

President's Message

Filling in the blanks

There is very little time between when anyone first learns about the AAAA and when they first say the words, "the AAAA should..." Whether what follows is an idea of what could be done, or a complaint about what isn't being done, it often highlights pretty clearly what should be done. But ideas are only the first step, and it's the last steps that mark the transition from "should" to "is."

Blanks do indeed exist. Step back far enough to see the whole picture and significant gaps become apparent.

Take a moment to study that big picture. You'll see that many dedicated people have laid a solid foundation for the profession through their work in education, accreditation, and certification. Without any of these components, the AA profession would collapse.

However, the gaps between these components have been a handicap to the profession as a whole. Unless something is done to integrate resources to prepare for the next decade and beyond, the demands that will accompany the anticipated increase in programs and practitioners will not be properly met. The handicap will increase.

It is not the job of the components to manage the whole; that responsibility falls on us. We can only meet that need collectively through the AAAA.

Leading the profession is our job. It falls to us to determine the best trajectory and develop the mechanisms to make it possible. The mapping of it is not as hard as you might think; every other profession has found its way through these very issues. By learning from their example, we can more wisely chart our way.

If you care about where this wonderful profession goes in your career's lifetime, help make the AAAA the most capable organization possible. Challenges lie ahead, tough decisions must be made. Let's keep talking about what the AAAA should do, and then follow through to the best of our collective ability. It's the only way we can avoid a future of talking about what the AAAA should have done.



Deborah Lawson, AA-C
AAAA President

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33rd Annual
Conference

April 18 - 22, 2009
The Hilton Clearwater Beach Resort
Clearwater, Florida

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ANESTHESIOLOGIST
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The Anesthesia Record

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The Editor's Column

Election Day Lessons

Tiffany Lewis-Roberts, AA-C, co-editor

After all the political hoopla, our country has finally elected a new president. A year ago, the back-and-forth political banter seemed almost a nuisance to Americans. But as the elections approached, it appeared that the excitement of it consumed us. This was a highly anticipated election and America was tuned in. It was great in the sense that it spurred debate about policies and brought back memories of government classes long forgotten. And when all was said and done, our newly-elected president (good or bad), was urging us all to do our part to help make our country meet its potential for greatness. And the day before his inauguration, our future president participated in a day of community service.

So what does this mean to us? It depends on how you look at it. It may mean that however big or small we are in this universe, it all boils down to lending a helping hand. Being involved in something greater than you was the message I received from watching political campaigns wind down. Government, however bureaucratic it may be, is in its most simplistic form a community initiative. So how will you do your part? We all have our own agendas. We want our neighborhoods to be safe, our streets to be clean, and our jobs to be secure.

But, how do we get there? Simply by getting down to the nitty gritty and asking ourselves what we can do to help. How can our one small action pay it forward? Do you want your neighborhood to be nicer—what can you do to help? Do you want your schools to excel—what can you do to help? Do you want your profession to be stronger—what can you do to help? It may sometimes seem like we don't have any more energy to spare, but try to remember that one instance when somebody reached out to help you and how much you appreciated it. Remember that moment, and next time try to help someone, try to do something and watch yourself grow.



Tiffany Lewis-Roberts, AA-C

Change in Allocation for Lobbying Activities for 2008

Member dues are not deductible as charitable contributions for federal income tax purposes. However, they may be deductible as "ordinary and necessary" business expenses, subject to limitations imposed as a result of association lobbying activities. Such lobbying activities are considered to be "direct lobbying" or "grass roots lobbying". The IRS defines direct lobbying as when "an organization is attempting to "influence legislation" when the communication is directed to a legislator or employee of a legislative body, refers to specific legislation; reflects a view on that legislation."¹ Grassroots lobbying occurs when the communication is directed to the general public, refers to specific legislation,

reflects a view on the legislation and "encourages the recipient...to take action with respect to the legislation."²

For the past few years, the portion of AAAA member dues used for direct lobbying has been 26% of your total dues amount. In 2008, the percentage has been adjusted, based on an internal audit, to 2% of your total dues amount.

