



the **Anesthesia Record**

AAAA® American Academy of Anesthesiologist Assistants

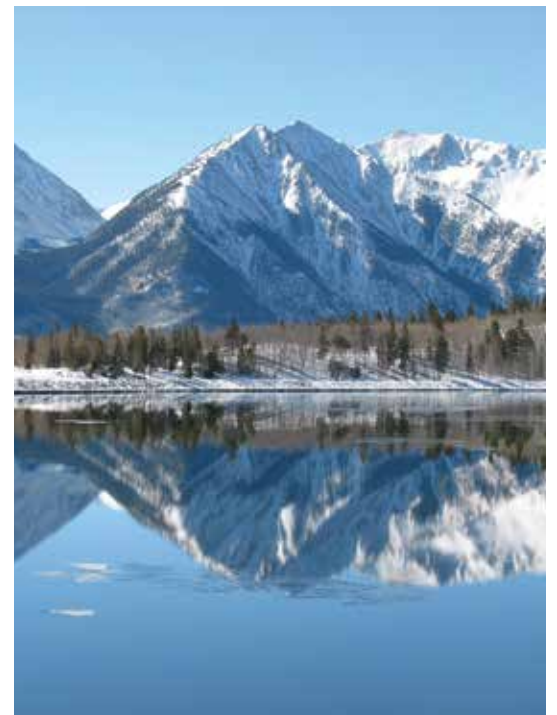
First Quarter 2016

CAA Prospects Are a Mile High

Explore Denver Like a Local



40th
Anniversary
ANNUAL MEETING



ONE MILE ABOVE SEA LEVEL

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The Anesthesia Record

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Calendar of Events

April 2016

AAAA[®] Conference

April 2 - 5 | Sheraton Downtown, Denver, CO

May 2016

2nd Quarter Newsletter Submission Deadline

May 2nd

June 2016

NCCAA Registration Deadline for CMEs

June 1st

National AA Week!

June 6th - 10th

NCCAA Certification Exam and CDQ Exam

June 4th

ASA Perioperative Surgical Home Summit

June 24th - 26th | Chicago, IL



San Diego, CA – January 2016: Carie Twichell, CAA, Jeff Smith, CAA and President-elect Gina Scarboro, CAA, staff the AAAA booth at the 2016 ASA Practice Management Conference. Physicians from across the nation visit the booth to inquire about expanding AA licensure.

President's letter

Mile High Views

The most important event for the Certified Anesthesiologist Assistant profession is the annual AAAA® meeting. For the 40th anniversary of the conference, AAAA® is convening in Denver, Colorado. Denver is a great city in a great state where CAAs fought tirelessly and successfully for the right to be licensed and practice. This dedication by the Colorado Academy of Anesthesiologist Assistants (CAAA), the Colorado Society of Anesthesiologists (CSA), and other supporters is an inspiration and an example of, as Ben Saunders (see Saunders story right column) says, the “refusal to quit”. It is an honor to have this year’s AAAA® conference in such a groundbreaking state.

“It is an honor to have this year’s AAAA conference in such a groundbreaking state.”

Ben Saunders’ experience left him with the desire to implore people to “get out” and tackle the challenges that life brings. I urge every CAA to do the same by joining us at the AAAA® annual conference. The annual conference is the ideal arena where ongoing challenges to CAA practice are shared, often with new and important issues being discussed for the first time. The AAAA® strives to educate membership on the ongoing efforts to address these issues and also seeks membership input. How different might the AAAA® and our profession look if every CAA passionately fought for their profession with a “refusal to quit?”

This year’s conference is noteworthy because the AAAA® and the American Society of Anesthesiologists will be jointly providing AMA PRA Category 1 Credit(s) for the annual meeting. Not only does this allow our physician colleagues to attend the conference and receive CME credit, but it also conveys the continuing and growing support for our profession by the ASA.

“The AAAA annual conference is the only national event that is solely dedicated to our profession.”

With ASA support and credentialing, we also gain an increase in opportunities for grants and sponsorship. The AAAA® greatly appreciates the organizations and companies offering grants and sponsorship for the upcoming AAAA® meeting. These opportunities offset cost and allow the AAAA® to re-allocate limited resources and expand efforts to address membership directed initiatives. Our profession is designed to support and complement the advanced medical knowledge, experience and skill sets unique to Physician Anesthesiologists. This is in contrast to the message of nurse anesthesia leadership that touts the removal of Physician Anesthesiologists from anesthesia patient care. The AAAA® will continue to maintain its close and collaborative relationship with the ASA.

The AAAA® annual conference is the only national event that is solely dedicated to our profession. In attending the conference every year, CAAs have the opportunity to support the AAAA®, earn CME credits, and network within the largest gathering of CAAs and employers. This is also a great time for membership to express suggestions and concerns directly to AAAA® leadership. Attendees will be immersed in a learning culture and share memorable experiences with CAAs from around the nation.

“Denver is a great city in a great state where CAAs fought tirelessly and successfully for the right to be licensed and practice.”

While Saunders initially attempted his journey unsupported, as AAAA® members there is no need for your professional challenges to be met in isolation; the AAAA® organization is ready and able to support those members through their entire career journey. As an AAAA® member, you directly support the AAAA® to achieve “great feats through ambition, passion, stubbornness and refusal to quit.”



Tim Goodridge, CAA

President, AAAA®
Baylor Scott & White Healthcare
Round Rock, Texas
Tgoodridgecaa@outlook.com

On October 25, 2013, adventurer Ben Saunders and his teammate Tarka L'Herpinriere set out to complete Captain Robert Falcon Scott's failed 1912 polar expedition — a four-month, 1,800-mile journey from the edge of Antarctica to the South Pole and back.

At the start of the expedition, L'Herpinriere and Saunders each dragged 200 kilograms by sledge, heavier loads than each of Scott's weakest ponies, and about 100 kilograms more than Scott and his men. Over these four months, the pair faced blizzards, temperatures far below zero and vast whiteouts that forced them to move forward blind.

