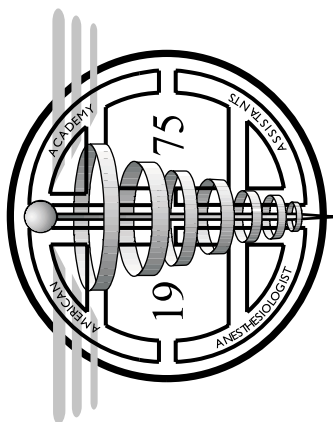


The Anesthesia Record

The Newsletter of the American Academy of Anesthesiologist Assistants 4th Quarter 2006



The President's Message

By Ellen Allinger, AA-C

There is no representation without membership

This is the last time that I will write this column. On January 1st, 2007, current president-elect Mike Nichols will ascend to the office of AAAA President. I have every confidence in Mike's abilities as a leader, and he has a very clear and energetic course set for this organization during the next year.

Typically, one reflects at this time on accomplishments during the past year and the outlook for the next year. I'm not going to do that. If you've been reading your AAAA newsletters and emails, visiting the website, and attending meetings, you are aware of what the AAAA has done this year. I will say that the progress made has been no small accomplishment toward the improvement of this organization. The AAAA has been leading (not just reacting to or following) the AA profession toward a strong and stable position in the future. What I am going to focus on for this last column is what makes all of this possible – membership.

Without membership, this organization does not exist. It has no money to pay for the professionals that aid us, to pay for our participation in events that advance our profession, or to pay for the materials that are involved in simply running this organization. For 2006, the AAAA Board adopted a budget of \$187,386.61. I am pleased to announce that as of August 30th, 2006, the AAAA had already received income of just over \$210,000.00. But, I want to give you a comparison to this AAAA budget. The October 2006 issue of the ASA's NEWSLETTER states that the approved budget for 2007 for the ASA is \$24,877,200.00. Wow! Imagine what the AAAA would become with a budget like that. Why, we'd be as influential as the ASA and the AANA. Dream about that!

So, with such a small budget restricting what we can accomplish, what does the privilege of AAAA membership afford you? It gives you a voice. It gives you an individual voice in voting power and in being able to contact AAAA leaders to seek council and to ask questions. It gives you a voice if you wish to participate in the AAAA in a variety of levels. Membership even allows you to give a voice to the organization as president if you accept the challenge and honor of such a position. Membership also gives the organization a collective voice to other organizations, to state and federal leaders, and to the public. For the survival of our profession, this is where our membership voice must be heard.

See "President's Message," continued on page 3

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The Editor's Column

By Liz Decker, AA-C It Can Happen Anywhere

It happened to me this summer quite unexpectedly. I knew it would happen eventually, but I thought I had gotten lucky for the next four years anyway. My husband has an active duty Army commitment for at least the next seven years, so I knew the odds were that at some point we would probably live in an area that would not necessarily be open to AAs. However, when we found out we would be moving from Cleveland to Augusta and that he would be stationed at Ft. Gordon for the next four years, I thought I would have no problem finding a job since I would be in the state where more AAs practice than anywhere else in the country. Initially, things looked good. The hospitals in Augusta needed anesthesiologists, and I had a phone interview scheduled less than a week after I sent out my CV. Then I received an email from the hiring anesthesiologist: "Unfortunately, I am told by our CEO and CNO that a PA anesthesiologist position does not exist and they are not willing to create one at this time. I regret their decision, it is not my sentiment. If the situation changes, I will contact you again." So much for things being easy.

I guess I could look at the glass as being half empty and say I have still had no luck in finding a job in Augusta. Instead I choose to look at the glass a half full and relate to you the reasons why I feel fortunate to be an AA.

After I realized I was not in an area particularly receptive to AAs, I sent out a few emails — one to an AA whom I worked with through this newsletter, one to a former instructor, and one to a former classmate. Within 24 hours, I had replies back from all of them as well as friendly contacts at the hospitals, a placement agency which worked with AAs, a reminder of utilizing the AAAA as needed, and 3 genuine offers of assistance in anyway possible.

While still working on opportunities in Augusta, I have decided to broaden my search area a bit. I emailed 2 former classmates who work in Savannah and also contacted two fellow AAAA members (whom I found through the AAAA member directory online) who work closest to Augusta. Again, within 24 hours I had responses. I knew I would hear back from my classmates (they're just that kind of people). Both put me in touch with the hiring anesthesiologist at their hospital, and less than a week later, I have a job. No interview or references necessary. Besides the formalities of the credentialing paperwork, I'm in. In the words of the anesthesiologist who hired me, "We love to work with AAs. Your colleague is a great guy. And if he says you're good, then you're good. Whatever we can do to help you here or anywhere, just let me know."

The glass gets even fuller. The AAAA member I called who doesn't even know me? She called me back the same day, filled me in on where she works, and gave me the name of the anesthesiologist to contact (he's on vacation so I'll have to finish this part of the story at a later date).

Yes, it was disheartening to experience firsthand the battle AAs have been fighting for years. But at least I can work a few hours away from where I live. Plus, I have gotten extremely positive responses from the anesthesiologists with whom I have spoken. However, without a doubt most encouraging is the number of AAs who have been willing to help me out in anyway they can. So how could I possibly look at the glass as being half empty?

AAs make strides every year on many fronts. Our profession will continue to proliferate as long as we continue to work together both on a professional level by supporting the AAAA and its leaders and on a personal level by helping other AAs out whenever we can.

Inside AAAA

The 2007 AAAA Annual Meeting Update

By Chris Caldwell, AA-C, 2007 Annual Meeting Chair

As the autumn-colored leaves are flying in the wind and we up north get ready for the first snowfall of the season, it is easy to see that this year is getting ready to leave us. Out with 2006 and in with 2007. Not only will 2007 bring my 1st high school reunion, it will also bring my two-year anniversary from graduating from CWRU. For many of us, June 1st, 2007 also means that it is CME submission time.

If you're like me, you're adding up your CMEs and finding that you're a bit short of the 40 hours that are required. Enter the 31st annual AAAA national conference. The 2007 meeting will be held at the only four-star hotel in Daytona Beach, Florida. The Shores Resort and Spa will offer us a very luxurious setting away from the hustle-and-bustle of Main Street after their 20-million dollar transformation (www.shoresresort.com). The meeting will be held from April 21 – 24, 2007.

As in past years, the 2007 annual meeting will offer a variety of excellent lectures, time to reconnect with old friends

and classmates, as well as the AAAA annual business meeting. This year will also mark the beginning of something new for the AAAA annual meeting, a lecture and discussion

workshop entitled "How to Teach Anesthetists." Many other professions have something similar to this each year and this is our first step. With the number of AA students growing each year, it is time for us to start something that we all can do to help make our profession stronger.



