



Residents' Series

Residents' Guide to ASA



American Society of
Anesthesiologists



Residents' Guide to ASA

Residents' Guide to ASA was developed by the Committee on Communications of the American Society of Anesthesiologists with the cooperation of the Society's officers, chairs of the ASA divisions, sections and committees, and the Resident Component.

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INTRODUCTION

The American Society of Anesthesiologists (ASA) is an educational, research and scientific association of physicians organized to raise and maintain the standards of the medical practice of anesthesiology and to improve patient care.

In recent years, ASA has greatly expanded the role of residents in its activities. Recognizing that many residents perceive the Society only through its journal, *Anesthesiology*, ASA has prepared this booklet to give residents in anesthesiology an introduction to a few of the many functions of ASA.



A BRIEF HISTORY OF ASA

ASA was founded in 1905 when nine Long Island, New York, physicians organized the first professional anesthesia society. The Society expanded to 23 members in 1911 and named itself the New York Society of Anesthetists.

As its purpose and scope of involvement in anesthesia-related issues grew and attracted other interested physicians nationwide, the Society changed its name to the American Society of Anesthetists in 1936 and then to the American Society of Anesthesiologists in 1945. ASA moved its Executive Office to Park Ridge, Illinois, in 1960, where today it serves a membership of more than 39,000 physicians.

GOVERNANCE OF ASA

ASA's highest decision-making power is vested in its House of Delegates. The membership of the House of Delegates includes: 1) Delegates and a director representing each state component society including the resident component; 2) Representatives from seven subspecialty societies [Table 1];

3) ASA's 12 officers, who are elected annually, and past Presidents; 4) the Editor of *Anesthesiology*; 5) Chair of the ASA Delegation to the AMA House of Delegates; and 6) the chairs of the sections on Education and Research, Annual Meeting, and Clinical Care. Sessions of the House of Delegates are held during the Society's Annual Meeting and are usually open to all members. The House of Delegates is the platform for more than 300 members to discuss the business of ASA.

Table 1

Subspecialty Societies With Representation to the ASA House of Delegates

- American Society of Critical Care Anesthesiologists
- American Society of Regional Anesthesia and Pain Medicine
- Society for Ambulatory Anesthesia
- Society of Cardiovascular Anesthesiologists
- Society of Neurosurgical Anesthesia and Critical Care
- Society of Obstetric Anesthesia and Perinatology
- Society for Pediatric Anesthesia

ASA's goals and objectives are carried out by its three divisions and nine sections (see Table of Organization on pages 10-11), under which are a variable number of committees working in the subject area of that section. A few of the sections and committees that have special interest to resident education and other resident-related activities are described on the following pages. (Remember, these represent only a fraction of the Society's committees and areas of responsibility.)

Sections and committees submit annual reports to the House of Delegates. Each report to be considered by the House of Delegates is first referred to a reference committee for discussion. All members of ASA who wish to do so may appear before the reference committee and present their views on any issue before that committee. At its final session, the House of Delegates will take definitive action on all reports submitted to it from the reference committee.

GOVERNANCE OF THE ASA RESIDENT COMPONENT

All ASA members, including resident members, are urged to participate in the annual meeting of the House of Delegates and reference committees to learn more about how these deliberations are conducted. All ASA members, including residents, are entitled to address the reference committees.

Between meetings of the House, the ASA Board of Directors is authorized to manage the Society's affairs. In the interim between meetings of the Board, officers are authorized, in select circumstances, to act on behalf of the Society.

The component societies work at the local (state) level, carrying out many activities similar to those of ASA but tailored to local needs and capabilities.

ASA maintains fully staffed offices in Park Ridge, Illinois, and Washington, D.C., that assist the membership and implement ASA's programs and policies.



The concept of a Resident Component within the structure of ASA began in 1986 with a steering committee composed of five residents under the auspices of the Committee on Representation to AMA. The ASA Resident Component (ASA-RC) was officially formed in 1988 through an amendment of the ASA Bylaws. It is a special component that has as its objectives the following:

- to encourage resident participation in ASA;
- to develop experience in organized medicine among young physician leaders; and
- to improve resident awareness of ASA's role in the evolution of the specialty of anesthesiology.