While the AAAA uses many resources each year on lobbying efforts on behalf of its members, most of these efforts do not fall within the realm of "direct lobbying". You may wish to adjust your business deduction accordingly.

1. Source: IRS Reg. 56.4911-2(b)(1)(ii)
2. Source: IRS Reg. 56.4911-2(b)(2)(ii)

Finance Committee Report

Barry Hunt AA-C
Treasurer
Chairman, Finance Committee

Due to the generous contributions from AAAA members, the Legislative Fund accumulated a balance of \$40,261.11 (contributions for 2008 were \$21,826). The Legislative Fund is the sole financial source for local, state and national legislative issues involving the AA profession. The political and judicial process to pursue and achieve licensure in a new state is a continuous process. The AAAA has been approached

from several state Anesthesiology societies in the last few months about pursuing licensure in their state.

The AAAA members have generously been giving to the fund, and we all must continue to do so to secure the future of our profession. The AAAA does not know what new legislation will come out of Washington in the future but the Legislative Fund will allow us to be proactive in our response to any problems in a timely and efficient manner. As you receive membership renewals, please remember to contribute to this fund for the continued expansion of the AA profession.

National Affairs Update

Ellen Allinger, AA-C
National Affairs Chairman

There will be a change this year from the past process of informing AAAA members of AA legislative activities at the state and national level. In the past, mass emails went out updating the membership at each step of the legislative process. Because it is expected that there will be more than one state with AA legislative activity, as well as several national bills that will affect AAs, that system of updating members will quickly reduce the response rate to needed AA action. Instead, the newly redesigned AAAA website (www.anesthetist.org) has a section under the Members Only area of the website in which weekly legislative updates will be posted. Once you have signed on to the Members Only area, click on "Legislative Updates." Announcements of the introduction of bills as well as alerts of critically needed action will continue to be sent by mass email to members.



Ellen Allinger, AA-C

primary purpose of the legislation, just to name a few. There may even be the chance the timing is not right for the bill and the decision is made by its supporters to wait for another legislative session. For all of these reasons and more, it would be detrimental to start a support campaign for a bill that does not yet exist. All it serves to do is irritate legislators with a barrage of information that they don't need at the time.

The AAAA leaders, in conjunction with other AA supporters, attempt to do what is the best action at the time for the bill. It is unfortunate that this means that advance notification cannot be given concerning any AA legislation, but it is what is right to give each bill its best chance of success. In addition, advance notification to AA supporters also means that opponents find out about this activity. They sometimes find out anyway, but the less the possibility of an AA bill is broadcast before its introduction, the less time the opposition has to prepare its arguments against it.

National Activity

It's a new year with a new President of the United States of America and a new Congress. There will be new bills introduced as well as former ones that will directly affect AA practice. As you may recall, there was a dramatic 11th hour success last July when Congress overruled President Bush's veto of a bill that prevented the cut in Medicare payments and returned the full Medicare payment to anesthesiology residency programs when one anesthesiologist supervises two anesthesia residents. This bill directly affected AAs because it provides more money to all anesthesia departments to support their staffs, and it provides millions of dollars to anesthesiology residency programs across the nation, allowing them to employ more staff anesthesiologists to train future anesthesiologists.

The future of AAs is directly tied to anesthesiologists, so what is good for them is generally good for the AA profession. As national bills are introduced, a sub-committee of the National Affairs Committee will track them. This sub-committee will also develop material to assist AAs in contacting their state senators and representative to ask for their support of these bills. In addition, these materials will be used during the ASA's Legislative Conference in early May when AAs attending the conference meet with various legislators at the capitol.

Continued on page 4

National Affairs Update, from page 3

The other national area of great interest to AAs is employment within VA hospitals. The Veterans Affairs Handbook changed in 2007 to allow AAs to work within the VA system. However, because AAs and nurse anesthetists are classified under different Titles in the system, this leads to a large discrepancy in pay scale between the two professions. The Veterans Affairs sub-committee of the National Affairs Committee held a teleconference in December that included anesthesiologists, two who work in the VA system, and a retired VA director. Possible solutions to this problem were discussed, but all solutions require the common factor that to change the Title designation of AAs requires congressional approval.

