



American Society of
Anesthesiologists™

Central Line

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(SOUNDBITE OF MUSIC)

VOICE OVER:

Welcome to ASA's Central Line, the official podcast series of the American Society of Anesthesiologists, edited by Dr. Adam Striker.

DR. ADAM STRIKER (HOST):

Welcome to Central Line. I'm your host and editor, Dr. Adam Striker. We're shaking things up in this episode, bringing you to the Legislative Conference in Washington DC, where we interviewed anesthesiologists who were participating in ASA's leadership spokesperson training.

(CLIP)

Welcome to leadership spokesperson training, Today we are going to help you learn how to speak to your policy maker or the media when you're doing an interview or a policy maker meeting.

DR. STRIKER:

We caught up with participants as they were coming out of training sessions. We asked them, why is it important for anesthesiologists to be involved in advocacy>

DR. FELIPE PEREZ:

It's important to have anesthesiologists be involved in advocacy because we are the ones who advocate for our patients. We're the ones who really understand what our patients are about to go through when they're about to have surgery. And so if we're not at the table advising on the policies' impacts on how our patients are going to be impacted by the decisions that are being made, then the policies that are created will have a negative impact on our patients and in the way we can deliver our care to our patients.

DR. SHARON ASHLEY:

If we don't make sure that legislative affairs and bills are addressed in a timely manner and effectively, we will not have a future for our residents who are training behind us

DR. LYDIESTHER MARTINEZ:

Advocacy definitely drives the way we practice, you know, the way our patients are treated, their outcomes. And I feel like who better to be at the table, you know, acknowledging what are the issues and what could potentially be the solutions than a physician who is right by the side of the patient, the patient side, you know, when the hard things are coming through, when their life is on the line. At the end of the day, I want an anesthesiologist, a physician anesthesiologist, designating, you know, what has made our practice better, what has made patient care a lot more safer, and how could we enact that into laws that are going to benefit the American community as a whole.

DR. STRIKER:

They talked about how important it is for us as anesthesiologists to represent the specialty...

DR. KEVIN BEITZ:

As physicians, we will come to a point where we will all eventually represent the specialty, whether it's in front of patients, in front of Congress, or in front of our own loved ones. We have to represent ourselves and we have to recognize that we don't live in a perfect world where everything is just going to be set out for us and we have to represent ourselves in that regard and fight for what we believe in.

ZELLE NDIKA . MD CANDIDATE . CLASS OF 2023:

Anesthesiologists are often known as the eyes and the ears of the O.R., as well as patients when they're out of the O.R., including pre-op and post-op. There's many things that anesthesiologists see that's not addressed, and I think that that does deserve some sort of advocacy, especially if it's something that will help to improve patient care. So for that reason, I believe anesthesiologists are important when it comes to advocacy.

DR. ANDREW NICOLI:

As we all know, most people don't even know what we do. I said even amongst other physicians, they kind of they know that we're physicians at least. But their

understanding of what we do is very small. And so for us to get our point across, to share with legislators, with the outside world, we need to tell our own story.

DR. STRIKER:

They urged anesthesiologists to get involved at the local level with our state component societies, our communities, our hospitals...

DR. PEREZ:

I encourage everyone to be involved with the state society and with our national society of ASA. Each state has its own anesthesiology society and there can help you target the message in the correct way, in that you can be together advocating for the same thing. And if the society is not advocating for something that you want to be advocating for, you can present it to them. What's important is to come as a large organization that has power, because then you're more likely to be listened to and more likely to be able to create change or changes needed or to support something that's already going to happen.

DR. NICOLI:

For us, it's easy to get involved at our hospital level or in our community, to be on our hospital boards, to reach out to other departments, things like that. Be advocate for your group and what you can do for the rest of the hospital.

DR. STRIKER:

Even talking to our colleagues can help.

DR. BEITZ:

So one of the best ways we can advocate at a local level is to actually talk with our peers, both medical students, surgeons, other physicians, nurses even. So at a local level, the best way to actively fight for change is to kind of get on board with each other's messages and recognize that we're all kind of trying, trying our best to have a fair way of way of working and and working with everyone.

ZELLE NDIKA:

Yeah, absolutely. And I believe that also speaking to in addition to legislative leaders, many of the hospital staff, including, as we discussed during our training, the C-suite

executives, as well as other people in the hospital who are involved in patient care, such as nursing staff, you know, speaking to them about things that could help the patients, as we said before and after an operation that would help the patients to optimize their health care.

DR. STRIKER:

They talked about the value of spokesperson training...

DR. NICOLI:

This was an excellent introduction into dealing with media and with legislative offices. It was an eye-opening experience just to kind of prepare you to be on the hot seat.

DR. PEREZ:

I would encourage everybody to take this spokesperson training. I think it helps you think about how to frame the situations that you want to be advocating for, and it makes you a lot more comfortable being in front of a camera. I'm not someone who enjoys being in front of a camera, but after being there and getting feedback, how to improve, I have learned now that it's not as scary and I'd be willing to now do it.

DR. STRIKER:

And they shared some of the valuable tips and techniques they picked up to make their meetings with lawmakers and the media more successful.

DR. MARTINEZ:

This was definitely a helpful activity for us. You know, how to showcase what we know into terms the public could understand, media could understand, politicians could understand, because that's so important. We learn so much in medical school about the intricacies of how the body works. But how do that how do we translate that into American health care that's going to impact our nation as a whole? You know, we've all have patients who have maybe undergone surgery, have been deeply impacted by COVID. And so how do we get our stories across that lets them know, hey, if this was your patient on the line, I'm going to be there doing my best to make sure they get the safest care within our arms.

