MESSAGE FROM THE CHAIRMAN:

-SCOTT T. REEVES, MD, MBA

July marks the beginning of a new academic year. Each July, we have the opportunity to attend our resident and fellow graduation. It marks the end of a minimum of 12 additional years of education following high school. The 2013 graduating classes of anesthesiology residents and cardiothoracic and critical care fellows were exceptional. I know we all wish them luck with their careers. June also marks the transition month as our CA0s get their first taste of what the next three years will require. The faculty and I are looking forward to helping them into the truly exceptional physicians they will become.

July is also a time of new arrivals. In this edition of Sleepy Times, you will meet our new faculty, new interns and CA1s, summer research students and research specialists. Please take a moment in the next few weeks to introduce yourself to them. On July 23, I will be giving our annual state of department address. We have a lot to be proud of, and I look forward to highlighting our accomplishments.
MEET THE NEW INTERNS

Thomas Brinkley, UNC Chapel Hill
Jay Chan, University of Florida
Jackson Condrey, MUSC
Loren Francis, New York Medical College
Jordan Friel, Ohio State University
Ben Jones, Ohio State University
Tyler Keena, Indiana University
Tony Lawson, University of Florida
Jared McKinnon, Medical College of Georgia
Sam McLaurin, Mercer University
Jeff McMurray, Indiana University
Julie Owen, George Washington University
Stefanie Robinson, MUSC
Kevin Shamburg, Wake Forest
Matt Zachary, University of Tennessee
MEET THE NEW CA1S

Chase Black, MD
Medical College of Georgia

Carey Brewbaker, MD
Wake Forest

Dale Carter, MD
University of Alabama

John Fox, MD
University of Louisville

Jason Herndon, MD
Meharry Medical

Ben Kightlinger, MD
University of Toledo

Greg Kottkamp, MD
Medical College of Georgia

Marc McLawhorn, MD
MUSC

Adrian Moretti, MD
University of Texas

Clinton Pillow, MD
University of Kentucky

Andrew Powelson, MD
Northeast Ohio

Katherine Roden, MD
UNC Chapel Hill
Dr. Ryan Nobles was born in Augusta, GA, raised throughout middle Georgia, and finally settled in Laurens, SC. He completed a BA in English Literature at Presbyterian College. He then attended medical school at the Medical University of South Carolina where he was also fortunate enough to stay for residency in anesthesiology. Next, he spent a year in Atlanta, GA for a fellowship in pain medicine at Emory University. He and his wife and high school sweetheart, Kristy, are extremely happy to return to Charleston and MUSC where he joins his mentor Dr. Rick Smith as the newest member of the chronic pain clinic. He is excited to bring new skills and looks forward to expanding the role of the pain clinic at MUSC.

In his free time, Ryan enjoys all things rock and roll, getting beat mercilessly at golf by Kristy, running in beautiful downtown Charleston, and spending weekends at the beach.

Dr. Tim Heinke is excited to be joining the faculty at MUSC as a member of the cardiothoracic anesthesia division. Tim was born in Dayton, Ohio and traveled across the border to Indiana to attend Earlham College, earning a B.A. in biology. He met his wife, Sarah, while attending Indiana University School of Medicine. Together, they made the trip south for anesthesia residency at MUSC. After residency, Tim stayed on to complete his cardiothoracic anesthesia fellowship at MUSC.

Away from the hospital, Tim enjoys spending time with his wife, daughter, and their two dogs. He is also an avid football fan. The entire Heinke family is happy to be able to stay in Charleston. Tim is looking forward to continuing to work with all the great people here at MUSC.

Dr. Wendy Suhre is originally from Southern California but grew up in Arizona where she met her husband, Dennis, at the University of Arizona where she received her B.S. in Biology. Soon Wendy began her research career working in multiple basic science research labs, and eventually completed an M.S. in Renal Physiology. Her heart was always set on medicine, so she decided to go on to complete medical school training at the University of Arizona.