A major objective of the Resident Component is to promote involvement of residents in organized medicine by encouraging their active membership at the state and local level. Resident organizations that parallel the ASA organization at this level are still evolving in many states. Ideally, every residency training program should be represented through a state resident section. Many residents first experience ASA by way of their state component. This is where grassroots action is fostered and leadership within ASA is learned.

Prior to the ASA Annual Meeting held each October, resident delegates are elected to represent each state component. The number of resident delegates representing a particular component is based on resident population: one delegate for every 50 residents. They attend the Resident Component House of Delegates meeting, usually held on Saturday at the start of the ASA Annual Meeting. Old and new business items are discussed, resolutions are presented, goals for the upcoming year are established, and officer elections are held. While all ASA resident and medical student members are invited to attend, the resident delegates constitute the attending voting membership.

Presiding over the Resident Component and its House of Delegates' meeting is the ASA Resident Component Governing Council. It is composed of the Chair, Chair-Elect, Delegate, Alternate Delegate and Secretary. In addition to running the Resident Component House of Delegates, the Governing Council attends the meetings of the ASA Board of Directors in Chicago in March and August. Governing Council members are voting members of the ASA House of Delegates while the Chair holds voting rights during the Board of Directors meetings.

Any resident member of ASA with at least 18 months remaining in his/her residency (including fellowship training) may run for office. Each officer serves a one-year term in each elected capacity. The Alternate Delegate and Chair-Elect positions are two-year terms, and those individuals then become the Delegate and Chair at the close of the ASA Annual Meeting in October.

Governing Council Officer Responsibilities:

ASA-RC Chair (Chair-Elect*)**

1. ASA Annual Meeting:
Grassroots/Advocacy Workshop, Resident Component House of Delegates, Resident Forum, ASA House of Delegates, ASA committee meetings, ASA communications booth, ASA-RC Governing Council Meeting
2. ASA Board of Directors biannual meetings
3. ASA committee meetings (annual and interim if applicable)
4. American Medical Student Association Airway Workshop: Joint venture with ASA Committee on Residents and Medical Students
5. ASA-RC adjunct committee appointments
6. Article for ASA NEWSLETTER “Residents’ Review” column
7. Spokesperson training, conference sessions and Capitol Hill visits at the Annual ASA Legislative Conference
8. Representative to Council of Medical Specialty Societies (CMSS) — two-year position

ASA-RC ASA/AMA Delegate (Alternate Delegate*)**

1. ASA Annual Meeting:
Grassroots/Advocacy Workshop, Resident Component House of Delegates, Resident Forum, ASA House of Delegates, ASA committee meetings, ASA communications booth, ASA-RC Governing Council Meeting
2. ASA Board of Directors biannual meetings
3. Annual ASA Legislative Conference
4. ASA committee meetings (annual and interim if applicable)
5. Annual American Medical Association (AMA) and AMA Resident and Fellow Section (AMA-RFS) meeting:
AMA-RFS House of Delegates, ASA Delegation and Section Council meetings, AMA House of Delegates
6. Interim AMA meeting (same as annual AMA meeting)
7. Article for ASA NEWSLETTER “Residents’ Review” column