Halfway through, after walking thirty-five marathons back-to-back, L'Herpinriere and Saunders came close to death. They were hypothermic, hypoglycemic, and losing weight at alarming rates. Soon, they ran out of food. Saunders had to make the hardest decision of his life: to call for a resupply flight, which meant that the expedition was no longer “unsupported,” and therefore not purely what he'd set out to accomplish. But “I don't regret calling for that plane for a second,” he says. Without it, he would never have made it to speak today.

[Saunders completed his expedition without loss of life]

“Telling you this,” he says, “is proof that we can all accomplish great feats through ambition, passion, stubbornness and refusal to quit ... that if you dream something hard enough, it does indeed come to pass.”

Reference
“Why bother leaving the house?” Ben Saunders. Online Blog. 2014

<http://blog.ted.com/the-hardest-105-days-of-my-life-ben-saunders-at-ted2014/>

Leadership opportunity

AAAA Representative to CAAHEP

The Governance Committee is now accepting candidates for the position of AAAA® representative to the board of directors of the Commission on Accreditation of Allied Health Education Programs (CAAHEP). The AAAA® representative will be selected by the AAAA® Board of Directors. The term begins July 1, 2016 and runs three years. Applicants should demonstrate an interest in professional leadership, knowledge of our profession, advocacy skills, and a willingness to work with the AAAA® board of directors. CAAs interested in representing AAAA® to CAAHEP should send their letter of interest and a CV to the Governance Committee, c/o meganvarellas@gmail.com.

Why this appointment is important:

When individual CAAs step up as volunteers and engage in professional citizenship, they help all CAAs while their own "boat" is moved closer to the shore. Volunteers gain leadership experience and become quality advocates for our profession while helping each other. Part of an effective governance committee is the comprehensive review and recommendations to the board which enhance the quality and future viability of the board of directors and other critical leadership positions.

The Commission on Accreditation of Allied Health Education Programs (CAAHEP) is a programmatic postsecondary accrediting agency recognized by the Council for Higher Education Accreditation (CHEA) and carries out its accrediting activities in cooperation with 23 review committees (Committees on Accreditation) which for our profession is the Accreditation Review Committee for Anesthesiologist Assistants (ARCAA). CAAHEP currently accredits over 2100 entry level education programs in 28 health science professions.

CAAHEP is comprised of both a commission and a board of directors. The commission is composed of representatives appointed to represent the organizations that belong to CAAHEP as well as certain other "communities of interest." These commissioners are responsible for approving the bylaws, mission, and vision statements of CAAHEP as well as determining which health sciences professions are to be recognized by CAAHEP. They also monitor the development of accreditation standards and retain legal counsel and secure liability insurance for CAAHEP, its appointed and elected committees, and all Committees on Accreditation (CoA).

The CAAHEP Board of Directors is composed of 16 members who are elected by and from those serving as commissioners. The Board is the accrediting body of CAAHEP that awards or denies accreditation after review of accreditation recommendations made by the Committees on Accreditation. It is also the primary governing body that oversees the business of CAAHEP and implements the mission and vision as adopted by the Commission.



Megan Varellas CAA

Governance Committee chair
Park Ridge Health
Hendersonville, NC
meganvarellas@gmail.com

The current and past members of the AAAA® board of directors would like to thank Claire Chandler, CAA, for her years of service as the CAAHEP representative and AAAA® leader. Claire had the additional



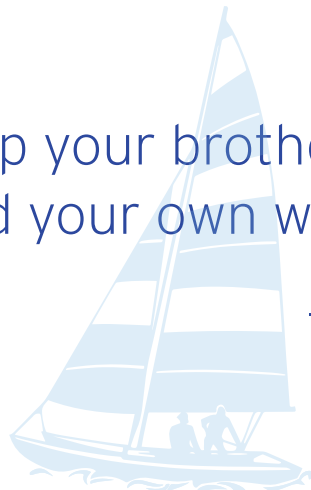
Claire Chandler, CAA

honor of being elected to the CAAHEP board and has served as a tireless advocate for the profession during her career. She successfully brought a strategic planning process to AAAA® while serving as president and her organization skills helped AAAA® transition to an effective advocacy professional organization while expanding our sphere of influence with partnering organizations in the healthcare industry.

"When individual CAAs step up as volunteers and engage in professional citizenship, they help all CAAs

"Help your brother's boat across,
and your own will reach the shore."

- Hindu Proverb



Numbers tell story, foretell the future

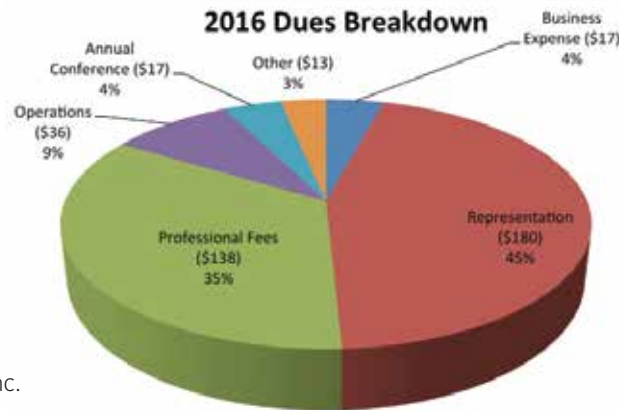


Jamie Taff, CAA

Treasurer, AAAA
Western Anesthesiology Associates, Inc.
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The primary responsibilities of the members of the AAAA Board of Directors include goal setting and allocating limited resources to realize goals. The 2016 budget was approved at the 4th quarter board meeting in San Diego at the ASA conference. Creating and approving the budget begins in June each year and continues until a budget is finalized. The budget reflects priorities and objectives that will be most beneficial to membership. At the close of 2015, AAAA finished the year in the "black", accounting slang for positive cash flow. This demonstrates responsible use of your dues and allows for a bold increase in advocacy efforts for CAAs.