Hope to see everyone down in sunny Florida.

"President's Message," continued from page 1

At the October 14th AAAA Board meeting, it was announced that the total AAAA membership had just recently passed the 500 members mark. This is a momentous event, but of this number, only 381 are fellow members. Of the nearly 1000 practicing AAs out there, less than 40 percent feel that it is important enough to join their professional organization. That's a very sad percentage. However, I am pleased to tell you that there are 125 student members of the AAAA. These are the future voices of the organization and AA profession. Both Nova Southeastern University and Case Western Reserve University feel that AAAA student membership is important enough to have ALL students at these programs enrolled as AAAA members. My hat is off to these two programs for recognizing the importance of student membership and involvement in the organization that will help to shape their futures the most.

At the September 30th Fall Regional Meeting in Atlanta, Dr. Steve Sween, an anesthesiologist practicing at St. Joseph's Hospital and a leader in the American Society of Anesthesiologists, gave an impassioned speech on the importance of AA membership not only in the AAAA but also in the ASA. I am in full agreement with Dr. Sween's opinion. He made a point to say that the ASA represents its members, and that AAs will find support and representation by the ASA if AAs are members of the ASA. Yes, it is an additional \$225 per year to be an educational member (a mere \$25 per year to be an educational student

member). ASA membership gives you many perks, but, again, the most important aspect of ASA membership is that it gives you a voice in a national anesthesia organization of over 39,000 total members. What an awesome collective voice that is!

One of my dear AA friends recently rejoined the AAAA and became a member of the ASA. She told me that she had no clue that so much was happening that concerned the AA profession until she attended the Fall Regional meeting and heard the information given during the luncheon concerning our profession. I suspect that there are many other AAs like my friend out there. It is truly an accomplishment when this organization reaches AAs that have not been members for some time. But where the real emphasis must be placed is to retain the membership that the AAAA already holds. If you decide to not be a member of the AAAA, you no longer have a voice in this profession. My mantra this year has been that the AAAA is the only organization entirely devoted to the advancement and security of the AA profession. Never, ever forget that.

Finally, I would just like to say that it has been a true honor and pleasure to serve the AAAA as your elected president this year. I have met many AAs and AA students that I would have never known without being in this position. The ideals of this organization are ones for which we all should be proud to be a part. Thank you for the opportunity to serve you in such an honorable fashion.

Inside AAAA

Fall Meeting Re-Cap

By Lance Franklin, AA-C

AAAA Treasurer, Director of communications

A few weeks have passed and we are all back to our routine of anesthesia and life. The pressing questions about anything the AAAA endeavors to accomplish are always asked while the memories of the event are fresh in the mind. Was it a success? That depends on how you define success. So let's start with the easiest number to quantify. Did it break even? Did it make money? Yes.

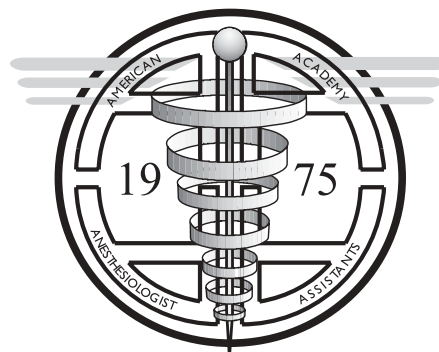
Was that the purpose of the meeting? No and Yes. Of course the AAAA does not wish to initiate an event that loses money. The more funds the AAAA has access to, the more latitude we have as an organization to increase our presence in the health care community (i.e. we recently increased our contributions to the APSF and now exceed the AANA in sponsorship). The financial support that your attendance created helped to make this happen.

However, the ultimate purpose of meetings are not so that the AAAA can make money and certainly not so the AAAA can flex in the mirror and admire itself as to how far it has come in such a short time. The ultimate purpose for meetings is to strengthen you the member and as a result, the AAAA as a whole. Strong enough already, you say? Perhaps. But do you have a sense of confidence in your role on the medical profession battlefield that exists?

Do you have a sense of where AAs are going and in effect where you are going? Not at your job, mind you. Many of you probably see yourself set in your job wearing golden handcuffs. In your mind you believe that the worst thing that could happen to you is that your salary might not keep up with inflation. The reality is that it is possible that someone, someday, somewhere may be in a position to greatly limit your scope of practice and thereby limit your marketability and ultimately your income. Take Ohio as an example and a continuing warning. Gloom and doom? More hand wringing? I am secure. My career is secure. My job is secure. My lifestyle is secure. Fine, if you say so.

Let's go back to the analysis of the meeting. The purpose of the meeting is to strengthen the membership and allow us to be among our kind; to further a sense of community within the AA populus. We had a great number attend, but less than half of the AAs in the Atlanta metropolitan area were able to make it. Why? Was it poor timing, lack of publicity, or lack of interest; lack of motivation? Was it low on the priority list?

We worry about the AANA, the state representatives and/or the committee chairs that are in their back pocket blocking our



2006 Fall Meeting Analysis

Registrants	76
Fellows	65
Students	8
Nonmembers	2
Physicians	1
Exhibitors	12
Net income	\$3,125.44

advance in battleground states, but in truth sometimes we are our own worst enemy.

Atlanta is a hub for AA anesthesia and is densely populated with AAs. A meeting on home turf in a region where AA anesthesia is widely embraced should be a homecoming of sorts for our profession and successful without much effort. Instead this meeting was only successful thanks to great efforts from various contacts at hospitals who helped to spread the word among fellow employees and the dedicated sponsors who believe in us and willingly support us by being vendors at our meetings.

So after all of that, yes the meeting was a success but not what it could've been. Atlanta is AA central and one would believe that we could get a greater response than we did. So if you did attend, thank you, and your AAAA thanks you. If you didn't, you truly missed a great meeting with great speakers, timely topics and a wonderful one of a kind opportunity to network. Please be a part of it next year.

Inside AAAA

National Affairs Update

By Pete Kaluszyk, AA-C, National Affairs Chairman

This report is a summary of some of the activities that the AAAA was involved in at the ASA's annual meeting in Chicago in October. The AAAA leadership seemed to be running from committee to committee within our own organization or between the AAAA, ASA, other professional organizations, and panel discussions covering our profession. Although stressful at times, the common feeling among those involved was that of satisfaction in the progress of our organization and our profession and the maturing relationship between AAs and anesthesiologists.

The ASA's Committee on AA Education and Practice was very well attended by both AAs and anesthesiologists to discuss the future of our profession and to discuss common issues. The ASA, by forming a standing Committee on AA Education and Practice, has made a real fiscal and philosophical commitment to our profession. This should not be taken lightly by members of our profession, as it will be essential to how we progress in the future.