DR. BEITZ:

So I think really thinking about what you're going to say, how you present yourself to the public really is important to do. Before you even, you know, come out and think about what you want to say, you want to think about how you want to say it, who you're talking to, and those sorts of elements we don't necessarily always think about before we, you know, honestly say things. So we need to train ourselves and we need to see to get the feedback of others before we go out and. Yeah. Ourselves.

ZELLE NDIKA:

Yeah. And many of the issues that we discussed during this training are real issues. But I think more so what's important is the way that we present it. We have many times a shortened amount of time to make a case for these issues, and so figuring out how to do that effectively has definitely been helpful.

DR. STRIKER:

The experience gave them more confidence to face audiences they're not used to dealing with.

DR. ELISA LUND:

I have complete stage fright. I do not like being in front of people at all. I don't feel like as anesthesiologists we get that much experience speaking to people and speaking in a public setting. So having one hour dedicated to just workshop what we want to speak to legislators, what we want to speak to public figures is just something that we don't get in our day-to-day work.

DR. ARIANNA COOK:

Yeah, for us as residents, I think my biggest experience is interviewing for residency or for medical school. But speaking to legislators or learning to speak to media is a different skill set. So although I think I have some of the building blocks on how to interview, it's a different type of interview style and different types of questions. So just getting that experience beforehand, before doing the real thing is extremely helpful.

DR. ASHLEY:

This is my first legislative conference and I've been in practice since 1981, so I'm excited about just this opportunity to be coached and learning how to present meeting new people. I learned I should concentrate on making things simple, but getting my point across, using personal stories and winding it up with statement of fact.

DR. STRIKER:

Telling stories and making the information you're sharing with others a personal one were key take-aways several interviewees shared from the training sessions,

DR. NICOLI:

Making it personal is the best thing you can do.

DR. ASHLEY:

Stories make it personal. And people can relate to stories if they sound like something they've heard before. Might be something that the family has gone through. Or personal experience. So my story might touch someone.

DR. PEREZ:

I think stories are so important because that's what people remember. If you remember growing up, what you remember is not necessarily what your teacher said, but how they your teacher made you feel. So if you go back to your kindergarten days and you're like, What happened in kindergarten? I bet it's not them teaching you what's one plus one equals two, but how that teacher made you feel. And so if you can leave legislators, if you can leave the person you're advocating with a story, then they're more likely to remember that experience of them experiencing that story through your eyes than the actual content that you're saying, perfect.

DR. COOK:

Pick a personal example and something that is relatable. But you don't want to be telling a story that's so long that people are getting lost in all the details that you're telling. So something concise.

DR. LUND:

Yes. And shorter, the better. And try to keep it to only three topics or three main points.

DR. STRIKER:

Some even told us their own stories, and shared how their stories drove their advocacy efforts...

DR. LUND:

Well, actually, why don't I share a story about what we've been doing for the last two years? So in North Carolina, obviously, we've all been dealing with the COVID pandemic as we have nationwide and physician anesthesiologists have led the way for patient care in this global pandemic. Specifically in April 2020, I was working in a rural community in eastern North Carolina, and we were overrun by COVID. A prison, multiple nursing homes and a chicken processing plant all had COVID outbreaks, and our 14 ICU beds were immediately at capacity. So the Anesthesia Department and physician anesthesiologists in particular were able to convert our post anesthesia care unit into a temporary COVID unit. And we used our anesthesia machines to ventilate these patients while they could not breathe. And that was an adaptation and an ability of physician anesthesiologists to adapt to the need that we had within our nation at that time. And time in and time out for the last two years, we've just shown that adaptability that our profession has for our patients.

DR. MARTINEZ:

I actually, you know, came into medicine because I myself come from an underserved community. I'm an immigrant from Nicaragua. And I felt like policy has definitely shaped the way that brought me into medicine. Medicine, health disparities drove me into medicine years ago. And I'm still here willing to advocate for my community to make sure to see those changes. I want it to be seen within my community to be changed. I actually had the opportunity to work on the Hill a few years ago before medical school. So being on the other side now, knowing what it takes to become a physician and what it takes to provide safe care, has helped me, you know, look at medicine and look at policy in a different way. And I want to make sure those changes are enacted.

DR. STRIKER:

Their passion for advocacy, and just being involved in the society and specialty, was inspiring but they also had some practical tips to share.

DR. LUND:

From a resident standpoint, I think the main thing to know is that this is available to you as residents. Obviously, residents are extremely busy and don't have much time on their plates, but just find anybody. Google what your state anesthesiologist society is and see if there's any names that you recognize and search for those individuals in operating

rooms. And most likely, there will be an opportunity for you to participate and just seek those opportunities out.

DR. COOK:

And I think another thing I've learned is how many resources there are out there, particularly on our own society sites. So the ASA how it's so, you know, a lot of people have taken the time to write out really concise kind of summaries of what's going on in the legislator and how we can help support our specialty.

DR. BEITZ:

I hope that you guys can make it in the future. This is an excellent place to be and I want everybody to participate who can.

DR. STRIKER:

We want to thank Drs. Ashley, Beitz, Cook, Lund, Martinez, Ndika, Nicoli and Perez for speaking with us. We appreciate their passion for the specialty, the society and their patients. And we're pleased they shared some of what they learned at this year's ASA Legislative Conference.

We hope you enjoyed this peek behind the curtain as ASA's Legislative Conference. Join us again for the next episode of Central Line.

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VOICE OVER:

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