Wendy and her husband decided they needed to broaden their horizons, so they moved to the South! Their move to Charleston four years ago was a culture shock at first, but quickly settled in and she completed her residency here at MUSC. She is very excited to join the faculty and is looking forward to working side by side with her mentors from the last four years.

Dr. Ebony Jade Hilton was born and raised in a small town called Little Africa, South Carolina. She is the middle of three girls and moved to Charleston following high school graduation in 2000. She obtained a B.S. in Biochemistry, B.S. in Molecular Biology, and a B.A. in Inorganic Chemistry while attending the College of Charleston. In 2004 she enrolled in medical school at MUSC and has remained for the completion of her anesthesiology residency and critical care fellowship. Ebony now joins the critical care division and looks forward to the unfolding of the next chapter of her life.
Clark Sealy — is excited to be participating in the FAER Medical Student Anesthesia Research Fellowship this summer. He is a native of Greenwood, South Carolina, located in the upstate an hour south of Greenville. He graduated from Covenant College in Lookout Mountain, GA summa cum laud in 2012 with a B.S. in biology. While in school, he enjoyed playing on the school’s varsity soccer and tennis teams for all four years. He has worked as a Product Development Scientist for Chattem Inc., a Purchasing Manager for a plastics molding company in Chattanooga, TN, and recently an MCAT prep course instructor through Kaplan Inc. He matriculated into MUSC’s school of medicine last August after careful consideration of other medical schools. Clark’s wife, Chelsea, teaches middle school Latin at Porter Gaud. They currently live on James Island and enjoy going to Folly Beach in their free time.

Clark first became interested in anesthesia and perioperative medicine during high school while shadowing a local doctor. He hopes to continue to learn much about the field and further develop relationships with professionals here at MUSC through the Summer Fellowship. He would like to thank the Department of Anesthesia and Perioperative Medicine for hosting this program and for giving him the opportunity to participate. He is humbled by it and looks forward to learning more about the day-to-day duties of an anesthesiologist.

Ryan Mims — recently completed his first year of medical school at MUSC. Originally from the upstate, Hartsville, SC, he obtained an undergraduate degree in Biology from the College of Charleston and graduated with honors. Ryan’s interest in medicine started at a very early age and he began seeking medical experiences in high school. Over the last few years, he has volunteered at several medical clinics and traveled to Trinidad for medical mission trips.

His pastimes consist of volunteering at ECCO and participating in professional organizations. At this time, he is undecided as to which field of medicine he wishes to pursue but has an interest in Anesthesiology. This summer he was selected out of a pool of candidates for the Dr. J. G. Reves Fellowship.
MEET THE RESEARCH STAFF

Megan Hilbert—Research Specialist

Megan Hilbert, a recent magna cum laude graduate from the College of Charleston, joins Anesthesia as a Research Specialist. Originally from Apex, North Carolina, she has come to embrace Charleston as her home. She will be seeking admission to MUSC’s MD/PhD Program. As a student she worked with Dr. William Griffin, who is affiliated with MUSC’s Department of Psychiatry, investigating the neurobiology of alcoholism. Her interest in research was further strengthened during her time as a fellow in the DART Summer Fellowship Program.

Megan loves to play soccer and run while also spending time drawing and painting. She is very excited about having a year off and being able to work in the Anesthesia Department, while also gaining experience that will help her in her future endeavors. Megan loves to travel and speak Spanish, which she was able to do while studying abroad in Spain for three and a half months. She hopes to one day be able to do medical aid in South America. Please join us in welcoming Megan. She will definitely be an asset to this department.

INTRODUCTION TO THE NEW INTERN LECTURE SERIES

BY: ERIC NELSON, DO

July is a very exciting time in our world of medicine. Our senior residents and fellows who have completed training here are now gone and are moving on to the next part of their lives. We also get to welcome new interns, residents, and fellows to our department. Starting this academic year I have the honor of being the rotation director for the interns. The curriculum for their last month as interns (or CA-0) has not really changed. However, we have revamped the intern curriculum for the rest of the intern year to try to increase their educational experience and better prepare them for their anesthesiology residency.

