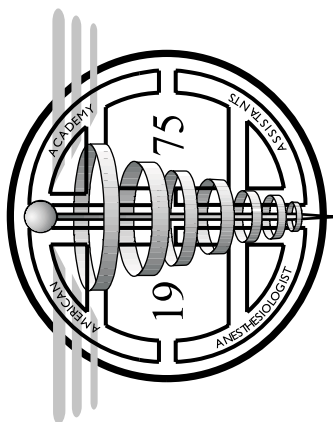


The Anesthesia Record

1st Quarter 2007

The Newsletter of the American Academy of Anesthesiologist Assistants



The President's Message

Michael S. Nichols, AA-C, AAAA President



AA's and the Chinese Teacher

If you've gotten this far in the newsletter, you're probably wondering what the crazy title of this article is all about. In his book *The Psychology of Rumor*, sociologist Gordon Allport uses the story of a Chinese teacher traveling through Maine as an illustration of the most contagious of all social messages – the rumor. This particular Chinese teacher was traveling through Maine on vacation in the summer of 1945, shortly before Japan's surrender to Allied forces, marking the end of World War II. The teacher's guidebook described a breathtaking view of the surrounding countryside from the vantage point of a local hilltop. Unfamiliar with the area, the teacher stopped in a small, nearby town to ask directions. It was from this innocent request that a rumor quickly spread: a Japanese spy had gone up the hill to take pictures of the region!

Rumors begin when facts are distorted to fit into the frame of reference of those spreading the rumor. In the case of the Chinese teacher, it was 1945, in rural Maine, at a time when virtually every family had a son or relative involved in the war effort; the only way to make sense of a story like that was to fit it into the context of the war. Such is how an Asian became Japanese, a guidebook became a camera, and sightseeing became espionage.

The corollary for AAs is that the rumors about the Chinese teacher could be compared to the misrepresentations, mistruths, and misinformation that are spread about our profession. Psychologists identify three components necessary to start the spinning of the 'rumor mill'. First of all, the story is *leveled*, meaning all of the details that are essential for understanding the true meaning are left out. Much as the timid nature or the precise nationality of the teacher were omitted from the story, so too is the fact that AAs undergo as much as three times the clinical training (~2500 hours) as CRNAs, when the latter preaches about clinical experience not being a prerequisite for matriculation. Second, the story is *sharpened*, wherein the remaining details are made more specific. The Chinese teacher became a Japanese spy and AA applicants become 'Joe-the burger flipper'; never-mind the premedical curriculum, impressive GRE scores, and top-notch undergraduate GPAs. Finally, *assimilation* occurs when the story is altered so that it

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THE ANESTHESIA RECORD

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The Editor's Column

By Tiffany Lewis-Roberts

The Evolution of Words and Meanings

Throughout time, humans have looked to words for meaning as well as information. Our past languages are reminders of symbols lost over time and entire civilizations deciphered through obscure shapes. Historians have studied hieroglyphics to gleam any sort of knowledge on ancient civilization's thoughts and functions. We look for insight to our predecessors by scouring drawings on caves and canyons. Our present language's evolution is a reminder that we are always learning, always changing, and always having to keep up with the times. New words are thought of every day. For example, "googled" becomes a common computer phrase, "plutoed" warns us that even a planet can be demoted these days, and "gianormous" is a testament to combining any two words you want to make one. Pop culture plays an undeniably important role in language these days too. Using words like "crunk", "snaps," "cooleio," and "bling-bling" convey that you are hip to what's going on with the next generation of communicators whether you like it or not.

Communication and education seem to go hand in hand since language has become so progressive. So when somebody you meet hears the word "AA" or "Anesthesiologist's Assistant" and has a very confused look on their face, you have to understand this could be a language barrier of sorts. This seems to be a commonplace occurrence that I have noticed since I started working over a year and a half ago. There is always a nurse, or a surgeon, or even an anesthesiologist who has either never even heard of an AA or never worked with an AA before. However, this is indeed evolution at hand because like so many languages, we as AA's are an evolving species. We are a relatively young profession that is constantly growing and with that growth comes barriers such as this one. However, a quick education of who we are and what we do is important in these circumstances and it starts with each and every one of us. So next time you see a confused look on someone's face, take time out to give some quick facts about your chosen profession. Make sure you know informative facts such as how long we've been around, how many schools are open, how many states AAs work in, and of course the scope of our practice. Just taking a few minutes to show that you care about what is said and known about AAs is really helpful to people just making contact with AAs. So as we progress into new hospitals, new states, and meet new people remember to always be proud of who you are and where you came from.