The AA Educational Programs/AAAA booth was well attended and fairly busy. All of the training programs sent their administrative representatives. The most gratifying aspect of the booth activity was the increased participation of students. I would like to thank the students from Case University, Sabena Kachwalla and Jared Kutzer; South University students Adrienne Humphries and Jimmy Valanty; Nova Southeastern University students, Maryam Aminzadeh, Candra Banks, Keith Brown, Jill Clapner, Catherine Coleman, Matthew Corsitt, David Drolte, Sabrina Gonzales, Kevin Hall, Chin Hsu, Jessica Johnson, Katie Knebelberger, Shane Latham, Christa Loar, Jimmy Lunsford, Allison Mattis, Oscar Mendoza, Brad Oakley, Nafije Redzovic, Rosemary Shoener, and Nathan Weirich. Some of these students participated in the AAAA sponsored Spokesperson Training session where they learned how to answer and handle questions about our profession. I would like to sincerely thank the program directors for making a commitment to encourage our students to learn about our profession, to participate in promoting our AA training programs, and to participate in AAAA organizational activities. A lot of these students attended the various committee hearings and panel discussions and came away with first hand knowledge about the challenges we face and how to go about solving these issues.

The booth was also staffed by practicing AAs which included, Ellen Allinger, Deb Lawson, Don Biggs, Dave Zagorski, Joe Rifici, Lauren Hojdila, Mike Nichols, Claire Chandler, Stephanie Polutnik, Rob Wagner, Shane Angus, and Ty Townsend.

Some of these folks attended the Spokesperson Training session also. If I've omitted anyone, please accept my apologies.

Bob Stupi and Ben Yoder from Wisconsin were in attendance and have been working on developing the Wisconsin Academy of Anesthesiologist Assistants (WAAA). Hopefully, the formation of this academy will make it the third state academy following Ohio and District of Columbia.

The ASA's Anesthesia Care Team (ACT) committee was given a report from the AAAA on our legislative activities for the past year. The ASA ACT committee's major project during the last year was revision of the ASA's anesthesia care team statement. The principle change was defining the phrase "qualified anesthesia personnel." AAs have been part of the ACT statement since the 1980s and this amending of the document was meant to further refine the definitions for qualified anesthesia personnel. Within the proposed statement the definition read: "QUALIFIED ANESTHESIA PROVIDERS - Anesthesiologists, physician anesthesiology residents and fellows, anesthesiologist assistants and nurse anesthetists." The major amendment was that anesthesiologist assistant students and nurse anesthetist students were omitted from the list as qualified anesthesia providers as both are in training. This statement was later altered and presented to the ASA House of Delegates (HOD) in the form: "QUALIFIED ANESTHESIA PERSONNEL - Qualified anesthesia personnel are members of the Anesthesia Care Team (ACT) capable of delivering anesthesia care as determined by the responsible anesthesiologist." The newer revision on the surface seems somewhat lacking significance, however it is an attempt to level the playing field between AAs and CRNAs. There will be more discussion by the ACT committee as how anesthesia providers will be viewed within the context of the anesthesia care team.

We were also informed that the Veterans Administration process for including AAs within the long awaited Handbook of Anesthesia Services seems to be on track. The position definition for AAs is now being developed. We hope the final approval will be soon, however, as we have seen, the Federal process can be glacial in nature.

Overall, we were able to talk to key contacts and hopefully there we will be able to have some new legislation introduced next year. Again, we have to have every AA join the AAAA in order for us to be able to do the work we need to do across the nation. Additionally, an educational membership in the ASA helps further our profession also. Have a great holiday season!

Inside AAAA

AAAA Legislative Fund Report

By Barry Hunt AA-C, Chairman, Finance Committee

The Legislative Fund accumulated a balance of \$39,433.32 during 2006 and had expenses distributed in the amount of \$15,112.61. The fund should start 2007 with approximately \$24,320.71 as retained earnings. In this ever changing medical, political and judicial world, this ending balance is severely under funded.

During 2006, the AAAA had 327 members (renewed 2005 members 283 and recent graduates 44) listed and from the above list we had 125 members donating to the Legislative Fund. This is only 26% of the AAAA members. The Finance Committee would like to see this number increase significantly in 2007.

At the 2006 Fall meeting, Dr. Steve Sween spoke about the ASA and AAAA relationship and he stated that due to our small

number of members, AAs are very vulnerable to outside groups and we should have very tight relationships with our state anesthesia organizations and the ASA. These organizations are going to want financial commitment to help us with state and national affairs and the Legislative Fund is the only source of funding for these obligations. A \$500 contribution from each member is a small price to pay for state and national representation from the AAAA.

During the next few months, membership renewals for 2007 will be mailed, please remember to contribute to the Legislative Fund. You can use your credit card, check or money order to contribute to the fund. Please call the AAAA office at 1-866-328-5858 to contribute by credit card.

2006 Income

Income Type	Amount
Contributions/Pledges (Including contributions with 2006 dues payments received at end of year 2005)	\$25,881.00
Interest	\$105.83
TOTAL	\$25,986.83

2006 Expenses

Expense	Amount
CC processing charges	\$309.05
FTC meeting expenses	\$922.60
Ann Peton Consulting – AA Data Maps	\$1000.00
Andy Harris, MD for US Senate contribution	\$1000.00
Travel to NC Senate Health Care Committee	\$1880.96
OAAA Contribution	\$10,000.00
TOTAL	\$15,112.61

2006 Net Income **\$10,874.22**

2006 Contributions by State

State	# Donors	Contributions	Avg. Contribution
AL	3	\$1,100.00	\$367.00
CA	1	\$500.00	\$500.00
CO	1	\$50.00	\$50.00
DC	2	\$700.00	\$350.00
FL	1	\$200.00	\$200.00
GA	66	\$12,431.00	\$173.00
IA	1	\$200.00	\$200.00
IL	1	\$200.00	\$200.00
IN	1	\$200.00	\$200.00
MD	2	\$400.00	\$200.00
MI	2	\$400.00	\$200.00
MN	1	\$500.00	\$500.00
NM	1	\$50.00	\$50.00
NY	1	\$500.00	\$500.00
OH	25	\$4,450.00	\$178.00
SC	4	\$1,000.00	\$250.00
TX	6	\$2,000.00	\$333.00
VT	1	\$100.00	\$100.00
WI	5	\$900.00	\$180.00
TOTAL	125	\$25,881.00	\$207.00

American Academy of Anesthesiologist Assistants

AAAA Support Pledge Commitment



Name _____ Date of Pledge _____

Address _____

City/State/Zip _____

Phone _____ Email _____

Year Graduated _____ Practice Location _____

Yes! I would like to pledge at the level indicated below!