Detailed information on the VA Handbook 1123 for Anesthesia Services and Job Postings can be found under the "Articles of Interest" on the AAAA's Members Only website section.

Political and legislative activity requires funding. Please support the AAAA's Legislative Fund as generously as you can. You are encouraged to make donations more than once a year. Contact the AAAA office for information on how to make donations throughout the year. However you choose, just don't forget to give something.

33rd Annual AAAA Meeting April 18-22, Clearwater, FL

Do you remember when "One Flew Over the Cuckoo's Nest" won the Oscar for Best Picture? Or how about when Captain and Tennille won the Grammy for "Love Will Keep Us Together"? Well, I wasn't around just yet, but it is truly something that AAs have been having an Annual Meeting since 1976. Every year, the AAAA strives to make that Annual Meeting even better than the last, and I think we have done it again.

This upcoming April 18 – 22 marks the 33rd AAAA Annual Meeting. This year we will be at the Hilton Clearwater Beach Resort on the white sands of Clearwater Beach, Florida. After listening to the membership's suggestions we have made some additions and some changes to this year's program which we think will make it another great meeting. As always the lectures will be excellent; and with the variety of topics, there will be something for everyone. The weekend alone has ten CMEs to better accommodate those of you that need to leave on Sunday night. The 2nd Annual AAAA Blood Drive will also take place on the weekend. Those staying for the entire conference can enjoy the 2nd AAAA Annual Meeting Golf Scramble at the beautiful Belleview Biltmore Golf Course. The certification review has been completely revamped and we're bringing back the Clinical Instructor Education Seminar to help all practicing AAs become better teachers. In order for more people to attend the AAAA Annual Business Meeting we have changed it from a lunch to a breakfast. This will make it easier for everyone who wants to come and be apart of it to do so. Also, you won't have to worry about carrying around a big, bulky conference syllabus. This year, the AAAA goes green with all the material on CD.

Clearwater Beach, Florida offers so much to anyone that visits (www.floridasbeach.com). The AAAA Annual Conference is not only a place to hear great lectures, visit with old friends, and take in some sun but it is also an excellent opportunity to get informed and involved in YOUR professional organization. Like Henry Ford said, "Coming together is a beginning. Staying together is progress. Working together is success." We all need to do our part.

See you in Florida,

Chris Caldwell
AAAA Annual Meeting Chair



Inside AAAA

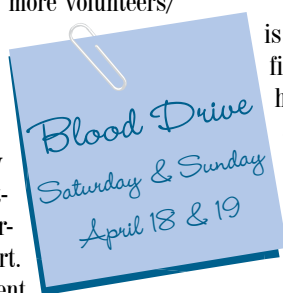
Community Initiatives Committee Offers Events at Annual Conference

By Carie Twitchell, AA-C

Now that the AAAA 33rd Annual Conference registration is available on our website, take a moment to consider participating in the Second Annual Blood Drive and the Second Annual Charity Golf Scramble.

The Florida Blood Service handles all blood drives in that state. On Saturday, April 18, and Sunday, April 19, the Florida Blood Service will be available to all those able and willing to donate blood. The meeting registration form will have a box to check if you are interested in donating so that we can gather an early estimate on the number of participants expected. With the addition of a second day and more volunteers/equipment, we look to avoid the long wait times of last year and accommodate many more people. Available times will be posted near the meeting registration desk and a sign-up sheet will be provided. **Student participation is also strongly encouraged.** The school with the highest percentage of student donors will receive a \$100 gift certificate from the Hilton Clearwater Beach Resort. Thanks to the Student Committee and all the student reps for their efforts. We expect this venture to be a huge success!

The second community initiative event will take place on Tuesday, April 21, at 2:00 p.m. at the Belleview Biltmore Golf Course. The Second Annual



Charity Golf Scramble will benefit the Children's Cancer Center (www.childrenscancercenter.org). Primarily, the Children's Cancer Center provides its support to pediatric hematology/oncology patients in St. Joseph's Children's Hospital, Tampa General Hospital, All Children's Hospital and All Children's Specialty Care of Tampa. However, the Center has served children from all over Florida, the Southeastern United States and abroad in the Bahamas, India and South America.