Inside AAAA

The 2007 Annual Meeting Update

By Chris Caldwell, AAAA Annual Meeting Chair

In just a few short months we will all be seeing each other again down in sunny Daytona Beach, Florida for our 31st Annual Conference. If you have been to the annual meeting in the past couple of years, you know to expect great presentations, fun social events, informative vendors, a certification review, the AAAA business lunch, and much more. If you haven't been to the annual meeting for some time, first, shame on you, and second, this would be an excellent time to renew the tradition. This will be the first year that we will have a lecture and workshop aimed specifically at how we all can become better clinical instructors. This endeavor will help each of us understand the different philosophies at each AA program and help us teach students from schools other than where we graduated.

In addition to all the superb activities that will be happening at the annual meeting, there is plenty to see and do in Daytona Beach, FL. The city offers a tremendous mix of activities for the AA students and those of us coming down with our families. Daytona has over 400 restaurants to chose from,



a great nightlife, and we will be down there during their Spring Family Beach Break. Take the afternoon and go to Daytona International Speedway and ride around the track with the Richard Petty Driving Experience. Charter a boat for a cruise or head out for some deep-sea fishing. If boats are not your thing, rent a reel and fish from the Main Street Pier. The chocolate lover might enjoy the free tour of the Angells and Phelps Chocolate factory and then drive up to see the tallest lighthouse in Florida, the Ponce de Leon Inlet Lighthouse. Enjoy shopping at one of the many places in the area and go to the Daytona Beach Kennel Club for Greyhound racing and poker. The Daytona Lagoon offers enough activities for the entire family to have fun all day and then unwind at our hotel's spa. Of course, you can always drive down to Orlando and I believe they have a few things to do down there as well.

Hope to see everyone soon from April 21 – 24th at The Shores Resort in Daytona Beach, Florida.



“President’s Message,” continued from page 1

makes more sense to those spreading the rumor. Much the same disbelief was present when Maine farmers quickly dismissed the possibility of Chinese teacher on vacation, as when the AANA finds it inconceivable that a practitioner can deliver high-quality anesthesia care...and *not* be a nurse.

The take-home message is that despite our [AAAA] best efforts, the rumor mill will continue to swirl, and lies will continue to be spread. The good news is that truth is on our side, we are our best advocates, and time will reveal the facts. We must continue to meet head-on the challenges before

us, stand proud of our chosen profession, and rise above the conjecture and animosity of those opposed to our proliferation.

The Chinese teacher finally made it the top of the hill he strived to see...so too shall we [the AAs], as a team and a family, stand above the petty squabbling and insecure ‘villagers’ below.

(Footnotes)

Gladwell, Malcolm. *The Tipping Point*. Little, Brown, & Co. (2002). Pgs. 201-202

Inside AAAA

Letter to the Editor

A Call for Action in North Carolina

Maggie O'Neal, Weaverville, N.C.

Within the next several weeks a bill will be re-introduced in NC providing for the licensure of our profession. This will begin the third year of AA legislative activity in the state considered the political stronghold of nurse anesthetists. The NCSA has been the primary force driving this legislation for the past two years. However, this year, the AAAA will be assuming more of the lead in getting a new bill through the NC General Assembly. While AAs can probably count on the continued financial and moral support from anesthesiologists, we need to step up and assert ourselves. Every new state's licensing of AAs further enhances and validates our image as valuable health care providers in all locations.

This informative excerpt from the September '06 ASA Newsletter summarizes the bill's progress to date:

AA Licensure Legislation

North Carolina AA licensure legislation that carried over from 2005 after receiving overwhelming support from the House Health Committee (24-4) died in the House Rules Committee. Neither the House Rules Committee nor full House of Representatives was provided the opportunity to vote on H.B. 1330 before the General Assembly adjourned for the year.

