all diseases that require it. The pain clinic treats patients with all diseases with pain, mainly chronic pain, such as postherpetic neuralgia, CRPS, and trigeminal neuralgia. The surgical intensive care unit provides systemic management of severely ill perioperative patients.

#### Strong Fields

We actively perform peripheral nerve block under ultrasonographic guidance both in surgical anesthesia and in the pain clinic. In the pain clinic, we perform spinal cord electric stimulation therapy, nerve block using high-frequency thermocoagulation, and various other nerve blocks.



#### Clinical Results

The number of cases where this department was in charge of the surgical anesthesia was 6,050 in fiscal year 2012. The pain clinic treated 30 outpatients a day and three inpatients at one time.

#### Specialized Outpatient Clinic

We provide cancer treatment at a dedicated outpatient clinic as well as clinical examination prior to surgery.

#### Advanced Medicine and Research

We conduct many research such as neurogenic pulmonary edema, the effect of anesthetics on vascular endothelial cells, heart rate variability, and postoperative analgesia after peripheral nerve block under ultrasonographic guidance.



## Oral and Maxillofacial Surgery

**Director** UEDA, Minoru (Professor)

6E

### Research on regenerative medicine and advanced medicine such as implant treatments

We address the application of advanced medicine including regenerative medicine in dental practice. We accept patients with all oral surgery diseases.

#### Medical Care System

Both new patients and revisit patients are accepted on weekdays. New patients are accepted until 11:00 a.m. Consultation with a dentist basically requires a prior appointment.

#### Target Disease

Atrophy and defect of the alveolar bone, oral neoplasia (e.g. gingival cancer, tongue cancer), cleft lip and palate, jaw deformity (e.g. mandibular prognathism, microgenia), temporomandibular arthrosis, cystic disease, injury of the maxillofacial area, impacted tooth, dental treatment requiring systemic management, and other diseases (e.g. perimaxillary inflammation).

#### Strong Fields

Bone regenerative treatment for atrophy and defects of the alveolar bone, implant treatment for loss of teeth, mandibuloplasty for jaw deformity, and multimodality therapy for oral cancer.

#### Clinical Results

Osteoplasty in 15 patients, implant replacement in 45 patients, surgery for jaw deformity in 95 patients, cleft lip and palate surgery in three patients, benign tumor in 10 patients, and malignant tumor in 43 patients.

#### Specialized Outpatient Clinic

Minor oral surgeries such as impacted tooth extraction are conducted on Monday and Tuesday afternoons. Implant outpatients are accepted on Thursday afternoons and temporomandibular joint and tumor outpatients are accepted on Fridays. Doctors provide medical care related to his/her specialized field in the morning.

#### Advanced Medicine and Research

Research on regenerative medicine such as osteoplasty using bone marrow stem cells has been actively conducted.



## Neurosurgery

**Director** WAKABAYASHI, Toshihiko (Professor)

7E

Equipped with an advanced operating room, Brain Theater, and performing complex surgery

Our department has a long history; it was established by Professor Makoto Saito, the founder of the Japan Neurosurgical Society. Since then, our department has always been challenging the pioneering development of neurosurgery.

### Medical Care System

We strive to improve treatment results by developing state-of-the-art brain surgery devices, establishing new therapies through university-industry cooperation, and diagnosing intracerebral conditions and analyzing treatments using computer simulation models. We are also working to establish a system for quickly responding to thrombolysis by establishing a medical institution network in cooperation with the emergency medical service, to establish an organic system for treatment in cooperation with convalescent rehabilitation facilities for stroke patients and home medical care facilities, and to increase awareness of preventive medicine through brain checkups.

### Target Disease

High-precision image-guided navigation surgery for brain tumors, super advanced endovascular surgery and aneurysmal clipping for stroke, surgery for pituitary tumor and intraventricular surgery using neuroendoscope, stereotactic surgery for Parkinson's disease and essential tremor based on functional neurosurgery, surgery for intractable pain and epilepsy surgery, minimally invasive surgery for spinal diseases, and development of advanced medical care including nucleic acid technology by the advanced neurosurgery development group.

### Strong Fields

High-precision image-guided navigation surgery for brain tumors, super advanced endovascular surgery and aneurysmal clipping for stroke, surgery for pituitary tumor and intraventricular surgery using neuroendoscope, stereotactic surgery for Parkinson's disease and essential tremor based on functional neurosurgery, surgery for intractable pain and epilepsy surgery, minimally invasive surgery for spinal diseases, and development of advanced medical care including nucleic acid technology by the advanced neurosurgery development group.

### Clinical Results

The annual number of surgeries was 614; the number amounts to 10,581 if surgeries performed in affiliated hospitals (45 facilities) were included. The breakdown of a total of 19,976 inpatients according to diseases, including inpatients in affiliated hospitals, was as follows: 2,919 patients with a tumor, 2,134 patients with aneurysms, 3,203 patients with cerebral hemorrhage, 2,545 patients with cerebral infarction, 5,027 patients with head trauma, 1,110 patients with spinal disease, and 764 patients with functional neurosurgical disease (results in 2011).

### Specialized Outpatient Clinic

Brain tumor; genetic, regenerative, and cell therapies; endovascular surgery; functional and epilepsy surgery; pituitary gland and endoscopic surgery; spinal cord and spine; peripheral nerve; stroke; rehabilitation for neural function recovery; and BMI.

### Advanced Medicine and Research

Our department has adopted advancement in life science and medical engineering and performed the first gene therapy for brain tumor in Japan. In addition to making efforts to develop cellular and regenerative medicine and cerebro-endovascular treatment, we introduce new technologies in computer and diagnostic imaging to establish sophisticated surgical methods. Our department is equipped with an advanced operating room (Brain Theater), which fully uses intraoperative MRI and the high-accuracy navigation robot "Neuro Mate," which was introduced for the first time in Asia.



## Geriatrics

**Director** KUZUYA, Masafumi (Professor)

10W

Comprehensive medical care for elderly people

Our department provides comprehensive medical care to elderly patients, especially to those with multiple medical conditions.

### Medical Care System

Basically, our department provides comprehensive medical care to elderly people. Therefore, we do not have specialized outpatient clinics. Outpatient specialists (two or three examination rooms every day) provide medical care to patients with the following target diseases. We accept first-visit patients every day. We recommend you to make a prior appointment using the hospital-clinic cooperation system.



### Target Disease

- 1) Comprehensive evaluation and treatment of multiple coexisting symptoms and diseases
- 2) Diagnosis, evaluation, and treatment regimen for dementia
- 3) Comprehensive medical care for lifestyle-related diseases in elderly people
- 4) Comprehensive evaluation and treatment of geriatric syndrome including tendency to fall, decreased activities of daily living (ADL), malnutrition, and tendency of aspiration

### Strong Fields

Our department specializes in providing comprehensive medical care to elderly people with multiple chronic medical conditions.

### Clinical Results

The total number of outpatients in fiscal year 2012: 9,592 outpatients  
 The number of inpatients in fiscal year 2012: 295 inpatients  
 The number of beds in fiscal year 2012: 23 beds  
 The bed occupancy rate in fiscal year 2012: 82.1%  
 The average length of stay in fiscal year 2012: 22.5 days

### Specialized Outpatient Clinic

At our outpatient clinic for those presenting forgetfulness, we accept first-visit patients from Monday through Friday.



## Neurology

**Director** SOBUE, Gen (Professor)

10W

A large number of specialists flexibly provide medical care in response to the aging society

We perform activities such as diagnosis and treatment of neurodegenerative disease and dementia, which are expected to increase in the aging society, and stroke, which is one of the three major causes of death.

### Medical Care System

More than 35 neurology specialists in our department provide medical care in the general outpatient clinic and specialized outpatient clinic and inpatient medical care. We provide accurate diagnosis and better treatment by utilizing techniques, such as the most advanced imaging devices, and various biopsies and electrophysiological technologies in which we have made extensive achievements.

### Target Disease

Alzheimer's disease, dementia, Parkinson's disease, amyotrophic lateral sclerosis, bulbospinal muscular atrophy, spinocerebellar degeneration, multiple sclerosis, Guillain-Barre syndrome, myasthenia gravis, polymyositis, facial spasm, epilepsy, headache, dizziness, and numbness.

### Strong Fields

Diagnosis and treatment of neurodegenerative disease such as dementia and Parkinson's disease using three-Tesla MRI, PET, and SPECT. Diagnosis and treatment of diseases such as peripheral nerve disease, muscular disease, spinal cord disease, and amyotrophic lateral sclerosis using biopsy, electrophysiological tests, and genetic testing.

### Clinical Results

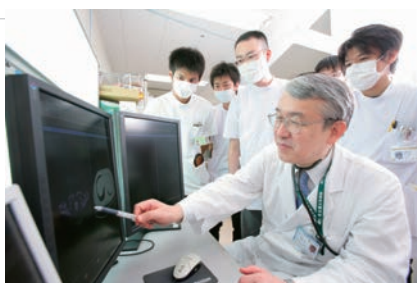
The annual number of outpatients: About 22,000; the annual number of new patients (only those with neurological disease): 1,032; the annual number of inpatients: 426.

### Specialized Outpatient Clinic

We provide medical care in specialized outpatient clinics for bulbospinal muscular atrophy, amyotrophic lateral sclerosis, Parkinson's disease, and dementia. In addition, we are actively involved in the second opinion outpatient clinic.

### Advanced Medicine and Research

A clinical study of leuporelin in patients with bulbospinal muscular atrophy, a nationwide multi-center prospective cohort study in patients with amyotrophic lateral sclerosis (JaCALS), high-dose gamma globulin therapy and plasma exchange therapy for various intractable immunologic diseases, etc.



## Thoracic Surgery

**Director** YOKOI, Kohei (Professor)

3E

Extensive achievements to provide relief in diseases including lung cancer

Our department specializes in surgical treatment of thoracic malignant tumor (e.g. lung cancer) and benign disease (e.g. pneumothorax).

### Medical Care System

10 full-time doctors (including seven thoracic surgery specialists) provide medical care. Outpatient days are Tuesday, Thursday, and Friday. Surgery days are Monday, Wednesday, and Friday. Treatment strategies for patients are discussed and determined every Friday at the joint conference of Respiriology, Surgery, and Radiology.

### Target Disease

Main target diseases are thoracic malignant tumor such as primary lung cancer, metastatic lung cancer, pleural mesothelioma, and thymoma. Non-neoplastic benign diseases such as myasthenia gravis requiring thymectomy, inflammatory lung disease, pyothorax, pneumothorax, chest injury, and congenital pulmonary malformation are also our target diseases.

### Strong Fields

We have safely and successfully performed surgeries in patients with locally advanced lung cancer and malignant pleural mesothelioma, which require specialized perioperative management, and in patients with severe comorbidities (e.g. chronic obstructive pulmonary disease, heart disease, diabetes, and dialysis).

### Clinical Results

The total annual number of surgeries in 2012 was 333 (188 patients with lung cancer, 44 patients with mediastinal tumor, 46 patients with metastatic lung tumor, seven patients with malignant pleural mesothelioma, 48 patients with other diseases; there was no patient who died during surgery). More than half of the surgeries were performed for lung cancer.

### Specialized Outpatient Clinic

Although we do not have specialized outpatient clinics, our department is characterized by extensive experience in treatment of diseases, especially in lung cancer, malignant pleural mesothelioma, and advanced invasive thymoma. We welcome patients seeking second opinions.

### Advanced Medicine and Research

We conduct various basic research and clinical studies to establish new evidence. Currently, a phase II study of postoperative adjuvant chemotherapy and clinical studies on topics such as investigation of limited surgery for early-stage lung cancer and that of multi-modality therapy for malignant pleural mesothelioma are ongoing.





## Cardiac Surgery

**Acting Director** USUI, Akihiko (Professor)

3E

We protect your heart with our 24-hour-available team medical care system

We annually perform about 250 surgeries for acquired heart disease and thoracic aortic disease.

### Medical Care System

We provide 24-hour quick response service with our team medical care system consisting of 15 staff members; an on-duty doctor is always available both during the day shift and the night shift.

### Target Disease

Valvular heart disease (aortic stenosis / regurgitation, mitral stenosis / regurgitation), ischemic heart disease, thoracic and thoracoabdominal aortic aneurysm, adult congenital heart disease, and arrhythmia.

### Strong Fields

Aortic arch surgery and thoracoabdominal aortic surgery requiring protection of the brain and spinal cord, hybrid operations involving aortic aneurysm stent graft, mitral valve repair and aortic valve sparing operation, CABG using arterial grafts (especially off-pump coronary artery bypass graft not using an artificial heart-lung machine), maze operation for atrial fibrillation, and auxiliary artificial heart treatment for severe heart failure.

### Clinical Results

We perform about 300 surgeries of cardiac and thoracic major vessels including surgeries for cardiac valvulopathy in about 80 patients, coronary artery bypass surgeries in about 100 patients, and surgeries of the thoracic aorta in about 100 patients. The surgical mortality rate of 1,172 patients undergoing surgery in the last five years is 1.7 %.

### Specialized Outpatient Clinic

Monday through Friday: acquired heart disease and aortic disease  
1<sup>st</sup> and 3<sup>rd</sup> Thursday: pacemaker clinic

### Advanced Medicine and Research

We use a ventricular assist device for severe heart failure, and perform hybrid therapy for thoracic aortic aneurysm combining blood vessel prosthesis implantation with stenting.



