Executive Summary
More than 46 percent of all media coverage during the month of January included ASA members, followed by mention of ASA. Online media outlets provided the largest amount of coverage at 82 percent. Also, coverage was an overwhelming 96 percent positive.

If you are contacted by a media outlet seeking comment on anesthesia related topics or even non-anesthesia related topics, please contact the ASA Marketing and Communications Department at communications@asahq.org. ASA can provide the latest topical background information, media training and interview tips for any type of request. Also, please let ASA know if you were mentioned in any media report, as an appearance may be featured in a future ASA Media Clip Report or ASA NEWSLETTER “Anesthesiology in the News” piece.

Featured Topics
After the Tucson shooting on January 8, 2011, ASA developed content on trauma anesthesiology and the difference between medically induced coma and sedation. The PR team also reached out to the media to highlight the important role anesthesiologists play in trauma care. As a follow-up to this ASA outreach, the Wall Street Journal interviewed Executive Director of the Anesthesia Quality Institute Richard P. Dutton, M.D., M.B.A. about the role of trauma anesthesiologists and how important it is that emergency rooms are prepared to treat severe injuries.

On January 21, 2011, Hospira announced its decision to stop the production of sodium thiopental. ASA quickly released a statement on the implications the loss of the drug will have on the medical community, especially for geriatric, cardiovascular and obstetric patients. Special thanks to ASA Leadership, including ASA President Mark A. Warner, M.D., ASA President-Elect Jerry A. Cohen, M.D. and ASA Vice-President of Scientific Affairs Arnold J. Berry, M.D. for speaking with reporters from several top-tier and trade publications on this important topic.

News Type
Online pub/wire service made up the largest portion of coverage.
**News Category**
Member inclusion garnered the most hits during January.

**News Medium**
Online outlets made up the majority of publications.
Overall Tone Summary
The majority of coverage was positive.

Social Media
Twitter provided the majority of social media coverage. More than 1,300 people currently follow ASA Lifeline and ASA Patient Lifeline on Twitter.
American Society of Anesthesiologists – General News Items

- ASA member Keith Ruskin, M.D. provides comment on the risks associated with awake plastic surgery, especially during procedures that should use general anesthesia. Dr. Ruskin explains how symptoms from lidocaine toxicity can occur while a patient is on the way home after awake surgery.

- Volunteers discuss the earthquake one year later, including ASA member Cassie L. Gabriel, M.D. who made three weeklong trips to Haiti in May, June and November 2010. The volunteers explain how victims are still dealing with major wounds months after the earthquake.

- ASA Chair of the Committee on Communications John F. Dombrowski, M.D. explains how propofol should be safely administered and monitored by an anesthesiologist.

- ASA President Mark A. Warner, M.D. provides an editorial on how the specialty of anesthesiology has evolved over the years. Dr. Warner discusses the 25th anniversary of the Anesthesia Patient Safety Foundation and how its efforts have and will continue to develop best practices for all anesthesia providers.

“Tucson Injured Received Trauma Care Out of Reach for Many,” Wall Street Journal, January 14, 2011.
- AQI Executive Director Richard P. Dutton, M.D., M.B.A. provides perspective on trauma anesthesiology. He discusses how some emergency rooms aren’t well-prepared to treat patients with severe injuries like head wounds or multiple fractures.

- The differences between medically induced coma and sedation are discussed. ASA defines medically induced coma as a deep state of unconsciousness caused by a controlled dose of an anesthetic like propofol, pentobarbital or thiopental, while sedation is only a semi-conscious state and allows a patient to be comfortable during surgery.

- ASA Chair of the Committee on Pain Management Richard W. Rosenquist, M.D. and ASA Chair of the Committee on Communications John F. Dombrowski, M.D. discuss the pros and cons of pain patches. “Salonpas is the Western world catching up with Asia,” said Dr. Rosenquist.

- AMA’s Truth and Transparency survey findings as related to anesthesiology are revealed, including that 20 percent of respondents do not know an anesthesiologist is a medical doctor and 70 percent think a medical doctor should administer and monitor anesthesia levels before and after surgery.

Drug Shortages

- ASA’s letter to the FDA to expedite imports of sodium thiopental is mentioned, “The letter noted that there are no good substitutes for thiopental in some situations, such as inducing general anesthesia in cesarean deliveries and in neurosurgery.”


- ASA’s statement on Hospira’s decision to stop manufacturing sodium thiopental is discussed. According to ASA, sodium thiopental is an “important and medically necessary anesthetic agent that has been used for years to induce anesthesia in patients undergoing surgical procedures.”
- Comment from several health organizations on Hospira’s decision to stop producing sodium thiopental is included, along with excerpts from ASA’s statement on the issue.

- In a companion blog piece, the impact Hospira’s announcement will have on patient care is explored. ASA discusses the important medical uses of sodium thiopental particularly for geriatric, cardiovascular and obstetric patients.

- ASA President-Elect Jerry A. Cohen, M.D. explains the impact of the loss of sodium thiopental on the anesthesiology community, “We’ve seen the fairly sudden disappearance of a very common and popular drug.”

**Journal Anesthesiology**

Coverage from journal press releases can be found below, including coverage from studies published in the January issue on physician burnout among anesthesiologists.

**Journal Press Releases**


