MESSAGE FROM THE CHAIR
-SCOTT REEVES, MD, MBA

March is here and spring is right around the corner. With it comes the opportunity to evaluate our college and department. The dean recently held his State of the College address and several initiatives are underway within the College of Medicine. The medical student curriculum will undergo an extensive revision. The department is well positioned to play a significant role through the leadership of Matt McEvoy, Program Manager for Curriculum Reform. John Schaefer will also play a prominent role as simulation training will be used to assist in transitioning the medical students from the classroom to the hospital floors. As the curriculum is reformed, the basic science departments are undergoing significant restructuring which is expected to more cost-effectively align their research and education missions.

With the continued poor state of the national and state economy, all the clinical departments will be asked to do more with less financial resources from the college in 2009. Our department is no different. As such, we have created a Work Equity task force to evaluate our subspecialty teams and call systems. The operating rooms remain the engine that will bring the hospital and college out of the financial situation in which we find ourselves. It is my expectation that we can work smarter and more efficiently. With the additional data that the leadership is now getting through Exelligence (PICIS), we will be better able to improve upon simple metrics such as OR start times and room turnover. These improvements should also improve our professional job satisfaction by eliminating the long waits that frustrate us all. The whole department has been recognized within the University for our efforts in reducing costs and streamlining our operations. These new initiatives will keep us in the forefront of productive change. I thank you all!

A December 17, 2008 survey by the US Department of Health and Human Services asked the question, “Would patients recommend the hospital to friends and family?”

(There was insufficient data to rank Roper or St. Francis Hospitals.)
MESSAGE FROM THE CRNAs AT UNIVERSITY HOSPITAL

How time flies when you’re busy. We were busy orienting our three new CRNAs, Micki Ballister, Rhiannan Davis and Emily Munday. They even had the opportunity, thanks to Jane Swing and Lester Kitten, to take the Difficult Airway course in the simulator lab.

We were busy bidding farewell to Tanya Lipto. After spending the best four years of her life at the Medical University, she is leaving to see the world, starting with Tennessee. We wish her good luck and safe travel.

We were busy preparing for computer charting, which is coming soon to the Main OR. The super users, Kathy Comley, Heather Highland, Pat Tobin, Laurie Uebelhoer, Ray White and me, spent a morning with Pat Aysse and Cindy Banks becoming familiar with the online chart. We appreciate all the people who have gone before us and worked out all the bugs. It looks like you’ve done a great job. Thank you for that.

We were busy trying to get everyone to push buttons for everything they use in the pyxis, and we will stay busy until everyone does. If you remove something from the pyxis, push the button. This not only generates charges, it guarantees the items used will be restocked. It’s everyone’s responsibility. Thanks in advance for your attention to this.

Now we’re just waiting to see what the March winds blow in.

MESSAGE FROM THE CRNAs AT ASHLEY RIVER TOWER

It is hard to believe that we have been at ART for a year. Thankfully, we are keeping busy in both the OR and the NORA areas. Our CRNAs, Anesthesia Attendings and Anesthesia Techs have worked as a team to build and refine processes that make our daily work life both productive and pleasant.

Since December 1st, we have been operating an additional team in the DDC. Although we anesthetize upwards of twenty NORA patients per day, operational issues in the DDC and HVC are minimal. For the last year, we have been maximizing our NORA cost effectiveness by using rolling Pyxis carts, Accudose, and syringe pumps. The PAT clinic performs DDC anesthesia workups in the hours prior to the patient’s procedure, which is very helpful.

In the last year, Jane Swing and Lester Kitten (pictured below) have taught the Difficult Airway Management simulation course for over 60 CRNAs. It has been a wonderful learning opportunity and we thank them, along with Dr. Schaefer, for their time and patience.

The nights and weekends at ART have been both challenging and interesting. As part of the Mayday team, the CRNAs are often the most clinically experienced providers at the patient’s bedside. The 24hr CRNAs have shown exceptional judgment under very stressful conditions. Don Pagley and Donna Embrey have the added pleasure of covering the weekends at ART when hospital staffing is minimal. A few Sundays ago, Don had one of the most interesting ART Mayday experiences to date. Under the grimmest of circumstances, he maintained his composure and exhibited superior clinical leadership skills for the benefit of the patient.