ASA-RC Secretary

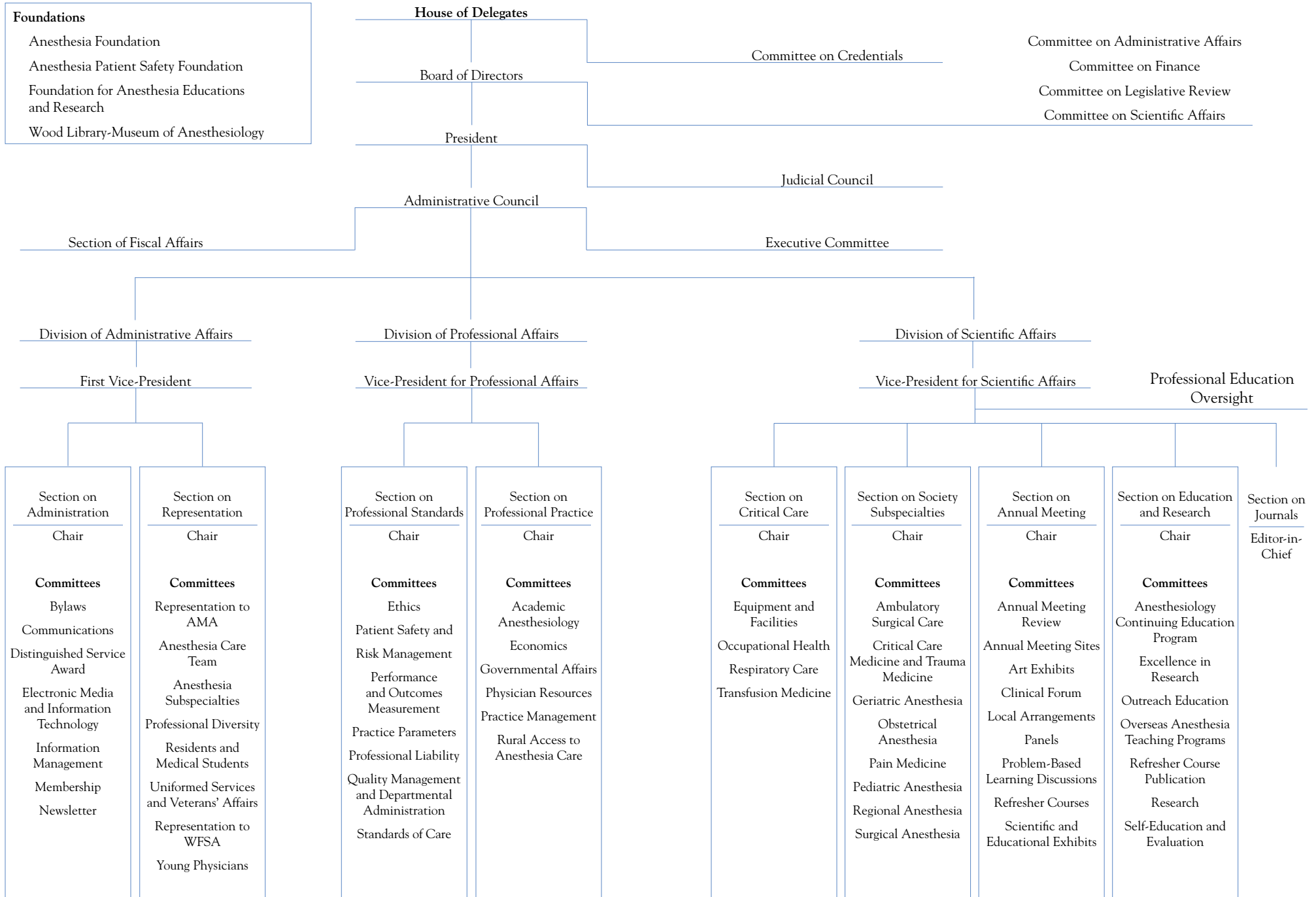
1. ASA Annual Meeting:
Grassroots/Advocacy Workshop, Resident Component House of Delegates, Resident Forum, ASA House of Delegates, ASA committee meetings, ASA communications booth, ASA-RC Governing Council meeting
2. ASA Board of Directors biannual meetings
3. ASA committee meetings (annual and interim if applicable)
4. Compile resident adjunct committee members’ reports
5. Obtain ASA-RC Award Recipient applications
6. Website/listserve/contact list updates
7. Article for ASA NEWSLETTER “Residents’ Review” column

***The responsibilities of the **Chair-Elect** and **Alternate Delegate** are to become familiar with the roles and responsibilities of the ASA-RC Chair and AMA Delegate prior to the year they will assume their respective roles.

The ASA Annual Meeting offers many opportunities for the resident. In addition to the Resident Component political activities, residents may submit abstracts and/or manuscripts for presentation, attend committee meetings established as a result of the House of Delegates meeting, attend scientific meetings and Refresher Course lectures given by top anesthesiologists in subspecialty areas and meet fellow residents from across the country.



ASA TABLE OF ORGANIZATION



SECTION ON ANNUAL MEETING

In addition to the legislative activities and meetings of the ASA and Resident Component Houses of Delegates, a major portion of the ASA Annual Meeting is devoted to exhibits and scientific meetings. These include the annual Refresher Course Lectures, panels and workshops, oral and poster scientific paper presentations, subspecialty breakfast panels, clinical forums and lectures by eminent anesthesiologists and guest speakers.

