The Newsletter of The American Academy of Anesthesiologist Assistants

First Quarter, 2008

President's Message Under New Management

By Deb Lawson, AA-C AAAA President

rowth means change, and as the AAAA continues to expand its scope of influence in professional affairs, the organization's management capabilities are also increasing. Moving the office to Richmond, VA added a huge amount of unexpected work for everyone involved, and I cannot adequately express my gratitude for the heroic effort of so many people to keep the transition to the new management firm on track. Thanks also to many of you for your patience through the frustration you may have encountered trying to sort out membership issues over the past couple of months. I am positive that the very member-friendly presence in the Richmond office will more than make up for this temporary inconvenience.



Deborah Lawson, AA-C AAAA President

Beyond those challenges, the promise of expanded management services is exciting. We are extremely impressed with Heather Spiess, our new Executive Director. Despite a staggering amount

of email and hours of teleconferencing, she has kept up the pace with answers, ideas, and follow-up, at all hours, seven days a week. The Ruggles Service Corporation is comprised of a staff with significant expertise whose support will allow the AAAA to accomplish great things.

A top priority of our strategic vision this year has been re-tooling the annual meeting to provide increased opportunities to tackle the biggest need of all: getting this profession what it deserves. Attendees at the upcoming conference will learn how much has been gained in the last year, what it took to make that happen, and what we learned in the process.

Many resources are available to health care professions, and the AAAA (that means you, too) needs to step up and insert our profession capably and confidently into those processes so that we, too, can take advantage of them. Anywhere that anesthesia care professionals play a role, we need a voice, whether it's in employment, academic, state, or federal areas. The fuel for that engine: dues and volunteerism, the more the better. Pay attention, pitch in, and get your colleagues in the AAAA loop. If they ask what the AAAA has ever done for them, have a good answer ready.

Not enough of us are able to properly speak for the profession in the forums where we could have significant impact. To meet that goal, the AAAA is devoting significant dedication and dollars to preparing more members to represent the profession effectively. The best place to take advantage of those resources is the annual meeting, with lots of face-to-face time to put ideas, expertise and energy together.

The meeting starts with an excellent roster of speakers, including special guest Dr. Roger Moore, ASA President-Elect. Add the beach, the community of AAs from across the country, old friends and new, a growing pool of recruiters, increased industry sponsors, and it's hard not to be optimistic.

The annual meeting is always a good time, and 2008 is a particularly good time to be an AA. The future has more potential than ever, but we need you to make it happen. Stay tuned.

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The Anesthesia Record

Published four times a year by the American Academy of Anesthesiologist Assistants. Please direct all general inquiries to the AAAA's management at the mailing address below, fax number or e-mail address. Opinions expressed in this newsletter are those of the individual authors and do not necessarily represent AAAA policy.

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The Editor's Column
It Takes a Village

By Tiffany Lewis-Roberts , AA-C Co-editor

pon a recent trip home to visit my family this holiday season, I was reminded how much the phrase, "it takes a village to raise a child," rings true. Observing how much energy and input each grandma, grandpa, aunt, uncle, great-grandma, and greatgrandpa put into raising and nurturing my niece and nephew was really amazing to see. It was incredible to see everyone pitching in and helping to raise the next generation of children in my family. It made me really start to understand how important this concept is in my own professional life as well as my family life.



Tiffany Lewis-Roberts, AA-C

Each year, there are five AA schools that are certainly raising the next generation of AAs to make us proud as an organization and more importantly, provide quality health care to patients.

The number of AAs itself is still relatively small, so many of us still feel that we are a close-knit family in a lot of ways. In keeping with the saying that it does take a village to raise a child, then it certainly takes all of the practicing AAs, as a collective family, to raise the next graduating class of confident, competent, and professional AAs. Every clinician, professor, director, etc. that comes into contact with students has a chance to make a positive impact in that student becoming outstanding when they graduate and enter the anesthesia workforce. We all have so much of an impact on students and even though it takes a lot of energy and effort, it really is vital to the survival of our organization that we take the time to do it right and make each student a priority to us. I can still remember all the clinical instructors and professors that shaped how I thought about anesthesia. Every time I got pimped or had to go home with questions to look up helped form my thought processes and I really appreciated that at the time and to this day.