The Board has determined that AAAA members and the profession would benefit greatly from the hiring of a state affairs director to be solely dedicated to handling practice issues and state licensure expansion. CAAs in numerous states face practice restrictions, reimbursement denial, and licensure opportunities. The Board recognizes the most pressing needs for members are to protect CAA scope of practice where conditions exist that would make CAAs third tier providers, to improve work opportunities by increasing work sites in open states where opposition to CAAs or practice and payment challenges limit CAA employment, to reinstate full reimbursement where CAA employers have been unfairly denied payment for their services, and the always present desire for every state to authorize CAA practice. The state affairs director job position was posted nationally on March 8.



In order to underwrite a state affairs director who can address these concerns on a full-time basis through a comprehensive strategy, the AAAA must increase its operating budget. We can't do this without improved membership numbers. Just over 50% of CAAs support the advocacy work of AAAA compared to greater than 90% of nurse anesthetists who support their professional organization. About the same percentage of CAAs newly graduated support AAAA, which is surprising since practice issues impact the longevity of their career investment the most. The largest CAA employer in the country has the lowest membership rate, creating a culture of professional complacency which damages such a small profession.

Recognizing dues aren't always easy to pay, the membership committee created and the board approved quarterly bank draft option for payment of dues, should one payment not be feasible at the beginning of the year.

"Membership dues and legislative fund contributions are vital and necessary for the expansion and advocacy of the CAA profession."

Members may ask "How is the AAAA spending my dues?" The board and finance committee promote budget transparency to make our members not only willing to pay their dues each year but also recruit their coworkers to do so as well. The chart below generally illustrates how each dollar of your individual dues is invested in the mission of the AAAA.

The majority, approximately 45%, of the operating budget for 2016 is aimed at promoting the profession and materially participating in strategic meetings that can advance and protect the profession. Professional fees, approximately 35%, include legal, accounting, and our management company which maintains a headquarters and staff for the organization. Operations, about 9%, cover expenses to members including but not limited to the website, newsletter, telecommunications, printing and distribution of promotional materials, and office supplies. Business expenses, 4%, cover bank fees, business registration fees, licenses and permits and merchant credit card fees.

As the annual conference fast approaches one can also appreciate that a small portion of each member's dues is allocated to provide a discounted CME opportunity to every member annually. The annual conference is designed to cover all CDQ exam topics via lecture and reach the 40 hours of CME required every two-year period.

Anyone that has ever managed a business can see that AAAA members get a great value for their dues!

[Continued on page 11](#)

40th Mile High Meeting

Anniversary 2016 AAAA Annual Meeting
April 2 - 5, 2016
Sheraton Denver Downtown Hotel
Denver, CO



Samantha Evankovich, CAA

Chair, Annual Meeting Committee
UT Health, University of Texas Department of Anesthesiology
Memorial Hermann Texas Medical Center
Adjunct Instructor, Case Western Reserve University, Houston
Houston, Texas

Jointly Provided by the American Society of Anesthesiologists®
and the American Academy of Anesthesiologist Assistants®

Register at www.anesthetist.org/aaaa-annual-conference

Registration Fees

AAAA® Fellow & Physician Members: \$475

AAAA® Student Members: \$225

Non-Members: \$900

Saturday and Sunday only - Members: \$375

Saturday and Sunday Only - Non-Members: \$650

Meeting Topics | The 2016 Annual Conference features outstanding speakers presenting on relevant topics.

- **Preoperative Evaluation of the Pediatric Patient, Part 1 & 2**
Megan Brockel, MD

- **Thoracic Anesthesia: An update on lung separation techniques**
- **Thoracic Anesthesia: Hypoxia during thoracic surgery**
Javier H. Campos, MD

- **Cardiac Anesthesia Jeopardy**
- **Anesthesia for Patients with Grown Up Congenital Heart Disease**
Richard J. Ing MBBCh, FCA

- **Ensuring Postoperative Safety and Comfort with Neuromuscular Blockade***
Jaideep Mehta, MD

*This educational activity is supported by an educational grant from Merck

- **Assessment of Adequate Strength Following Neuromuscular Blockade**
- **Evaluation of Neuromuscular Blockade in Patients With Neuromuscular Disease**
Anthony Oliva, MD

- **Addiction in the Anesthesia Provider, Part 1 & 2**
Daniel Perlin, MD

- **Use of Thrombelastography in the OR to Guide Therapy**
- **Evaluation and Care of the Patient with End-Stage Liver Disease**
Evan Pivalizza, MD

- **Improving quality and safety in office-based surgery and anesthesia**
- **Newer practical approaches for managing OSA and obese ambulatory patients**
Fred E. Shapiro, DO

- **The Dark Side of Evidence-Based Medicine**
- **Thoracic Anesthesia Can Be a Pleasure:**
Tips and tricks for maximizing success
Karen Sibert, MD

- **Anesthesia Concerns for Liver Disease and Surgery**
- **Anesthesia for the Patient with Morbid Obesity**
Srikanth Sridhar, MD

- **Top 10 Respiratory Anesthesia Practices that Drive Me Crazy**
- **Beating Joe Camel: Helping Your Patients Quit Smoking**
David O. Warner, MD

- **AA Panel, Topic: Mission Trip**
Shane Angus, CAA
Sabena Kachwalla, CAA
Megan Varellas, CAA

ACCME Accreditation and Designation Statements

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the American Society of Anesthesiologists® and American Academy of Anesthesiologist Assistants®. The ASA® is accredited by the ACCME to provide continuing medical education for physicians.

The 2016 AAAA Annual Meeting is currently being reviewed for AMA PRA Category 1 Credits™.