The E.A. Rovenstine Memorial Lecture highlights the scientific lectures offered at the Annual Meeting. This lecture is presented annually in honor of Emery Andrew Rovenstine, M.D. (1885-1960), who is remembered for his devotion to and research in the field of anesthesiology. Due to his influence and dedication to education and knowledge through research, anesthesiology developed in stature and recognition, ushering the specialty into a new era of development.

The Lewis H. Wright Memorial Lecture is presented each year under the auspices of the Board of Trustees of the Wood Library-Museum of Anesthesiology. This lectureship honors another distinguished pioneer in the science and practice of anesthesiology. Among his numerous accomplishments, Dr. Wright (1894-1974) made perhaps his most significant contribution to anesthesiology in 1940, when he first suggested, and later arranged for, the clinical trials of curare in anesthesia.

A Residents' Research Essay Award is given for first, second and third place during each Annual Meeting.

At the 1990 ASA Annual Meeting, the Resident Component House of Delegates held its first meeting. State sections were allocated a number of delegate positions based on the proportion of resident ASA members in their regions at this time.

The Resident Component House of Delegates continues to meet annually to discuss pending issues, elect new officers to its Governing Council, make recommendations on issues presented in the ASA House of Delegates Handbook, introduce any proposed changes to the ASA Bylaws and present reports for action or recommendations. Medical student members of ASA are encouraged to attend the Resident Component House of Delegates.

SECTION ON EDUCATION AND RESEARCH

The Section on Education and Research plans, directs and evaluates specific educational and research activities through standing committees, ad hoc committees and editorial boards:

- The **Committee on Excellence in Research** develops criteria and nominates a candidate for the ASA Award for Excellence in Research.
- The **Committee on Outreach Education** plans and supervises educational offerings by ASA.
- The **Committee on Overseas Anesthesia Teaching Programs** is a committee organized to provide anesthesia education in developing countries.
- The **Editorial Board for Refresher Course Publication** selects and edits quality Refresher Course volumes, which are offered for sale annually.
- The **Committee on Research** judges manuscripts for grant awards and encourages residents to conduct research and to submit formal papers.
- The **Editorial Board for the Self-Education and Evaluation (SEE) Program** prepares two volumes per year, each composed of 100 multiple-choice questions, based on articles in the most recent anesthesiology journals and the ASA Annual Refresher Course Lectures book.
- The **Anesthesiology Continuing Education (ACE) Program** is a self-evaluation and education program similar to the SEE Program but focused on core knowledge for lifelong learning and designed to assist members preparing for recertification or maintenance of certification.
- The **ASA website** contains a wealth of information. Valuable resources for residents include practice guidelines, a searchable Placement Service, Annual Meeting registration and an entire section devoted to resident and career information. (See page 20 for more details.)

Through these committees, this section provides educational and research programs and opportunities of interest and value to the anesthesiology resident.

SECTION ON JOURNALS

Anesthesiology is the journal of ASA in which are published results of peer-reviewed research under the categories of Clinical and Laboratory Investigations as well as case reports, review articles, medical intelligence articles, special articles, correspondence, book reviews and reports of scientific meetings. The Editorial Board consists of one Editor-in-Chief, 12 editors and 20 associate editors. Editors are elected for a maximum of three, three-year terms, whereas associate editors are elected for a maximum of three, two-year terms.

Papers submitted to *Anesthesiology* are subjected to peer review by editors, associate editors and/or consultant reviewers. Approximately 30 percent of the papers submitted for publication are published in the journal, with a delay from three to four months between the time of acceptance and publication.

Because *Anesthesiology* publishes the results of current research as well as review articles, regular reading of the journal should be part of every resident's ongoing education. Furthermore, because both the results of original research as well as review articles and case reports are included, there should be something of interest to all readers in virtually every issue of the journal.