- ¢ Level **1**: SILVER All Commitments up to \$99.00
AMOUNT PLEDGED \$ _____
- ¢ Level **2**: GOLD From \$100.00 up to \$249.00
AMOUNT PLEDGED \$ _____
- ¢ Level **3**: PLATINUM From \$250.00 up to \$499.00
AMOUNT PLEDGED \$ _____
- ¢ Level **4**: PRESIDENT'S CLUB From \$500.00 and above
AMOUNT PLEDGED \$ _____

A portion of your contribution may be used for administrative purposes.

Involvement Options:

- Annual Meeting Committee
- Bylaws and Ethics Committee
- Education & Practice Committee
- Finance Committee
- Membership Committee

- National Affairs Committee
- Student Committee

Other Activities:

- Jobline
- Newsletter
- Website

Payment Options

Check (make payable to AAAA)

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Name on Card: _____ Signature: _____

Card #: _____ Expiration: _____

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Inside AAAA

AAAA PR at the ASA Meeting

By Al Rothstein, AAAA PR and Media Consultant

The AAAA has made strides with its recent article in the Bulletin of the American College of Surgeons. Several anesthesiologists at the ASA meeting mentioned that they saw the article, showing how AAs have progressed in the OR, and are even being sought after by many surgeons.

More articles like that are in the works!

For local publicity, we have been working with the Atlanta Journal Constitution on an article that gives tips to readers on how to prepare for surgery. Thank you to John Flynn for his assistance in putting that together.

Also, at the ASA meeting, Claire Chandler and Lauren Hojdila met with Anesthesiology News to give them new story ideas for the future. We also conducted our second Spokesperson Training workshop. This time, we focused on handling both positive and negative questions at our booths. I visited the booth after that, and the training seemed to work well!



Clinical Teaching: The Bridge to Quality

By Deb Lawson, AA-C, Education and Practice Committee Chair

Many AAs find themselves involved in the clinical education of AA students, and a logical consequence of opening new programs is that the mix of both students and instructors increases rapidly. That's good news for a profession, but part of that package is a changing dynamic that adds new challenges



and stresses. As these pressures build, many AAs are voicing concern over how to meet the demands of providing a rich and effective clinical learning experience.

The AAAA has responded by launching an initiative to develop a resource for clinical instruction. The first major forum for this project will be a workshop on Saturday afternoon of the 2007 Annual Meeting, on April 21 in Daytona Beach. The Education and Practice Committee is planning a program to integrate perspectives on effective clinical teaching strategies, both general and AA-specific.

Discussion will include the state of AA education, the implications that rapid growth presents to standards of quality, and the challenges of dealing with students at any point of academic learning from any program. The workshop will include participation of the four AA programs, to build the project in a manner that optimizes the relationship between both components of the didactic education philosophy. A speaker associated with the Society for Education in Anesthesia will be featured to tap the greater body of knowledge on this important element of producing capable clinicians.

Teaching those who enter the profession behind us is important work. The graduate AA community has a long history of dedication to the task. Stay tuned as this important undertaking develops and improves our ability to meet the demands ahead.

Inside AAAA

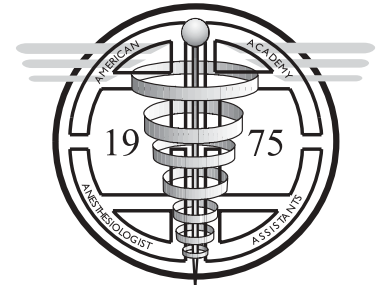
AAAA Election Results

By Don Biggs, AA-C, Elections Committee Chair

I am pleased to announce the winners in the recent elections.

President Elect:	Deb Lawson
Director Seats 1, 2, and 3:	Brad Maxwell, Saral Patel, Joe Rifici
Director Seat 7:	Carie Twichell
Treasurer:	Barry Hunt

We congratulate these Officers Elect and look forward to their service with the AAAA.



AAAA Photo Album

AAAA wishes to thank the Missouri AAA for sharing these photos.

Right: Pat Flaherty (second year AA student at South), Senator Charlie Shields (Missouri State Senate Floor Leader), Jimmy Valanty (second year AA student at South)



Below: Pat Flaherty (second year AA student at South), Missouri State Representative Bob Behnen (Chairman of the House of Professional Registration and Liscensing Committee, Chief Sponsor of House Bill 390, which in 2003 liscensed AAs in Missouri), Jimmy Valanty (second year AA, student at South), and Jim Gibbons MD (who was one of the driving forces behind AA liscensing in Missouri)



Above: Jimmy Valanty (second year AA student at South), Steve Smith MD (Legislative Chair MSA), Senator Christopher “Kit” Bond (Senior US Senator from Missouri), Pat Flaherty (second year AA student at South)

Professional News

AAAA Participation at the Annual ASA Meeting: Good Things Just Kept Happening

By Ellen Allinger, AA-C

As it has in years past, the AAAA has used the annual ASA meeting, held this year from October 14th - 18th in Chicago, Illinois, to promote the AA profession to anesthesiologists and to conduct AAAA business within the leadership. This year, however, there was so much more that occurred during the ASA meeting.

AAAA Events During ASA Meeting.

The dedication of the AAAA leadership in attending this annual event each October has made this an excellent venue by which to hold one of the four required AAAA Board meetings. The advantage of holding a Board meeting during the ASA meeting time is that it offers a face-to-face meeting of the Board, an event that also occurs each spring at the AAAA's annual meeting. The other two Board meetings are conducted via teleconference. The opportunity to sit down together and have a meeting provides an intimate opportunity to discuss issues and make decisions as a bonded group of leaders that is not afforded over the telephone. The AAAA benefits from the leadership coming together for a Board meeting.

In addition, the AAAA leadership had started using this opportunity to conduct a yearly Strategic Planning session. During this event, the leadership reviews the goals set during the previous year, assesses whether or not those goals were attained and to what level, and sets the goals and plans the steps for attaining those goals for the next year. Some of the goals set for 2007 include retaining and gaining AAAA members, increased communication to the AAAA membership, and developing improved education and awareness of the AA profession among allied societies, anesthesiologists, universities/colleges, and the general public.

Also, for the first time, the AAAA conducted a Spokesperson Training seminar. Conducted by AAAA Secretary Claire Chandler, AAAA Director Pete Kaluszyk, and AAAA public relations and media consultant Al Rothstein, the seminar taught nearly two-dozen AAs and AA students how to handle negative questions, gave them important facts about AAs and the AAAA organization, and allowed attendees to practice Q&A scenarios in a friendly environment. Skills learned from this seminar were put to immediate use as most of the attendees then helped staff the AAAA booth located in the ASA exhibit hall.

An Opportunity to Meet with Anesthesiologists.

