Residents: Get Involved!

Residency is a complex and demanding time. From second to second clinical decisions, to personal relationships, to the broader choices we must make as we contemplate that time our training will officially end and we will strike off on new paths, we are constantly making decisions. In a sense, improving our decision making capabilities is why we are in training.

Today, I would challenge you to make another decision. I challenge you to GET INVOLVED. This is an exciting time in healthcare and anesthesiology. It is also a challenging time as powers align to dramatically alter the field we have worked so hard to make safe. There are numerous causes with which to become engaged. As residents, the decisions of today will impact our careers and the lives of those we care for—for the rest of our lives.

The key is to get involved. No personal expertise is required. There are countless ways to become involved as well. Much like in the house of medicine, there is room for all interests and a need for each individual. Some of the key arenas include:

- ASA
- ASA Resident Component
- ASAPAC and Advocacy
- Safe VA Care and Scope of Practice Changes
- Humanitarian and International causes: e.g. Lifebox

The ASA Resident Component is designed to serve you. But it cannot do it alone. To reach our full potential, we need resident members to be proactive and engaged. We are working to provide opportunities to make a difference, to find our passions, to change things that ought to be changed—but in the end, individuals need to propel these initiatives forward.

So again, I challenge you to GET INVOLVED. Join an existing initiative, suggest a new one, or simply volunteer to help in any capacity. The ASA Resident Component Governing Council is focused on involving more of
our 7000+ resident members because we truly believe that together we are powerful and can help shape the future of medicine.

Email with any questions, ideas, or especially, if you would like to be a champion for various causes within your program.

Daniel A. Hansen MD
President ASA Resident Component
Mayo Clinic Arizona
hansen.daniel1@mayo.edu

---

**Write for the ASA Monitor**

We are accepting submissions for the “Residents Review” section of the *ASA Monitor*. If you are interested in writing an article, please submit the following:

- **Topic or possible title of article, and**
- **Sample paragraph**

Potential authors do not need to submit the entire piece, although we will accept full articles as well. Mark and I are happy to help edit and develop your idea if needed. Articles are typically 1000-1500 words. Please visit the [ASA website](http://asahq.org) to view our most recently published articles and to get a sense for what we publish.

We look forward to hearing your ideas!

Sincerely,

Elena Koepke M.D., M.B.A.
Junior Editor, ASA Resident Component
Governing Council
UT Southwestern Medical Center
Department of Anesthesiology and Pain Management
elenakoepke@gmail.com

Mark Jensen, M.D.
Senior Editor, ASA Resident Component
Governing Council
SUNY Downstate Department of Anesthesiology
Mjensen08@gmail.com

---

**Protect Safe VA Care**

There are many challenges confronting our specialty, but perhaps none is more pressing than the VA Nursing Handbook. Don’t let the mundane title fool you; in a very real and serious way, this issue directly imperils our patients and your future!

In short, healthcare at the VA is governed by a set of handbooks, which are implemented by the VA Secretary. To date, anesthesia care has been provided under the traditional team-based model--i.e. attending physician anesthesiologists supervising either nurse anesthetists or residents. A new document, the “VHA Nursing Handbook", would require nurse anesthetists to practice independently; those who wished to practice under physician
supervision would not be able to practice at the VA at all! This would represent a radical paradigm shift that could have implications in all sectors of healthcare.

Although regulatory policy seems complicated, the process is really quite simple. Some day soon, the VA Nursing Handbook will be released by the VA Secretary for public comment; there will then be a 60 day comment period, after which the VA Secretary is at liberty to either implement or alter this document. In preparation for the comment period, the ASA has created a website where anyone—including the lay public—can make their voices heard. The quality of each comment definitely matters, but the truth is that the sheer number of comments in opposition versus those in favor will play a key role.

Thus, we encourage all residents to participate in the 1+5 campaign; in addition to leaving your own comment, we urge you to recruit at least 5 of your family members, friends, and acquaintances to make comments as well. After all, patient safety should be a priority for everyone, because anyone can be a patient!

Thankfully, the ASA has created a simple, quick, and seamless tool for comment submission. If you haven’t submitted a comment, please leave one today at http://www.safevacare.org/. After you’re done so, help us carry out our 1+5 campaign by seeing out at least 5 non-anesthesiologists in your life to add their voices as well. Once people understand this issue, the right answer is clear: preserve team-based anesthesia at the VA, and stop the VA Nursing Handbook!

Comment link: http://www.safevacare.org/

Douglas Hale McMichael, M.D.
President-Elect ASA Resident Component
Northwestern University - Feinberg School of Medicine
halemcmichael@gmail.com

Residency: From a Different Perspective

Residency is tough. Long hours, lack of sleep, and feeling completely clueless despite your extensive years of education do not make for a fairy tale. Believe me, I understand. I’m not a resident, but I am a resident’s wife, and I understand. While we significant others might not be the ones logging crazy hours in the OR, residency is tough on us as well. Moving to a new city and starting over can seem a bit daunting. But instead, try to look at it as getting to see new places and starting a new adventure.

Since moving to our new home, I’ve been blessed to meet a handful of other wonderful resident wives through the housestaff alliance. It is such a blessing to have found a group that shares a bond without even having to try. We all understand the lonely nights, living with a zombie, and having to fly solo for bedtime routines again. They have become a support system.

Whether your resident is an intern or preparing for fellowship, I urge you to find your own support system.

Belonging to a group that understands the hardships that come along with residency is vital to success and happiness during such a trying time. But more than that, I encourage you to be the support system for your resident. Make sure they know how proud you are. Make their lunch and include a sweet little note to brighten their day. Go out and celebrate when they do their first solo epidural. Be there to listen when they lose their first patient. Residency is tough, but having each other to lean on will make all the difference.

Those who have made it to the other side have told me that we will look back on residency and miss those crazy days. While it might seem hard to imagine now, I look forward to the days that we can reminisce on our times during residency. And when we do, I don’t want my husband to remember me nagging him about getting home late or complaining about having to work another weekend shift. I want him to remember that I was his biggest fan and all the love and support I provided him along the way.

Lauren M. Greene
Wife of ASA RC Secretary Chad Greene, D.O.
laurenmicalgreene@gmail.com
Contact Your Resident Component Governing Council

Daniel A. Hansen M.D.  
President ASA Resident Component  
Mayo Clinic Arizona  
hansen.daniel1@mayo.edu

Douglas Hale McMichael, M.D.  
President-Elect ASA Resident Component  
Northwestern University - Feinberg School of Medicine  
halemcmichael@gmail.com

Chad R. Greene, D.O.  
Secretary ASA Resident Component  
Vanderbilt University Medical Center  
chad.greene@vanderbilt.edu

Linda W. Young, M.D., M.S.  
Delegate to AMA Resident and Fellows Section  
University of Texas - Houston  
linda.w.young@uth.tmc.edu

Michael C. Lubrano, M.D., MPH  
Alt. Delegate to AMA Resident and Fellows Section  
University of California - San Francisco  
lubrano.michael@gmail.com

Mark Jensen, M.D.  
Senior Resident’s Review Editor  
SUNY Downstate Medical Center  
mark.Jensen@Downstate.edu

Elena J. Koepke, M.D., M.B.A.  
Junior Resident’s Review Editor  
University of Texas Southwestern Medical Center  
elenakoepke@gmail.com

Thank you for reading! If you are interested in writing for the newsletter, please email the ASA Resident Component Secretary at chad.greene@vanderbilt.edu