SECTION ON CLINICAL CARE SECTION ON SOCIETY SUBSPECIALTIES

The Section on Clinical Care and the Section on Society Subspecialties direct and administer the clinical activities of ASA. The committees that constitute each section are as follows:

Section on Clinical Care:

- Committee on Equipment and Facilities
- Committee on Occupational Health
- Committee on Respiratory Care
- Committee on Transfusion Medicine

Section on Society Subspecialties:

- Committee on Ambulatory Surgical Care
- Committee on Critical Care Medicine and Trauma Medicine
- Committee on Geriatric Anesthesia
- Committee on Obstetrical Anesthesia
- Committee on Pain Medicine
- Committee on Pediatric Anesthesia
- Committee on Regional Anesthesia
- Committee on Surgical Anesthesia

Each committee meets at least once a year to promote, study and investigate in their specific field of anesthesia care. In addition, each committee acts as a liaison representative to the appropriate organizations. For example, the Section on Clinical Care sends liaison representatives to the: National Fire Protection Association; Respiratory Care Board of Medical Advisors; Joint Review Committee for Respiratory Therapy Education; National Board for Respiratory Care; Joint Review Committee on Educational Programs for the EMT-Paramedic; American Society for Testing and Materials Committee F-29; American College of Obstetricians and Gynecologists Committee on Obstetric Practice; American Association of Blood Banks; American Heart Association; American Academy of Pediatrics; and AARP.

Finally, the committees also serve educational functions through formal presentations at the ASA Annual Meeting and by serving as a resource to answer both clinical and policy questions posed by the ASA membership.

RESIDENT COMMITTEE REPRESENTATION

ASA has approximately 70 standing committees on which members serve. These committees allow for an organized forum of discussion regarding issues relevant to the pulse and success of our profession. Over the years, ASA has welcomed residents to serve as adjunct members to several of these committees. This representation is a communication bridge between ASA and the ASA-RC. Representation on ASA committees allows residents to be informed regarding different aspects of their Society as well as the field of anesthesiology. This is an excellent avenue for resident involvement in ASA.

Committee selection for residents is based on an application process. The Chair of the ASA-RC submits a call for resident committee applications in December following the ASA Annual Meeting. Residents then submit their applications for the committee of their choice. Application materials are reviewed by the ASA President-Elect and ASA-RC Chair and selections are made for the next calendar year. The responsibility of the resident members include attending their respective committee meetings at the ASA Annual Meeting and/or interim meetings held by the committee. The resident adjunct member is required to submit a written report to the ASA-RC regarding issues discussed at the meeting. The reports are included in the Residents House of Delegates Handbook for the ASA Annual Meeting.

List of Resident Committees (varies by year):

Section on Administration:

- Committee on Bylaws
- Committee on Communications
- Committee on Distinguished Service Award
- Committee on Electronic Media and Information Technology
- Committee on Information Management
- Committee on Membership
- Committee on Newsletter

Section on Representation:

- Representation to AMA
- Committee on Anesthesia Care Team
- Committee on Anesthesia Subspecialties
- Committee on Professional Diversity
- Committee on Residents and Medical Students
- Committee on Uniformed Services and Veterans' Affairs
- Committee on Young Physicians

Section on Professional Standards:

- Committee on Ethics
- Committee on Patient Safety and Risk Management
- Committee on Performance and Outcomes Measurement
- Committee on Practice Parameters
- Committee on Professional Liability
- Committee on Quality Management and Departmental Administration
- Committee on Standards of Care

Section on Professional Practice:

- Committee on Economics
- Committee on Governmental Affairs
- Committee on Physician Resources
- Committee on Practice Management
- Committee on Rural Access to Anesthesia Care

Section on Clinical Care:

- Committee on Equipment and Facilities
- Committee on Occupational Health
- Committee on Respiratory Care
- Committee on Transfusion Medicine

Section on Society Subspecialties:

- Committee on Ambulatory Surgical Care
- Committee on Critical Care Medicine and Trauma Medicine
- Committee on Geriatric Anesthesia
- Committee on Obstetrical Anesthesia
- Committee on Pain Medicine
- Committee on Pediatric Anesthesia
- Committee on Regional Anesthesia
- Committee on Surgical Anesthesia

Section on Education and Research:

- Committee on Outreach Education
- Committee on Overseas Anesthesia Teaching Programs
- Committee on Research

ASA PLACEMENT SERVICES

ASA offers two avenues for placement opportunities: through the ASA website at <http://placement.asahq.org> and up-to-date postings of practice opportunities at the ASA Annual Meeting.