The intern curriculum is now based on Newman’s Perioperative Medicine, Managing for Outcomes. The lecture series is designed to help give our interns a more well rounded background of medicine and knowledge of the co-morbidities they’ll be dealing with on a daily basis as anesthesiologists.

We will also have a larger variety of attending anesthesiologists who will be giving lectures throughout the year so our interns can get to know more of us prior to starting as residents.

As I said earlier, I’m excited to have a larger role in our resident education, and I think by revamping our intern lecture series, we will help make more well rounded interns who will be fully prepared to start their anesthesiology residency.
Introduction to the New CA1 Lecture Series
By: Will Hand, MD

The American Board of Anesthesiology has decided to add a step to the board certification process for matriculating residents. The "Basic Examination" will require CA-1 residents to demonstrate mastery of a broad content area related to pharmacology, anatomy, pathology, and physiology in order to proceed with training to the advanced CA-2 and CA-3 years. This exam ensures graduating residents will have proven mastery of the educational foundation and likely result in consistently high quality applicants for official board certification.

To keep up with the changes associated with certification and also to graduate excellent anesthesiologists, we have modified the CA-1 lecture series. This series of weekly lectures will thoroughly cover all topics outlined by the ABA and we expect will help ensure a 100% pass rate on the first attempt. Lectures will primarily be based on scheduled readings from Clinical Anesthesiology by Morgan and Mikhail, with supplementary reading from other text books and Problem Based Learning and Development and will be delivered by 19 participating faculty members. We look forward to evaluating the success of this series and a high "Basic Examination" pass rate!

Congratulations to Dr. Field on his recent publication in the Journal of Clinical Anesthesia

Original Contribution

The efficacy of automated intermittent boluses for continuous femoral nerve block: a prospective, randomized comparison to continuous infusions

M. Gabriel Hillegass MD (Resident) a, Larry C. Field MD (Associate Professor) a, Scott R. Stewart MD (Resident) a, Jeffrey J. Borckardt PhD (Associate Professor) a, Luke Dong BS (Research Assistant) a, Peggy E. Kotlowski RN (Research Nurse Coordinator) a, Harry A. Demos MD (Associate Professor) c, H. Del Schutte MD (Associate Professor) c, Scott T. Reeves MD, MBA (Professor and Chairman) a

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c Department of Orthopaedic Surgery, Medical University of South Carolina, Charleston, SC 29425-2400, USA
Graduation Address 2013: Practice Joy
By: Dr. Scott T. Reeves

Dear residents and fellows, faculty, family and friends, I want to welcome all of you to the 2013 graduation ceremony. This is always a festive time as the long journey through college, medical school and residency and/or fellowship is finally coming to a close. I hope you will always have fond memories of your time in Charleston within the Department of Anesthesia and Perioperative Medicine. As has become my tradition, I will use my time to impart some farewell remarks as you leave MUSC.

Recently I heard a quote by Heiko Oberman, “Joy of life is not something that simply exists: it must be worked at. Even in our century, with holidays and relaxation legally established as a human right, the joy of life is an art that cannot be bought. Space and time can be provided - but joy needs practice.” This simple statement, joy needs practice got me thinking about the events that shape our lives as individuals, couples, families and generations.

The great depression and World War II primarily shaped my grandparents’ generation. Their lives were always characterized by being frugal. Because of their sacrifices and commitment to their children, their generation has often been called “the Greatest Generation.”

My parent’s were shaped by Vietnam. The baby boomers as they would eventually be called would become a huge political force in the country that continues to this day. Maintaining healthcare and social security for the boomers including myself has been financed primarily with debt and will be a legacy that you will be paying for.