## Plastic and Reconstructive Surgery

**Director** KAMEI, Yuzuru (Professor)

9W • 9E

We make efforts as a team for the future of patients

Our department makes efforts to correct various conditions, whose appearance is different from normal because of reasons such as tumor and injury, to as close to normal as possible.

### Medical Care System

Our department, consisting of one professor, one associate professor, one lecturer, two assistant professors, and three doctors, aims to provide more advanced and safer medicine. We provide team medical care: we hold a conference for each patient including new patients to determine therapeutic options.

### Target Disease

We mainly perform reconstructive surgery including reconstruction after malignant tumor resection, abnormality of ears, hands and feet, cleft lip, funnel chest, reconstruction after injury, birth mark, keloid, scar, ptosis, umbilical hernia, microtia, and absent breast. We also perform plastic surgery for the improvement of QOL.

### Strong Fields

Reconstruction using microsurgery after malignant tumor resection or injury, delayed healing of surgical wound or after injury, intractable ulcer including intractable ulcer associated with diabetes, microtia, congenital anomaly of hands and feet, funnel chest, breast reconstruction, etc.

### Clinical Results

Yearly we perform 140 or more reconstructions after tumor excision, especially those using microsurgery, with a success rate of 98%. We have performed treatment including reconstruction of intractable ulcer in a large number of patients and achieved excellent results.

### Specialized Outpatient Clinic

We have outpatient clinics such as a tumor outpatient clinic, intractable ulcer outpatient clinic, pediatric plastic outpatient clinic, endoscopy outpatient clinic, and breast outpatient clinic. We also provide second opinions.

### Advanced Medicine and Research

Even if there are no satisfactory blood vessels of the graft bed near the defect, we can safely perform microsurgery by vascular anastomosis at two sites using omentum. In addition, we perform cultured skin grafting and conduct research on regenerative medicine.



## Pediatric Surgery

**Director** UCHIDA, Hiroo (Professor)

5W

We actively make efforts to treat pediatric surgical diseases

Our department was established as a study group in 1968 and became an independent department recently (1997); currently, it is the only graduate course in the Tokai area.

### Medical Care System

A total of five staff members (one professor, one associate professor, one lecturer, two assistant professors) perform about 400 surgeries (50 are for neonates) a year and have 15 beds to provide medical care to patients. Outpatient days are Monday, Wednesday, and Friday.

### Target Disease

Biliary atresia, congenital biliary dilatation, congenital esophageal atresia, gastroesophageal reflux disease, congenital intestinal atresia, Hirschsprung's disease, anal atresia, bullous lung disease, tracheal stenosis, neuroblastoma, hepatoblastoma, lymphangioma, inguinal hernia, umbilical hernia, and cryptorchism.

### Strong Fields

In addition to medical care for hepatobiliary diseases such as biliary atresia and congenital biliary dilatation, we actively provide the latest medicine such as partial liver transplantation from living donors and endoscopic surgery. We also treat patients with neonatal surgical disease and pediatric malignancy in cooperation with other departments and have provided medical care to an extensive number of patients.

### Clinical Results

The number of surgeries in 2012 was 390, of which 47 were performed in neonates. The number of surgeries for biliary atresia in the last 10 years is 54; bilirubin reduction rate: 80%. The number of pediatric liver transplantations is 49; the survival rate is 89.8%. 168 patients had congenital biliary dilatation. The annual number of endoscopic surgeries such as gastroesophageal reflux disease and Hirschsprung's disease is 36.

### Specialized Outpatient Clinic

We provide consultation for issues such as hepatobiliary disease, laparoscopic and thoracoscopic surgery, and treatment of pediatric tumor in which extraction seems difficult to perform, in the outpatient clinic on Monday, Wednesday, and Friday. We accept patients in the second opinion outpatient clinic as needed.

### Advanced Medicine and Research

We gain Grant in Aid for Scientific Research and the Ministry of Health, Labour and Welfare group research fund about twice a year for activities such as research on the mechanism of biliary dilatation for congenital biliary dilatation, research on the mechanism of protein plug formation associated with the development of pain in congenital biliary dilatation, bile duct cell culture, and the development of the artificial organs.



## General Medicine

**Director** BAN, Nobutaro (Professor)

11W

The department where patients can seek for help whenever they are not sure which specialties are appropriate

Our department provides comprehensive medicine, which takes into consideration the physical and mental aspects of patients, patient's family, and society.

### Medical Care System

10 academic personnel (including academic personnel of center for medical education, department of education for community-oriented medicine, and department of community health care system development), five doctors, one senior resident, four registered trainee doctors, and five health care providers provide medical care every day to patients in two to three revisit outpatient examination rooms and three to four first-visit outpatient examination rooms and eight inpatients beds.

### Target Disease

We provide medical care to patients for whom a certain department cannot be specified. If a patient needs to see a specialist, we refer the patient to a specialized department. We also accept consultations from specialized departments.



### Strong Fields

We identify various health problems of patients, interpret them comprehensively, and finally solve them. We consider prevention, medicine, and welfare as a continuum and are involved in each component.

### Clinical Results

The daily number of revisit outpatients is about 60, and the daily number of first-visit outpatients is 15 to 20. For inpatient medical care, we are in charge of around eight beds and see two to five patients as a consultant. We also provide support for emergency department visits during operating hours by seeing walk-in emergency patients. We accept about 30 consultations from other departments a month.

### Specialized Outpatient Clinic

We do not have outpatient clinics for specific diseases and organs. An outpatient clinic for treatments using mainly Chinese medicine is held on Thursday mornings.

### Advanced Medicine and Research

We conduct various researches such as research on education, research on medical care, and epidemiological research. What is common among these researches is that it is based on questions and the needs arising in clinical settings or medical education.





## Rheumatology

**Director** NISHIDA, Yoshihiro (Extraordinary Professor)

8W

Diversified actions include providing information on the treatment of rheumatism

We treat patients with rheumatic diseases that cause damage to motor organs such as joints.

### Medical Care System

We perform surgical therapy and drug therapy for patients with rheumatic diseases. In addition, our department is one of the few facilities that are committed to the treatment of hemophilic arthropathy, and we safely perform surgeries in cooperation with Hematology Department. We cooperate closely with departments such as Respiriology, Nephrology, and Gastroenterology and are ready to manage complications and adverse drug reactions.



### Target Disease

Rheumatoid arthritis (about 1,000 registered patients) and hemophilic arthropathy (three to five surgeries per year).

### Strong Fields

We aim at minimally invasive and precise surgery and actively perform surgical therapy. For drug therapy, we basically use methotrexate and actively use biologic drugs as well. In addition, we make comparisons with inflammatory markers, bone metabolic markers, and so forth, and utilize the findings for a better understanding of the pathology and to establish treatment strategies.

### Clinical Results

We perform implantation of joint prosthesis in 60 patients a year and use biologic drugs in about 400 patients a year. To provide information on advancements in treating rheumatism, we launched a rheumatism network and hold study meetings and open lectures.

### Specialized Outpatient Clinic

Rheumatism outpatient clinic and hemophilia outpatient clinic.

### Advanced Medicine and Research

We actively conduct clinical studies for drug development; we are conducting clinical studies for the development of five antirheumatic drugs. We are focusing on cartilage matrix and elucidation of the pathology of joint destruction, and expect to develop new methods of treatment.



## Hand Surgery

**Director** HIRATA, Hitoshi (Professor)

8W

The latest treatment and research and development specialized on the hands based on high expertise

We specialize in the treatment of conditions such as musculoskeletal disorders of the upper limbs including the shoulder girdle and hands, injury, nerve paralysis, circulatory disorders, and congenital malformations.

### Medical Care System

Six doctors who specialize in diseases and injuries of the upper limbs provide medical care in the specialized outpatient clinic five days a week and perform about 400 surgeries a year. While holding conferences with doctors, four occupational therapists perform post-treatment adapted to each patient.

### Target Disease

Fractures and dislocations, tendon and ligament injuries, work-related upper limb diseases, sports injuries, entrapment neuropathy, traumatic nerve injury, spastic hand, joint diseases and contracture of the upper limbs, quadruple amputation, osteoarticular infection, circulatory disorders and aseptic bone necrosis, tumors, and neoplastic lesions.

### Strong Fields

Treatment of intractable osteoarthritis of the upper limbs, paralysis due to a peripheral nerve disorder, hand reconstruction and treatment of pain, contracture removal and musculoskeletal reconstruction for contracted hands, treatment of circulatory disorders of the upper limbs, minimally invasive surgery for small joint disorders, congenital anomaly, and functional reconstruction of hands.

### Clinical Results

We are committed to minimally invasive surgery utilizing endoscopy and operating microscopes, and we have performed more than 1,000 endoscopic wrist surgeries, which is an outstanding number in Japan. We introduce the latest treatment techniques for the treatment of peripheral nerve palsy as well.

### Specialized Outpatient Clinic

We provide medical care in the specialized outpatient clinic from Monday through Friday. There are six exclusive doctors, and we accept referred patients in and outside of Aichi Prefecture.

### Advanced Medicine and Research

We perform functional reconstruction of upper limbs using composite tissue transplantation. In the field of research, we promote the development of materials for the treatment of peripheral nerve disorders, artificial bone, materials for the treatment of fractures, and upper limb rehabilitation supporting devices. One patent were approved during the past three years, and six patents are pending.



## Child and Adolescent Psychiatry

**Director** OZAKI, Norio (Professor)

2E

Our goal is to help children with mental health issues and find a promising future

We perform diagnosis and treatment of developmental disorders and emotional disorders in children 18 years old or younger with the goal of improving their mental health.

### Our System of Medical Care

To ensure sufficient time for consultation and interviews, we have implemented a reservation only system for new and returning patients. Patients making their first visit are required to make an appointment via telephone with the outpatient clinic of our department.



### Target Disease

We provide medical care for developmental problems in infancy such as retardation in language and development, hyperactivity, poor adaptation to peer groups, and inability to establish a good relationship with peers about the same age as well as psychological problems in childhood and adolescence such as the inability to go to school or eat normally.

### A Strong Clinical Knowledge

Our staff members have a strong clinical knowledge of developmental and emotional disorders which occur in the life stages from infancy to adolescence. We perform multidimensional treatment consisting of pharmacotherapy, psychotherapy, and the like. We also conduct evaluations using measures such as psychological tests. Our staff maintain a vigorous interest in the current state of research and modern therapies for the complete range of issues facing our patients.

### Clinical Results

To address the increasing incidence of children's mental problems, we provide the latest treatment mainly on an outpatient basis. In addition, we are actively cooperating with mental clinics and hospitals where children's mental problems are handled.

### Advanced Medicine and Research

While investigating the best diagnosis and treatment methods at present, our basic policy is to seek to identify the pathology and develop treatments and preventive methods based on the pathology identified. In order to translate the latest advances in knowledge about children's mental problems into clinical practice, we keep our medical staff trained to the highest medical level.



## Department of Clinical Laboratory

**Director** MATSUSHITA, Tadashi (Professor)

We aim to make further improvements to support safer and higher-quality medical care

Our department consists of doctors and clinical technologists. We aim to support the most advanced medical care as a clinical laboratory department of a university hospital, which is responsible for providing highly advanced medical treatment, to respond to the demand of the staff working in clinical settings, and to quickly perform lab tests any time as patients demand.

### Operation System

We accept requests for tests made off-hours (nights and holidays) as well as requests made in the day shift of weekdays, and we provide real-time (quick) reporting of all tests except for special tests or outsourced tests. We aim to report the test results of inpatients before the doctor's round and to report the test results of outpatients before consultation. The physiology laboratory provides safe and high-quality medical services. In May 2009, we moved the opening time of the central blood sampling room back 30 minutes to 8:00 a.m. to shorten the waiting time for blood sampling.



### Scope of Medical Services

In addition to laboratory tests such as general tests, hematology, chemistry, immunology and serology tests, gene tests, and bacteriology, we conduct physiologic tests such as circulatory tests, respiratory tests, and neurophysiological tests.



### Features

We have introduced an internationally standardized clinical test method and promptly report accurate results, using high-precision autoanalyzers, for the staff working in clinical settings. The physiological laboratory provides patients with safe and high-quality medical care using the latest high-performance medical devices.

### Other Undertakings

We considered that it is our greatest responsibility to provide higher-quality medical care to patients, aimed to make further improvements, and obtained ISO15189 certification (a certification given to laboratories that meet the criteria of "Medical laboratories - Particular requirements for quality and competence") in fiscal year 2009.



## Department of Surgical Center

**Director** KAMEI, Yuzuru (Professor)

We provide high-level and advanced surgical medicine while ensuring safety

In a comfortable environment, we provide high-level and advanced surgical medicine required for university hospitals while ensuring utmost safety.

### Medical Care System

We have enough staff to perform 12 or more surgeries under general anesthesia and several surgeries under local anesthesia simultaneously almost all the time from 8:30 a.m. to 6:00 p.m. five days a week. Furthermore, we are always ready to provide medical care for emergency surgery at night or on holidays as well. Our staff members consist of four academic personnel of the Department of Surgical Center, and operations are conducted through cooperation among the staff of the Department of Anesthesiology and of various sections of surgery, and nurses working in the operating rooms.

### Scope of Medical Services

We perform almost all types of surgery, including liver transplantation, implantation of ventricular assist devices, da Vinci surgery, and awake craniotomy. In addition to performing sophisticated and advanced surgeries, which is a characteristic of university hospitals, we have recently been performing an increasing number of surgeries for more common conditions, meeting the needs of the community.