So each time you see a student rotating at your hospital, take the time to spout off some of your knowledge, or take the time to answer their questions, because it really does "take a village..."

Bylaws Changes

It's that time of year again....Please keep an eye out for an explanation of proposed bylaws changes that will be mailed to you in early March. As you know, all bylaws changes will be voted on at the Annual Business Meeting on Sunday, April 27, 2008. See you in Hilton Head.

Saral Patel AAAA Bylaws and Ethics Committee

The advertising and copy deadline for the Second Quarter, 2008 Edition is **April 15.**

Inside AAA AAAA Partners With a New Management Firm

By Heather Spiess Executive Director

Ruggles Service Corporation is a multi-association management company, founded in 1974 by John A. Hinckley. Mr. Hinckley passed away in December 2006. The company is owned and managed today by his son, Stewart A. Hinckley and daughter, Heather A. Spiess.

Ruggles provides full management services, including membership recruitment and retention, meeting management, exhibit and grant sales and service, accounting, web site development, desktop publishing and more.

For over 33 years, Ruggles has specialized in managing strictly medical associations. Some of Ruggles' clients include the Society of Cardiovascular Anesthesiologists, Association of Cardiac Anesthesiologists, Society for Pediatric Anesthesia, American College of Osteopathic Pediatricians, American



Heather Spiess



Stewart Hinckley

Society of ExtraCorporeal Technology, Society for Pediatric Sedation, Clinical Orthopaedic Society, Psychiatric Society of Virginia, Virginia Society of Anesthesiologists and Virginia Orthopaedic Society and now the American Academy of Anesthesiologist Assistants.

Some of the key AAAA staff who you will get to know are:

Heather A. Spiess, Executive Director Stewart Hinckley, President (Ruggles Service Corporation) Joye Stewart, Association Manager Kevin F. Johns, Director of Meetings and Conventions Kimberly Robertson, CPA, Controller Daniel Gainyard, Director of Information Technology Matt Van Wie, Manager or Corporate and Educational Support Ray Hall, Media Manager Matt Martin, Web site Developer Julie Hitt, Administrative Assistant

There are additional staff persons who are also a valued part of our team. For more information on Ruggles and the staff, please visit <u>www.</u> <u>societyhq.com</u>. We hope you will not hesitate to contact us at (866) 328-5858 with any questions. Thank you for your patience as we continue with our management transition. We truly look forward to a long and prosperous partnership with the members of AAAA.

32nd AAAA Annual Meeting Update

By Chris Caldwell AA-C

AAAA Annual Meeting Chair

As I look back on our last few AAAA Annual Meetings something simply incredible sticks out at me. My have we grown. If you've been to a meeting in the last couple of years you know exactly what I'm talking about. If not, here's an example. At the 2005 AAAA Annual Meeting in St. Petersburg, Florida, we had a total of 132 people attend the meeting. Last year in Daytona Beach, Florida, we had a staggering 255 people in attendance.

Now, as the committee chair for my second AAAA Annual Meeting, I and the rest of the AAAA, want to raise the bar even higher for this year's Annual Meeting. The meeting returns to Hilton Head Island, SC this coming April 26 - 30, 2008, at the Hilton Oceanfront Resort, where it looks to be the best AAAA Annual Meeting to date. Here is just a sampling of what we have in store.



The education lectures will again be superb. Dr. Roy Soto returns after his excellent reviews from last year's meeting. Dr. Anna Maria Mar-

> chionne is coming to us all the way from Washington to give two excellent lectures on Pediatrics. Dr. Greg Applegate is coming to present us with two very interesting topics from his experience in the US Military. Dr. Karen Posner is going to bring us up to date on the ASA Closed Claims Taskforce. Dr. Sorin Brull will do the same from the Anesthesia Patient Safety Foundation (APSF). Then there is our Keynote Speaker on Saturday, Dr. Roger Moore, President-Elect of the ASA. Again this is just a sampling, and the AAAA will be bringing you something interesting and informative for the entire time that you are in Hilton Head.

All of what you have come to know and love about the AAAA Annual Meeting is happening, but we also have some new things for this year. The American Red Cross will be helping us with

Inside AAAA

Our Public Relations Effort - What it Means to You

By Al Rothstein

Media Consultant

During those times that you have examined your future as an Anesthesiologist Assistant, you no doubt have had to make critical decisions, such as where you want to work, what state, city, or medical center? Today AAs have more choices. Part of our role in public relations is to give you those choices, and expand them for the future.