Your generation has been called the millennials. Early in your life you were marked by September 9/11 and the war on terrorism. Most of us in this room still vividly remember where they were and what they were doing that day. For me, I was traveling by plane to Yale in New Haven, Connecticut to edit my first textbook when the planes hit the twin towers. Uncertainty and anxiety continues to plague our nation. As my son, Townsend, stated in his valedictorian high school address, “the past four years have also been characterized by economic turmoil in the midst of the fiscal cliff and sequestration, the conclusion of a long and arduous war, and gridlock within our nation’s governmental system.” I agree with him.

As you finish your 12 plus long years of preparation, many of you are concerned about the financial health within the US healthcare system and how that will affect your salary, work hours, etc. These issues will not go away, but I believe there are lessons you can learn from the Greatest Generation.

Be frugal with your spending. Eliminate your education and consumer debt. Then save and pay off your home, save for your children’s college education, and your retirement.

Becoming a life long saver will give you financial security over time and hence decrease stress, but it is not enough. As I stated at the beginning of my address, I want all of us to PRACTICE JOY. Take time each day to just slow down and be joyful for the world around us. It is simple, and tonight I will encourage you to start the process. As you receive your diplomas, you will each be handed a single rose. Use your senses. Sight how beautiful and intricately made it is, smell its sweat aroma, feel its satin finish. Use this simple example to start a daily process of PRACTICING JOY. You and your family will be glad you did.

I would now like to lift a toast to our graduating residents and fellows- to a job well done. We are all very proud of you!

Congratulations to:
CA2/3 Faculty Teacher of the Year:
Latha Hebbar, MD
CA1 Faculty Teacher of the Year: Will Hand, MD
Dr. John E Mahaffey Resident of the Year:
Trevor Adams, MD
Dr. Laurie Brown Resident Teacher of the Year:
Kyle Branham, MD
Dr. J.G. Reves Resident Research Award:
Kyle Branham, MD
Resident and Fellow Graduation: June 21, 2013
Resident and Fellow Graduation: June 21, 2013
A BRIDGE TO LIFE; INTRODUCING THE HEARTWARE VENTRICULAR ASSIST SYSTEM

Have you ever thought about how new life-saving technology is introduced into practice? As our pediatric cardiac transplant program has grown, there has become a need to be able to offer a mechanical bridge to transplant option. In contrast to our adult population, the large Heart Mate VAD device is not optimal in our smaller population. In 2012, the FDA approved the HeartWare device for children. To date, only 2,500 devices have been implanted worldwide. The device itself is the diameter of a coke can and is inserted into the left ventricular apex.

In June, the HeartWare application specialists came to MUSC to train the team (surgeons, cardiologists, pediatric CT anesthesiologists and CRNAs and ICU nurses) on the device, insertion techniques and OR/ICU support requirements. At the conclusion of the two-day in service, Drs. Minoo Kavarana and Scott Bradley demonstrated the implant technique on porcine hearts.

For us it is a complicated, immediate post implant process as pulsatile flow is lost and hence RA, LA and mean arterial pressures are utilized to optimize hemodynamics. The education process is an excellent opportunity to learn from other institutions’ experience and to address potential complicating circumstances prior to any patient care issues. Shortly after the completion of the training process, the HeartWare device was utilized by Dr. Kavarana while the patient was under the anesthesia care of Dr. Jake Freely, Cardiac Fellow, Dr. Tim Heinke and Chief Resident Dr. Trevor Adams. The excellent teamwork and planning on the part of our pediatric cardiac anesthesia care team resulted in a successful initial outcome. Just another example of us changing what’s possible.
Faculty and residents welcomed the new additions to the department by introducing them to a Charleston classic – a lowcountry boil (also known as a frogmore stew). The party was held at Bowens Island Restaurant, which has been named as one of America’s Great Seafood Dives by Coastal Living and one of the Top 10 Southern Seafood Dives by Southern Living.