We are happy to welcome Kanika Parrish and Alexandria Davis to our ART Anesthesia Tech group. Kanika comes to us from the CTICU and Alexsis is new to MUSC. Under the guidance of Paul Dancy, the ART Anesthesia Techs truly function as part of our Anesthesia Team. Their assistance has been crucial during the off-hours. Out of necessity, Paul Dancy became somewhat of a Pyxis expert last year. He has been successful in streamlining our anesthesia supply inventory and developing processes to make our systems work efficiently in both the OR and NORA areas. We hope to soon collaborate with Wendy and our UH friends on the transfer of these Pyxis practices.
Message From The Pain Clinic

The past months have been filled with ups and downs for the health care industry. During times of stress and uncertainty, one can anticipate some predictable issues, e.g. initiate change or remain with the status quo, which can impact one’s ability to continue productively. Throughout this the Pain Management Clinic has remained constant in their high patient satisfaction scores and compliance ratings. This success has been achieved by creating a sense of trust with each patient through perceptive listening which helps to uncover the patient’s actual needs.

Thanks to everyone in Pain Management for their contributions to these successes. Thinking dialogue, not monologue, is a shared goal to address patient and staff concerns.

Cynthia Fitzgerald, RN

Book Review: “Oxygen” by Carol Cassella

Nancy had lunch with a friend last week who gave Nancy a book she thought that I would enjoy. Enjoy was an understatement; I finished it two days after I started.

The book is a novel with the intriguing title of “Oxygen.” It was published in 2008 and written by Carol Wiley Cassella. Cassella majored in English Literature at Duke and graduated from Baylor College of Medicine in 1986. She is an anesthesiologist at the Virginia Mason Clinic in Seattle where she lives with her husband and their two sets of twins.

Not being an experienced book review writer, it is hard for me to describe the book without giving away the plot. The central character is Dr. Marie Heaton, a 37 year old female anesthesiologist who works in a large private hospital in Seattle. Cassella is dead on accurate in describing anesthetic practice, so much so that a lay person won’t appreciate the precision of many of the descriptions. I totally empathized when the character said that whenever she saw a person she instantly assessed how difficult an intubation would be. She even works elements of the Fick equation into the story.

Heaton had a bad outcome that leads to a malpractice suit. The medical aspects of the plot incorporate many aspects of our practice including substance abuse and ends with a real surprise twist. I couldn’t figure out the cause of the arrest until the end of the book even though the medical events are completely plausible.

Interspersed in the medical tale is the story of Heaton’s relationships with her family including her widowed father, who is losing his vision and his autonomy. This fleshes out the tale and portrays Heaton as a multi dimensional character.

If this whets your appetite for anesthesia based malpractice stories, I would also highly recommend renting “The Verdict.” It is a 1982 movie starring Paul Newman as a down-on-his luck lawyer reduced to drinking and ambulance chasing. He gets referred a case of maternal aspiration during a delivery in which the medical record has been altered. All parties were willing to settle out of court. Blundering his way through the preliminaries, he suddenly realizes that perhaps the case should go to court to punish the guilty, to get a decent settlement for his clients, and to restore his standing as a lawyer. Both “Oxygen” and “The Verdict” reemphasize the critical nature of our work, the importance of the pre anesthetic evaluation, the devastating effect of substance abuse, and the profound effect of a serious anesthetic accident on the patient’s family and on us.
Thank you, Bettie Spencer!

Bettie Spencer retired January 31 after 35 years of service to MUSC. Originally from Greenville, she graduated from Greenville General Hospital School of Nursing in 1969. Bettie then took her new skills to Tanzania, Africa with the Southern Baptist Journeyman Program. She had the opportunity to practice every facet of nursing from scrub tech, pediatrics, washing the hospital laundry and cooking the hospital food for the patients. She says it was most enlightening and was very glad she took her nursing books along for reference. Upon her return to the United States, Bettie worked in the ICU at Greenville General. Mrs. Spencer was interested in anesthesia and in 1972 came to Charleston. She took a position at Charleston Memorial Hospital’s ER to support herself while she attended MUSC’s Nurse Anesthetist Program. She completed her CRNA and began working for MUSC on March 14, 1974.

In Bettie’s 35 years here at MUSC she has seen many changes. She enjoyed being on staff and “sleeping” her patients. In 1991 she became Chief (5 CRNAs on staff) and coordinated off site anesthesia (now NORA). She was very involved with the renovation of the Rutledge Tower building. She helped arrange equipment for anesthesia in priming the OR’s for service. As Chief she was a back up for the Pre Op Clinic and in 2000 (35 CRNAs on staff) was assigned to the unit where she spent her last 8 years. Her co-workers say that Bettie was gifted in talking to the patients and had a wonderful ability to calm their fears concerning anesthesia.

Bettie married Richard Spencer (EMT) in 1974 and they have a son, Daniel, who is married to Lisa. They have 2 children, Summer (6) and Michael Daniel (6 months). Now retired, “Granny” Spencer has traded her breathing tubes for bottles and bibs and is enjoying her grandchildren. This spring she will help her husband with his “Weenie Wagon” that parks in front of the Harley Davidson Shop in North Charleston. Betty is active in Ashley River Baptist Church and plays Elizabeth in a yearly Christmas drama. She looks forward to tickling the ivories of her piano and cross stitching in her rocking chair.