AAs can consider working in states like sunny Florida, beautiful North Carolina, and even our nation's capitol, choices you didn't have even three years ago. This is because of the team efforts our leadership's guidance has coordinated, including skilled legislative advocacy, support of anesthesiology societies, and public relations.

Our PR strategy is created through a joint effort of Communication Committee Vice-Chair Lauren Hojdila, and Al Rothstein, our PR Consultant. Both work under the direction of Sarah Russell, the Communication Committee Chair, and Deb Lawson, our President. Once we decide which groups we want to educate, Al creates the articles and press releases, then distributes them to those groups.

Al is also a specialist in working with the news media, and has educated the news media so that stories help medical professionals, the public, and lawmakers become aware of your training, education and impeccable safety record. This is critical during our efforts to get licensed in the various states in which we work. The resulting media coverage has shown the world exactly who you are, enabling a much easier legislative process in the face of opposition, hesitation, and those who are simply unaware of our existence.

Public Relations in the Workplace

When you have made your decision about where to work and begin to apply for positions, it is critical to be accepted "into the fold." That means not only do anesthesiologists, hospital administrators and ambulatory surgery centers know the value of an AA, but others you will work with on a day-to-day basis must know and appreciate it as well. That is why we have published articles in *The Bulletin of the American College of Surgeons, Anesthesiology News* and coming up this month, our article "Perianesthesia Nurses and AAs - A Critical Partnership" will be published in *Airway*, the newsletter of the perianesthesia nurses of Florida.

These articles let those you will be facing every day know the intensity

and quality of your training, making your introduction into the workplace much easier. We gain a tremendous amount of credibility when we secure a news article in the publication of other medical professionals. If these news articles were display advertising, they would cost thousands and thousands of dollars.

Our articles and press releases are also targeted to those who will hire our AA students. In fact, a press release and article we sent through the listserve of the National Association of Advisors for the Health Professions, about the launching of the AA program at Nova Southeast University and considering a career as an AA, received many responses from students wanting to get into our profession.

Another practical way that press releases help will be our upcoming release on the certification exams. This will inform hiring professionals about how, with a couple of clicks, they can quickly see that an AA's certification is up to date, making hiring a lot easier and quicker.

And speaking of getting hired, our recent article "How to Hire an AA" has been published in Florida, South Carolina and perhaps nationally. This article tells the story of how one anesthesiology group had the courage to be one of the first to hire an AA, and the quality of care benefits they received in return.

Most of these articles are available on our web site, for the entire world to see when being educated on what we do. We invite you to read them, and always feel free to suggest other story ideas!

Spokesperson Training

You might be asking yourself about what would happen if all of a sudden you were called on to be interviewed for an article. This is why Lauren and Al conduct a Spokesperson Training session at least once per year at the annual meetings of the AAAA and the American Society of Anesthesiologists. We have covered topics such as media interviews, legislative presentations and communicating at our exhibit booths. For this April's spokesperson training, the topic will be "Message Development" giving you the confidence and skills to take your message and make it understandable for our audiences.

The bottom line about public relations is that it must benefit you. Our PR is the tool that communicates who we are to those who license us, hire us and work with us, giving the profession more control of its destiny, and giving you more control of your future.

Annual Meeting Update, from page 3

our 1st AAAA Blood Drive on Saturday, April 26, 10:00am - 2:00pm. On Monday, April 28, the AAAA will have its 1st Annual Golf Tournament will all the proceeds going to the APSF. Then on Tuesday, April 29, 2:00 - 5:00 pm the AAAA will be having an open panel discussion with the AAAA committees in attendance in order to give the membership a better understanding of what each committee does in the AAAA. This is an excellent opportunity for anyone wishing to become more involved in YOUR national organization. So come, learn, and get involved in the AAAA.

I hope to see you in Hilton Head, SC!