It was a wonderful evening full of good conversations, delicious seafood, and a beautiful river view.

**NEW BABIES IN THE DEPARTMENT**

- **Madeline Hutchinson Adams**, Born May 15, 2013, 8lbs, 6oz
- **Mia Wong**, Born June 9, 2013, 6lbs, 15oz
- **Avery Anne Davis**, Born March 23, 2013 at 4:08 pm, 7lbs, 11oz
PCA—PATIENT CONTROLLED ANALGESIA BROCHURE

Pain control after surgery

This brochure has been prepared for you by the Department of Anesthesiology and Perioperative Medicine. The purpose is to inform you of possible methods of postoperative pain control prior to your surgery.

PCA—Patient Controlled Analgesia

How is my pain controlled? The PCA tubing is connected to the intravenous (I.V.) tube in your arm. Your doctor will decide how much pain medicine is right for you. The most common pain medicines used are hydromorphone (dilaudid) and morphine. The nurse will set the computerized pump and you will be given a button to press whenever you feel you need pain medicine. When you press the button the pump will deliver a safe amount of medicine directly into your IV. Your nurse will watch you and the pump to make sure there are no problems. There is a safety lock-out device that will warn you if you have received too much medicine. You can press the button as often as you like, but you will only receive a safe amount of medicine over a certain amount of time. Only you should press the button. Family and friends should never press the button, especially when you are sleeping. This is for your safety. You need to be alert enough to decide if you need pain medicine.

Can I get "hooked" on the pain medicine? Although your body may need more medicine over time, you will not get "hooked." Having nictuate or tolerate pain medicine will not alter your thinking. Different people need different amounts of pain medicine and it is important to stay as comfortable as possible to allow your body to heal.

What are the side effects? The most common side effects are nausea, itching, difficulty urinating, constipation, and excessive drowsiness. All of these are treatable. Talk to your nurse if you are concerned or experience any of these side effects. Sometimes the pain medications that you are taking can be changed to decrease side effects.

What are the benefits of a PCA? When your pain is well controlled you are able to rest easier, breathe better, begin to move around earlier, and heal faster. The PCA allows you to control when and how much pain medicine you receive.
Department Hurricane Plan: The Season Is Here Be Prepared

Department Weather Emergency Staffing:
• During weather emergencies, the Rutledge Tower ambulatory surgery facility will be closed to surgical procedures.
• The University Hospital Operating Room will be staffed by the following members of the Activation Team (designated, essential personnel):
  o Faculty: Two faculty scheduled to cover the date of the anticipated Weather Emergency (Step 3 above) will be assigned in house call.
    • If the scheduled in-house call attending is pediatric capable (peds, peds CT) then the second in house attending will be the Bold 1 faculty.
    • If the in house call attending is not peds capable then the second faculty in house person will be determined by the following order. The first available pediatric capable faculty will assume the in house duty.
      o Bold 1(peds, peds CT faculty)
      o Bold 2(peds, peds CT faculty)
      o Peds
  o Residents: The designated CA 3, CA 2, two CA 1s, and liver call residents scheduled for duty on that date.
  o CRNAs: The scheduled 24 hour call CRNA or the late CRNA when a 24 hour individual is not scheduled. A second 24 hour CRNA volunteer will be designated. The Chief CRNA will make this determination during the Step 1 (weather watch) planning stage.
  o Anesthesia Technicians: Two anesthesia technicians will remain in the hospital commencing with Step 3 conditions. These individuals will be named by the Anesthesia Technician supervisor from anesthesia tech “Team A” during the Step 3 planning phase.
  • The Ashley River Tower Operating Room will be staffed by the following members of the Activation Team (designated, essential personnel):
    o Faculty: The cardiothoracic anesthesia and critical care attending scheduled to cover the date of the anticipated Weather Emergency (Step 3 above).
    o Residents: ART and the MSICU call residents.
    o CT and Critical Care Fellow: The on call CT and Critical Care fellows will stay in house. If no CT or Critical Care fellows are assigned on call, one of the fellows will be assigned as determined by the CT and CC Fellowship Program Directors.
    o CRNAs: A CRNA will be assigned to stay in-house. The Chief CRNA will make this determination during Step 1 (weather watch) planning stage.