Additional Workshops

In addition to general session lectures, the AAAA® will offer the below workshops. Please note that each workshop requires additional registration. Participation space is limited, so reserve your spot in each session today.

USGRA Workshop sponsored by NOVA

Featuring experienced UK and USA Faculty including members of the Block GuRU, Block Jocks and Block Nursing teams. There are three sessions, each covering the same content.

Session 1 - Saturday, April 2, 10:00 a.m. - 2:30 p.m.

Session 2 - Sunday, April 3, 12:30 - 5:00 p.m.

Session 3 - Monday, April 4, 8:30 a.m. - 1:00 p.m.

The cost of each session is \$100 for Fellows and Physician Affiliates and \$45 for Students. Proceeds from the USGRA Workshops go to the AAAA Legislative Fund.

ACLS/BLS & PALS

Includes all new American Heart Association updates for 2016. Find out what changes have been made and learn about the newest protocols. Bring your certification and knowledge up to date.

Saturday, April 2, 9:00 - 11:00 a.m.

ACLS/BCLS - Registration fee \$150

Sunday, April 3, 8:00 - 10:00 a.m.

PALS - Registration fee \$150

Meeting attendees who wish to attend ACLS/BLS and PALS may do so at a discounted rate of \$250. Proceeds from ACLS/BLS/PALS workshops go to the AAAA® Legislative Fund.

PBLDs - Problem-Based Learning Discussions are offered at no additional cost to meeting attendees.

Saturday, April 2, 2:30 - 4:00 p.m.

Pediatric PBLD - Katie Monroe, CAA, PhD & John Ng, CAA

Sunday, April 3, 9:00 - 10:30 a.m.

*PBLD: Sudden inability to ventilate during major scoliosis surgery
Caleb Hopkins, CAA & Samantha Lupton, CAA*

Monday, April 4, 2:00 - 4:00 p.m.

Geriatric PBLD - Stacy Fairbanks, MD & Elizabeth Block, CAA

Educator Training Session - The Educator Training Session is offered at no additional cost to meeting attendees.

Monday, April 4, 2:00 - 4:00 p.m.

*Educator Training Session: Feedback - the most powerful teaching tool -
Shane Angus, CAA & Melanie Guthrie, CAA*

The Gravenstein Memorial Lecture, ASA Update

In recognition of the efforts of Dr. Joachim "Nik" Gravenstein in anesthesia patient safety, the AAAA® designates a lecture each year during the Annual Conference program as the Gravenstein Memorial Lecture.

This year's Gravenstein Memorial Lecture will be ASA President-Elect Dr. Jeff Plagenhoef's ASA Update presented on Sunday, April 3, 11:30 a.m. – 12:30 p.m.

Hotel Accommodations

For hotel reservations, contact the Sheraton Denver Downtown Hotel at (303) 893-3333 and request the American Academy of Anesthesiologist Assistant room block. Please note that the cut-off date to receive the AAAA® room rate is March 25, 2016.

Those staying at the conference host hotel will receive a 10% discount on their meeting registration. To receive the discount, forward your hotel confirmation email to info@anesthetist.org. A discount code will then be sent to your email.

The AAAA® room block is limited and discounted, so reserve your room today to ensure that you receive the AAAA® room rate and 10% off your conference registration fee.

Early onsite registration

Beat the Saturday rush. Early registration for the AAAA® Annual Meeting will be Friday, April 1, 3 - 6 p.m. in the South Convention Lobby of the Sheraton Downtown Hotel.

Denver Travel Tips [include these tips as a custom note – snowboard? Mountains? etc]

- Arrive early and explore
- Drink plenty of water to avoid altitude sickness
- The thin air causes sunburn – pack sunscreen

Conference Notes [include this section as a post-it note]

- Regional Workshop with hands-on experience
- Nationally recognized speakers
- Expanded PBLD curriculum
- BLS, ACLS & PALS recertification opportunities

Are you attending the AAAA Annual Conference? Let us know! Tag us on Facebook, Twitter, or Instagram using #AAAA2016

Enjoy the Mile-high City

(But, prep early to prevent altitude sickness)



Travis Dziubinski, SAA
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Anschutz Medical Campus
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Bart Williams, SAA
University of Colorado
Anschutz Medical Campus
Bart.Williams@ucdenver.edu

This April, as your plane descends into the Denver Airport, look to the west to grab your first view of the beautiful Colorado Rockies! Take a second to catch your breath through the dry, thin air and double check – Did you remember your Acetazolamide? Prepare for some degree of altitude sickness as you plan your first day's activities. Your body will need time to acclimate to the mile-high altitude and lower PAO₂. Keep these barometric pressures handy for your alveolar gas equations: Denver's PB = 630mmHg & Vail's PB = 550mmHg!

Acclimatization is key to avoiding altitude sickness. The body responds slowly by increasing production of red blood cells, 2, 3-DPG and capillaries. So allow your body time to adjust to the environment before driving up North America's highest paved road to Mount Evans or even traversing the Rocky Mountain foothills on your first day. Altitude sickness symptoms include headaches, extreme fatigue, nausea/dizziness, shortness of breath and an overall feeling of malaise. Most hotels also provide supplemental oxygen and humidifiers to guests experiencing altitude sickness.

Stay hydrated! Maintaining isovolemia will optimize your body's transport of oxygen by increasing blood flow and end-capillary oxygen tension despite your exposure to relatively decreased PAO₂. With the dry atmosphere, dehydration also occurs much faster! Take a bottle of water with you wherever you go exploring! Colorado's cool, thin, and dry air may also irritate your throat and lungs, especially with exercise. Downing a couple extra glasses of water throughout the day would not be a bad idea, especially after taking a tour of Epic Brewing Company.