AAAA members at the 2007 Annual Conference in Daytona, Florida

Inside AAAA

Membership Development: The Lifeline for AAAA

By Amie Schilling, AA-C

Membership Committee Chair

Every year around this time the AAAA works diligently to contact all AAs and remind them to renew their membership if they haven't already or join the AAAA for the first time as a new student or fellow. For those that have been members for many years, it does not take much convincing to get those dues paid and understand how important the AAAA and its membership numbers are to the future existence and growth of the AAAA. Joining the AAAA is the best and only way to stay up to date on the advances of our profession and to show your support and dedication for your career and fellow AAs.

Along with the usual mailings, newsletter articles, emails, etc., the membership committee will be striving to reach higher membership numbers again this year in several ways. The student committee and student reps will be asked to team up with the membership committee members and work on developing a strategy to promote the importance of continuing AAAA membership after graduation day. Over the past few years, new graduate membership numbers have not been at our goal and hopefully this is just because students are now busily wrapped up in the real world of working and running households and not because they are dissatisfied with the services AAAA provides as someone starts on a new career. The AAAA needs to do a better job of demonstrating the need for students to become fellow members following graduation. Similar to the importance each student and each new AA school that opens plays a vital role in the expansion of the AA profession; the membership numbers play that role in the political and national recognition and expansion of the AA profession through the AAAA.

An active relationship between the membership committee and the delegate assembly is also hoping to be established this year. The goal would be to increase representation to the AAAA at a more statewide or local level and give each AA a person to go to for questions, information and suggestions to the AAAA. Hopefully all of this would help foster a great relationship between AAs and the organization that represents the positive future of the profession.

As in all organizations, membership is the lifeline and backbone of the group and each year all AAs can help build the strength and support in the AAAA by talking to their peers, colleagues and physicians and encouraging them to join the AAAA for the first time or remind them to send in their renewals. Most AAs would not have to look very far in the past to see how much the career path and education of the AA profession has changed for the better due to the efforts put forth by the AAAA and the benefits and representation it gives to its members.

Please urge, push, write the check for them and sign their name, or just gently remind your fellow AAs to send in their dues and continue supporting the AAAA and all its effort for you career. After all, the fu-

Office of Communications Continues to Build Awareness

By Lauren Hojdila, Co-chair, Office of Communications and Al Rothstein, Media Consultant

Happy New Year to all from the Office of Communications! 2008 has started off with a bang and will continue full steam ahead for the AAAA and the AA profession. This year marks the arrival of the fifth AA Program located at the University of Kansas City in Kansas City, Missouri. They started their classes in January and we all wish our newest program the best. We also welcome the UMKC AA students to the AAAA and hope to see you in Hilton Head in April.

Another milestone for the AA profession in 2008 is the graduation of the first class from Nova Southeastern University in Fort Lauderdale, Florida, in August. We wish all of the soon-to-be graduates in all of the programs good luck in their preparation for the upcoming NCCAA Certification Exam this June.

Over the past year the Office of Communications has made some important progress for spreading information on the AA profession to the health care media. We are continuing with this effort in 2008 by defining the relationship between AAs and perianesthesia nurses, to help the nurses understand our role in the anesthesia care team. This has been done with our article "Perianesthesia Nurses and Anesthesiologist Assistants, A Critical Partnership." It has been published in January's *Airway*, the publication of the Florida Association of Perianesthesia Nurses. This article introduces perianesthesia nurses to AAs and defines the important relationship between us in the O.R.

We will also help to encourage the eventual hiring of AAs by reaching out to medical boards and hospital administrators with the press release "Web Site Offers Instant Certification Confirmation of Anesthesiologist Assistants." The press release shows how simple it is for those regulating and hiring AAs to find an AA's certification information on the Internet. We explain in the release that those checking on certification of AAs can do so on the web with little time and effort. Hopefully, this article will decrease the time your credentialing file sits on desk, while they await a paper copy, and increase your patient's access to a qualified anesthesia provider.

Are you tired of the snowy, cold, blustery, and dreary days of winter? Dreaming of sunny skies, warm ocean breezes, and gently swaying palm trees? No, I'm not thinking of the AAAA Meeting in Hilton Head...I'm thinking of working in Florida. We are trying to increase the number of anesthesiologists in Florida that are hiring AAs. This is extremely important as Nova students begin to graduate and maybe if you ever want to move to a tropical climate. Our article "How to Hire an AA" has been the first step in that process. It has been published in the fall edition of FSA Today, the newsletter for the Florida Society of Anesthesiologists.