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BE PREPARED

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IV. Post-Storm Staffing:

Reinstitution of surgical services following the weather emergency will be contingent upon the demand for service, sustained structural damages, impediments to emergency services access, and the ability to resume clinical activities. The Medical Center Command Center will determine whether operations will resume at normal or reduced capacity. This information will be accessible through the hospital’s aforementioned designated telephone line or the OR emergency line. Continuation of “emergency-only” surgical operations will be covered by the in-house storm call team until they can be replaced by the in-house and pediatric call attendings scheduled to cover on the date facility re-access is permitted. The call team should plan for the possibility of staying in-house for up to 72 hours post-storm.
GRAND ROUNDS FOR THE MONTH OF JULY

“Complex Regional Pain Syndrome”
July 2, 2013
Arthur Smith, MD
Medical University of South Carolina
Associate Professor

“Pain Management in the 21st Century; Myth and Reality”
July 9, 2013
Kutaiba Tabbaa, MD
Case Western Reserve University
Associate Professor

“Cultural Competency”
July 16, 2013
Wanda Gonsalves, MD
Medical University of South Carolina
Associate Professor

“State of the Department Address”
July 23, 2013
Scott T. Reeves, MD
Medical University of South Carolina
Chairman and Professor

“Anesthesia Medically Challenging Case Conference”
July 30, 2013
George Guldan, MD and Ryan Guncelman, MD
Medical University of South Carolina
Assistant Professors
DEPARTMENT OF ANESTHESIA AND PERIOPERATIVE MEDICINE
Medical University of South Carolina
167 Ashley Avenue
Email: kinmic@musc.edu
Phone: 843-792-7503
Fax: 843-792-9314

CHECK OUT OUR WEBSITE AT:
HTTP://WWW.MUSC.EDU/ANESTHESIA

Future Events/Lectures
CA-2/3s
1/July — Chronic Pain Management, Dr. Smith
2/July — Complex Regional Pain Syndrome, Grand Rounds, Dr. Smith
8/July — Understanding New Concepts of Chronic Pain and Anesthesia Implication, All Residents, Dr. Tabbaa (CWRU)
9/July — Pain Management in the 21st Century; Myth and Reality, Grand Rounds, Dr. Tabbaa (CWRU)
15/July — Sympathetic Nerve Blocks (Barash Ch. 26), Dr. Doty
16/July — Cultural Competency, Grand Rounds, Dr. Gonsalves
22/July — Anesthetic Management of Kidney Transplantation PBLD (Barash Ch. 54), Dr. Hand
23/July — State of the Department Address, Dr. Reeves
29/July — Anesthetic Management of Aortic Surgery PBLD (Barash Ch. 42), Dr. Finley
30/July — Anesthesia Medically Challenging Case Conference, Entire Department, Drs. Guldan/Gunselman

Click Here to Download the Rising CA1 Lecture Schedule for June 2013

I HUNG THE MOON
Don’t forget to nominate your co-workers for ‘Beyond the Call of Duty’. I Hung The Moon slips are available at the 3rd floor front desk, and may be turned in to Kim Crisp. Thanks so much!!

Emily Munday, CRNA: Thanks for being a team player!

Susan Craven, CRNA: Thanks for being a leader in all of the craziness!

Amy Leatherman, CRNA: Thinking of others and always helping out! Thank you!

Holiday Party: December 7, 2013
Location: Carolina Yacht Club.

4TH OF JULY

We Would Love to Hear From You!
If you have ideas or would like to contribute to Sleepy Times, the deadline for the August edition will be July 22, 2013.