It is not for lack of support that the bill did not become law this session. In addition to its success in the House Health Committee, H.B. 1330 received unanimous support in both Senate health and finance committees and bipartisan support by the full Senate (42-3). After the bill passed the Senate, the Speaker of the House assigned the bill to the House Rules Committee where it remained until the General Assembly adjourned. Although legislation licensing AAs will have to be introduced again in 2007, this issue continues to retain its bipartisan support in the House and Senate. Lisa Percy, J.D., Manager State Legislative and Regulatory Affairs, ASA Newsletter, September 2006 Volume 70.

Needless to say, AAs faced well-financed opposition by the nurse anesthetists. According to Democracy in North Carolina, the NC Association of Nurse Anesthetists P.A.C. contributed \$3,500 in 2002. In the 2006 election, that figure rose to \$103,050. Thankfully, our ally, the NCSA has shouldered most of the financial burden of our licensure bill for the past two years.

We are too small an organization to be complacent about the future. I'm asking all of you to do what you can over the next several months to help AAs achieve our goal of recognition in North Carolina.

How?

We need AAs who are willing to use a precious day off to join other AAs with face-to-face lobbying in Raleigh.

AAs who have family connections in North Carolina, especially in the Triangle area, need to contact the local representatives and ask for their support of the upcoming bill.

AAs geographically unable to help can still do so financially by sending a contribution to the AAAA Legislative Fund. The money will be used to get supporters to and from Raleigh, and to counter the propaganda that the nurses continually produce against us.

If you want to join the pivotal effort in North Carolina, contact Ellen Allinger, recent past AAAA President, at moses@cetlink.net, who has graciously volunteered to coordinate our efforts.

Last, but not least, join the AAAA and the ASA. Our future successes depend on the leadership of these organizations.

Four AAs are currently living in NC and commuting to Georgia or SC in order to work. Naturally, a positive outcome of this battle will benefit us locally. But if AAs can get into North Carolina, the bastion of nurse anesthesia, it will have national ramifications, and it will certainly benefit all AAs. Please join us in our efforts here and in any future state that an AA wants to call "home".

Inside AAAA

AA Education Opportunities: The Key to Sustaining the Profession

By Ellen Allinger, AA-C

AA education has come to the forefront of importance in sustaining this profession. While AA expansion into new states has been the main concern for many AAs and a major objective of the AAAA organization for the past decade, it has become painfully obvious that it is pointless to open new states if it only means rearranging the same pool of practicing AAs.

Statistics on AAs currently practicing in some of the newly opened states demonstrates this problem. South Carolina, which began licensing AAs in 2001, has a grand total of nine licensed AAs in the state. Missouri, which passed AA licensing legislation in 2003, has just three licensed AAs. Anesthesiologists and hospitals become frustrated as they attempt to recruit AAs to these new areas, only to find that recruiting efforts are at least as difficult to bring AAs to a new area as it has been in attracting CRNAs to the same facility. The key to continuing the expansion of AAs into new areas is to educate more AAs.

Right now, there are two excellent opportunities to answer the call to become a leader in AA education. South University,

located in Savannah, GA, is currently seeking an Assistant Program Director for its accredited AA program. Anyone interested in finding out more about this position should contact Bill Paulsen, AA-C, Ph.D., and Dean of the School of Health Professions. Dr. Paulsen may be reached by email at bpaulsen@southuniversity.edu.

In addition to this position, the University of Missouri - Kansas City (UMKC) is also seeking qualified applicants for the position of AA Program Director. This program is still in the start-up process, allowing the unique position of this chosen individual to help design the education process of AA students attending this program. For a job description, applicant qualifications, and job contact information, go online to <http://www.umkc.edu/html/acjobs/med.html>.

Consider thoughtfully your potential for AA education leadership. The success of this profession depends upon the education of future qualified and skilled AAs.

AAAA Council on Leadership Development



By Claire Chandler, AA-C, AAAA Secretary, Director of the Council on Leadership Development

The new year brings new initiatives for the AAAA. In our efforts to respond to member feedback, we are trying to make it easier for many of you to get involved. It is common to hear members indicating a desire to participate in various AAAA efforts but not knowing

where to start. This year we are launching a new project, the Council on Leadership Development, to provide a forum for those individuals.