### Strong Fields

Our department is equipped with a facility where MRI can be performed to detect remnant tumor during surgery, a facility with which radiation can be administered in the operating room during surgery, and so forth. In addition, our department has multiple operating rooms where various endoscopic surgeries, which have been increasing recently, and robot-assisted surgeries can be performed.



### Clinical Results

The number of surgeries has been increasing yearly; we performed about 7,750 surgeries in fiscal year 2011 and 7,995 in fiscal year 2012.



### Advanced Medicine and Research

Our facilities for intraoperative MRI scanning and intraoperative radiation are outstanding. The endoscopic surgery assisting robot "da Vinci" was introduced in March 2010. These robots are now used in the Urology, Obstetrics and Gastroenterological Surgery Departments.





## Central Block of Radiology

**Director** NAGANAWA, Shinji (Professor)

### Safe and advanced diagnostic imaging and radiation therapy

Using the latest medical devices and team medicine, we perform safe and advanced diagnostic imaging tests and radiation therapy.

#### Medical Care System

The department consists of one director (professor), one vice director (associate professor), one assistant professor, two clinical assistant professors, six doctors, 57 radiation technologists, 20 nurses, and four administrative staff. Radiologists join this team and cooperate with doctors and nurses in each clinical department.

#### Scope of Medical Services

Diagnostic imaging tests such as general X-ray photographs, angiograms, GI series, CT, MRI, nuclear medicine studies such as scintigraphy, SPECT, and PET and radiation treatment such as linear accelerator, and encapsulated sealed radioactive source.

#### Features

The latest medical devices such as three-Tesla MRI and SPECT/CT are introduced in clinical divisions including image diagnosis, nuclear medicine, and radiation treatment.

#### Clinical Results

General X-ray photographs (simple) 128,226 cases, general X-ray photographs (contrast radiography) 6,269 cases, angiogram 2,483 cases, CT 44,230 cases, MRI 20,852 cases, radioisotope examination 5,735 cases, mammary gland and thyroid ultrasound 4,189 cases, bone mineral measurement 1,391 cases, radiation treatment 20,420 (in fiscal year 2012)

#### Advanced Medicine and Research

The department is working on the development of advanced medicine such as clinical imaging using high field MRI, high precision radiation treatment, novel nuclear medicine diagnostic method, as well as our presenting research results at domestic and international academic conferences or in papers.



## Department of Medical Supplies

**Director** GOTOH, Momokazu (Professor)

### Supply and control for safer and more reliable medical equipment

Serving as administrator of the medical devices used in the hospital to provide a safer and more reliable medical environment.

#### Operation System

The management system was revised in April 2010, with the objective of centralized management of the purchase, sterilization and conveyance of medical equipment and disposable medical products; bringing transparency to areas in the management system following purchase that are inadequate and to the selection of equipment; ensuring proper management of medical equipment and disposable medical products, and optimizing investment in facilities. The organizational system of the medical supply department consists of managing the sterilization of medical devices, and managing endoscopes, disposable medical products, SPD (supply, processing, distribution), medical equipment and materials (MDI activities).

#### Scope of Medical Services

- (1) Supervise the central medical supply department in their cleaning, assembly and sterilization of medical equipment and devices, and the endoscope cleaning department in their cleaning, sterilization and management of endoscopes. Give advice and provide guidance to ensure proper management of sterilized equipment.
- (2) Hold meetings of the materials committee to discuss fair purchasing of medical equipment and disposable medical products, and proper use thereof.
- (3) Submit proposals to the steering committee on the medical supply department in the event of purchasing durable medical equipment to enable all related departments to discuss the adjustment and effective utilization of equipment. Also, submit the views of the medical supply department to the management meeting.
- (4) Centralized management of purchase, supply, conveyance, usage, lot numbers, etc. of all disposable medical products and pharmaceuticals through the operational management of SPD (Supply, Processing and Distribution).
- (5) Collect information on all medical equipment used in the hospital through MDI (Medical Device Information) activities, inform relevant information to all related departments in the hospital, and make necessary requests to relevant departments to address the related information. Reports on the status of measures are received and information on related medical equipment is collected and publicized.
- (6) In addition to the steering committee of the medical supply department and material committee, to ensure smooth operation, meetings of the steering committees on endoscope management, SPD, and medical equipment sterilization are also held.

The objective of the medical supply department is to enhance the quality and safety of our medical care, and achieve a stable management basis through the above activities.



## Department of Blood Transfusion Service

**Director** MATSUSHITA, Tadashi (Professor)

### Aiming at opening doors to medical staff in various fields

The department consists of two full-time doctors, one part-time doctor, four clinical technologists, and one resident nurse. Any time we, Department of Blood Transfusion Service, open a door for every medical staff in various fields.

### Scope of Medical Services

Accept transfusion orders and prepare blood for blood transfusions, examination required for transfusion, collection and storage of stem cells required for cell therapy, collection and storage of autologous blood donation of preoperative patients, and other various kinds of consultation for blood transfusion therapy.

### Features

The department provides guidelines for the administration of blood product for preventing severe bleeding during surgery, as well as providing storage for peripheral blood stem cells, mononuclear cells, or blood platelets against clotting abnormality including DIC by consultation or apheresis.

### Undertakings

Promoting proper use of blood products through consultation for blood transfusion therapy, and reducing amount of preparations (especially, fresh frozen plasma and blood platelets). Promoting the conversion of unused blood product, and planning to largely reduce dispose of preparations.

### Advanced Medicine and Research

As part of advanced regenerative medicine, sampling and storage of (peripheral blood or bone marrow origin) stem cells for immune cell therapy and revascularization therapy. In addition, prepare autoserum for self-tissue culture during implant treatment.



## Department of Pathology and Laboratory Medicine

**Director** NAKAMURA, Shigeo (Professor)

### Accurately providing pathological diagnosis indispensable for diagnosing diseases

As a pathological diagnosis center, we provide reliable, safe medical services through an accurate and high-quality pathological diagnosis.

### Medical Care System

The department consists of five full-time doctors and two part-time doctors (including seven doctors specialized in Clinical Pathology certified by Japanese Society of Pathology, two doctors specialized in cytodiagnosis certified by Japanese Society of Clinical Cytology), nine medical technologists (including five cyto-screeners), and four administrative staff.

### Scope of Medical Services

The department performs a pathological diagnosis by observing tissues through a microscope during a biopsy, operation, or cytological examination. A pathological diagnosis is indispensable for diagnosis of a disease and provides important information for decision on a treatment policy or prognostic. An autopsy of a patient, who sadly passed away, not only reveals the whole aspect of disease but also affords clues for new developments in medical treatment.

### Strong Fields

The department performs as many as 1,000 intraoperative rapid diagnoses annually. An intraoperative rapid diagnosis is a pathological diagnosis of a sample collected during an operation over a short period of time to provide new information, and to use that information to make a decision on treatment policy.

### Clinical Results

About 14,000 histological assessments, about 12,000 cytological diagnoses, and 33 autopsies were performed last year. We accept a second opinion diagnosis of sample diagnosed in other facilities to provide equal standards of medical care.

### Advanced Medicine and Research

The department diagnoses and researches rare diseases such as hematopoietic tumors including malignant lymphoma.





## Department of Emergency and Critical Care Medicine

**Director** MATSUDA, Naoyuki (Professor)

An emergency medical care system that enables patients to receive safe and secure treatment

Provision of the best possible medical services to patients ranging from primary to tertiary emergencies in cooperation with all clinical departments, with a focus on specialist physicians at the Emergency Department. We deal with patients in serious conditions who need urgent care.

### Medical Care System

An emergency outpatient clinic is operated around the clock according to instructions by specialists working at the Emergency Department. For patients in a serious condition who require urgent care, we conduct triage and provide medical care on the basis of priority.

### Target Disease

Our department handles all emergency cases from walk-in primary patients to tertiary patients in a serious condition transported by ambulance. Our treatment policy is that in principle we do not refuse any emergency patients who have consulted us before.

### Features

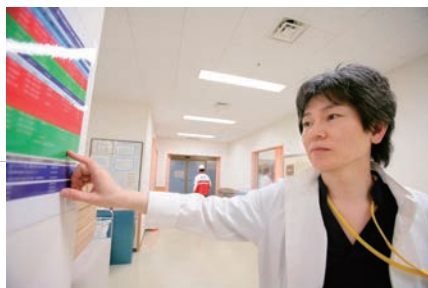
Emergency medicine supervising doctors and specialists are stationed around the clock in the emergency outpatient clinic, preparing for every kind of medical emergency. In addition, we have introduced an on-duty system in every medical department to seek medical care in each specialized field. Patients in a serious condition are then dealt with at the ICU of the Emergency Department or one of the various sections of the Internal Medicine Department.

### Clinical Results

The number of emergency patients totaled 11,901 in fiscal year 2012. The department collaborates on pre-employment and in-service training for emergency medical technicians. As a disaster base hospital, it is actively preparing for major disasters.

### Other Undertakings

Even if a patient develops a medical emergency that is different from their regular medical problems, they can visit the Emergency Department so that we can provide specialized emergency care. This system allows patients to receive treatment at an appropriate specialized medical department in case they can be dealt with there.



## Surgical Intensive Care Unit

**Director** KAINUMA, Motoshi (Clinical Professor)

Providing the world's highest standard of medical services in a completely closed ICU system

The department provides multimodality and cross-sectional Systematic control and medical care services to all patients with severe diseases from a diagnostic, therapeutic and nursing aspect.

### Medical Care System

Our ICU has a completely closed system, in which doctors are exclusively stationed in the ICU for 24 hours under the direction of anesthesiologists where they hold conferences in the morning and the evening and provide medical care around-the-clock with support from specialized clinical departments. The nursing staff ratio is one to two nurses per patient.

### Target Disease

The department implements systemic controls, such as artificial respiration control, circulatory management, infection control, and nutrition management; after highly invasive cardiac surgery, great vessel surgery, abdominal surgery, and any other major surgical operations; or for patients with multi-organ disorders and severe infections.

### Features

Among hospitals affiliated with national university medical schools, a completely closed ICU system is rare, and we achieve the highest level of medical care. Doctors and nurses work to improve safety management and service quality and promote advanced medicine.

### Clinical Results

In fiscal year 2012, we received 1,246 patients and the death rate was 1.77%. We actively accept severely-ill surgical outpatients and inpatients.

### Other Undertakings

The department aims to provide medical services compliant with world standards. By introducing Evidence-Based Medicine (EBM), we eliminate ad hoc medical services. In addition, working closely with the Medical and Emergency Intensive Care Unit, we are developing therapies for refractory diseases as a university hospital ICU.





## Emergency and Medical Intensive Care Unit

**Director** MATSUDA, Naoyuki (Professor)

Covering all critical care, a complete attending physician system during the acute phase

The Emergency and Medical ICU (EM-ICU) responds swiftly to acute clinical conditions and provides advanced acute-phase management. In addition to dealing with patients transported in an emergency and treating primary conditions of inpatients in such areas as internal medicine and pediatrics, we provide basic management, such as reduction of systemic inflammation, acceleration of regeneration, infection control, and nutritional management, to ensure appropriate management and prevent multiple organ failure.

### Medical Care System

EM-ICU has 10 beds in total. Open seven days a week, the department is staffed by emergency medicine specialists and ICU specialists. It is a highly independent, completely closed ICU. A full-time doctor specialized in emergency medicine / ICU is assigned as the attending physician for each patient in the ICU. This helps to provide acute-phase medical services with treatment policies defined by the team. Professors, associate professors, lecturers and assistant professors give appropriate guidance to the attending physicians.

### Target Conditions

The ICU provides treatment to adults and children with conditions requiring acute-phase systemic management, such as disturbed consciousness or coma, acute respiratory failure or acute exacerbation of chronic respiratory failure, shock, acute drug intoxication, serious metabolic disorder (e.g., hepatic or renal dysfunction, diabetic ketoacidosis or environmental disorder), multiple trauma, postresuscitation encephalopathy and severe sepsis.

### Features

Our results in treating systemic inflammatory response syndromes such as sepsis and disseminated intravascular coagulation syndrome are far better than the world average, and the ICU is staffed by personnel highly skilled in acute-phase management and handling of all of the abovementioned acute clinical conditions systemically and comprehensively from multiple perspectives.

### Clinical Results

The ICU opened in May 2011. The number of beds was increased to six on June 1, 2011 and to ten on October 1, 2011. The ICU is designed to handle more than 500 urgent cases in serious conditions a year.

### Specialized Outpatient Clinic

At the Emergency and Medical Intensive Care Unit, we run a rapid response system in case of an acute deterioration of patients, by immediately detecting such condition and promptly transferring the patient to our unit.

### Other Undertakings

We provide state-of-the-art acute-phase treatment, which is strength of university hospitals. We understand the global level of evidence-based medicine (EBM), and possess world-leading knowledge about refractory cases. Clinical research on such treatments is carried out after obtaining approval from the Ethics Committee and informed consent from the patients. Our hospital is internationally-renowned for collaboration with other institutions inside and outside the country in the field of intensive care.



## Department of Blood Purification

**Director** TSUBOI, Naotake (Lecturer)

Undertaking blood purification therapy that responds to the increasing demand

The department takes charge of the hospital's blood purification therapy in collaboration with the ICU.