If you can, fly in a day or two early and check out the arts, beats and eats of Boulder Arts Week (March 25th-April 2nd). Visit one of over 200 breweries, take in some outdoor acoustics at the Red Rocks Amphitheater or relax at one of the many parks in the greater Denver area. Or head up to the mountains to catch the Springalicious festivities in Steamboat-Ski Town (April 1st-10th). If altitude sickness strikes, head for lower altitude and check out this list of Denver hot spots!

Best breakfast:

1. Snooze - Specialty Pancakes
2. Denver Biscuit Company
Biscuit Sandwiches and Bloody Mary's
3. The Lobby - Bottomless Mimosas & Stuffed Tater Tots

Best Grub:

1. Illegal Pete's
2. Hapa Sushi
3. Pinche Tacos
4. Crave Real Burgers

Downtown Hotspots:

1. 16th Street Mall
2. Larimer Square
3. 19th and Market

Best Concert Spots:

1. Red Rocks Amphitheatre
2. The Fillmore
3. Ogden

City Sights:

1. Denver Zoo
2. Washington Park
3. Cherry Creek
4. The Source

Best Mixed Drinks:

1. The Green Russel
2. Retro Room
3. Avanti

Best Nightlife:

1. Beta Nightclub
2. Mile High Spirits
3. The View House
4. Punch Bowl Social

Best Brewery and Distillery Tours:

1. Miller Coors
2. Stranahan's Whiskey
3. Great Divide Brewery

Best Slopes:

1. Arapahoe Basin
2. Copper Mountain
3. Vail
4. Loveland

Best Taps:

1. Ale house
2. Lowry Beer Garden
3. The Yard House
4. First Draft

Best Slice:

1. Mellow Mushroom
2. Atomic Cowboy
3. Marquis Pizza

Alert!

Prepare for some degree of altitude sickness.

Acclimatization is key to avoiding it.

Stay hydrated!

Explore Denver Like a Local

Experience Denver's Local Flavors



Deborah Agustin, CAA

President, Colorado Academy of Anesthesiologist Assistants
Recent Graduate Commissioner, CAAHEP
Instructor, Children's Hospital Colorado
Department of Anesthesiology, University of Colorado
Aurora, Colorado

Things to do:

- Walk or ride the free shuttle down 16th Street
- Check out Union Station: historic terminal building 1st opened in 1881
- Eat at one of the many restaurants inside: Snooze, Mercantile Dining
- Walk around Confluence Park: an urban park located near Lower Downtown
- Includes concrete trails, grassy areas, and river overlooks
- Civic Center Park: this park includes a Greek amphitheater, fountains, and gardens
- Museums:
 - Denver Art Museum, Clifford Still Museum, Denver Museum of Nature and Science
- Art museum is free the first Saturday of every month (April 2!)
- Denver Mint
- Denver Botanic Garden
- Denver Zoo
- Elitch Gardens: an amusement and water park located in the downtown area
- Catch a baseball game at Coor's Field

Things to eat:

- Coffee/Tea
- Novo Coffee, Little Owl, Tea Cloud, Crema Coffee House
- Sweets/desserts
- Ice cream: Little Man's, Sweet Action
- Donuts: Voodoo Donuts, Habit Donut Dispensary
- Gourmet: D Bar, Sugar Mill
- Breakfast/brunch
- Snooze AM Eatery, Denver Biscuit Company, Mercantile Dining & Provision, Crema Coffee House
- Casual dining
- Hopdoddy Burger Bar, Ian's Pizza, Modmarket, Crave Real Burgers, Crepes'n'crepes, Illegal Pete's, Cart Driver
- A wee bit fancier
- Mercantile Dining & Provisions, Root down, Linger, The Populist, Old Major, Steuben's, Watercourse (vegetarian), Euclid Hall, Stoic & Genuine, Squeaky Bean, Work & Class, beast + bottle
- Libation
- Cocktails: Green Russell, Williams & Graham, Cruise Room at the Oxford Hotel
- Beers: Jagged Mountain Brewery, Denver Beer Co, Great Divide Brewery, Wynkoop Brewery
- A little bit of everything
- The Source in River North: home of Acorn, Crooked Stave Brewery, Boxcar coffee, and more
- Union Station: home of PigTrain Coffee, Milkbox Ice Creamery, Stoic & Genuine, Kitchen Next Door

What To Expect In Denver

Erica Bamgbopa, SAA

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Annual Meeting Subcommittee
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A new year is upon us. For most of us, it brings new goals, new countdowns, and perhaps new daydreams of traveling. If so, you're in luck! You have the opportunity to take a break from life's everyday stresses and travel to beautiful Denver, Colorado, for this year's annual AAAA conference. Some of you may be thinking, "Why Denver?" or "Why go to the AAAA conference?"

"the chance to network with AA students (SAAs), CAAs and anesthesiologists (**employer alert**) from across the country."

Denver is a city with a plethora of things to offer to fit each person's interests. Outdoorsy? Denver is an outdoor paradise. You can raft down the river, bike from park to park, and of course enjoy the natural wonders of the great Rocky Mountains. Sports enthusiast? Denver is home to SEVEN professional sports teams, including the Denver Broncos, Super Bowl 50 Champions. Foodie? Denver features many top-rated restaurants and boasts local and eco-friendly food.

So why register for the AAAA conference?

The opportunities to not only learn but network at this conference are abundant. The AAAA Annual Meeting Committee has worked tirelessly to put together an incredible conference featuring lectures from top anesthesiologists and anesthesiologist assistants across the nation. In addition to attending these lectures, you will have the chance to network with AA students (SAAs), CAAs and anesthesiologists (employer alert) from across the country. The student social is a great opportunity to meet up with new and old friends and fellow SAAs! Share experiences with students from another program over a drink or two. Lastly, no conference is complete without a little friendly competition. Come out to Jeopardy to show your school spirit and watch each respective program compete to claim the champion title!