I am pleased to announce the 2007 Council on Leadership Development participants:

Leslie Dean
Sara Strom
Carie Twichell
Ben Yoder

All of these individuals have shown an unyielding interest in the AA profession and bring strong leadership traits to the group. Over the course of the next twelve months we will be defining their personal leadership strengths while educating them on various topics essential to becoming AAAA leaders. They will be mentored by various members of the current AAAA leadership and will complete their own group projects. Our first month has been dedicated to learning about parliamentary procedure and the legislative process.

Next month will focus on the fundamental laws of leadership.

The impact of an organization is determined by the ability of its leaders and the AAAA has had no shortage of excellence in this area. It is essential, however, to share the knowledge of previous experience with new leaders who will bring ideas and energy to an ever-growing organization. I am thrilled to be participating in such a valuable endeavor and appreciate the dedication of all those involved.

Inside AAAA

AAAA Membership Drive



By Amie Schilling, membership chairman

It is that time of year again when you are hopefully receiving this newsletter as a renewed or new member of the AAAA. The membership drive has been under way since November, and although we gain a few new AAs each year, it is not enough. To increase our numbers even more, we can no longer rely solely on the recruitment letters we send out each year. We must also ask all AAAA members to actively aid us in our recruitment. When you receive the renewal form in February, please renew, but don't stop there, also try to persuade all your AA friends to renew or join if they're not currently members. Tell them how vital their membership is to our mission.

This year the membership committee is working with the communications committee and regional delegates to find local hospital or state representatives to promote AAAA membership and AAAA events, i.e. AA day. These persons would act as liaisons for the AAAA in order to reach more AAs, including those that don't have a current address on file with the AAAA. Their most important duty this time of year would be to remind AAs to renew or join the AAAA. They would do this through verbal and written contacts. Their duties would also include providing the AAAA with addresses of anesthesia departments where AAs are employed including the AAs' names and addresses. This information would enable the AAAA to

track our professionals and to disseminate information to them regarding AAAA events.

It is important for other organizations to see that AAs support the only national organization dedicated to the success and advancement of their profession. Remember, there is strength in numbers! The leadership of the AAAA dedicates an enormous amount of time, energy, and effort each year to the concerns and issues of the membership. It is not redundant to remind ourselves and other AAs that membership in the AAAA is the life support of our profession as well as the key player in its advancement.

If you have been a loyal member of the AAAA for years (Thank You!), and have not yet gotten involved in a committee or in a leadership position, please consider doing so now. It would require a small time commitment and a limited amount of involvement, but the results would be enormous.

Many exciting opportunities for AAs are continuing to evolve each year, including new states, new schools, new AA state societies, new meeting opportunities, and new job openings. For this to continue, membership in and support of the AAAA is vital. Also, if you are interested in helping as a state or local (hospital, group) representative in your area, email me at schilling.amie@gmail.com for more information. Thank you for being a member of the AAAA for 2007 and hopefully for many years to come.

AAAA Public Relations Report

By Al Rothstein

The AAAA public relations arm is reaching out to several groups who work with AAs. In the future, we are planning articles that help encourage anesthesiologist groups to hire AAs in states where we have been recently licensed, including Florida. Look for comments from an AA who has had the courage to be one of the first to be hired in Florida, what he has gone through, and the forward-thinking anesthesiologist who hired him.

We also plan to reach out to hospital pharmacists, medical office staffs and various nursing disciplines. We want to educate these medical professionals on our skill level, educa-

tion, and clinical experience, so they won't be strangers to our profession. We are also showing them how professional we are in the working environment.

At our Annual Meeting in April, we will be conducting another spokesperson training session. At the ASA Annual Meeting in Chicago in October, our spokesperson training session focused on communications skills at our exhibit booth. More than a dozen participated and applied the results right away! These seminars are preparing our members for the media, and legislative visits and hearings as well.