### Medical Care System

There are 10 beds in the department. The department is open on Monday, Wednesday, and Friday for a morning and afternoon shift, and Tuesday, Thursday and Saturday for a morning shift, which are handled by doctors, clinical technicians and exclusive nurses. Various blood purification therapies such as PE, DFPP, L/G-CAP in addition to HD/HDF are also performed. The specialist nurses also give guidance to outpatients on peritoneal dialysis (CHPD).

### Target Disease

Blood purification therapy is administered for diseases such as hemodialysis for patients with end-stage kidney disease, surgical perioperative dialysis of patients on maintenance hemodialysis, or acute kidney failure or hepatic failure due to medicine, an operation, auto immune disease or sepsis, inflammatory Crohn's disease, and diseases of the nervous system.

### Features

Only our hospital performs highly-specialized and advanced medical services protocol for ICU, cardiac surgery, organ transplantation, marrow transplant, cancer chemotherapy for severe infections, multi-organ failure, cardiovascular system, as well as for malignant diseases and acute blood purification for severe multiple complications.

### Clinical Results

Total number of cases: blood dialysis 2,200 sessions, plasma exchange 45 sessions, leukocyte reduction 160 sessions, and new dialysis patients totaled 50 (all numbers are approximate figures in 2012)

### Other Undertakings

The department started Tuesday, Thursday and Saturday shifts in May 2009 to meet the increasing demand. In October 2009, the department was renamed Department of Blood Purification. The department actively undertakes research on devices, medicines, and equipment relating to the total blood purification therapy, as well as establishment of safe dialysis for acute patients.



## Center for Maternal - Neonatal Care

**Director** HAYAKAWA, Masahiro (Clinical Professor)

4E

### Comprehensive support for the health of mothers and babies using advanced medicine

The Center performs obstetric medical care, reproductive medicine, intensive care for premature babies and sick newborn infants including high risk childbirth.

#### Medical Care System

Nine specialized doctors in the departments of obstetrics and reproductive medicine and 10 specialized doctors in the neonatal department provide medical care. Even at night and on holidays, specialized doctors are assigned to the respective departments, who perform emergent childbirth delivery procedures and operations, handle emergent hospital admission, and monitor severe newborn infants.



#### Target Disease

The Center targets high risk pregnancy (pregnancy induced hypertension, pregnancy complicated by maternal disorders, placenta praevia, fetal disorder, etc.), infertility (endometriosis, uterine fibroid, fertility-preserving and recovery treatment), premature / low birth weight infants, critical ill infants (neonatal asphyxia, newborn infants with surgical disease complications, etc.).

#### Strong Fields

Fetal abnormality, placenta praevia accreta, total assisted reproductive technique such as in vitro fertilization, microinsemination, monitoring of severe newborn infants using advanced medical technology such as extracorporeal membrane oxygenation or hypothermia.

#### Clinical Results

Recorded the following numbers of clinical cases in 2012: childbirth delivery (478 cases including 200 cases of caesarean operation); mother conveyance (59 cases); congenital abnormal fetus (60 cases); in vitro fertilization (120 ovum collection periods); embryo transfer (185 periods); newborn intensive care unit (NICU) hospital admission (265 cases); extremely low birth weight infant (13 cases); and congenital diaphragmatic hernia (10 cases).

#### Advanced Medicine and Research

Researching clinical conditions of placenta previa accreta, predicting severity of fetus' diaphragmatic hernia, continuously observing embryonic development using an incubator with a microscope and studying regeneration medicine using stem cells for perinatal brain damage.



## Center of National University Hospital for Infection Control

**Director** YAGI, Tetsuya (Professor)

### Special team for infection control & prevention and support for treating infectious diseases in Nagoya University Hospital

This department specializes in promoting cross-departmental nosocomial infection control and prevention activities and officially manages the Japan Infection Prevention and Control Conference for National and Public University Hospitals.

#### Medical Care System

We coordinate as the secretariat of the Japan Infection Prevention and Control Conference for National and Public University Hospitals. The infection control team consisting of ICDs (five Infection Control Doctors), ICNs (one Infection Control Nurse), one laboratory technician, two pharmacists, and one administrative staff collaborate in controlling health care-associated infections and supporting diagnosis and treatment of infectious diseases. We also vaccinate on an outpatient clinic basis once a week.



#### Target Disease

Surveillance against drug-resistant bacteria and various healthcare-associated infections, planning and implementation of infection control measures, consultation on cases of refractory infections, measures against occupational infections (prevention of needlestick injuries, blood exposure, vaccinations, etc.).



#### Features

Surveillance for drug resistant bacteria and device-related infections. Cross-sectional activities for planning and implementing infection control measures. Rapid feed back of clinical microbiological information to doctors in charge in cooperation with the microbiology laboratory. Working as a secretariat for Japan Infection Prevention and Control Conference for National and Public University Hospitals.

#### Clinical Results

Standardization in reprocessing endoscopes, vaccination outpatient clinic, infection control management for novel influenza and outbreak control of drug resistant bacteria, consultations for diagnosis and treatment of difficult-to-treat infectious diseases and support in the treatment for positive blood culture cases (about 900 cases annually).

#### Advanced Medicine and Research

Clinical and microbiological research on drug resistant bacterial infections and mycobacterial infections.





## Department of Endoscopy

**Director** GOTO, Hidemi (Professor)

Providing the ultimate level of medical services such as various endoscopic or ultrasonic examinations

Providing the ultimate level of medical services in cooperation with the five exclusive doctors (concurrent 10 doctors), four exclusive nurses (concurrent three nurses) and the Department of Clinical Laboratory.

### Medical Care System

Diagnosis and treatment using an upper endoscope; diagnosis and treatment using a lower endoscope, diagnosis and treatment using an endoscopic ultrasonography for the biliary tract and pancreatic disease and an external ultrasonic examination and treatment (treatment of hepatophyma) are conducted basally from 8:30 a.m. daily.

### Target Disease

Benign tumors (inflammation and ulceration, and so forth) and malignancy (carcinoma, sarcoma) of the stomach, esophagus, duodenum, small intestine, colon (upper and lower gastrointestinal tract), hepatocellular carcinoma, pancreatic tumors (pancreatic cancer and so forth), gallbladder neoplasm, biliary tract tumors, and so forth.

### Strong Fields

Endoscopic mucosal resection, endoscopic submucosal dissection for the early cancer of gastrointestinal tract, endosonography-guided fine-needle aspiration biopsy, transduodenal pancreato-biliary diagnosis.

### Clinical Results

Endoscopic examinations totaled about 9,600 cases in last year (upper part: 5,600, lower part: 2,800, gallbladder and pancreas: 1,000, small intestine: 270), of which endoscopic treatments accounted for about 1,400 cases. Ultrasonography and related treatments were performed for 5,700 cases annually. (results during the fiscal year 2012)

### Advanced Medicine and Research

Diagnosis of the digestive tract and clarification of physiological functions of the human body using capsule endoscopy, immune cell therapy of pancreatic cancer, somatoscopy of cell ultra-structure using a confocal endoscope, research on gene expression profiling using a small amount of biopsy material, and development of a new method of endoscopic treatment applying endoscopic treatment for digestive tract tumors (ESD).



## Department of Rehabilitation

**Director** NISHIDA, Yoshihiro (Extraordinary Professor)

Targeting early recovery through early rehabilitation

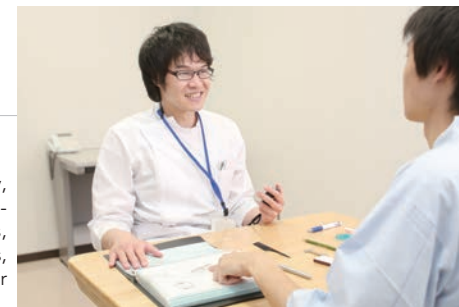
In principle, we mainly perform rehabilitation in the acute stage.

### Medical Care System

Two exclusive doctors  
22 physical therapists  
Four occupational therapists  
Three speech therapists

### Scope of Medical Services

The department conducts physical therapy, occupational therapy and eating / swallowing therapy for cerebrovascular diseases, motor system diseases, breathing problems, cardiac macrovascular diseases, and cancer patients.



### Strong Fields

The main task of the department is to respond to the needs for early rehabilitation after pathogenesis and operations. There is a high ratio of intractable neurological diseases, artificial joints after an operation, and postoperative hands.

### Clinical Results

2,739 registered patients started rehabilitation in 2012 (including cerebral vascular disturbance 25%, motor system diseases 23%, respiratory diseases 25%, cardiac macrovascular diseases 24%, and other 3%.

### Other Undertakings

Education for other departments in the hospital about transfer, falling, and so forth.



## Center for Advanced Medicine and Clinical Research

**Director** ISHIGURO, Naoki (Professor)

Center that explores new medical treatments to lead the next generation

We support the advanced medical development, practical studies on the collaboration between medical and engineering institutions, and the implementation of accurate and smooth clinical studies. We carry out exploitation of new medical treatments to lead the next generation. It is one of the missions of Nagoya University Hospital.

### Operation System

Under the direction of a director (concurrently assumed) and seven full-time faculty members, the Department of Advanced Medical Support is staffed by one researcher, six technologists, one in charge of information systems and another for intellectual property management. The Department of Clinical Research Support is staffed by five members for clinical trial examination and drug management, 23 clinical research coordinators, six data managers, three monitors and one medical writer. The Management Department is staffed by 13 administrators.



### Scope of Medical Services

The Department of Advanced Medical Support has the largest cell processing room in Japan. Its operations are conducted under strict control according to international standards of quality assurance. This department supports advanced medicine to provide essential health care involving new treatments, such as genes, cells, tissue culture. The Department of Clinical Research Support implements clinical tests accurately and smoothly in compliance with laws, ordinances and guidelines relating to clinical tests such as pharmaceuticals. Moreover, the Management Department conducts administrative tasks related to the program for training human resources in charge of clinical research, the progress management of seed technologies and supported projects, and cooperation with external organizations.

### Features

We support creating a protocol of a clinical trial, implementing a trial and analyzing data, by allocating teachers who are versed in data management and biostatistics. The Center works to protect trial subjects' rights, safety, and welfare, and support implementation of high-quality clinical trials while securing reliability of data, by following the ICH-GCP, which are international rules.



### Other Undertakings

This center conducts the "Translational Research Network Program" adopted in 2012 by the MEXT (Ministry of Education, Culture, Sports, Science and Technology) as well as the "Clinical Research Core Hospital Program" of the Ministry of Health, Labour and Welfare, thus improving and reinforcing the capacity to develop state-of-the-art and advanced medical technologies at Nagoya University.



## Department of Clinical Oncology and Chemotherapy

**Director** ANDO, Yuichi (Professor)

3W

Aiming at improvement the quality of chemotherapy

The department performs high-level outpatient pharmacotherapy for cancers that occur in all organs.

### Medical Care System

With the presence of specialists in cancer pharmacotherapy, we perform medical care through cooperation among doctors, nurses and pharmacists of various departments in order to improve the quality of cancer pharmacotherapy throughout the hospital. In addition to receiving advice from the staff of other clinical departments, we run special beds for inpatients.



### Scope of Medical Services

The department performs medical care in cooperation with other clinical departments specializing in organ-specific cancers, such as digestive organ, breast and lung cancers, and runs chemotherapy rooms for outpatients, acts as a palliative care team, arranges for chemotherapy regimens, conducts clinical trials of anticancer drugs, and provides medical staff training relating to chemotherapy.

### Features

We provide global-standard chemotherapy for patients with cancers that occur in all organs and palliative care for patients with cancer symptoms or side effects of treatment. We are also engaged in the development and clinical trial of new anticancer drugs, as well as education and enlightenment on cancer pharmacotherapy for people in various professions working inside and outside the hospital.

### Clinical Results

About 35 chemotherapy regimens per day are administered at the chemotherapy room for outpatients. The palliative care team has been responding to 240 requests in total between July 2006 and March 2013. Since 2009, the department has been entrusted with a total of 10 industry-sponsored clinical trials for registration.

### Specialist Outpatients

Palliative care



### Other Undertaking and Researches

The department serves as a Designated Cancer Hospital, and, for training, takes part in the Cancer Professional Training Plan, a program of the Ministry of Education, Culture, Sports, Science and Technology from an educational aspect. The department promotes the study focusing on the differences of the side effects of anticancer agents among different individuals.





## Department of Clinical Engineering

**Director** USUI, Akihiko (Professor)

### Rapidly responding to troubles with artificial respirators and operating room equipment

The department makes a profound study to provide safe and high quality medical services. This is our department's basic objective.

#### Operation System

Total of 23 members consisting of 13 full-time employees and 10 fixed-term employees provide support for circulatory and metabolic medical treatment and manage the controlling equipment. In addition, the department introduced 24-hour system so as to react in an emergency at night and on holidays.

#### Scope of Medical Services

The scope of business includes hemocatharsis, artificial heart lungs, cardiac catheter tests, pacemakers, and central management of ME equipment. In addition, the department supports the ward round checks of artificial respirators, or equipment trouble in the intensive care unit or operating rooms.

#### Features

The features of the department include many cases of cardiac surgery for large vessels using an artificial heart and lung apparatus, as well as supporting medical treatment by skillfully applying advanced medical equipment such as catheter ablation and a pacemaker, or implantable cardioverter defibrillator for circulatory system.