Ever have a question about AAs or the AAAA while you are working hard behind the drapes? At the AAAA Meeting in Hilton Head we will be presenting another Spokesperson Training Session with a focus on how to master the AA message. We will be discussing information on the AA profession, conversational tactics, and many other tips and tricks to assist you with educating others about our profession. This session will be open to all attending the meeting. More information about this session will be filling your inboxes very shortly. See you in Hilton Head. Best wishes in 2008!

My Journey

Anesthesia and the Art of Skydiving

By Melissa Huang, AA-C

...and once you have tasted flight, you will walk the earth with your eyes turned skyward, for there you have been and there you long to return. -- Leonardo de Vinci

I don't really fit in. But that's alright. It's been that way all my life. There I am sitting in class with five men, most of whom are significantly older than me. One has already dropped out. We are going over emergency procedures for the hundredth time. I am attending a class called Accelerated Free Fall. Most people just call it skydiving. The dive plan rise and flank me on each side. The first one climbs out the door and perches outside in the fierce wind to my left. The second instructor is inside on my right. I line up on the edge of the door way. It's my skydive. My instructors are there now only to support me. I initiate the count. 1, 2, 3 and out we go.

Amazingly, one does not get same feeling as you do on a roller coaster when you jump out of a plane. The roar and coolness of the wind is unforgettable. I perform all the maneuvers that I am supposed to that we talked about on the ground. Pretty soon the freefall part of the skydive will be over. My jumpmasters spin me around to face the sunset. The view is incredible. I pose for a picture before I pull my chute. The

is drilled into us. We practice it again and again with the hope that if our brains ceased to function our bodies would take over with recall. We have a plan A, a plan B and even a plan C. After they are pretty sure we won't be a hazard to ourselves and others, we are sent on our way.

I walk up to the little plane with my parachute strapped on, which I have double and triple checked. I have rehearsed the dive plan over and over--out loud with my jumpmasters and alone in my head. I stop for one last picture and say "see you soon" to the people who will be



force of the chute opening is startling. It will later leave all sorts of bruises behind. My jumpmasters continue on with their dive. There is nothing else they can do for me now. I am on my own.

I check my chute as per protocol. All is not right. The lines are twisted. But the rate of my descent has definitely slowed. What to do? Do I choose to cut away from this main parachute and deploy a reserve that will hopefully be functional or do I fix the one I have? I decide that it is fixable and that I can ameliorate the situation. It was just a minor malfunction this

waiting for me on the ground. I protect the pull cord with my hand as I duck underneath the low opening of the plane's door. The jumpers file in and we are packed in sardine style. We try to joke around over the roar of the engines. The engine seems to sputter a little as it kicks into gear and hauls its hefty load into the air.

Everyone settles into place. Some look out the window. I close my eyes and go over the plan again. When I open my eyes I check my altimeter--4000 feet. My jumpmaster asks me to say the dive plan aloud again. My mind is racing with everything I have learned, and I try to exude calmness but my face betrays me. The jumpmaster shakes his hand at me like he's trying to shake off imaginary water--the skydiver's signal to relax. I take in a deep breath, smile and look at my altimeter--10,000 feet.

It's almost time. Someone slides open the plane's door. The blast of air is refreshing. It's been a hot ride up. A group of divers are ahead of me. They go first. It is amazing to watch them leave together. It looks as if they are being sucked right out of the door. My two jumpmasters

ELL US ABOUT YOUR JOURNEY.

time. Definitely a good learning experience. The landing is smooth. It is a successful skydive.

I've had other jumps where the landings were less than perfect --you might even call them rough and even the freefalls were maddeningly chaotic and uncontrolled. I've had other experiences where I've come scarily close to 90-foot tall pine trees, and other times when I knew I wasn't going to make it back to the drop zone. So what did I do? I used the training I had. I went with the flow.

Things don't always go the way you plan it in skydiving or anesthesia. I have found some uncanny similarities in skydiving and anesthesia. Anyone can jump out of a plane but it is the landing that demonstrates one's artistry and finesse. One can plan and plan and at the end of the day nothing goes your way. But I feel my teachers (anesthesia and skydiving) have taught me well. They left me with a set of tools that I can use. The situations and conditions will always vary but I am confident that whatever comes my way I am prepared.