Inside AAAA

Legislative Update: North Carolina Up Again for AA Licensing

By Ellen Allinger, AA-C, National Affairs Committee Vice-Chairman

The question at the beginning of each year on many AAs' minds is, "What state will try for AA licensing this year?" The solid answer this year is – North Carolina. Dr. Tom Hill, known to many of us as the NC champion of AA licensing, has been the leader of this cause in NC for the past three years. This year, Dr. Hill, now president of the North Carolina Society of Anesthesiologists, is once again pledging his and his society's support for AA licensing legislation. At the time that this article is being written on February 3rd, a licensing bill has not yet been introduced but will be within the next month.

During the last two-year legislative session when several AA licensing bills failed to pass, several issues worked against it. They included:

- One AA bill, HB 503, combined AA licensing and recodification of the requirement that nurse anesthetists must be supervised by a physician, an issue that was also hotly debated in the legislature.
- Then Speaker of the House, Representative Jim Black, is an optometrist by profession and not sympathetic to physician-backed legislation.
- The opposing sides were seen as "physicians vs. nurses", which gained sympathy for the nurse anesthetists by many of the legislators.

One change that has occurred in the new legislative session for NC is that a new House speaker, Rep. Joe Hackney of Chapel Hill, NC, was elected in January. At this time the House speaker has not chosen committee chairmen, but it is hoped that Rep. Wright will not be named as chairman of the House Health Committee. As you will recall, Chairman Wright refused to release HB 503 from his committee after it was passed by a majority vote, which did not allow the bill to progress any further in the NC legislature. With the removal of Jim Black as speaker and the hoped-for replacement of Rep. Wright as House Health Committee chairman, two enormous obstructions should be removed from seeking AA licensure during the 2007-2008 legislative session.

If you thought that the last NC legislative effort was exhausting, that was just a warm up. This time, the burden of championing the AA legislation in NC will fall to AAs. This needs to be viewed as the CRNAs obstructing the AAs, not as the anesthesiologists overwhelming the nurse anesthetists. Be prepared to write and even to travel to Raleigh or other parts of North Carolina to show the people and legislators of NC that AAs should be a choice as a skilled, qualified, and safe anesthesia provider in that state. This opportunity may be our best ever in NC with the strong support of the NCSA and its president and a less hostile NC legislation toward the AA profession. We'll need *everyone's* support for success so please take the time to get involved when asked.

AAAA Link with APSF Safety Poll

By Deb Lawson, AA-C, Member, APSF Committee on Education and Training

The Anesthesia Patient Safety Foundation (APSF) has started a monthly poll on safety issues, and has asked the AAAA to post a link on our website, www.anesthetist.org. Polling anesthesia practitioners serves two purposes, the promotion of specific safety topics for thought and discussion, and information about what the voting practitioners experience in their practice.

The APSF recently adopted a new mission statement: To ensure that no patient is harmed by anesthesia. Look around their webpage, www.apsf.org, to see what is being done to work toward that goal, and why so many individuals and groups, including the AAAA, believe it is important to support the APSF.

Welcome



Welcome to the Anesthesia Record's new co-Editor,
Alyson Finamore

AA Affiliate News

Wisconsin Gets Organized!

The Anesthesiologist Assistants of Wisconsin are pleased to announce the formation of the Wisconsin Academy of Anesthesiologist Assistants, Inc. (WAAA). In December 2006 the WAAA corporate organization was finalized, bylaws adopted, and board of directors elected. The WAAA aims to advance the profession of AAs in Wisconsin by maintaining and enhancing the education and standards of anesthesia practice, promoting patient safety through the anesthesia care team, and providing a forum for AA advocacy in the state. With close to thirty years of practice in Wisconsin, AAs have a proven record of safe, compassionate, quality care.

The WAAA Board of Directors consists of Sara Strom, Benjamin Yoder, Robert Stupi and Peter Shearer. Our website, <http://www.wisconsinaaa.org>, is currently under construction, but our blog site can be found at <http://www.wisconsinaac.blogspot.com>. Questions or concerns may be sent to wisconsin.aac@gmail.com. Donations (always welcome) and other correspondence may be sent to:

WAAA, PO Box 5083, Madison, WI 53705

FSA Educational Membership now available for AAs!

Practicing AAs are now eligible for Florida Society of Anesthesiologists (FSA) membership in the Educational category, and AA students are eligible for the Educational Student category. As with all FSA membership categories, Educational & Educational Student members are required to attain and maintain ASA membership. FSA uses the ASA educational membership application.