#### Medical Service Results

The department's medical treatment support in fiscal year 2012: hemoperfusion services (3,166 cases); artificial heart lung machine services (274 cases); percutaneous transluminal coronary angioplasty (200 cases); catheter ablation services (463 cases); pacemaker services (157 cases); and pacemaker follow-up services (2,131 cases).

#### Other Undertakings

The department positively participates in academic conferences or study sessions relating to hemocatharsis, extracorporeal circulation, and so forth, to collect information on cutting-edge medicine, in an effort to provide high-quality medical treatment support.



## Stroke Care Managing Center

**Director** MIZUNO, Masaaki (Clinical Professor)

### Enhancement of the quality of stroke care

The department targets to link together with medical institutions in the Tokai region using information technology and establishing stroke association medical care centering on the patients and citizens.

#### Operation System

The doctor in charge of stroke medical care plays a central role in establishing new diagnostic measures and medical treatment for strokes and verifying their effectiveness.

#### Scope of Medical Services

The center supports stroke medical care from both diagnostic and therapeutic aspects in related institutions and so forth, by operating a network integrating medicine and welfare supported by electronic engineering, establishes a stroke association medical care system, and strives to enhance the quality of stroke medical care.

#### Strong Fields

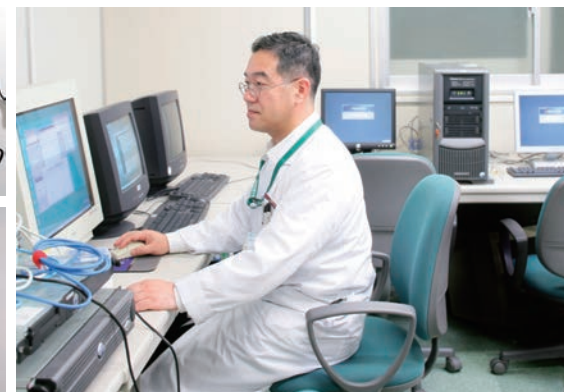
The center developed the standardization of medical information on an electronic basis (HL7, CDA, DICOM) and the technology of sharing (XDS) technology intended for the stroke medical field to demonstrate the effectiveness of the stroke association medical care system as a first in Japan.

#### Medical Service Results

The system for transmitting CT and MRI images to a cellular phone to support acute care for strokes has been utilized more than 1,500 times. In addition, the standardization and sharing of medical information developed by our center is becoming a Japanese national standard specification.

#### Other Undertakings /Advanced Medicine

NAGOYA-RHIE (Regional Health Information Exchange) of our center is highly evaluated from overseas and useful for constructing a Japanese version of EHR and System for Community General Support.



## Continence Information Center

**Director** GOTOH, Momokazu (Professor)

### Committing ourselves to the treatment of continence disorders

This center serves local communities by making full use of the expertise and human resources of Nagoya University with the aim of QOL improvement of elderly people through improvement in continence treatment.

#### Operation System

This center consists of two urologists (concurrent doctor) and one administrative staff member.

#### Scope of Medical Services

This center provides various services and operations for continence control improvement in collaboration with municipalities and commercial establishment (e.g., NPO Aichi Continence Care Society). The services and operations include workshops, open lectures, counsel through the Internet, and training of paramedical staff specializing continence care.

#### Strong Fields

This center provides promotion, training, information service, construction of local networks, and counsel regarding continence treatment.

#### Features

The following efforts are made by this center:

- Provision of information through website: <http://www.m-haisetsu.info/> (in Japanese)
- Building interactive consulting system
- Training of paramedical staff specializing continence care

#### Medical Service Results

This center has conducted the following services:

- Public lectures (once a year)
- Local workshops (about five times a year)
- Education and training of 206 Licensed Continence Nurses since 2004
- Publication of Guideline of Continence Care for the Elderly
- Internet counseling service (about 200 counseling)
- Continence care and control training workshop (once a year)

#### Other Undertakings

This center conducted the "Development of Care Site Evaluation Criteria and Local Models on Continence Rehabilitation for the Elderly at Care Site and Home" project, which is a "Comprehensive Research Project on Longevity Science" funded by the Ministry of Health, Labour, and Welfare (fiscal year 2005 to 2007: Prof. Goto's team). Moreover, the center created a local continence control model in cooperation with local comprehensive support centers, hospitals, elderly care facilities, home-visit nursing care service, and medical associations in Hekinan-city, Aichi Prefecture.



## Medical IT Center

**Director** ISHIGURO, Naoki (Professor)

### Supporting hospital operations through information technology and management

This center developed a comprehensive hospital information system (electronic medical records), which controls and manages total medical records in the hospital. This system is state-of-the-art system in Japan, so that patients' personal information is well protected and high-quality medical services are provided.

#### Operation System

This center was developed to controls and manages medical records with comprehensive hospital information system. The comprehensive control and management is conducted collaboratively with administrative divisions of IT System and the Medical Records.

#### Scope of Medical Services

Furthermore the development, control, and management of electronic medical records, the center promotes IT literacy of staff and enhances IT intelligence for research using clinical information.

#### Features

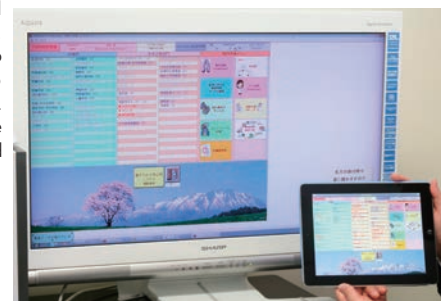
Our comprehensive hospital information system use an object-oriented database Caché, which is an advanced system in Japan and operate a large-scale, stable system. Integrating hospital information system and FileMaker, our comprehensive hospital information system covers large hospital operation.

#### Medical Service Results

Nagoya University Hospital was first to integrate operations between commercial software (FileMaker) and Hospital information system among national university hospitals in Japan. This enabled clinical information at each department to be successfully integrated. The center focuses on establish a three-layer hospital information system.

#### Other Undertakings

The center utilizes data entered in electronic medical records statistically using a clinical data warehousing system on a trial basis. Analyzing the data that may be beneficial to clinical applications, the center will help improve the quality of our medical services. Furthermore, the center aims to develop the CDSS (Clinical Decision Support system) and to create intelligent clinical information system.



## Center for Postgraduate Clinical Training and Career Development

**Director** UEMURA, Kazumasa (Professor)

Developing professional competencies of young doctors for their future

This center provides postgraduate medical training for young doctors and lifelong training for the hospital staff.

### Operation System

This center works together with the Center for Medical Education, which educates undergraduate medical students of Nagoya University. The section of postgraduate clinical training conducts training for medical and dental residents and the section of faculty development lifelong training for the hospital staff.

### Activities

Providing postgraduate clinical training for postgraduate doctors and dentists, this center supports the career planning of young doctors in Tokai region. The center also works together with the Nagoya University Clinical Simulation Center (NU-CSC), which provides an effective training environment and training programs for all staff of the hospital.

### Features

Together with the Center for Medical Education, as the headquarter for medical and clinical training, this center provides seamless education and training programs from undergraduate, postgraduate, up to lifelong for all medical staff of the hospital.

### Results

Lectures for the residents and workshops for the hospital staff were held periodically, and last year, 20 lectures and workshops were held with a total of 150 people attending. The Skills and IT Laboratory, which was the forerunner of the NU-CSC, was used by at least 1,000 groups (approx. 18,000 people) a year, which is the highest usage in Japan.

### Other Undertakings

As the 2008 fiscal year project by the Ministry of Education, Nagoya University Hospital conducts a medical specialist qualification acquisition support programs for young doctors' training in cooperation with seven university hospitals in the Tokai region (Tokai Career Support Program for Young Doctors). This program will help solve the shortage of doctors in the region.



## Community Liaison Center

**Director** KUZUYA, Masafumi (Professor)

Liaison with communities to focus on the quality of life of patients

This center supports liaison with communities in medical services, nursing, and social work.

### Operation System

This center has personnel from various fields: three doctors, six nurses, and seven medical social workers. Featuring cross-functional collaboration groups, the center provides various support programs that link hospitals and local communities. The major tasks of the center are:

- Supporting patients when they leave the hospital
- Acceptance of patient into the hospital
- Provide hospital information
- Consultations with patients
- Promotion programs for collaboration



### Scope of Medical Services

Local support nurses and medical social workers collaboratively provide coordination of homecare and transfer of hospitals to support patients when they leave the hospital. Hospital-to-Clinic Collaboration Group conducts administrative work on hospital-to-clinic collaboration and hospital-to-hospital collaboration (providing and accepting introduction). In addition, the center provides a wide range of counseling about cures, medical and welfare systems for cures, provides information on social resource utilization, and patient support.

### Features

To flexibly cope with functions required for local collaboration, this center employs a cross-functional structure that integrates various fields. Establishing a support structure that places importance on patients as living people and their quality of life is the center's goal.



### Medical Service Results

The number of patients who receive supports when discharging hospital has been gradually increasing, totaling 987 in fiscal year 2012. The number of registered doctors promoting collaboration among medical facilities in the community exceeded 1,600 as of March 2013. This center proactively holds lectures for registered doctors, workshops on community collaboration among multiple occupations, and in-house workshops on support for patients discharge.



### Other Undertakings

The center plans and hosts a variety of symposiums with the keywords of "local collaboration".



## Clinical Nutrition

**Director** OISO, Yutaka (Professor)

### Providing safe, delicious, and clinically beneficial food

This department aims at providing food paid attention to safety and catering with high quality patient service and engaging in clinically beneficial nutrition management for hospitalized patients.

### Scope of Medical Services

This department offers the following services:

- Nutrition management focusing on nutrition screening and nutrition management planning for inpatients
- Nutrition and dietary advice to inpatients
- Feeding service for inpatients

In addition to the above, the department provides dietary counseling and promotional education for outpatients.

### Operation System

This department participates in the nutrition support team (NST) and is involved in the operation of the NST. In a regular NST briefing, to increase the effects of medical treatment, a custom-tailored nutrition intervention based on the nutrition assessment is made for inpatients with nutritional risk.



### Features

This department provides high quality food-services featuring:

1. Selection menu
2. Food provision with face-to-face service at patients' cafeteria
3. Birthday menu for inpatients on their birthday (exclude some food)

### Medical Service Results

Dietary counseling is offered for individuals and group. In particular, dietary counseling for inpatients with diabetes in the Endocrinology and Diabetes ward includes practical programs such as dietary therapy lectures and cafeteria-style menu.

### Other Undertakings

This department proactively participates in the hospital-to-clinic collaboration programs that are funded by Chronic Kidney Disease (CKD) Local Collaboration System, Frontier of Renal Outcome Modifications in Japan. For outpatients with CKD, the department provides medical treatment and care in a collaborative manner with doctors and paramedical staff, and holds a kidney disease class on Saturday once a month.



## Transplant Coordination Service

**Manager** GOTOH, Momokazu (Professor)

### The basis for organ transplantation within the hospital, local clinics, and patient services

The department provides patients requiring organ transplantation with information and advice and serves as a liaison between the related departments in the hospital and with outside institutions.

### Operation System

Two full-time transplant coordinators (nurses) provide patients with physical and psychosocial care throughout the process, from initial consultation and waiting list, to hospital admission, surgery and medical care after discharge from the hospital, while working closely with related clinics and departments in the hospital and with local medical institutions.

### Scope of Medical Services

In addition to the above, another important role is to protect living donors (organ donors) and provide them with psychosocial care for life. For transplantation from brain-dead donors, which is now increasing, the department manages the conditions of patients waiting for donation in close liaison with local institutions. It also serves as a base for information when the donor is an inpatient of the hospital.



### Medical Service Results

At present, the hospital mainly handles liver, small intestine and kidney transplantations, and is considering handling transplantations of other organs in the future. The department also provides psychosocial care and consultation on the medical costs in cooperation with psychiatrists, clinical psychotherapists, and the Department of Social Service.

### Other Undertakings

We strive to establish the best system to address various issues regarding not only technical matters but also ethical, financial, and psychosocial aspects that arise during the period while the patient is waiting for a donor organ to when a donor is found and the patient undergoes the transplantation, and then while the patient is receiving lifelong care.





## Department of Hospital Pharmacy

**Director** YAMADA, Kiyofumi (Professor)

Solely in charge of management of the large quantities of medicines and drugs

The department consists of the director, five deputy directors, 13 team leaders, 56 pharmacists, 10 pharmacist residents, and four administrative staff members.

### Operation System

The department consists of a drug dispensing section, injection dispensing section, drug formulation sections (I, II and III), narcotic drug section, drug information section, medication record management sections (I, II and III), testing laboratory, drug affairs section, advanced medical drug support section, drug safety control support section, and administration office.

### Scope of Medical Services

The department purchases, prepares, formulates, and manages drugs; prepares infusion solutions and antineoplastic drugs; keeps control of narcotic drugs; and gathers and provides information on drugs. The department is also in charge of the operations of the pharmaceutical affairs committee, therapeutic drug monitoring (TDM), administration planning, medication guidance, checks for drugs brought to the hospital by inpatients, and medication guidance upon discharge from the hospital.

### Features

Upon request from the primary doctor or the patient, we provide guidance (pharmacist clinic) on inhalation therapy for bronchial asthma and use of warfarin and Aricept to help optimize the effectiveness and safety of drug therapies.

### Medical Service Results

Other support includes checking prescriptions for cancer chemotherapy, preparing antineoplastic drugs according to certified regimens (Department of Clinical Oncology and Chemotherapy), and testing drugs used for PET (Central Block of Radiology).