The most visible contact for the AAAA with anesthesiologists occurs at the AAAA booth. Held in conjunction with the four AA programs, the booth allows anesthesiologists and other interested persons the opportunity to ask specific questions on AA education and practice. Along with speaking to an AAAA or AA program representative, printed material on AA topics are available for these people to take with them and refer to at a later time. In addition, the AAAA leadership, in particular the AAAA National Affairs Committee members, uses this time to contact ASA state component society leaders to speak to them and offer assistance concerning AA issues in their state. This is also the opportunity to speak to those dealing with federal AA issues, such as the ongoing inclusion of AAs in the Veteran's Affairs system, and the legal team for the ASA.

ASA Panel Discussion and Committees with AA members.

A unique opportunity was afforded this year to those interested in learning more about AAs in the form of a panel discussion that was open to anyone. Initiated by Dr. Steve Goldfien, chairman of the ASA's Committee on AA Education and Practice, and moderated by Dr. Arnold Berry, the panel discussion involved four major topics. The panel was set up as follows:

Panel Participants and Their Topics

- 1) Michael Nichols, AA-C - What is an Anesthesiologist Assistant, Where Do They Come From, and How Can They Improve the Anesthesia Care Team?
- 2) Joseph M. Rifici, AA-C, M.Ed. – Anesthesiologist Assistant Education From Pre-requisites to Graduation: How Does It Compare to That of Nurse Anesthetists?
- 3) Steven L. Sween, M.D. – Anesthesiologist Assistants in the Clinical Setting: What Do They Do and How Does It Compare to Nurse Anesthetists?

See "AAAA Participation," continued on page 11

Professional News

“AAAA Participation,” continued from page 10

- 4) A. William Paulsen, AA-C, Ph.D. – I Am Interested in Opening a New Anesthesiologist Assistants Education Program. What Do I Need to Know?

This two-hour panel presentation and discussion that followed was highly informative and extremely useful to those who attended. The packed meeting room was an encouraging sign of the level of interest in the AA profession by those attending the ASA meeting.

In addition, there are two standing ASA committees of which AAAA leaders are members: The Committee on Anesthesia Care Team and the Committee on Anesthesiologist Assistant Education and Practice. Currently, the ASA President-elect appoints the AAAA President to the AA Education and Practice. For the year from Oct. 2006 to Sept. 2007, current AAAA President Ellen Allinger will serve in this capacity. In addition, many other AAs are part of this committee who are also involved in AA education. Rob Wagner, Don Biggs, Joe Rifici and Bill Paulsen were members of this committee for 2006. In addition, chairman Dr. Steve Goldfien has added Mike Nichols, Deb Lawson, Pete Kaluszyk, and Claire Chandler to the committee. AAs are well represented in this one ASA committee. Pete Kaluszyk is an appointed AA member to the Committee on Anesthesia Care Team. Any ASA member can self-nominate himself or herself for consideration to an ASA committee. Self-nominations can be made by early November and forms can be found under the “members only” section of the ASA website.

The ASA Reference Committees and its House of Delegates: Where Decisions are Made.

During the ASA meeting, the House of Delegates (HoD) meets twice: on Sunday morning for opening ceremonies and election of officers who will assume their positions at the close of the HoD meeting, and on Wednesday to vote on recommendations made by four reference committees. As in the past, the current AAAA president was introduced to the entire House and its guests along with presidents of other allied organizations. This is a real honor and I was proud to be there as the representative of the entire AAAA organization. Reference committees met on Monday afternoon. Each reference committee handles items proposed for action to the HoD. This year, three important items that concerns AAs came

before the Reference Committee on Administrative Affairs. At Reference Committees, any ASA member may come before the committee to make comments and offer suggestions. A very lengthy discussion involved the rewording of the ASA’s ACT Statement, which was last revised in 2001. Along with some other issues, the item debated the most was the revision of the list of QUALIFIED ANESTHESIA PROVIDERS. Because of the level of discussion on this topic at the Reference Committee level, Committee on ACT chairman Dr. Jeff Plagenhoef revised the language for submission to the HoD as follows:

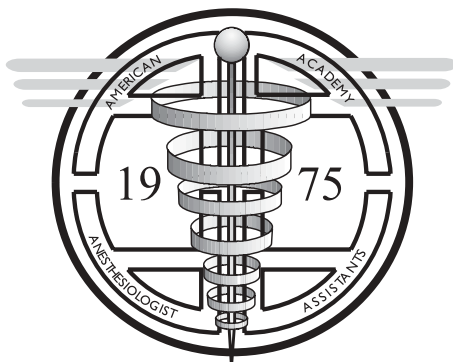
QUALIFIED ANESTHESIA PERSONNEL – Qualified anesthesia personnel are members of the Anesthesia Care Team (ACT) capable of delivering anesthesia care as determined by the responsible anesthesiologist.”

This statement was approved by the HoD, reaffirming the philosophy that the best person to determine the course of anesthetic care and who should administer that care is the anesthesiologist directly involved with the anesthetic care of that patient.

The Committee on Anesthesiologist Assistant Education and Practice proposed two Recommends to the HoD. This first Recommend was the approval of the following statement:

“The policy of the ASA in regards to the performance of regional anesthesia is governed by the ASA Statement on Regional Anesthesia. The Committee recommends that, in their practice, anesthesiologists be given the discretion to determine the extent of participation of AAs in the performance of regional anesthesia and invasive monitoring in accordance with their hospital’s policies and state’s regulations.”

The second Recommend was that the ASA President refer to a committee of his choice the development of an ASA Statement on AA and NA Education and Practice to be based on, 1) the quality and preparation of the applicants, 2) the quality and effectiveness of the educational programs, and 3) the quality of each group’s clinical practice. The HoD passed both of these Recommends. In addition, the Annual Report of the Committee on AA Education and Practice included the AAAA’s Statement on Regional Anesthesia and Invasive Line Procedures, Statement on Use of Propofol by Non-Anesthesia Personnel, Statement on the Anesthesia Care Team (ACT) Model, and Statement on Use of Medical Terminology.



See “AAAA Participation,” continued on page 12

Professional News

Hurry, NCCAA Exam Deadline is December 15, 2006

By Ron Hall, MD

The National Commission for Certification of Anesthesiologist Assistants, in conjunction with the National Board of Medical Examiners, is pleased to announce that computer-based testing will begin in 2007. Certifying Examination 2007 and CDQ Examination 2007 will be offered on Saturday, 02 June 2007, at Prometric Testing Centers throughout the United States. General information about Prometric can be found on their web site, www.prometric.com. Specific information about scheduling and testing with Prometric can be found in NCAA's Rules and Regulations 2007.