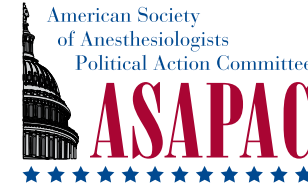
The quarterly printed placement bulletin has been replaced by an improved web version that makes searching all known employment opportunities fast, easy and free of charge. Its search capabilities use various criteria, including the state in which a position is located, type of anesthesia to be performed and the type of position available. A feature on the web placement service allows hospitals and group practices to submit positions directly, allowing any ASA member to view contact information for organizations looking to fill a position. Because changes to information on open positions will be made within 24 hours, users can be assured that the web placement service is always up to date.

The Annual Meeting Placement Service allows attendees to view practice opportunities on interactive multimedia units. Users can search by geographic area, job title or keyword, and print out the information. Those seeking a position can submit an application, which is then available for review by locations seeking to fill a position or positions. The kiosk of computers will be located near the ASA registration area at the Annual Meeting.

Further information about ASA placement services is available through the ASA Executive Office.



ASA POLITICAL ACTION COMMITTEE



The ASA Political Action Committee (ASAPAC) began to function in late October 1991 as a result of action of the 1991 ASA House of Delegates. ASAPAC was created to allow ASA to become a full player in the political scene on Capitol Hill.

For many years, the ASA Washington Office has done an extraordinary job in looking out for the interests of anesthesiologists. With the creation of ASAPAC, ASA was able to directly enter into political campaigns for members of Congress who were supportive of ASA positions in matters that affected the welfare of all anesthesiologists. Particular attention is paid to members of the congressional committees who deal with health care issues and issues that will arise because of proposed health system reforms.

ASAPAC activities are directed by an executive board. The executive board is made up of 12 ASA members with experience and interest in the politics of medicine. These ASA members are selected from various geographical locations. The ASAPAC board members are nominated by the ASA President. These nominations must be confirmed by the ASA Board of Directors. The term of office is three years, and the director may not be renominated for a second consecutive three-year term.

All resident members of ASA are encouraged to support ASAPAC.

FURTHER INFORMATION

As a member of ASA, you have a wealth of information available to you. The following is a quick reference list:

On the ASA website:

About ASA

- ASA Bylaws
- ASA Committee Listing
- ASA Component Society Officers

Annual Meeting Information and Registration

ASA News and Alerts

ASA NEWSLETTER

- “Residents’ Review” column (monthly)

Calendar for Meetings (searchable)

Clinical Information

- Practice Parameters
- Standards, Guidelines and Statements
- JCAHO Compliance Toolkit

Continuing Education Resources

- Certificate in Business Administration Program
- Self-Education and Evaluation Program (SEE)

Office of Governmental and Legal Affairs

Patient Education

- What’s New
- Frequently Asked Questions
- Patient Education Brochures

Resident and Career Information

- General Overview
- Frequently Asked Questions
- Residency Programs

In the ASA NEWSLETTER:

- “Residents’ Review” column (monthly)
- ASA Officers and Directors
- ASA Executive Staff
- Substance abuse hotline telephone number

USEFUL CONTACT INFORMATION

	Telephone	Fax
ASA Executive Office 520 N. Northwest Highway Park Ridge, IL 60068-2573 mail@asahq.org	(847) 825-5586	(847) 825-1692
ASA Washington Office 1101 Vermont Ave., N.W. Suite 606 Washington, DC 20005 mail@asawash.org	(202) 289-2222	(202) 371-0384
ASA NEWSLETTER 520 N. Northwest Highway Park Ridge, IL 60068-2573 communications@asahq.org	(847) 825-5586	(847) 825-5658
Anesthesiology Journal University of Iowa Department of Anesthesia, 6546 JCP 200 Hawkins Drive Iowa City, IA 52242-1009 anesthesiology@uiowa.edu	(319) 356-4601	(319) 353-6817
American Board of Anesthesiology 4101 Lake Boone Trail The Summit — Suite 510 Raleigh, NC 27607-7506	(919) 881-2570	(919) 881-2575

RECOGNITION

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