### Other Undertakings and Research

In our department, there are 32 pharmacists (board-certified pharmacists and pharmacy specialists certified by academic societies) and 17 doctoral degree holders. The Director for the Department of Hospital Pharmacy and one of five Deputy Directors for the Department of Hospital Pharmacy also teach at the School of Medicine and the Department of Neuropsychopharmacology and Hospital Pharmacy of the Graduate School of Medicine.



## Department of Nursing

**Director** MIURA, Masako

Aiming to provide safe nursing care that enables patients to feel a sense of security and trust

Respecting patients' rights and aiming to provide the possible highest-quality nursing services. Also, making various efforts to foster excellent nurses.

### Operation System

In order to build a sense of trust and security while respecting patients' rights, and to provide nursing care of the highest possible quality through united efforts by the entire organization, head nurses are assigned to respective wards, outpatient clinics, and the Clinical Laboratory and Examination Center. These head nurses include the Deputy Hospital Director, who is the chief of the Department of Nursing, six deputy chiefs of the Department of Nursing, the human resources chief, and head nurses respectively specialized in education, research, infection, safety and community support.



### Scope of Medical Services

The Department of Nursing of a university hospital, which provides advanced comprehensive medical services, should provide quality nursing. We therefore pursue higher levels of specialization and advancement to meet the changing needs of the times and communities in our operations for human resource management, administration, education, medical information processing, recruitment, nursing services, and safety. We promote collaboration with the community not only in the facilities, through the university hospital's practical knowledge and education.

### Features

This department has an in-depth training system that produces nurses with sophisticated skills, deep knowledge and a sense of hospitality through both practical and theoretical training. Since fiscal 2009, the department has been conducting post-graduation clinical training for new nurses, ahead of other hospitals throughout the nation. In fiscal 2012, the career development system using e-portfolio started, through which we systematically provide education that allows them to grow and develop as professionals. Since fiscal 2006, we have been working to revitalize the organization by always approaching nursing care from the viewpoint of customer service, through implementing goal management based on BSC in nursing administration.

### Medical Service Results

Certified nurse specialists and certified nurses who have advanced special knowledge and high-quality nursing skills, are working in a wide variety of areas in a cross-functional manner and striving to improve the quality of nursing care. The hospital conducts three in-house certification courses: the management course, the critical care course and the infection control course.



### Other Undertakings

We are creating a system to always respond to changes according to the needs of the times. In fiscal year 2010, the "Saving Life Nurse Fostering Plan" was adopted in the university reform promotion project by the Ministry of Education, Culture, Sports, Science and Technology, and efforts are being made to foster nurses who can accurately handle critical situations. In fiscal year 2011, we started reviewing the nursing system and international exchange with Asian countries.

## Department of Medical Technique

**Director** YONEDA, Kazuo

### Providing safe and high-quality medical services

This department aims at maintaining excellent personnel, flexibly responding to a variety of needs from the clinical side, providing safe and high-quality medical services (medical examination and treatment aid). Through these aims, the department built its solid foundation as a university hospital with advanced medical practices and services.

### Operation System

This department has five groups of specialists with medical technology certifications. The groups are:

- Clinical examination group: 64 medical technologists
- Radiology group: 57 radiological technologists
- Rehabilitation group: 22 physical therapists, four occupational therapists, three speech therapists, and 10 orthoptists
- Clinical engineering and dentistry group: 23 clinical engineers, one dental hygienist, one dental technician
- Special technological group: two medical technologists, two clinical engineers



### Scope of Medical Services

Medical technologists aid clinical examinations at the Department of Clinical Laboratory, Department of Pathology, and Department of Blood Transfusion Service. Radiological technologists play a role in image diagnosis examination, radiographic examination and radiation therapy at the Central Block Radiology. Physical therapists, occupational therapists, and speech therapists aid the rehabilitation of patients at the Department of Rehabilitation. Clinical engineers maintain the heart-lung machine during an operation and the dialysis machine during dialysis at the Department of Clinical Engineering.

### Features

The clinical examination group acquired ISO15189 accreditation in fiscal year 2009 to provide data based on international-level quality examination to doctors.

The radiology group introduces the most advanced medical equipment to provide the highest-quality diagnosis image and radiation therapy.

The rehabilitation group has provided its services on Saturday as well as weekdays since April 2009 to facilitate the recovery of patients.

In the clinical engineering group, skilled clinical engineers provide safe medical services with high-performance equipment.



## Administration Office

**Director** SHIOZAKI, Eiji

### Processing a variety of administrative work and supporting smooth hospital operations

The Administration Office processes a variety of administrative work of this hospital as well as the graduate school of medicine and faculty of medicine. Fast, smooth processing is made through collaboration with each department.

### Operation System

The following functions are controlled by the Administrative Director:

Vice Administrative Director, General Affairs Division, Personnel Affairs and Labor Group, Student Affairs Division, Management Planning Division, Accounting Division, Facilities Management Group, Medical Affairs Division, Medical Services Support Division, and General Administration Division, Daiko Campus.

### Scope of Medical Services

#### ■ General Affairs Division

This division designs, plans, and improves hospital management and operations, publicizes our services, plans clinical training, and handles administrative tasks related to the safety management of medical care and prevention of nosocomial infections.

#### ■ Personnel Affairs and Labor Group

This division handles the administration of human resources, payroll, labor management, benefits and welfare, and occupational safety and health.

#### ■ Student Affairs Division

Services related to studentship, school affairs, student life, support for students, international exchange, and foreign students, etc.

#### ■ Management Planning Division

This division provides administrative support related to the hospital's business plans, budgets, settlement of accounts, contracted clinical research, joint research, contracted research, contracted businesses, donations and receipt of external funds as well as grants for scientific research. In addition to providing administrative support in the survey, analysis, assessment and improvement of the hospital management, administrative support is provided for operating the University Hospital Management Accounting System (HOMAS). The division also provides support for advanced medicine.

#### ■ Accounting Division

This division handles the accounting of pharmaceuticals and medical materials, patient meals, and specified procurement contracts.

#### ■ Facilities Management Group

This division designs, plans, and improves facilities and equipment for future hospital design. The division also handles improvements to the in-house environment, asset management, security, and the prevention of fire and disaster.

#### ■ Medical Affairs Division

This division is involved in medical service contracts, billing and receipt of medical fees, acceptance of patients, patient reimbursement claims on medical fees, application of a comprehensive evaluation system regarding medical fees, and the management and disclosure of medical records.

#### ■ Medical Services Support Division

This division handles a variety of administrative work related to the clinical laboratory and examination center, the functions of a core hospital, team medicine, patient service, complaints, counseling, regional medical cooperation and so on.

#### ■ General Administration Division, Daiko Campus

Services related to the Graduate School of Medicine (Daiko Campus) and the School of Health Sciences.



# Part.3

## Facilities and Access



3-1	Site Map in Tsurumai District .....	46
3-2	Floor Guide Map .....	47
3-3	Ward Building .....	48
3-4	Outpatient Building and Amenities .....	49
3-5	Central Consultation Building .....	50
3-6	Daiko District Site Map .....	52



Access



# 3-1

## Site map in Tsurumai District



Area: 89,137 m<sup>2</sup>

Location: 65 Tsurumai-cho, Showa-ku, Nagoya city

Building: building area: 35,252 m<sup>2</sup>; gross floor area: 202,139 m<sup>2</sup>

### University Hospital

Name	structure	building area (m <sup>2</sup> )	gross floor area (m <sup>2</sup> )
① Outpatient Building	RC4	5,309	19,446
② Central Consultation Building	SRC7-2	5,881	43,612
③ Ward Building	S14-2	4,721	52,297
④ Residence for Nurses A	SRC10	675	6,158
⑤ Residence for Nurses B	RC6	563	2,741
⑥ Old Ward Building West	RC6-1	1,584	14,525
⑦ Old Ward Building East	(Included in ⑥ Old Ward Building West)		
⑧ Oasis Cube(welfare facility)	S1	604	595

### Graduate School of Medicine/School of Medicine

Name	structure	building area (m <sup>2</sup> )	gross floor area (m <sup>2</sup> )
A Medical Science Research Building 1	S13-2	1,493	20,875
B Medical Science Research Building 2	RC7	1,515	10,300
D Basic Medical Research Building	RC4-1	1,651	6,585
E Basic Medical Research Building Annex	RC5	695	3,158
F Center for Promotion of Medical Research and Education(Experimental Animals Division)	RC7-1	889	6,488
G Medical Library / Co-op Cafeteria	RC4-1	974	3,138
H Welfare Facility	RC3	308	760
I Kakuyu Kaikan (Alumni Hall)	RC3	550	1,354
J Radioisotope Research Center	RC4 + RC2	695	1,803
K Human Anatomy Laboratory	RC1	301	301
Others		6,844	8,003

### Part.3

Facilities and Access



				Restaurant	Bathing Room Meeting Room			14F
Dermatology Plastic and Reconstructive Surgery Pediatric Surgery				Gastroenterological Surgery 2 Common Ward for All Departments Cafeteria	Gastroenterological Surgery 1 Common Ward for All Departments			13F
Orthopedic Surgery Rheumatology Otorhinolaryngology				Cardiology Endocrinology and Diabetes	Hematology Gastroenterology and Hepatology			12F
Ophthalmology Oral and Maxillofacial Surgery				Respirology General Medicine	Gastroenterology and Hepatology			11F
Psychiatry Neurosurgery				Neurology Geriatrics	Nephrology Urology			10F
Gastroenterology and Hepatology Nephrology Neurology				Ophthalmology Plastic and Reconstructive Surgery	Otorhinolaryngology Plastic and Reconstructive Surgery			9F
Radiology Infectious Diseases Clinical Management Medicine Department of Clinical Oncology and Chemotherapy				Orthopedic Surgery Rheumatology Hand Surgery	Meeting Room Staff Resting Room			8F
Hematology Cardiology Pathology and Laboratory Medicine	Public Health and Health Systems Occupational and Environmental Health Division for Medical Research Engineering Global COE Promotion Office			Department of Nursing Administration Office Meeting Room	Gastroenterological Surgery 1	Breast and Endocrine Surgery Neurosurgery		7F
Respiratory Medicine Endocrinology and Diabetes Geriatrics	Preventive Medicine Physiology 1 Physiology 2			Surgical Intensive Care Unit Emergency and Medical Intensive Care Unit Center for Advanced Medicine and Clinical Research	Gastroenterological Surgery 2 Transplantation Surgery	Vascular Surgery Oral and Maxillofacial Surgery Dermatology		6F
Obstetrics and Gynecology Pediatrics	Immunology Cancer Biology Molecular Carcinogenesis			Department of Surgical Center Chart Course Room	Pediatric Surgery Orthopedic Surgery	Pediatrics		5F
Urology Anesthesiology	Pharmacodynamics Bacteriology Neurogenetics	Lecture Rooms 3 and 4	Department of Quality and Patient Safety / Department of Central Medical Supplies / Center for Advanced Medicine and Clinical Research / Center for Maternal - Neonatal Care / Department of Blood Purification (Dialysis Room) / Department of Clinical Engineering	Gynecology	Obstetrics Center for Maternal - Neonatal Care	Medical IT Center Administration Office Clinical Record Management Office Meeting Room		4F
Gastroenterological Surgery 1 Vascular Surgery Cardiac Surgery Thoracic Surgery	Biochemistry 1 Biochemistry 2 Molecular Virology	Department of Renal Replacement Therapy / Department of Metabolic Medicine / Department of Transplant Immunology / Biochemistry 2 / Cardiology / Lecture Rooms 1 and 2 / Seminar Room	Department of Clinical Laboratory (e.g., endoscope cleaning room and laboratory testing) / Auditorium / Department of Blood Transfusion Service / Center of National University Hospital for Infection Control (ICT) / Department of Pathology / Meeting room	Hematology Department of Clinical Oncology and Chemotherapy Center of National University Hospital for Infection Control (ICT)	Radiology Cardiac Surgery Thoracic Surgery Anesthesiology RI Therapy Room	Obstetrics and Gynecology / Urology / Oral and Maxillofacial Surgery / Dermatology / Plastic and Reconstructive Surgery / Surgery / Anesthesiology / Operating Room 2 / Breast Feeding Room / Children's Room / Meeting Rooms		3F
Gastroenterological Surgery 2 Transplantation Surgery Breast and Endocrine Surgery Emergency and Critical Care Medicine	Pathology 1 Pathology 2 Anatomy 1	Department of Molecular Cardiology / Department of Advanced Research of Gastroenterology / Human Nutrition / Molecular Pathology / Seminar Room / Lounge	Department of Clinical Laboratory (Genetic Screen, Laboratory Testing, Microorganism Testing and Pathological Testing Rooms) / Department of Rehabilitation (Speech Therapy Room) / Central Block of Radiology (MR Examination Room) / Nadic Hall / Department of Endoscopy / Administration Office / Central Phlebotomy Room / Clinical Nutrition (Dietary Counseling Room) / Tsukushi Library	Department of Rehabilitation Kiyosaidan Reception	Psychiatry Child and Adolescent Psychiatry	Psychiatry / Child and Adolescent Psychiatry / Pediatrics / Pediatric Surgery Otorhinolaryngology / Internal Medicine / Radiology / Group Counseling Room / Transplant Coordination Service		2F
General Medicine Department of Hospital Pharmacy Convenience Store	Anatomy 2 Anatomy 3 Legal Medicine and Bioethics Division for Medical Research Engineering	Office of International Affairs Young Leaders' Program (YLP) Meeting Rooms Changing Rooms Administration Office	General Medicine / Outpatient Chemotherapy Room / Department of Emergency and Critical Care Medicine / Center for Postgraduate Clinical Training and Career Development / Central Block of Radiology (X-ray Room) / Disaster Prevention Center / After-Hours Consultation Reception	Disaster Prevention Center / Security Administration Staff Room / Post Office / Japan Post Bank's ATM / Reception for Hospital Admission and Discharge / Restaurant / Convenience Store / Barber / Vending Machine Section	Psychiatry Department of Hospital Pharmacy	Ophthalmology / Neurosurgery / Orthopedic Surgery / Rheumatology / Hand Surgery / General Information / Community Liaison Center / Admission Information Center / Reception for Hospital-Clinic Collaborative Service / Reception for Outpatient Referrals / Cash Desk Section / Bank ATM Section	Convenience Store Coffee Shop Shop for nursing care products (nursing care shop)	1F
Meeting Room Hand Surgery			Central Block of Radiology (RI Examination Room / PET Room) Center for Advanced Medicine and Clinical Research		Clinical Nutrition Feeding Service Facility			B1F
Medical Science Research Building 1	Medical Science Research Building 2	Basic Medical Research Building	Central Consultation Building	West Side (W)	East Side (E)	Outpatient Building	Oasis Cube(welfare facility)	Floor Number
Facilities of the Nagoya University Graduate School of Medicine			Facilities of the Nagoya University Hospital					