For those graduating in 2016, preparing for boards, applying for jobs, interviewing, and graduating can be somewhat of a stressful time. A useful tidbit is that you have the opportunity to renew your AAAA membership at the AAAA Membership Committee table at the conference. By renewing your membership now, not only will the transition from AAAA student member to AAAA Fellow be smoother, but this leaves one less item to worry about during this hectic time of year. Additionally, if you are interested in joining an AAAA committee, do not hesitate to talk to a current committee member. They would love to talk to you about how you can get involved within the AAAA.

Now, the question we hope you're asking yourself is, "Okay, what should I pack?"

Daytime attire is business casual, but if you are looking for a potential employer, consider bringing a suit to wear. Many employers will be present at the conference and there is always a possibility of securing an interview, future rotation, or even a job offer. Bring a current resume with you to the conference to provide to your new connections. Remember to look your best and act professional; you only get one chance to make a first impression.

Lastly, remember to have fun! As previously mentioned, the AAAA conference is a great place to learn and network, but it is a lot of fun! We hope to see you in Denver!

Leadership recognition

Allinger awarded emeritus status

Megan Varellas CAA

Governance Committee chair
Park Ridge Health
Hendersonville, NC
meganvarellas@gmail.com

Ellen Allinger, CAA, 2006 AAAA® President, joins a short and distinguished list of CAAs awarded emeritus membership in the AAAA®. The AAAA® Board of Directors unanimously voted to award Ms. Allinger emeritus membership in consideration of her lifelong advocacy for and contributions to the AAAA® and CAA profession. Ellen announced her retirement June 30, 2015 after a 29-year career as a CAA. She graduated from Emory University in 1986 and went on to work in Augusta, GA, Waycross, GA, Savannah, GA, and Rock Hill, SC.

Ellen has performed tireless service to AAAA® and our profession, notably serving as an officer from 2001-2010. She has also been a part of every legislative expansion effort for the CAA profession. If you work anywhere other than Atlanta or Cleveland, enjoy unhindered payment for your services, and receive a maintained salary due to practice expansion, then you have been rewarded with the fruits of her labor.

Ellen's advocacy efforts are evidenced by the fact that the former national affairs committee, of which she served as chair from 2007-2012 and 2013-2014, is now aptly named the AAAA® Legislative Committee. All AAAA® affairs are now "national" and this would not be the case if she had not contributed her time, money, and energy to



Ellen Allinger, CAA

expanding the CAA profession. Ellen also served on the ASA Anesthesia Care Team Committee (2013-2015) and the ASA Education and Practice Committee (2006-2007). These positions hardly reflect her successes in promoting CAAs to anesthesiologists in her professional and personal life to-date.

Ellen has the natural leadership quality of mentorship that most AAAA® leaders have benefitted from. We must all thank Ellen for where the CAA profession is now. The AAAA® Board of Directors is pleased to congratulate Ellen Allinger with her well-deserved emeritus membership!

AAAA® Emeritus Members: Robert C. Cooper, CAA, Nancy S. Cunningham, CAA, Wesley Frazier, MD, and Rhea Sumpter, CAA.

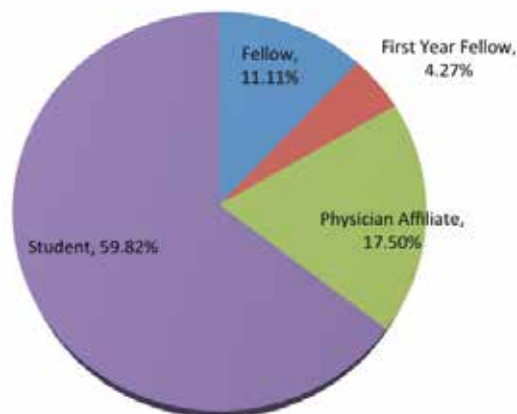
Numbers

Continued from page 5

The Legislative Fund is used to actively support CAA licensure efforts throughout the year. Such licensure expansion initiatives are funded solely by donations. Not surprisingly, the demographic most often looking for jobs (students) raises the most money for the leg fund each year. 25% of AAAA members contributed to the Legislative Fund in 2015 in an average amount of \$120.

It's important for all CAAs and AA students to understand that the AAAA operating budget is generated from membership dues revenue. We can only accomplish what CAAs are willing to finance through membership. Membership dues and legislative fund contributions are vital and necessary for the expansion and advocacy of the CAA profession. Members interested in managing AAAA finances and fundraising are encouraged to join the finance committee and get involved.

Legislative Fund Contributors in 2015



Maximize post-op analgesia for foot procedure

John Ng, CAA

WellStar Medical Group
Division of Pediatric Anesthesia
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Your next patient is scheduled for a talso-tarsal relocation of the foot. In addition to placing a popliteal nerve block, which of the following nerves should also be blocked in order to maximize post-op analgesia?

- A. Tibial nerve
- B. Deep peroneal nerve
- C. Superficial peroneal nerve
- D. Saphenous nerve
- E. Sural nerve

The sciatic nerve is a bundle of nerves that arises from the L4 to S3 segments of the lumbar and sacral plexi. It travels deep in the posterior thigh to the popliteal fossa, where it lies more superficial and typically divides into two major branches: the common peroneal and tibial nerves.

The common peroneal nerve leaves the popliteal fossa by passing posteriorly to the head and neck of the fibula. It then winds anteriorly and divides into the deep and superficial peroneal nerves. The deep peroneal nerve runs down the anterior aspect of the leg. It provides innervations to toes extensors and sensations to the medial half of the dorsal foot. Meanwhile, the superficial peroneal nerve descends and enters the ankle laterally, providing cutaneous sensations to the dorsal aspect of the foot and all five toes.

The tibial nerve leaves the popliteal fossa and continues deep behind the gastrocnemius muscle. As the nerve descends, it continues as the posterior tibial nerve that wraps around the posterior medial malleolus. It then branches into the medial and lateral plantar nerves, which innervate the heel and plantar region of the foot.