Complete application, including full payment of application fee, must be received on or before 15 December 2006 by NCAA at PO Box 15519, Atlanta, GA 30333-0519. Fax 404-687-9978. Email business.office@aa-ncaa.org

Eligible individuals can obtain an application and a copy of Rules and Regulations 2007 by writing, faxing, or emailing NCCAA (at the address above) and providing their name, complete mailing address, and year of graduation from an accredited anesthesiologist assistant educational program.

Please note that the application period for both examinations is open from October 1st until December 15th of this year. The application period closes on December 15th to enable NBME to mail Prometric scheduling permits to each candidate early in 2007 so that each candidate has an opportunity to secure a seat at the testing center of their choice.

AAAA ALERT! CMS NATIONAL PROVIDER IDENTIFIER NUMBER DEADLINE IS MAY 23rd OF 2007!

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) mandates the adoption of standard unique identifiers for health care providers. It is imperative that, as a healthcare professional, you realize that the Centers for Medicare and Medicaid Services (CMS) is REQUIRING that all healthcare professionals must have a National Provider Identifier (NPI) number before May of 2007. This number is required for reimbursement of not only services provided to Medicare and Medicaid insured patients, but other medical insurance carriers and credentialing bodies are also requiring this number. Please go to www.anesthetist.org for more information.

“AAAA Participation,” continued from page 11

Although these statements were removed from the official HoD proceedings, their distribution to the entire HoD as part of the Committee's annual report further demonstrates the like-minded philosophies of the ASA and AAAA organizations. These AAAA statements may be read on the AAAA website at www.anesthetist.org.

Reports on the ASA annual meeting and the ASA House of Delegates actions will appear in the December 2006 and January 2007 ASA NEWSLETTER publication.

And Finally, the Social Events.

After a day of lectures and meetings and decisions, it is necessary to eat and laugh and build bonds on a social level. There were quite a few of these events that AAs and AAAA leaders attended. President Ellen Allinger and President-elect Mike Nichols attended the Presidents' and President-elects'

Reception held at the Museum of Science and Industry, held in honor of outgoing ASA President Dr. Orin F. Guidry and President-elect Dr. Mark J. Lema. In addition, receptions hosted by the Florida Society of Anesthesiologists, University Hospitals of Cleveland, and the Malignant Hyperthermia Association of the United States were all attended by AAs. Last but certainly not least was the “reception” at the World's Largest Bar in the Chicago Hyatt Regency Hotel of AAAA members, including 22 Nova Southeastern University students.

As you can see, lots went on at the ASA annual meeting this year that involved the AAAA and the AA profession. It is a worthwhile event for all AAs to attend and, as an educational member, registration for the ASA annual meeting is free. For a membership form go to the ASA's website at www.asahq.org and click on “Join ASA!”, then click on “Educational Application”. Next year the ASA meeting will be in lovely San Francisco. Make plans now to attend!

AA Affiliate News

Health Professions Network News

By Theresa Green, AA-C, MBA,
AAAA representative to HPN and HPN Advocacy Team Leader

Health Professions Network (HPN), a collaboration of allied health professional organizations, educators and accreditors, held its fall meeting in Phoenix, Arizona this past September. At this meeting, the HPN took the historic step of formally incorporating; approving bylaws, and electing a board of directors (I was elected!).

The HPN is evolving and growing to meet head-on the many challenges in allied health. Although the HPN incorporation was a critical step to receive funding that will move our agenda forward, HPN remains committed to maintaining an all-inclusive, informal nature where everyone has an equal voice.

In addition to finalizing this big step forward organizationally at the fall meeting, attendees heard several compelling speakers focused on the meeting's theme: "Reaching Across the Professions to Support Quality Care Initiatives". Speakers representing the Agency for Healthcare Research and Quality, National Patient Safety Foundation, and the Arizona Hospital and Healthcare Association's Safe and Sound Initiative gave insightful accounts of the importance of reducing system errors in health care.

Also, attendees heard about the American Physical Therapy Association's Vision 2020 plan for their profession, and learned

how the Michigan Center for Health Professions is addressing critical state-wide issues of recruitment, education and retention of health professions.

Presentations will be available on line at www.healthpronet.org.

The 40 individuals in attendance represented a wide range of organizations, including the American Medical Association, Joint Commission on Accreditation of Healthcare Organizations, Association of Academic Health Centers, American Hospital Association, Health Occupations Students of America (HOSA), Commission on Accreditation of Allied Health Education Programs, and many allied health professional organizations such as the AAAA.

Megan Verallas attended the HPN meeting for the first time this fall and did an excellent job networking on behalf of the AAAA. Megan found a prominent physician who had some contacts in North Carolina that might help with our legislative efforts there. AAAA was very well represented!

As always, contact me with any questions or comments at tgreen@berriencohlthdept.org.

Education News

University of Missouri Kansas City Program Progress

By Ellen Allinger, AA-C

At the ASA's Committee on AA Education and Practice meeting on October 16th, Dr. Jim Gibbons, Missouri anesthesiologist and a past-president of the Missouri Society of Anesthesiologists, announced that the Missouri Society of Anesthesiologists Educational Fund (MSAEF) had raised close to \$100,000 in private contributions to go to UMKC's AA program for startup costs. Of that amount, I am pleased to report that approximately \$9,000.00 has come from contributions from AAAA members. That's nearly 10% of the total amount raised. This individual monetary support and commitment of AAAA members to the future of our own profession has not gone unnoticed. The successful startup of an AA program at a public university will hopefully start a trend that is necessary for the expansion of the AA profession.

It is not too late to make a tax-deductible contribution to this project. To do so, make a check out to the MSAEF and mail to Dr. Jim Gibbons, 13203 Greenbough Drive, St. Louis, MO 63146. Please note on the check that this donation is for the AA Challenge. The form that should accompany your check is included in this newsletter on page 14. Your contribution will go a long way to assist others in becoming AAs.

Education News

Take the AA Challenge

Contribution Form (Please Print)

You may also make credit card contributions to your fund online through Donor Edge at www.gkccf.org.

Fund Information:

Donor Name: _____

Daytime Phone: _____

The fund to receive contribution is the "Missouri Society of Anesthesiologists Educational Fund" (Fund ID: miss07)

Name and address of the individual making the contribution: _____

Donors may make contributions to their fund at any time. Note: Securities held for one year or less are deductible at the lesser of cost basis or fair market value.

Mail Contributions to:

Jim Gibbons, M.D., 13203 Greenbough Drive, St. Louis, Mo 63146

Cash Contributions:

To contribute cash, or cash by check or wire:

Check: \$ _____ (Make payable to Missouri Society of Anesthesiologists Educational Fund, MSAEF)

Cash: \$ _____ (Please do not send cash through the mail.)