# 3-3

## Ward Building



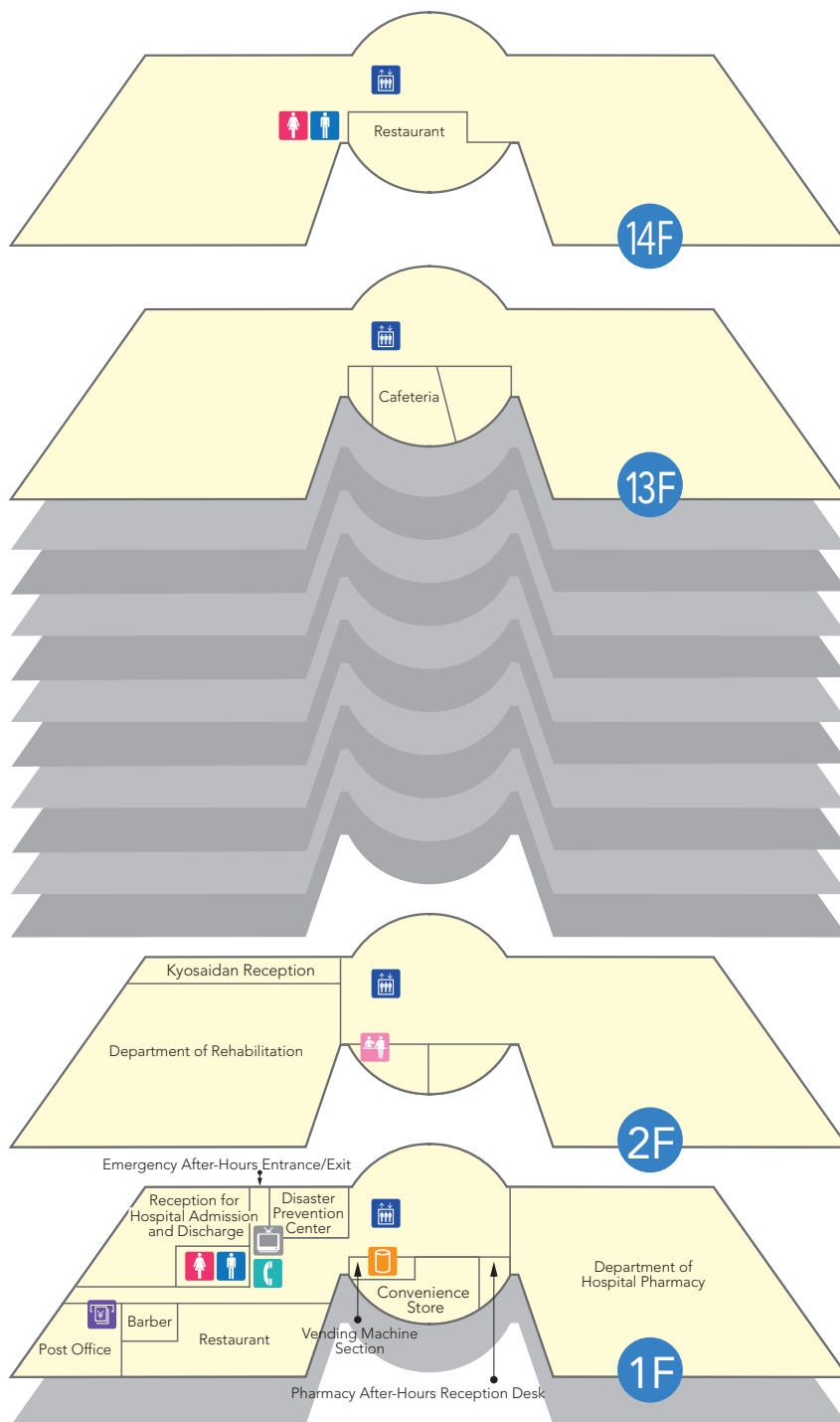
Restaurant (1F)



Reception for Hospital Admission and Discharge (1F)



TV card vending machine and Public Telephone (1F)



Restaurant (14F)



Cafeteria (13F)



Kyosaidan Reception (2F)



Disaster Prevention Center (1F)

	Reception		Men's W.C.
	Women's W.C.		Elevator
	ATM		Vending Machine
	Public Telephone		TV card vending machine

## Part.3

### Facilities and Access

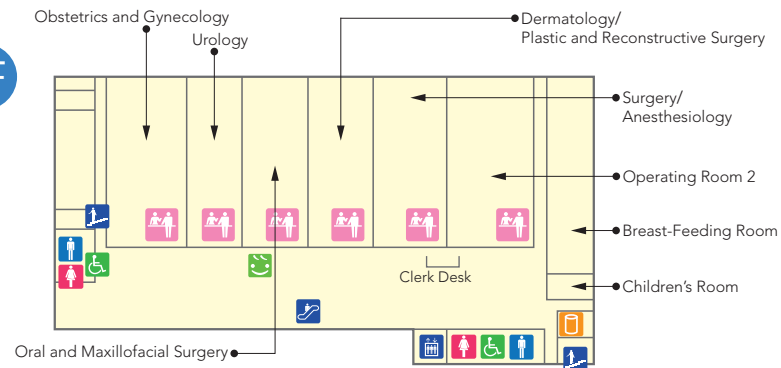
## Amenities



Oasis Cube(welfare facility) (1F)

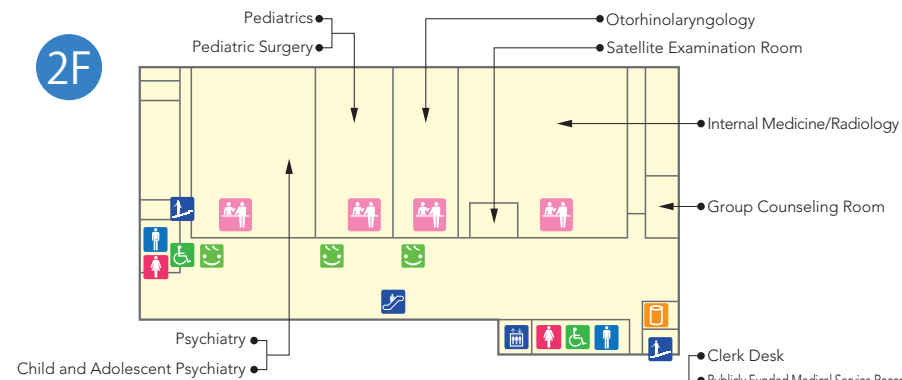


3F



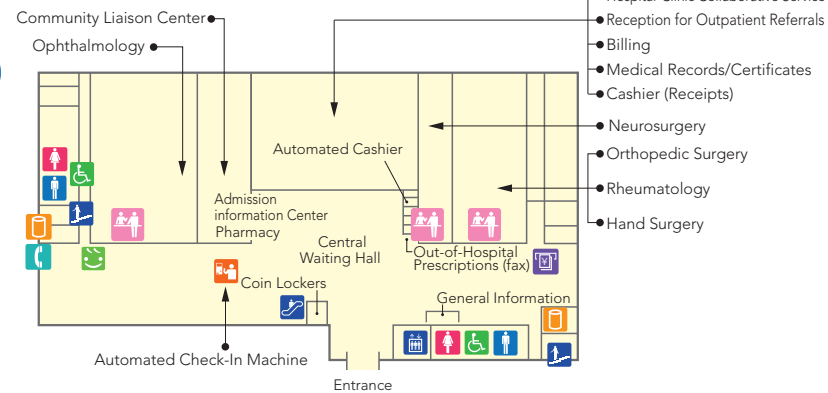
Children's Room (3F)

2F



Clerk Desk (3F)

1F



Automated Check-In Machine (1F)



Out-of-Hospital Prescriptions (fax) (1F)



Central Waiting Hall (1F)







Central Phlebotomy and Urinalysis Reception (2F)



Waiting Room 2 (1F)



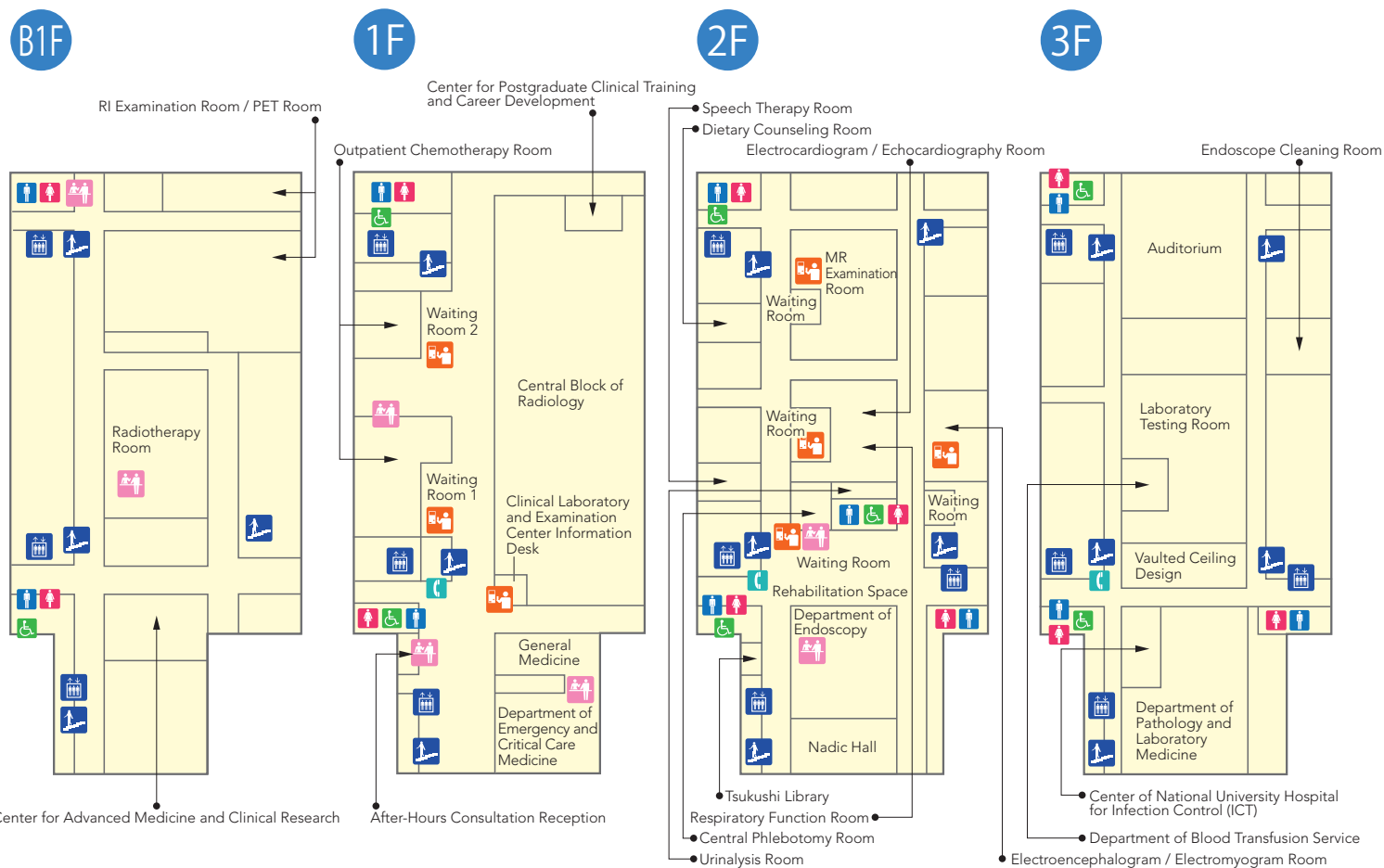
Radiology Examination Reception Machine (1F)



After-Hours Consultation Reception (1F)