The medial sural cutaneous nerve and the lateral sural cutaneous nerve are derived from the tibial nerve and common peroneal nerve, respectively. As they descend, they eventually connect together and form the sural nerve. The sural nerve travels down the posterolateral side of the leg, passes the lateral malleolus, and continues down the lateral side of the foot. It innervates the lateral side of ankle and foot.

Of the five main nerves that innervate the foot, the tibial, sural, deep peroneal, and superficial peroneal nerves are all terminal branches of the sciatic nerve as previously mentioned. Conversely, the saphenous nerve, which supplies cutaneous sensation to the anteromedial aspect of the foot and ankle, is the only branch that is supplied by the femoral nerve. Therefore, a combination of saphenous and popliteal blockade might be needed for maximizing analgesia for the ankle and foot.

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Correct Answer: D



MHAUS partnership brings discounts

The American Academy of Anesthesiologist Assistants (AAAA) has partnered with the Malignant Hyperthermia Association of the United States (MHAUS) to offer MHAUS membership benefits to active AAAA members at a reduced rate.

"The partnership between AAAA and MHAUS is an incredible opportunity that allows Certified Anesthesiologist Assistants (CAA) and members of AAAA access to comprehensive MHAUS training, support, and resources at an affordable and discounted rate," said AAAA President Timothy Goodridge.

"Every anesthesia provider is aware that malignant hyperthermia is a constant possibility that requires the utmost vigilance and preparedness. Perioperatively, CAAs are often the first providers that recognize the symptoms and initiate treatment for malignant hyperthermia. Alongside MHAUS, the AAAA continues its dedication to patient safety in anesthesia and offering the best resources to members." "In aligning with MHAUS through partnership, the AAAA recognizes MHAUS as the preeminent organization offering valuable resources for the education, prevention, preparedness, and treatment of malignant hyperthermia," Goodridge said.



"AAAA has upheld the mission of MHAUS, and has been instrumental in assuring their patients remain safe from the nightmare of MH through MH preparedness plans. The mutual respect and cooperation between our organizations is enhanced further through our joint decision to offer this partner membership option to active AAAA members. Those who take advantage of this opportunity will have improved access to MH education. With knowledge comes power. As a result, we expect to become even more impactful

in MH preparedness efforts. The ongoing communication between AAAA and MHAUS members and leaders can be channeled to implement products and programs that are both educational and impactful" said Dianne Daugherty, MHAUS Executive Director.

AAAA Members can learn more by going to www.mhaus.org and clicking Membership.

"With knowledge comes power"

What is Malignant Hyperthermia?

Malignant Hyperthermia (MH) is inherited genetic disorder found in an estimated 1 out of 2,000 people and triggered by certain anesthetics and/or the drug succinylcholine and most often experienced in individuals undergoing routine surgery but in rare cases MH can happen without anesthesia. The disorder is due to abnormally increased levels of cell calcium in the skeletal muscle. Symptoms include body temperature of up to 107 degrees, muscle rigidity, system-wide organ failure, and possible death.

There is mounting evidence that some patients will also develop MH with exercise and/or on exposure to hot environments. Without proper and prompt treatment with dantrolene sodium, mortality is extremely high.

About the Malignant Hyperthermia Association of the United States (MHAUS)

MHAUS was founded by families who lost their children to MH or could not find information about MH. In 1981 they found each other - and a doctor performing MH testing - and agreed "to make current information about MH available to all who need it!"

Beginning in 1981, MHAUS started work by asking the World Health Organization (WHO) to add MH to its list of recognized diseases and disorders. In 1983, MHAUS hosted its first healthcare professional and patient teaching conference on MH education. In 1992 the FDA ordered pharmaceutical companies that manufacture succinylcholine to change the package insert to indicate that the drug should not be used routinely in children. In 1995 the MH 24-hour Hotline was formalized and MHAUS merged with the North American MH Registry, which had been established in 1987. In 1997 the MHAUS website was formed along with the Neuroleptic Malignant Information Service of MHAUS. In 1998 the MH ID Tag program was created. In 2000 the MH Procedure Manual was created for ambulatory surgery centers, hospitals, and office based surgery suites. In 2001 the MH Patient Liaison Committee was formed. In 2003 a new mutation in ryanodine receptor gene was discovered and appears to be causal for MH. More information can be found at: www.mhaus.org.

Today MHAUS provides information and resources to medical and lay communities through conferences, educational materials, ID tags, 24-hour MH Hotline, MHAUS website, and with the help of MH Groups.

The mission of Malignant Hyperthermia Association of the United States is to promote optimum care and scientific understanding of MH and related disorders. MH episodes can happen at any time and MHAUS will always be ready to provide assistance when you need it. But the best way protect your family and patients is to be prepared before it's too late. Get Involved with MHAUS today to find out what you can do to make a difference.

American Academy of Anesthesiologist Assistants (AAAA)

The American Academy of Anesthesiologist Assistants (AAAA®) is the national organization dedicated to the ethical advancement of the Certified Anesthesiologist Assistant profession and to excellence in patient care through education, advocacy, and promotion of the Anesthesia Care Team.

Inaugural CU Class Graduates



Benny Dhanoa, SAA II

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Be An Organ Donor - Donate Life!

Congratulations to the inaugural class and 2015 graduates of the University of Colorado School of Medicine Anesthesiologist Assistant Program. These students have achieved a great milestone in their lives. Congratulations to the faculty and staff who worked tirelessly to educate and train these outstanding clinicians. The students passed their board examinations with exceptional scores, and will excel as medical providers.

The ceremony took the graduates back to the first day of class, revealing their nervousness, but reminding them of how far they have come. The administrators, faculty, and graduates were pioneers in developing an exceptional curriculum that seeks to challenge students to reach their full potential. Looking back at the journey, the endless hours of studying, volunteering, and serving patients are an embodiment of this class and their determination. The faculty and staff are proud of the graduates and excited for their future accomplishments. Congratulations and good luck to the inaugural CU class graduates!