The Pre Op Clinic recently hosted a retirement party at Nakatos honoring Mrs. Spencer for her service. Dr. Tam Psenka said, “It was fun and memorable” as Bettie opened 25 gifts related to her new season of life. Bettie donned her new hat the entire party and enjoyed a “blank” anesthesia record to remind her of phone screens!

MUSC CMS CORE MEASUREMENTS

The table below describes our progress for the first quarter on the CMS core quality measurements. As an institution, we are doing well with surgical prepping (razor) and venous thromboembolism (VTE) prophylaxis. We can and need to do better with antibiotic administration. Please review the beta blocker and normothermia protocols so that next quarter these measurements can also be in the green.
ANNUAL RESIDENT FACULTY BOWLING COMPETITION

On February 12 the residents and faculty squared off for the annual bowling completion at Twin River Bowling in Mt. Pleasant. Following the presentation of several good PACU related journal articles, the competition heated up. The residents had solicited several “heavy hitters” this year to participate. The faculty was told that Missy Reed would be arriving with her own personal bowling ball and that Jerell Brown was also very good. Both had recently been seen practicing. Last year’s ace, Anna Greata Taylor (AGT) was also expected to carry the day. The faculty could only counter with Cal “Big Daddy” Alpert who won last year’s competition with a 212 score.

As faith would have it, Dr. Alpert was at the hospital doing a pediatric heart case. The resident heavy hitters just chickened out. Both groups therefore were evenly matched. After agreeing to the rules for the evening or more likely being told the rules by Dr. Reeves, the competition began. This year’s event was marked by the inability of both groups to get the ball to actually hit a pin. Gabe Hillegass was only able to muster a resident low of 65. Rumor has it that he did much better later that night. Ilka Theruvath led all women with a 120.

Just like last year’s battle between Cal Alpert and Matt Springs, the leaders, Wes Hudson and Scott Reeves, were neck and neck going into the 10th frame. Scott went first and ended with a 148. Wes started with a 9 and needed to pick up the spare in order to probably win it all. A little smack talk then occurred between the parties with Dr. Reeves stating that most residents finish in only four years but not everyone. The pressure was worse than a liver transplant with Wes missing the spare and ending with a 143. The faculty retained their champion status for another year. However, this year’s victory was 69 points lower than last year. It was truly up for grabs.
Charleston is the host of the Southeastern Wildlife Exposition every year in mid February, and this year was no exception. On Sunday, February 15, the National Dock Dog Finals were held at Brittlebank Park on Lockwood Boulevard. Several Anesthesia staff members were in attendance to watch Dr. Scott Stewart and his girlfriend, Kara McFadden’s Chocolate Lab, Mulligan, win 2nd place in the Big Air Competition. This was her first time entered in the competition, and she jumped an incredible 18 feet 8 inches! Proudly watching on the sidelines were Kyle and Kathy Comley’s Yellow Lab puppies, Walker and Lily. They are both a bundle of energy! This was their first public outing and they behaved well on their leashes. They are 4 months old. Deb Feller is pictured with Rudolph “Rudy” Von Uebelhoer, a rambunctious 3 month old Great Dane puppy who would love to have Lily Comley for his first girlfriend! All three puppies slept for two days following this big day! Ginger Brister was also there with her two furry friends, a 2 year old Yellow Lab Jake and a 1 ½ yr old Boykin Spaniel, Hank. There was also a brief sighting of a rare breed, The Harv, but this particular species is so elusive it has never been captured on film! However, rumors say, this particular specimen also had her mating partner and young offspring with her!! Maybe next year we can have an entire Anesthesia Division in the Dock Dog Competition!! -Laurie Uebelhoer, CRNA

DEPARTMENT APPLAUSES

  The case report comes with an online video supplement starring Dr. Goodnight in which the immediate results of ketamine administration can be seen!

- This month’s winner in the “I Hung the Moon” drawing is Kim Crisp.

- Congratulations to Dr. Scott Stewart for being voted Teacher of the Month!
First Quarter Operating Room Patient Satisfaction Results

The table below lists our patient satisfaction results for the first quarter at RT (Amb surg RT) and the University Hospital (Amb surg 4E). We are doing well in the areas of IV starts and physician encounters. However, at the bottom of the chart, one will see a listing called “Personal Issues.” These are important patient satisfaction benchmarks that deal specifically with keeping the patient informed of their progress. Please keep your patient updated about delays and let them know how long you expect them to be waiting. Please also address any pain issues they might be having. These simple steps should greatly enhance our care to our patients.