The event will be a shotgun scramble and is open to all levels of golfers, from experts to first-time players. The cost is \$100 for the 18-hole round and clubs are available for rent at \$25. Pre-game fun is never dull, and there are many opportunities to win prizes. Sign-up on the meeting registration form.

In addition, please consider sponsoring a student and/or a portion of the event. This outing provides great fun while raising money for a truly special charity.



**2nd Annual
AAAA
Golf Scramble**
.....
**Tuesday, April 21
2:00 p.m.**

QUESTIONS?

If anyone has questions regarding the blood drive or golf outing, please feel free to email Carie Twitchell at ctwiche1@roadrunner.com.

2009 Charity Golf Scramble

Support the Children's Cancer Center by sponsoring a hole, sponsoring a student or participating in the 2009 AAAA Charity Golf Scramble.

Your support will be acknowledged during the conference and in our next Anesthesia Record.



Contact aaaa@societyhq.com if you are interested.

AAAA Thanks the 2008 Golf Scramble Sponsors

Student Sponsors

- | | |
|-----------------------------|---------------------------|
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Fallen, But Not Broken...

Tommy Kim, AA-S
South University, Class of 2010

I had a long journey ever since a bad fall I took. It was October 2004, and I had enlisted in the U.S. Army, where I was honored to be assigned to a 3rd Special Forces Group out of Fort Bragg, North Carolina, carrying out various missions in the war against terrorism overseas.

One day, my team was in an undisclosed location where we had to scale the face of a steep mountain-side. The anchor that was holding my line securing me to the rocks had worked its way loose, causing me to fall more than 30 feet down the mountain side onto my back. The fall crushed the L4-L5 vertebrae, rendering me unconscious and paralyzed from the waist down. My team made a "make-shift" stretcher and had to carry me 5 miles on mountainous terrain to get to a safe zone. There, I was eventually transported out of the area by helicopter to an army hospital in Landstuhl, Germany, where I laid unconscious for several days.

When I finally woke up, the doctors told me that I would probably never walk again. For the next 6 months, I was strapped to a bed that had to be rotated upside down every two hours to prevent bed sores, which by that point was one of the hardest times in my life. Day in and day out, I lay in that bed unknowing of what the future would hold for me. "What am I going to do? How am I going to get around? How will my life change without the use of my legs?" These were just a few of the vast questions I asked myself. From anger to self-defeat, a flux of emotions ran through me uncontrollably. I was coming to a self realization that this is how it was going to be for the rest of my life.

Then something happened that gave me new hope. In March 2005, I experienced what can only be described as a full body spasm in which an unbearable burning sensation in my legs followed shortly after. It became a pivotal point in my life because it gave me hope that one day I would be able to walk again. And that piece of hope was my driving ambition for the next year.

Determined to walk again, I drove hard into my physical rehabilitation 5 days a week. I became somewhat of a nuisance to the nursing and physical therapy staff that was taking care of me, because I was always pushing them to push me harder. And they definitely pushed me to my limits. But with each passing week, progression was being made, and that was a liberating feeling! What began as wiggling of my toes eventually led to my first steps in July 2005. It took me almost a year to start walking as normal as I used to before my injury. In March 2006, I was honorably discharged from the U.S. Army and returned home to Atlanta, Georgia, to seek where my life would take me next.

With all the care that was given to me at the hospital, I took interest in the medical field. With a biology (pre-med) degree from Colorado State University, I began to look into what I wanted to do with my life. I tested the waters of different fields such as physical therapy. A friend, however, turned my head to the field of anesthesia. So I decided to see what it was all about, and shadowed an anesthesiologist assistant for a few days. It blew my mind, and I knew that I had to be in an operating room doing the same thing.

From that point, I applied to South University in Savannah, Georgia, where I am currently an anesthesiologist assistant student and finishing my first year. It was a decision that is leading me to the life that I want and am happy with. I continue to train myself and physically increase my strength and coordination in hopes of becoming 100 percent healthy again! I am well on my way, as I completed my first sprint triathlon in September 2007. It was a race that let me know that I have to drive to accomplish anything that I want.