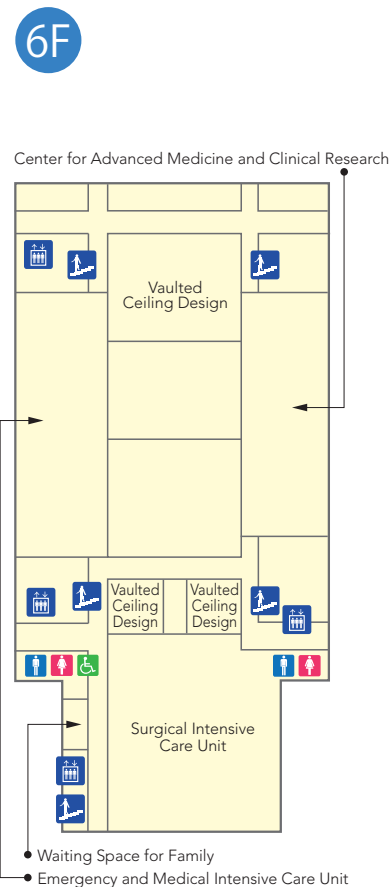
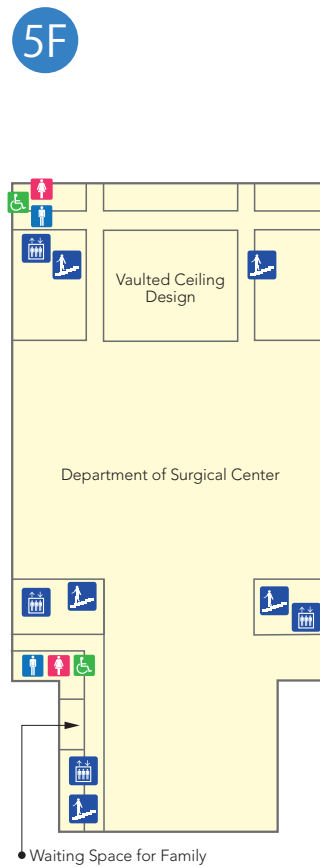
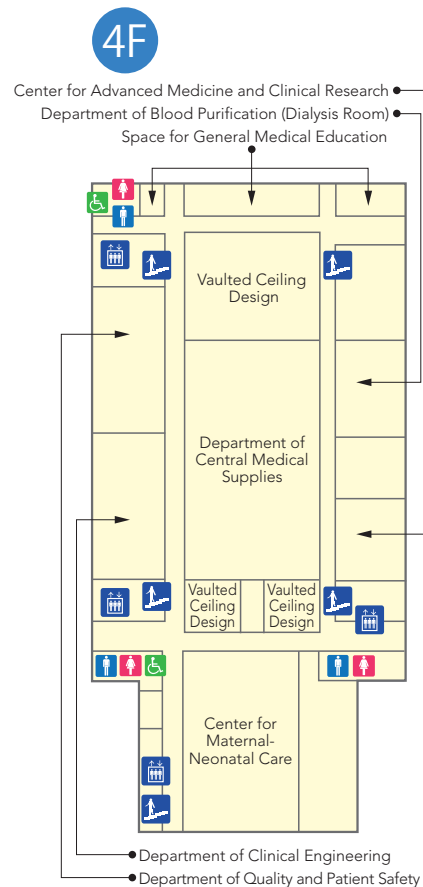


Radiotherapy Reception (B1F)



Central Consultation Building Information Desk (1F)

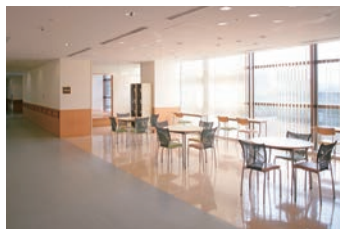




Surgical Intensive Care Unit (6F)



Emergency and Medical Intensive Care Unit (6F)



Waiting Space for Family (5F)



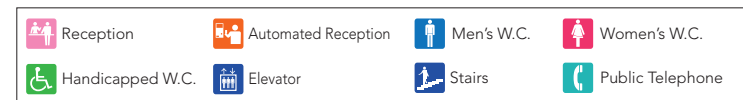
Nadic Hall (2F)

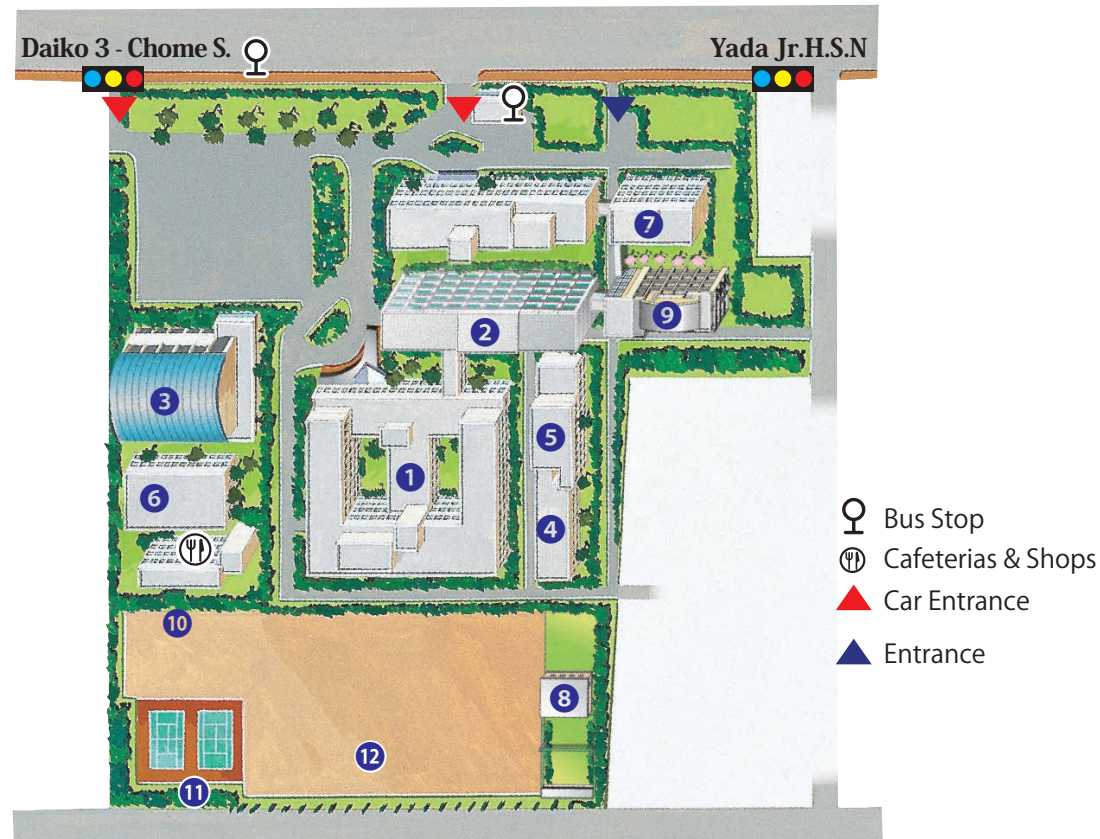


Waiting Room/Rehabilitation Space (2F)



Center for Maternal-Neonatal Care (4F)





Area: 48,463 m<sup>2</sup>

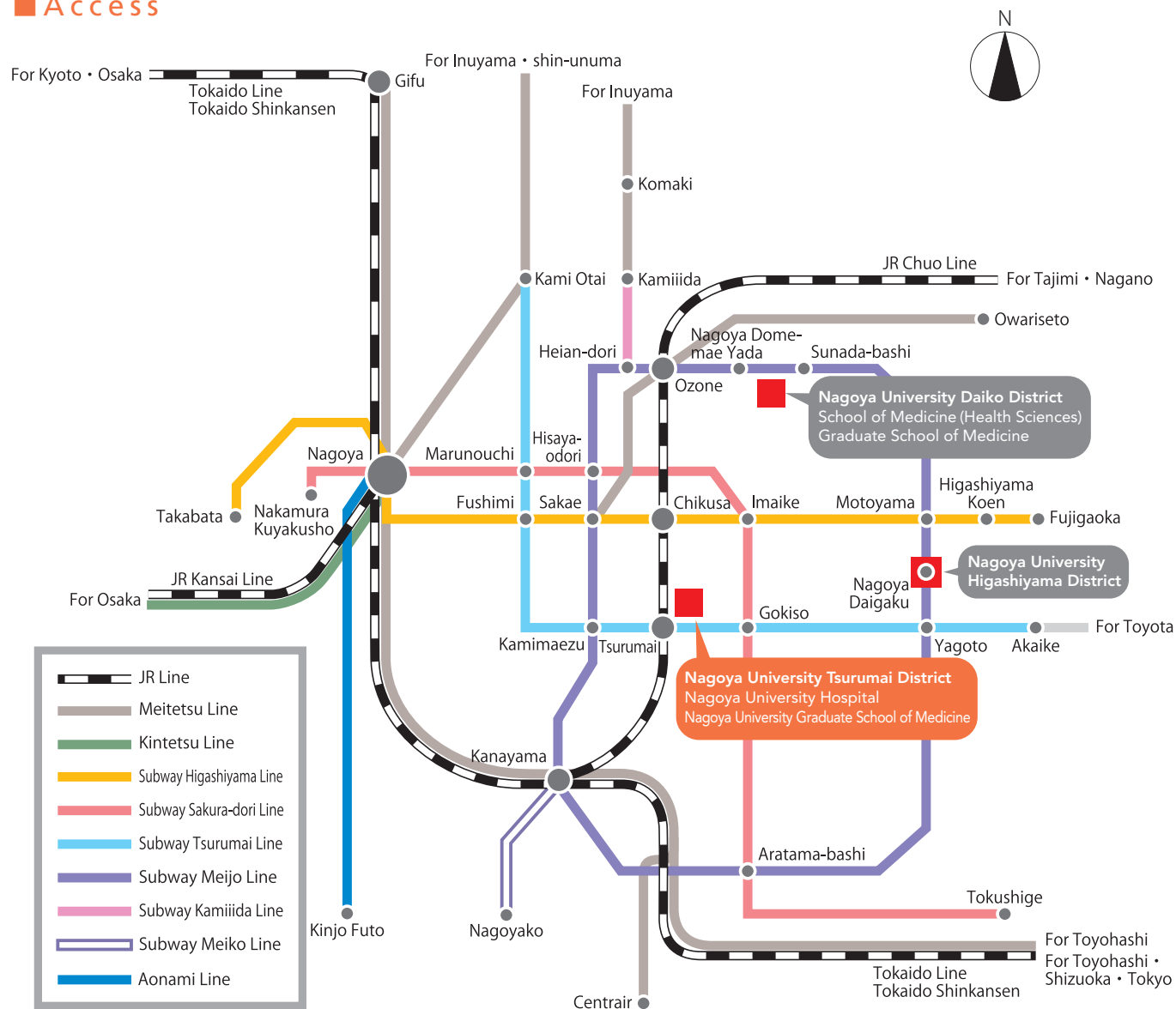
Location: 1-20, Daiko Minami 1-chome, Higashi-ku, Nagoya city

Building: building area: 10,470 m<sup>2</sup>; gross floor area: 28,429 m<sup>2</sup>

Name	structure	Building area(m <sup>2</sup> )	Gross floor area (m <sup>2</sup> )
① School of Health Sciences (South Building)	RC4	3,021	8,067
② School of Health Sciences (Main Building)	RC5	1,414	5,835
③ Gymnasium	SRC1	1,369	1,369
④ Radioisotope Laboratory	RC1	353	353
⑤ Energy Center	RC2	606	894
⑥ Student Hall	RC2	678	1,338
⑦ School of Health Sciences (Annex)	RC4	579	2,431
⑧ Kyudo (Japanese Archery) Hall		88	88
⑨ School of Health Sciences (East Building)	RC4	843	3,331
⑩ Researchers Village Daiko	RC3	280	720
⑪ Tennis Court		—	—
⑫ Ground		—	—
Others		1,239	4,003



## Access



### Tsurumai District

#### Nagoya University Hospital

##### Address

65, Tsurumai-cho, Showa-ku, Nagoya 466-8560  
TEL (052) 741-2111 / FAX (052) 744-2785

#### Nagoya University Graduate School of Medicine

##### Address

65, Tsurumai-cho, Showa-ku, Nagoya 466-8550  
TEL (052) 741-2111 / FAX (052) 744-2785

##### Access

- ① 3-minute walk from JR Chuo Line Tsurumai Station (Nagoya University Hospital exit side).
- ② 8-minute walk from Subway (Tsurumai Line) Tsurumai Station.
- ③ Take the "Sakae" route No. 18 city bus headed for Myokencho from Sakae Bus Terminal and get off at "Meidai Byoin (Nagoya University Hospital)."

### Daiko District

#### Nagoya University School of Medicine (Health Sciences)/ Graduate School of Medicine (Program in Nursing, Radiological and Medical Laboratory Sciences, and Physical and Occupational Therapy)

##### Address

1-1-20, Daiko-minami, Higashi-ku, Nagoya 461-8673  
TEL (052) 719-1504 / FAX (052) 719-1506

##### Access

- ① 15-minute walk from JR Chuo Line Ozone Station (north exit).
- ② 10-minute walk from Subway (Meijo Line) Nagoya dome-mae Yada Station or 7-minute walk from Sunadabashi Station.
- ③ Take the Meieki route No. 15 city bus headed for Sunadabashi from "Nagoya Station" "Ozone Bus Terminal" and get off at "Daiko 3-chome".

Profile of Nagoya University Hospital 2013-2014