> E-mail your story and a photo to Newsletter Co-Editor Tiffany Lewis-Roberts at tiffy131@hotmail.com

Professional News

AAAA NAC Report: State and National AA Issues

By Ellen Allinger, AA-C

National Affairs Committee (NAC) Chair

The promise of a new year is always that things will be better. However, in the arena of AA professional issues, we are still facing some of the same problems and discriminations of recent years past. While we continue to make forward progress, it is slow and fraught with difficulties.

State Issues

New Mexico

Hopes to revise New Mexico's Anesthesiologist Assistants Act to improve the ability of AAs to work in this state came to an unexpected halt on in early February when it was learned that the bill's legislative sponsor had failed to file the requisite paper allowing the consideration of a non-budgetary bill in this year's New Mexico legislative session. The bill would have sought to change three major points: (1) Allow AA employment beyond departments of anesthesiology in a New Mexico medical school; (2) Increase the supervision of anesthesiologists to AAs from its current ratio of 1:3 to equal that allowed by the Centers for Medicare and Medicaid Services (CMS), and; (3) Remove the oft-problematic word "assist" and substitutes the words "develop and implement" to clarify AAs' scope of practice. It will be possible to introduce this bill or another similar bill next year when the New Mexico legislative session is not limited to only budget items.

Kentucky

In 2006, Kentucky sought to change the 20-year statute of requiring any AA practicing in Kentucky after 1986 to also be a certified physicians assistant. Because of the immediate opposition to the legislation which only sought to remove this requirement, the entire bill was rewritten to "require the Legislative Research Commission to study the certification and scope of practice requirements of anesthesiologist assistants in Kentucky to those requirements in all states that statutorily license or certify anesthesiologist assistants;" This report, released in February of 2007, is one of the most comprehensive comparison studies to date of AA state statutes as well as providing a comparison between the AA and nurse anesthetist professions. This study, along with a critical nurse anesthetist shortage in Kentucky that fuels salaries up to \$260,000 a year, are perfect tools for use in a renewed legislative effort to remove the PA educational requirement of AAs that is unique to Kentucky.

However, at this time the Kentucky Society of Anesthesiologists (KSA) is unwilling to lead any AA legislative effort. A meeting this past November between Kentucky Association of Nurse Anesthetist (KyANA) leaders and four AAs representing the profession leaves little doubt that the KyANA will oppose any AA legislation. Because of the lack of strong KSA support and the anticipated KyANA opposition, no legislation has been introduced in Kentucky for 2008.

North Carolina

As of December 2007, all processes are now in place for AA licensing

in the state of North Carolina. Applications can be obtained online through the North Carolina Board of Medical Examiners (NCBoME) website at www.ncmedboard.org. Click on the heading "For Physi-Extenders/Perfusionists" cian and scroll to the bottom of the list on the left-hand side of the web page to the heading "Anesthesiologist Assistants". A notable fact about AA licensing in NC is that, unlike many states, an AA may receive his or her license before obtaining employment.



Ellen Allinger, AA-C

In January, the NCBoME of-

ficially granted the first two AA licenses. Congratulations to Maggie O'Neal and Megan Varellas on your new North Carolina AA licenses! These two Asheville, NC, area residents were both highly involved in the three-year process of AA licensing legislation, and none are more deserving than they in being the first recipients of these new state AA licenses.

As usual, though, the ability for AAs to work in a new state is proving to be a challenge in North Carolina, just as it has in other states such as Florida and South Carolina. The North Carolina Society of Anesthesiologists continues to work hand-in-hand with the AAAA to promote the AA profession within that state.

National Issues

Veterans Affairs

Despite the recognition last year of the AA profession by the VA system through our inclusion in the VA Handbook, interested AAs are having a difficult time finding employment at VA hospitals. Several factors are responsible, not the least of which is the fact that one must deal with the federal government for VA employment. Lack of knowledge about this change within the system is probably the biggest obstacle in the posting of AA positions and recruitment of the AA professional. This will be one of the major focuses of the National area of the National Affairs Committee for 2008. Anyone who is applying to the VA or who has ever had experience working in the VA system is encouraged to contact Mike Nichols (<u>pledgeaac@yahoo.com</u>) so that this activity can be tracked.