It was only a few years ago that a doctor told me that I may never walk again, and now I am training for another triathlon in May, which is not so easy to do with such an intense program as the one at South University. But nonetheless, I am happy, healthy and most importantly "back on my feet".

TELL US ABOUT YOUR JOURNEY.

E-mail your story and a photo to Newsletter Co-Editors Tiffany Lewis-Roberts (tiffany131@hotmail.com) or Alyson Finamore (alyson715@hotmail.com).

Thank You

AAAA would like to thank our 2009 Sponsors and Exhibitors

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Sheridan Healthcare

Other

One of Founders of the Anesthesiologist Assistants Profession Passes Away

It is with this sad note to inform the AAAA membership that Dr. Joachim S. Gravenstein, MD passed away at the age of 83 on January 16, after an extended illness. Dr. Gravenstein held the position of emeritus professor of graduate research in anesthesiology at the University of Florida's College of Medicine.

Dr. Gravenstein graduated from medical school in 1951 and did his clinical and research fellowship training at Massachusetts General Hospital. In 1958, he founded the anesthesiology department at University of Florida (UF) and stayed there until 1969. In 1969, he left UF and became director of anesthesiology and professor at Case Western Reserve University (CWRU). In 1979, UF recruited him back to Gainesville where he taught until recently.

During the 1960s, Dr. Gravenstein became very interested in patient safety in anesthesiology and the evolving manpower shortage in anesthesiology. His interests were in manpower issues along with the need to train personnel to address patient safety issues and the increasing complexity of technology in the perioperative arena. After studying these issues, Dr. Gravenstein, along with Drs. J.E. Steinhouse and P.P. Volpitto, created the concept of the anesthesiologist assistant (AA). Their aim was to create a

well-qualified, safe and compassionate provider, based on knowledge in basic sciences and strong clinical training to assist the anesthesiologist. Dr. Gravenstein was instrumental in initiating the AA training program at CWRU, and the first graduating class was in 1971.

Dr. Gravenstein's interest in patient safety led him to become one of the pioneers in increasing safety in anesthesia. He was one of the co-founders of the Anesthesia Patient Safety Foundation (APSF). Dr. Gravenstein was one of the first to develop patient simulators as teaching tools for physicians, residents and others involved in the field of anesthesiology. At UF, he developed the computerized Human Patient Simulator, known as Stan and has been adapted to many other teaching institutions.

I. Heermann Anesthesia Foundation Inc.

If you are interested in honoring Dr. Gravenstein's memory, contributions can be sent to I. Heermann Anesthesia Foundation Inc. Checks should be payable to **I. Heermann Anesthesia Foundation Inc.** and sent to: P.O. Box 100254, Gainesville, FL 32610-0254

Opportunities

JOBLINE

Florida

Full-time Faculty Position, NSU AA Program, Tampa. contact: Bill Orr, AA-C, Program Director NSU-AAP-Tampa

Missouri

Western Anesthesiology Associates, Inc. at St. John's Mercy Medical Center, St. Louis. contact: Sue Chrismer schrismer@waai.net; 636-386-9224 ext. 193

Washington, D.C.

AA for Pediatric Cardiac Team, Children's National Medical Center contact: Dr. Richard Levy, Director of Cardiac Anesthesia (202) 476-5171, RLevy@cnmc.org



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34th Annual AAAA Meeting News

Plans are already underway for the 34th Annual AAAA Meeting in 2010. Visit www.anesthetist.org for more exciting details and meeting updates!

Calendar of Events

March 6-7 – Atlanta, GA

Ultrasound Guided Regional Anesthesia: Technology and Techniques. Sponsored by the Emory University School of Medicine Dept. of Anesthesiology. This activity is designated for a maximum of 11.5 AMA PRA Category 1 Credits. For additional information, call Emory's Office of Continuing Medical Education at 404/727-5695 or e-mail visit the CME web site at www.emory.edu/CME.