Questions? Go to www.fsahq.org for details and the applications, or contact the FSA Membership Coordinator at 800/400-3211 or membership@fsahq.org for more information.



MSA offers Free Registration to AAs and AA Students to Attend the April Annual Meeting

The Missouri Society of Anesthesiologist Board recently unanimously decided to offer free registration to AAs and AA students attending their 2007 annual meeting. Held in Kansas City, Missouri, from April 13th – 15th at the Westin Crown Center Hotel, there will be a CME workshop held on Friday evening with the remaining CME portion of the meeting held all day Saturday and Sunday morning.

Those interested in taking advantage of this free CME meeting offered by the MSA should check the online reservation option at www.msahq.com.

The Students' Page

Changes in Latitude, Changes in Attitude

By Richie N. Nguyen, Emory University AA Class of 2008

Living in Michigan the last ten years has probably aged me twice as much than normal. Not because Michigan was a bad place, but because I was not part of anything that maintained youth and excitement. Setting foot on Emory's campus changed that instantaneously. Not only am I a part of a program that is mentally and physically challenging, but new friendships with 41 strangers from all over the country has allowed me to thrive internally.

As our second semester at Emory commences, there is much of the same with some minor and major changes. We will be moving into our brand new facility by February, and trust me, we are all excited. Our schedule remains consistent, clinicals 2-3 mornings a week with classes every afternoon, and time still seems to be standing still. Although things have become more comfortable and less foreign in the OR, things remain cloudy in the BIG picture. Patience is something that comes naturally for me since I have a three year old daughter but come

on, isn't there a fast forward button somewhere in this program?

Generally speaking, Emory's Class of 2008 has become a close knit group with new friendships that will remain intact even after we graduate. We are all still springing out of bed between 3-5am eager to learn more about the art of Anesthesia. We arrive on campus every afternoon with new stories from the OR that we share with one another. Our preceptors are becoming less hesitant with us, allowing us to run the cases with more autonomy. That, for me, gives me the most satisfaction.

Although I am looking forward to finishing the program, everyday brings different aspects of anesthesiology that I don't want to miss out on. I am confident that the next year and a half will bring us all closer to the infamous "A-Ha!" moment. The training that we all are going through, along with the concomitant ties along the way, will no doubt keep us all looking forward to our future careers.

The Future for AA's in South Florida is Bright

By James Lunsford

We, at Nova Southeastern University, are in our third didactic semester now and have begun our second semester of clinical rotations. We are finding that the anesthesiologists, surgeons, nursing staff, and scrub techs at our clinical sites are becoming more comfortable training Anesthesiologist Assistant students as they become more familiar with our level of education and skills. This is not to say that things have been easy. We have done our share of educating those at our clinical sites who were unfamiliar with the AA model, and believe it or not, there are actually some anesthesiologists out there that had not heard of Anesthesiologist Assistants. We have even had several nurses and scrub techs that have expressed interest in our profession and our program at Nova Southeastern University.

We are pleased to say that there has been an ever-increasing interest from the anesthesiologists in training more students in hopes of hiring some of them upon graduation. In order to increase access to potential future employees, one of our clinical sites has even asked that our program begin sending students in two shifts, 7-2 and 3-11.

We have been excited about being able to put our skills to use and see the fruits of our many hours of labor studying anesthesia and practicing in our lab. We look forward towards our second year and all the experiences that it will bring.

As our Assistant Program Director and AAAA President has stressed, it is particularly important for us as AAs and AA students to attend the AAAA Conference and continue to support *our* national association. The AA students and faculty at NSU are excited about attending the quickly approaching AAAA Conference in Daytona Beach, and meeting other AA students and practicing AAs.



The Students' Page

Oh, How Far We Have Come!