CU AA Program Faculty and the 2015 Graduates/Inaugural Class. From left to right: Brian Heighington (Clinical Director), Ann-Michael Holland (Assistant Program Director), Brandon Way, Laura Knoblauch, Kelly Maize, Talia Cozzetta, Dylan Hartley, Will Thompson, & Nikki Block (Program Director).

Organ recipient urges donations



Joey Parrish, SAA

NOVA Southeastern University
AA Program
Tampa, Florida

In 2015, I was able to graduate with a Bachelor's degree in Neuroscience from the University of Nevada Reno and move across the country to start my medical program for anesthesia at Nova Southeastern University in Tampa. I was able to as a tissue recovery technician in order to help save the lives of others.

In 2015, I was able to breath, run, exercise, explore, excel, smile, and laugh. I was able to live.

Because of my organ donor, in 2016 I will be able to continue my education on my quest to help save lives. I will be able to start my clinical rotations as an Anesthesiologist Assistant, where I will learn the skills necessary for my future career. I will be able to grow and advance in life. I will wake up each morning and be happy to be alive.

In 2016, I will continue to remember why I do what I do, and how I got here. I will not only be because of my organ donor, I will live in memory of my organ donor."



Joey received a liver transplant at the age of 6 on August 21, 1999. Photo courtesy of Joey Parrish.

Register your decision to be an organ, eye and tissue donor at DonateLife.net Give hope. Make LIFE possible.

Maryland residents lobby for AA licensure



Lexie Fine, SAA

ASA Student Legislative Representative
Master of Science in Anesthesiology Program
Case Western Reserve University School of Medicine
Washington, District of Columbia
amf157@case.edu

On January 20, 2016, several members of the Maryland Academy of Anesthesiologist Assistants (MAAA) and two anesthesiologist assistant students (SAA) from the Case DC Master of Science in Anesthesia Program traveled to Annapolis for a successful day of lobbying in support of Senate Bill 30 (SB30). Sponsored by Senator Conway, SB30 is also known as the Maryland Anesthesiologist Assistants Act. If enacted, SB30 would provide CAAs licensure to work in the state of Maryland.

Advocacy for CAA legislation in Maryland began in meetings with members of the Senate Education, Health, and Environmental Affairs Committee. The committee members included Senators Young, Waugh, Bates, Rosapepe, and Nathan-Pulliam. Each senator voted on the bill at the SB30 Senate hearing on February 10.

The group of Maryland residents lobbying for SB30 included Saral Patel, CAA, Ashish Patel, CAA, Tosin Okusaga, CAA, Erica Bamgbopa, SAA, and Lexie Fine, SAA. The group represented several different districts from the state of Maryland, including Howard Montgomery and Prince George's County. Overall, it was an excellent opportunity to learn about the legislative process and everything that is involved in working toward the passage of CAA licensure legislation.

In order to garner the support of the legislators, time was invested with each of the senators to tell them about the role of CAAs in the Anesthesia Care Team. We also discussed the CAA educational background and training as well as the shortage of non-physician anesthesia providers in the United States. The advocacy efforts in Annapolis emphasized the importance of the Anesthesia Care Team model and its purpose in providing the safest physician-led care to all patients. Current and prospective CAAs encouraged the legislators to make educated decisions in regard to supporting SB30.

The Maryland Academy of Anesthesiologist Assistants would like to thank its members for their support of the bill and for all of those who participated in writing letters to Senators advocating for CAA practice in Maryland.

"time was invested with each of the senators to tell them about the role of CAAs in the Anesthesia Care Team."

Get discounted CAA re-cert exam, CME submission



Laura K. Knoblauch, CAA, MMHSc

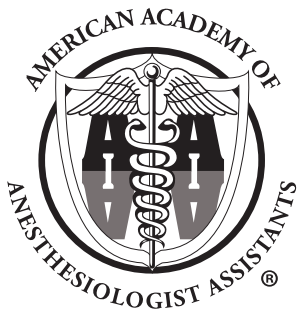
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Every six years, CAAs are required to recertify by taking the Continued Demonstration of Qualifications (CDQ) exam. AAAA members can register at a discounted rate of \$742.50 for the exam. Non-AAAA members pay \$1000. Please reference the table below for important CDQ exam dates.

June 1, 2016 is the deadline for Continuing Medical Education (CME) submissions. AAAA members receive a discounted rate of \$150 for CME submissions. Non-AAAA members pay \$235. You must use the current registration form on the National Commission for Certification of Anesthesiologist Assistants (NCCAA) website to submit CMEs. CAAs are required to have 40 CME credits every two years. 30 hours must be in the field of anesthesia, and the remaining 10 hours can be on any medical topic. ACLS and PALS instruction is counted as anesthesia hours. The NCCAA will accept a maximum of 20 hours for ACLS and PALS from a credited provider. The AAAA annual meeting offers an ACLS renewal session.

	February	June	October
Certifying Exam or CDQ	BOTH	BOTH	ONLY CERTIFYING
Application Period	8/1/15 to 9/30/15	11/1/15 to 1/15/16	3/1/16 to 5/31/16
Application Deadline	9/30/15	1/15/16	5/31/16
Application Withdrawal Deadline	1/7/16	5/4/16	9/15/16
Exam Date	2/13/16	6/4/16	10/15/16

Please reference the National Commission for Certification of Anesthesiologist Assistants (NCCAA) website for all important dates and information. (<http://www.aa-nccaa.org/>)



Second Quarter Newsletter
Content Deadline April 15, 2016

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THIS COULD BE YOUR LAST ISSUE

Renew your AAAA membership today at www.anesthetist.org



Thanks to AAAA members who have already renewed membership for 2016.
Your participation supports the expansion of AA licensure and continuing education towards patient safety.
April 14 is the “drop” date for persons not renewing.