Working with the ASA

The AAAA continues to work with the ASA in promoting the AA profession. This year, six AAAA delegates will attend the ASA's Legislative Conference in Washington, D.C., for three days of conference meetings as well as meetings with state legislators. Over the past four years, a smaller AAAA delegation has attended this conference, but many opportunities were being missed due to lack of AA manpower. This expanded delegation will allow members to breakout into smaller groups to meet with ASA state component society leaders while other visit legislators

Professional News

Anesthesia Advantage works to place and promote AAs

By Dan & Mary Hladky

Advantage - AAs!

With our 3 children out of the house, my husband, Dan Hladky (CWRU '74), and I began to think more about our retirement. In an effort to increase our small nest egg, Dan looked into locum work. We were very surprised to find out that most agencies only place MDs and CRNAs. In fact, AA locum work was very difficult to find. And so Anesthesia Advantage was born.

Anesthesia Advantage is dedicated exclusively to the placement and promotion of Anesthesiologist Assistants. Anesthesia Advantage will actively work to "spread the word" about the credentials and reputations of Anesthesiologist Assistants, increasing employment opportunities in more states. We intend to make Anesthesia Advantage synonymous with quality anesthesia care. We believe, and have personally seen, that as more anesthesia departments embrace the concept of the Anesthesia Care Team it creates a greater demand for AAs. Anesthesia Advantage will provide hospitals and physician groups an easy way to locate and employ AAs. We will work to be the "first call made" when either locum or permanent placement is needed.

We hope that you will consider making Anesthesia Advantage your representative. With your help, Dan and I hope to increase the exposure of AAs adding to all the hard work that is continually being done by so many.

Anesthesia Advantage is accepting inquiries for placements. We are building our connections – we need AAs who are interested in locum work, short or long term, and hospitals and physician groups who have a need. We believe we can build more opportunities and provide great exposure for AAs. We have the time and determination – we just have to make it happen. Please help us to spread the word!!

Please look for information on our website, www.anesthesia-advantage.com, launched March 1. Please feel free to contact Dan or Mary at 937-926-0589 or <u>mary@anesthesia-advantage.com</u>. We welcome your questions and the opportunity to work with you.

Opportunities



Opportunities

Florida

Currently recruiting AAs for a busy Orlando, FL practice. Interested parties please contact: Stephen W. Thompson, MD @ 407-947-2069, or <u>squidnox@aol.com</u>

Georgia

St. Joseph's/Candler Health System (permanent or locums work), Savannah Contact: Sandra Hineline or Glenn Womack 912-355-7214 or shineline@savannahanesthesia.com

Ohio

Northcoast Anesthesiology Providers, Inc., Cleveland area Contact: Ted Brewer AA-C <u>tedbrewer@hotmail.com</u> or fax 440-827-5458

Texas

Greater Houston Anesthesiology, Houston Contact: Katherine Chalkley 713-458-4162 or <u>kchalkley@choosegha.com</u>

Wisconsin

University of Wisconsin, Madison Contact: Human Resources Director for Anesthesiology 600 Highland Ave, Madison, WI 53792-3272

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.

Opportunities? Don't miss this one.

32nd Annual Conference

April 26 - 30, 2008 Hilton Oceanfront Resort Hilton Head Island, SC

Please visit www.anesthetist.org for program and registtration information



American Academy of Anesthesiologist Assistants

> 2209 Dickens Road • Richmond, VA 23230-2005 PH: 866-328-5858 FAX: 804-282-0090

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and attend meetings. This should translate into increased support for the AA profession in a variety of states as well as increased national recognition.

In addition, the NAC has been tasked with updating the Frequently Asked Questions (FAQs) on the AA profession that is posted on the ASA's website. Initiated by Dr. Kraig DeLanzac, this valuable tool will not only get a face-lift but will be moved to a more prominent place on the ASA website. The NAC is also seeking permission to post a link to these FAQs on our website's homepage.

Although no new state AA licensing has occurred for 2008, the AAAA through the National Affairs Committee is busily working to promote the AA profession on the state and national levels. We still seek to bring new changes for AAs in this new year.

Calendar of Events

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.