March 8-11 – Marco Island, FL

Perioperative Management – In Its 25th Year. Sponsored by the Johns Hopkins University School of Medicine. This activity has been designated for a maximum of 22.25 AMA PRA Category 1 Credits for the general session with an additional 2.0 AMA PRA Category 1 Credits for the optional workshop. Register online at www.HopkinsCME.edu or by phone at (410) 502-9634.

March 12-13 – San Diego, CA

2nd Great American Fluid Debate. Sponsored by Duke University School of Medicine and designated for a maximum of 22 AMA PRA Category 1 Credits. Registration available online at <http://anesthesiology.duke.edu/>.

March 14-17 – San Diego, CA

2009 International Anesthesia Research Society (IARS) Annual Meeting. Visit www.iars.org for updated information on the annual meeting.

March 21-25 – Walt Disney World, FL

The 46th Annual New York Anesthesiology Review hosted by the Mount Sinai School of Medicine and The Department of Anesthesiology. Visit the web site at www.newyorkanesthesiologyreview.org.

April 3-5 – Kansas City, MO

Missouri Society of Anesthesiologists Annual Meeting. Find more information at www.msahq.com.

April 14-17 – Fort Worth, TX

Health Professions Network Spring Conference. For more information visit www.healthpronet.org.

April 18-22 – Clearwater, FL

AAAA 33rd Annual Conference at the Hilton Clearwater Beach Resort. Information available online at www.anesthetist.org.

April 19-20 – San Antonio, TX

Commission on Accreditation of Allied Health Education Programs (CAAHEP) Annual Meeting. CAAHEP Board of Directors meeting on April 17 & 18. For more information go online to www.caahep.org and click on News & Announcements.

April 21 – Clearwater, FL

ARC-AA Program Directors Meeting. For more information, go to www.caahep.org.

April 29-May 3 – Washington, DC

Society for Obstetric Anesthesia and Perinatology (SOAP) 41st Annual Meeting. Information available at <http://www.soap.org/meetings.htm>.

May 2 – Austin, TX

Texas Society of Anesthesiologists (TSA) Interim Meeting. Information available at www.tsa.org.

May 4-6 – Washington, DC

ASA Legislative Conference. For more information, go to www.asahq.org and click on "ASA Legislative Conference". Note: You must be a member of an ASA State Component Society to attend. Contact the AAAA management office for clarification.

May 14-17 – Scottsdale, AZ

Society for Ambulatory Anesthesia (SAMBA) 24th Annual Meeting: "Ambulating without Assist". Designated for a maximum of 17.25 hours of AMA PRA Category 1 Credits. For registration and hotel reservations, go to www.sambahq.org.

June 5-7 – Seattle, WA

Society for Education in Anesthesia 2009 Spring Annual Meeting—Educating about Safety: Educating Safely. Sponsored by APSF, University of Washington and the Virginia Mason Medical Center. Meeting details available at www.seahq.org.

June 7-10 – Lake Buena Vista, FL

2nd Annual Emerging Technologies in the OR. Sponsored by the Duke University School of Medicine and the Department of Anesthesiology. Registration is available at <http://anesthesiology.duke.edu/>.

June 26-28 – Palm Beach, FL

Florida Society of Anesthesiologists (FSA) 2009 Annual Meeting. For event details, go to www.fsahq.org.

June 27-Nationwide Testing Centers

NCCAA Certification and Continuing Demonstration of Qualification (CDQ) Examinations. For more information, particularly on timelines, go to www.aa-nccaa.org/Examinations.htm.

Early July

Examination forms for January NCCAA Certification Examination available. For more information and a Certifying Examination request form, go to www.aa-nccaa.org/Examinations.htm.

July 31-Aug. 2 – St. Simons Island, GA

Georgia Society of Anesthesiologists' 2009 Summer Meeting. Information available at www.gsahq.org.

Aug. 21-23 – Dallas, TX

Oklahoma Society of Anesthesiologists Annual Meeting. Event details available at www.osahq.org.

Oct. 17-21 – New Orleans, LA

ASA Annual Meeting. Go to www.asahq.org for more details.

At Home Study: Perioperative Management

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