Credit Card Contribution:

(Use only if you do not make your credit card contributions online through DonorEdge)

Amount of contribution to be charged to your card: \$ _____

Card type: MasterCard Visa American Express Discover

Card Number: _____ Exp. Date: _____

Name on Card: _____

Authorized Signature: _____

I hereby certify that to the best of my knowledge, all information presented in connection with this form is accurate and I will notify the Community Foundation promptly of any changes. (Please include or attach additional donor signatures if necessary.)

Signature _____ Date _____

You must sign and date this form in order for your contribution to be processed.

For any other gift or further instructions contact the Donor Services Center at (816) 842-7444.

Donor Services Center, Greater Kansas City Community Foundation, 1055 Roadway, Suite 130, Kansas City, MO 64105, Fax (816) 842-0318

The Students' Page

Looking Forward to the Future

By Kevin M. Hall, AA-S, PA-C, Nova Southeastern University
Vice-President, Student Leadership Committee

Hello, my name is Kevin Hall, and I am Vice-President of the Student Leadership Committee at Nova Southeastern University (NSU). Briefly, I am a certified physician assistant, having recently practiced in Otolaryngology Head & Neck Surgery at the University of Kansas/VA Medical Centers, in Kansas City, Kansas. This is the second semester, as we have finished basic science courses in anatomy, physiology, and pharmacology. We now have started in-depth instruction in anesthesia-related physics, physiology, and pharmacology (yeah). I am pleased to say that 22 of our classmates attended the American Society of Anesthesiologist (ASA) annual conference in Chicago, Illinois. Education lectures, refresher, and basic science courses were very informative to say the least. We also were able to meet with AAAA executive officers and staff members, along with attending the spokesperson training seminar.

Now that we are back in Ft. Lauderdale it is back to exams, labs, and clinicals. Such is the life of an AA student, and I wouldn't trade it for anything in the world. Having attended one state, Florida Society of Anesthesiologists, and one national, ASA, conference I can say for sure that there are many individuals alike, from physicians, to practicing AA's, and AA students, who are aware of this inaugural class at NSU. This is a responsibility that my classmates and I take very seriously. This is evidenced by the way we have begun and exceeded clinical expectations at various hospitals, medical centers, and ambulatory centers throughout South Florida. Every time there has been a possibly controversial incident or "conversation," my classmates have taken the "high road," as Professor Wagner would say, and I commend each and everyone of them for that. There is still much more work to be done, in the form of daily class lectures, clinical rotations, and mountain hours of studying, but we are up for the task at hand.

For everyone in Chicago that I met, including Claire Chandler, Ben Yoder, Pete Kaluszyk, Dr. Joel Zivot, and the many others, I want to say "thank you," for being very personable and giving a great outlook for the AA profession. In closing, I would just like to say that I look forward to many years of practice and collegial friendships within the AAAA.

Back to the Grind

James P. Lunsford, PA-C, AA-S, Nova Southeastern University,
President, Student Leadership Committee

My classmates and I, from Nova Southeastern University's (NSU) Anesthesiologist Assistant (AA) program, attended our first ASA conference last week, and we are now energized and even more excited about our future profession. The faculty from our program allowed, or more appropriately encouraged, our class to attend this year's ASA Conference in Chicago, IL. Though this was a fairly expensive venture for student budgets there were 22 members of our class present for the experience, and we all had a blast to say the least. It was such a great opportunity to be able to attend a national conference for one of the organizations that we are all a part of (all NSU AA students and faculty are required to join the ASA and the AAAA). Attending the lecture series and seeing familiar faces, Dr. Sween and Dr. Lebert from Atlanta's St. Joseph's Hospital, was an added bonus for myself. We visited the exhibit hall and received hands on demonstrations of all the new and different types of anesthesia machines and endotracheal tubes. Speaking with the pharmaceutical representatives about their respective drugs was also very enlightening. There is so much to be learned from attending annual conferences that just cannot be taught in the classroom because of time and curriculum restraints. The advantage of having "experts" on so many different topics at your disposal is unspeakable. My feelings are that the other programs should encourage all of their students to take part in the annual conferences as well. Besides, there is so much to be gained from meeting and interacting with the people we will likely work with in the future!

Several of us were fortunate enough to be able to attend the AAAA's Spokesperson Training session on Saturday. This was beneficial in teaching techniques to handle the tricky or potentially entrapping questions that we may all face in the future, if not already. We had the opportunity to meet our current president, Ellen Allinger, who gave us her personal insight on handling these

See "Back to the Grind," continued on page 16

The Students' Page

My First Experience at the ASA Conference

By Sabena Kachwalla, AA-S, CASE

Chicago: “The windy city” and host of the 2006 American Society of Anesthesiologists (ASA) conference. My main purpose in going to the ASA conference was to stand at the AAAA booth to talk, educate, and answer any questions I could about our profession. I was told to expect between 15,000-20,000 people at the conference. The conference was held at McCormick Place which is a huge convention facility so large that you had the option to take the bus from your hotel either to the North or South side of the building. In the morning on my first day there was a mob of people lurking at the entrance of the exhibit hall waiting for the convention to start. Since my badge displayed “Exhibitor,” I was able to squeeze among the mob and enter the exhibit hall before the masses entered and admire all the booths before they were crowded with people. Baxter, Nellcor, and Emend were among some of the high profile industry exhibitors whose popularity did not stem only from the products they were featuring but also from the free goodies they were handing out. I have to mention I think the #1 goodie give-away was a personalized engraved pen which also has a USB flash drive inside the pen!

At the AAAA booth, anesthesiologists would approach me and say: “Why aren’t you guys practicing in my state?,” “AA’s are great!,” and “Come and work for me.” It was so encouraging to hear the support and recognition from anesthesiologists. On the other hand, I was also astonished at the number of anesthesiologists who had no idea who AAs were.

I had the opportunity to meet and talk with key players who make a difference in our efforts to expand our practice to other states. There was a bountiful amount of energy, technology, and combined brain power at the conference. I highly encourage anyone to attend the October 2007 ASA conference in San Francisco because it gives you the opportunity to see anesthesia as a propagating industry and an insight to the future of anesthetic practice.

“Back to the Grind,” continued from page 15

questions as well.

We were invited to and attended the Florida Society of Anesthesiologists’ social on Sunday night. We met some of the anesthesiologists from Florida who helped to make it possible for AAs to practice in this state and for our program to exist here. It was also nice to meet some of the other anesthesiologists with whom we will be doing future clinical rotations. Among the anesthesiologists we all had the opportunity to speak with was Sonya Pease, M.D., a former anesthesiologist assistant, and proponent of the AA profession who is now training some of my classmates.

Now that we’re back in Ft. Lauderdale, and the coats and sweaters have been stowed away, at least until next year’s ASA Conference in San Francisco, we are back to the grind. As I said previously we are energized and excited to have the opportunity to train for this profession. It is hard to believe that we have been in school for five months, and how much we’ve learned in that short amount of time is even harder to believe.