By Mary Hladky, Case Western, AA-S1

As the 2007-2008 Case MSA program applicants start rolling in the front door of the University Hospitals Case Medical Center I am left reflecting on the past 6 months as a first year student. And you know what I am remembering?... Those first couple months of school were rough! Sure, looking back it's easy to forget the sleepless nights spent haunted by the task of properly placing the ECG leads the next day in the OR, or those tiny sheets of paper I had to carry around to remember what drugs to set-up in the morning. Not to mention the horror I experienced when I realized I forgot to write down what syringe size goes with each drug! Laugh if you must, but whether you are a current student or a long-time respected AA-C you know you were once in my shoes. Some of my classmates' memories may be a little cloudier than others, but everyone can at least admit that we have made some pretty big strides over the first two semesters. Our conversations have shifted from the correct tank colors and their volumes to slightly more advanced topics. I recently heard two of my classmates intently discussing the anesthetic risks associated with subcutaneous emphysema- and

I was impressed, even proud. We actually did it! We became anesthetists- well, almost. We became "those people" who on a Saturday night with non-anesthesia friends feel upset when a joke involving the word "wenkebach" meets blank stares and confused expressions. There is nothing like going into the OR and successfully intubating all five cases of the day. It is days like these that I wish I worked in a football stadium and could proudly spike a liter of LR in my victory dance. Alas, I have only my colleagues to share the successes of my days with and I am happy to do so. As a member of the "all too soon to be" second year Case MSA class I am speaking for the group when I say "Oh, how far we have come!" We all know there is much more in the making, and the weeks and months dotted with the highs and lows of being a Master of Science student will one day be looked back upon with fond memories. I am happy to note that when this day comes we will probably be lying on the beach with our families at one of the grueling anesthesia conferences in the Bahamas.

In Dr. Cechner's words "pax",



Watch Your Mailbox and Email!

AAAA 31st
Annual Conference

**April 21 -
April 24, 2007**

The Shores Resort & Spa, Daytona Beach

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or by going to www.shoresresort.com
and using group code "30924".



AAAA

Spokesperson Training I

Offered by
The Council on Leadership Development

Sunday, April 22nd, 2007
2:00 - 4:00 pm
AAAA Annual Meeting



Highlights

AAAA Talking Points
Knowing your Audience
How to Bridge



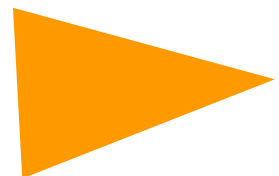
RSVP

by April 1st, 2007
to

kari@anesthetist.org

866-328-5858

Participation is encouraged for all AAAA members attending
the AAAA Annual meeting and is complementary.



Opportunities

JobLine Listing

Florida:

Tampa
contact: Dr. C. Neninger 813-882-7118

Optimal Anesthesia, Boca Raton and Pompano Beach

contact: Steven M. Kiffel, M.D., D.D.S.
561/271-6659

Georgia:

St. Joseph's Hospital, Atlanta
Contact: Marya Garner
recruiting@psa-online.net

Wisconsin:

University of Wisconsin Madison
Contact: Fern Reilly, 608-263-8106 fax
608/263-8111 freilly@wisc.edu

About JobLine Listings

JobLine is a free service provided to potential employees of AAAA members. For more complete information, current members can visit JobLine on the AAAA web site at www.anesthetist.org. Anyone wishing to post a job opportunity should contact Kris Tindol at kwTindol@comcast.net or Kari Glisson at kari@anesthetist.org.

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Calendar



If you know of an educational event that would be of interest to AAAA members, please contact the newsletter editor for inclusion in this calendar.

2007

March 17 – 18 — Houston, TX

2nd Annual Current Trends in Cardiothoracic Anesthesia (Offering a maximum of 13.0 hours of AMA PRA Category 1 Credits). Sponsored by The University of Texas M. D. Anderson Cancer Center Dept. of Anesthesiology. For registration information, contact Mary Ann Schneider 713/792-6911.

March 22 – 25 — San Francisco, CA

Obstetrical Anesthesia with optional Ultrasound Workshop for Regional Anesthesia (Offering a maximum of 19.5 AMA PRA Category 1 Credits plus 5.0 Credits for those who attend the workshop).

Online registration available at www.cme.ucsf.edu or call UCSF Office of CME at 415/476-5808.

March 31 – April 1 — Austin, TX

Spring Anesthesiology Symposium (Offering a maximum of 12.5 AMA PRA Category 1 Credits). Sponsored by Department of Anesthesiology, Scott & White Memorial Hospital. Contact: Dept. of Continuing Education, 1-800-724-7280.