March 14 – 16 – Houston, TX

Texas Anesthesia Conference for Obstetrics. Sponsored by the Department of Anesthesiology, Baylor College of Medicine. Register online at <u>www.BaylorCME.org/1390</u>. A Difficult Airway Workshop is offered on March 13th.

March 15 – 19 – Lake Buena Vista, FL

The 45th Annual New York Anesthesiology Review. Hosted by the Department of Anesthesiology, Mount Sinai School of Medicine and offering a maximum of 40 AMA PRA Category 1 Credits. For course information go online to <u>www.newyorkanesthesiologyreview.org</u>.

March 22 – 26 – Whistler, BC, Canada

Seventeenth Annual Whistler Winter Anesthesia Refresher Course & Review. Co-sponsored by the Departments of Anesthesiology & Continuing Professional Development, Queen's University. Offering a maximum of 21.75 hours recognized by the AMA.

Registration available online at http://meds.queensu.ca/whistler.

April 6 – 11 – Cozumel, Mexico

New Horizons in Anesthesiology. Sponsored by the Emory University School of Medicine's Department of Anesthesiology. Visit the CME website at <u>www.emory.edu/CME</u>.

April 12 – Lexington, KY

Kentucky Society of Anesthesiologists 2008 Spring Meeting. For more information, go online to <u>www.ksaweb.org</u>.

April 18 – 20 – St. Louis, MO

Missouri Society of Anesthesiologist Annual Meeting. For more information, go online to <u>www.msahq.com</u>.

April 26 – 30 – Hilton Head Island, SC

32nd Annual AAAA Conference.

For information on the meeting site and on Hilton Head Island, go to <u>www.hiltonoceanfrontresort.com</u>. Information on hotel reservations and meeting registration are available on the AAAA website at <u>www.</u> <u>anesthetist.org</u>.

May 1 – 4 – Miami Beach, FL

Society for Ambulatory Anesthesia (SAMBA) 23rd Annual Meeting – Enhancing Outcomes. Check <u>www.sambahq.org</u> for online meeting registration and full program information.

June 9 – 11 – Washington, D.C.

ASA Legislative Conference. For more information go online to www.asahqorg.

June 27 – 29 – Palm Beach, FL

Florida Society of Anesthesiologists' 2008 Annual Meeting. For more information visit <u>www.fsahq.org</u>.

July 25 – 27 – Hilton Head Island, SC

Georgia Society of Anesthesiologists – Lowering Your Handicap, Raising Your Revenue: the Business of Anesthesia. For more information visit <u>www.gsahq.org</u>.

Aug. 31 – Sept. 6 – Vail, CO

New Horizons in Anesthesiology. Sponsored by the Emory University School of Medicine's Department of Anesthesiology. Visit the CME website at <u>www.emory.edu/CME</u>.

September 19 – 21 – Charlotte, NC

North Carolina and South Carolina Societies of Anesthesiologists 2008 Annual Meeting. Visit <u>www.ncsoa.com</u> for more information.

Oct. 18 – 22 – Orlando, FL

ASA Annual Meeting. Free to all AAs who are ASA Educational Members. Visit <u>www.asahq.org</u> for more information.

Need CMEs fast? Find free CMEs online at <u>www.cliniciansCME.com</u> or at <u>www.CMEZone.com</u>.

Do you know anyone looking for careers in healthcare?

Send them to the AMA's Health Professions Career and Education Directory. The 2008 edition will be renamed the Health Care Careers Directory because it has been expanded to include professions such as dentist, nurse, pharmacist, physician, podiatrist, and veterinarian to name a few.

Since the 1960's it covered only allied health but consumer demand and workforce shortages among all health care careers has led to the expansion.

You can look inside this book listing 80 health related professions and 6,873 accredited educational programs in 50 states on www.amazon. com. AAAA is always working to promote awareness of our profession including getting AAs and AA programs recognized in the most popular health careers reference book used by career counselors and students.

Check out this book! As a profession, we measure up!

AA Students Go West

A new article in Missouri Medicine, the publication of the Missouri State Medical Association, describes how a new AA program is getting underway in Kansas City. It will mean more choices for those considering the AA profession out west, and eventually more AAs to solve the shortage of anesthesia providers, as they are doing in other states.

To read this article please click on the link below: <u>http://www.anesthetist.org/content/blogcategory/16/30/</u>.