### CY09 1st QTD Patient Satisfaction Scores - Ambulatory Surgery

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Cost Containment / Albumin Survey and Results

1. True or False - Albumin was the 7th highest drug expenditure in the hospital for 2008.  
   Correct Answer: True. The top 7 drug expenditures in FY08 were immune globulin, factor VIIa, iohexol, piperacillin/tazobactam, lymphocyte immune globulin, enoxaparin and albumin.

2. Approximately how much money did the hospital spend on Albumin last year?  
   Correct Answer: $600,000. The hospital spent $654,886 on albumin for FY08.

3. Approximately what percentage of Albumin expenditures came from use in the operating rooms at MUHA and ART in 2008?  
   Correct Answer: 20%. Approximately $150,000-23% of the albumin expenses came from use in the operating rooms.

4. The most commonly prescribed Albumin dose is ____?  
   Correct Answer: 5% 250mL

5. True or False - Clinical trials have demonstrated that Albumin administration produces the same clinical outcomes as crystalloid administration in patients with or without hypoalbuminemia.  
   Correct Answer: False! Clinical outcomes have demonstrated that albumin administration produces the SAME clinical outcome.

6. According to MUSC’s guidelines for Albumin use in adults, what is the preferred resuscitation fluid for both hemorrhagic and non-hemorrhagic shock?  
   Correct Answer: Crystalloid. NS or LR are the preferred initial resuscitation fluids for both hemorrhagic and non-hemorrhagic shock.

7. Albumin is more expensive than crystalloid by what margin?  
   Correct Answer: Albumin is 40x the cost of crystalloids. 1L NS is $0.81; 250 mL 5% albumin is $32.82

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INPATIENT PHARMACEUTICAL EXPENSES FY 2008
Course Purpose: This course is designed to benefit anesthesiologists interested in learning about perioperative transesophageal echocardiography (TEE) and intent upon gaining sufficient knowledge and experience to integrate this modality into their clinical practice. The scope and pace of this course is specifically designed for those with little or no TEE experience.

Learning Objectives: Upon completion of the course the participant should: Understand the basic physics of ultrasound imaging; understand the operation and optimization of TEE ultrasound machines; be able to understand and interpret 2-D TEE images of the normal heart; be able to recognize global and regional left ventricular dysfunction; be able to recognize significant aortic, mitral, and tricuspid valve pathology; be able to assess left and right ventricular filling; be able to apply TEE outside of the operating room.
Future Events

3/2 - Anesthesia and Musculoskeletal Disease Lecture
"All Residents" - Dr. Hebbar
3/3 - Opiods (Grand Rounds) - Dr. Marica
3/4 - ART Teaching Conference: TEE Review
-Dr. Abernathy
3/10 - NMBDs Recent Advances (Grand Rounds)
-Dr. Szabo
3/11 - ART Teaching Conference: Recent Innovations in the Cath Lab (Journal Club) "All Residents"
-Dr. Reeves
3/16 - Cardiac Board Review Lecture "All Residents" [Make-Up] - Dr. Cain
3/17 - M&M, Dr. Harvey
3/18 - ART Teaching Conference: TEE Review
-Dr. Abernathy
3/23 - Lecture “All Residents,” Dr. Perrino
3/24 - Fluid vs Phenylephrine "A Tale of Dogma & Data" (Grand Rounds) - Dr. Perrino
3/25 - ART Teaching Conference: TEE Review
-Dr. Abernathy
3/28 - TEE Conference (Guest Speaker)
3/30 Anaphylaxis and Adverse Drug Reactions Lecture
"All Residents" - Dr. Levy
3/31 - HITT (Grand Rounds) - Dr. Levy

SAVE THE DATE: Department holiday party will be 12/12/09 at the Old Exchange Building

I Hung The Moon!
The departmental members below have been recognized by our patients and their peers. This month’s drawing winner is Kim Crisp.

- Vic Bansal- Went out of his way to take care of one of my favorite patients and his family.
- Michael Hay- Going beyond his call of duty-Volunteered to conduct a regional workshop for the AIG. He came in on his post call day and did a great job with the workshop. I sincerely appreciate his enthusiasm and team spirit!
- Eric Pourmand- I sincerely appreciate your involvement in helping host the regional workshop for AIG. You too, like Dr. Hay, came in on your post call day and stayed late to facilitate this. Thank you so much.
- Donna Hoffman- Expediting a new cell phone over the holidays when the old one died.
- Kim Crisp- Always willing to go the extra mile to help. Helping me track down the deployment schedule from 2006!

We Would Love to Hear From You!
If you have ideas or would like to contribute to Sleepy Times, the deadline for the April edition will be March 23, 2009.

This Month’s Contributors: Scott Reeves, Wendy Ewing, Jodi Weber, Cynthia Fitzgerald, Fred Guidry, Carla Harvey, and Laurie Uebelhoer