March 31 – April 6 — Cozumel, Mexico

New Horizons in Anesthesiology (Offering a maximum of 25 hours of AMA PRA Category 1 Credits).

Visit Emory University's CME website at www.emory.edu/CME or call the Continuing Medical Education Department at Emory's School of Medicine at (404) 727-5695 or (888) 727-5695.

NOTE: Beginning January 8, 2007, all persons, including U.S. citizens, traveling between the United States and Mexico will be required to present a valid passport.

April 11 – 14 — Kauai, HI

11th Annual Spring Conference on Pediatric Emergencies. Register online at www.symposiamedicus.org.

April 13 – 15 — Kansas City, MO

Missouri Society of Anesthesiologists Annual Meeting. Free meeting registration for all AAs and student AAs.

Go online to www.msahq.com or call Fred Brown at 573/636-6905.

April 13 – 15 — Kansas City, MO

57th Annual Postgraduate Symposium on Anesthesiology. Sponsored by the UKMC Dept. of Anesthesiology and University of Kansas Continuing Education.

For information and registration, go online to www.kuce.org/kumc/psa.

April 21 – 24 — Daytona Beach, FL

31st Annual American Academy of Anesthesiologist Assistants Meeting. Hotel reservations at the Shores Resort and Spa are now available at an AAAA meeting discounted price. For more information, go to www.anesthetist.org or call the AAAA office at 866-328-5858.

April 28th — Dallas, TX

Texas Society of Anesthesiologists Interim Meeting.

For more information, go to www.tsa.org or call Chris Bacak at 512/370-1659.

May 5 – 6 — Houston, TX

12th Annual Hands-on Workshop for the Difficult Airway (Offering a maximum of 13.5 hours of AMA PRA Category 1 Credits). Sponsored by the M.D. Anderson Cancer Center.

For information go online to www.mdanderson.org/departments/anesthesia/ and click on "Upcoming Workshops".

May 7 – 9 — Washington, D.C.

ASA Legislative Conference.

Contact Michelle Allen at M.Allen@ASAWash.org or call 202/289-2222.

May 7 – 11 — Boston, MA

36th Anesthesia Review and Update (Offering up to 33.5 hours of AMA PRA Category 1 Credits). Sponsored by the Harvard Medical School Department of Anaesthesia.

For complete course details go to <http://cme.med.harvard.edu/courses/anesthesia2007>.

May 14 – 16 — Las Vegas, NV

TraumaCare 2007: The 20th Annual Scientific Meeting of ITACCS.

View the program and register at www.TraumaCare2007.com.

May 16 – 19 — Banff, Alberta Canada

39th Annual Meeting of the Society for Obstetric Anesthesia and Perinatology (SOAP).

For more information, go online to www.soap.org.

May 17 – 19 — Boston, MA

The 3rd Annual Ellison Pierce Symposium: Positioning Your ORs for the Future (Offering a maximum of 17.75 hours of AMA PRA Category 1 Credits). Sponsored by Boston University School of Medicine. Find out more information at www.bu.edu/cme.

May 19 — Winston-Salem, NC

C3 – Carolina Cadaver Course (Offering 9 hours of AMA PRA Category I credits). Jointly sponsored by the Duke University and Wake Forest Schools of Medicine.

Contact Linda Marion at 336/716-4497 or lm Marion@fubmc.edu for more information.

June 14 – 17 — Kiawah Island, SC

Carolina Refresher Lectures: Care of the Surgical Patient (Offering up to 20.0 hours of AMA PRA Category 1 Credits). Sponsored by the University of North Carolina at Chapel Hill. Course details available online at www.aims.unc.edu/education/cme/crl.

Registration information available online at www.med.unc.edu/cme.

June 22 – 24 — Palm Beach, FL

Florida Society of Anesthesiologists 2007 Annual Meeting.

For more information go online to www.fsahq.org

Sept. 6 – 9 — Atlanta, GA

Intraoperative Echocardiography in the 21st Century. Sponsored by the Emory University School of Medicine and Department of Anesthesiology, Division of Cardiothoracic Anesthesia.

Download the registration form at www.emory.edu/CME.

Oct. 13 – 17 — San Francisco, CA

ASA Annual Meeting

Information to become available at www.asahq.org.