As for the NSU AA class of 2008, thank you to those who made it possible for us to attend this year’s ASA Conference, and we look forward to seeing and meeting other AAs and AA students at the AAAA Conference in Daytona, Florida in April 2007.

The Winds of Change

Joann Roberts, AA-S, Emory

As the autumn winds are now blowing across the Emory campus, so too are the winds of change in the AA program. Arriving as new and enthusiastic first year students, we learned of the innovative plans for the program. This year Emory has returned to a twenty-four month program. The program has been redesigned to delete redundant information. Along with academic change, we are looking forward to a new facility for the program. Although many aspects of the Emory tradition remain intact, other areas are changing.

The diversity of clinical sites is a long standing tradition. It has been hailed by the class of 2008 as one of the great assets of the program. When we return from our clinical sites, we are replete with details of our experiences. The Emory program fosters independence and initiative as part of the learning process. Additionally, students have found time to work together cooperatively in study sessions. This has built a strong sense of cohesiveness among classmates.

Diversity among the students is another asset. With varying backgrounds and experiences, we have great appreciation for what each of us brings to the program. With strong class leadership, we have been able to enjoy spending time together outside the classroom setting. Facing the challenges together and being able to enjoy each other has built strong bonds among the class of 2008. We look forward to seeing what the year brings.

Opportunities

JobLine Listing

Alabama:

Anesthesia Services, P.C., Infirmery Medical Center, Mobile
Contact: Andy Price 251/432-4497 or fax 251/432-0577

Florida:

Sheridan Healthcare, Tallahassee
Contact: Shane Angus 850/443-8068 or shaneangus@yahoo.com

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

South Carolina:

Surgery Center in Myrtle Beach
Contact: Dr. Joseph Maggioncalda voice 843/692-1062 or fax 843/497-9303

Washington, D.C.:

Children's National Medical Center, Washington, D.C.

Contact: Dr. Richard Kaplan
202/884-2025 or Rkaplan@cnmc.org

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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Attn: Marya Garner, HR Manager
Physician Specialists in Anesthesia, P.C.
5671 Peachtree Dunwoody Road
Suite 530
Atlanta, GA 30342
Fax# 404-851-1649
Email: recruiting@psa-online.net

UNIVERSITY OF WISCONSIN – MADISON

The Anesthesiology Department has openings for AAs (certified or eligible) at the UW Hospital. Preoperative evaluations and all types of anesthesia care and monitoring performed by AA staff as part of our Anesthesia Team concept. No OB. Competitive salary and excellent benefits.

Send CV to: Human Resources Director for Anesthesiology
600 Highland Ave, Madison, WI 53792-3272.

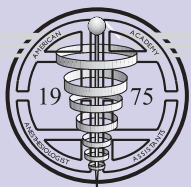
Unless confidentiality is requested in writing, information regarding applicants must be released upon request. Finalists cannot be guaranteed confidentiality. The UW-Madison is an EEO & AAE.

Mark Your Calendars!

**31st Annual Conference
April 21 - April 24, 2007
The Shores Resort & Spa,
Daytona Beach**

A Noble House Property and
AAA 4-Diamond Resort

Hotel reservation
details and Registration
information to follow!



2007 Dues Renewals In the Mail

Please watch your mailboxes for your 2007 AAAA dues renewal invoice. Invoices were mailed in November. If you have not received your renewal notice yet, please contact info@anesthetist.org to confirm that we have your current mailing address on file.



www.shoresresort.com



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.

2006

Dec. 8 – 12 — New York, NY

Postgraduate Assembly in Anesthesiology. (Offering up to 40.0 hours of AMA PRA category I credits.)
Online registration: www.nyssa-pga.org.

2007

Jan. 15 – 19 – St. Thomas, U.S.V.I.

Caribbean Seminar in Anesthesiology. (Offering up to 18 AMA PRA category 1 credits.)
Register online at www.currentreviews.com or call 954/763-8003.

Jan. 21 – 26 – Vail, CO

Anesthesia and Perioperative Medicine. Contact Janet M. Daniel at University of Alabama Birmingham at jmcdaniel@uab.edu or call 205/934-6501.

Jan. 22 – 26 – Maui, HI

California Society of Anesthesiologists Hawaiian Seminar. (Offering a maximum of 20 AMA PRA category 1 credits.)
Register online at www.csaq.org or call CSA at 800/345-3691.

Jan. 26 – 28 – Scottsdale, AZ

Arizona Society of Anesthesiologists Annual Meeting – Anesthesia 2007. Contact Patrice Hand at patriceh@azmedassn.org or call 602/246-8901.

Feb. 4 – 9 – Puerto Vallarta, Mexico

10th Annual Practical Updates in Anesthesiology. (Offering a maximum of 25 AMA PRA category 1 credits.)
Register online at <http://cme.med.umich.edu>.
Note: Beginning January 2007, all US citizens must have a passport to enter Mexico, including children.

Feb. 9 – 11 – Anaheim, CA

45th Clinical conference in Pediatric Anesthesiology.
To register, go online to www.pac.chla-accm.org or call Tivi Ortiz at 323/669-2262.

Feb 17 – 21 – Rancho Mirage, CA

Loma Linda University's 35th Annual Anesthesia Symposium.
Contact Shirley Jones at 909/558-8173 or go online to www.llu.edu/llumc/anesthesia/conference/html.

Feb 21 – 24 – Scottsdale, AZ

Mayo Clinic Symposium on Anesthesia and Perioperative Medicine.
Registration material online at <http://www.mayo.edu/cme/anesthesiology.html>.

Feb 24 – March 2 – British Columbia, Canada

Whistler Winter Anesthesia (Offering up to 21.75 section 1 hours of The Royal College of Physicians and Surgeons of Canada which maintains a reciprocity relationship with the AMA PRA category 1 credit).
<http://meds.queensu.ca/whistler>.

Feb. 25 - March 2 – Vail, CO

University of Colorado School of Medicine's Colorado Review of Anesthesia and Ski Holiday (CRASH).
Registration materials available online at www.cucrash.com or call 303/372-6301 for more information.

March 11 – 14 – Marco Island, FL

Perioperative Management. (Offering a maximum of 21 AMA PRA category 1 credits.)
Register online at www.hopkinscme.net or call 410/955-3169.
Registration cut-off date is March 5th.

April 11 – 14 – Kauai, HI

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

April 13 – Kansas City, MO

Missouri Society of Anesthesiologists Annual Meeting.
Go online to www.msahq.org or call Fred Brown at 573/636-6905.

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 7 – 9 – Washington, D.C.

ASA Legislative Conference.
Contact Michelle Allen at M.Allen@ASAwash.org or call 202/289-2222.