PRESIDENT’S CORNER

Pride, Work, Prosperity

I first want to tell everyone how extremely proud I am to be President of such a vibrant organization. In the first six months in this position, I have had the fortune of being an invited eavesdropper to amazing discussions on a lot of topics. These discussions between individuals and between groups are of such a high academic quality that any university president would be salivating. When I joined this organization about 14 years ago, I knew I was surrounded by excellent people who were great thinkers. Recent events have reinforced this even more. Therefore, there is no wonder why this organization is so healthy.

The signs of our health are everywhere. The economy has not deterred the goals of our membership. While other subspecialty societies have seen significant drops in membership, we have not. Our finances are stable, despite the bad economy. We set an attendance record for a west-coast SEA meeting this year. Committee work has increased and is continuing when it usually dies out at about two weeks after the spring meeting and revives a few weeks before the fall meeting. Experienced SEA members continue to produce, and new members are actively participating, bringing their energy and gifts forward. Mentoring within our own organization is alive and prospering. Based on our current enterprise and action, SEA has a bright future.

That future may seem hazy with the congressional attempts at overhauling the American health care system. At the time of this writing, there was no final answer in sight and limited information from which our task force on anesthesia educational support could glean enough information to make any rational assessments. By the time this newsletter is published, it is unlikely the answer will be clear. However, if the derivative of legislation threatens the popularity and prosperity anesthesiaology is now enjoying, I am confident we will survive. We have shown ourselves to be dedicated to our patients and our profession. Other specialties and other health professionals have benefited from our research, teachings and technological advancements. They rely on us to continue to show the way. Our contribution to the positive outcomes of our patients is too great for us not to survive and prosper.

With change comes uncertainty, which breeds fear, which produces anxiety, feelings of helplessness, and even depression. I am surrounded by hundreds of important thinkers in this organization who are improving the quality of anesthesia training. These same people are also human and susceptible to these emotions. My hope is that any reallocation of resources that may occur does not detract from the wonderful work I have been so privileged to witness. I predict SEA membership will continue to maintain its dedication. I am proud of SEA, for its members make it a rewarding place to be. Thank you.

“The signs of our health are everywhere. The economy has not deterred the goals of our membership. While other subspecialty societies have seen significant drops in membership, we have not.”

Gary E. Loyd, M.D., M.M.M.

Co-sponsored by the Anesthesia Patient Safety Foundation, University of Washington and Virginia Mason Medical Center.

SEA was founded in 1985 to support professional educators in anesthesiology. 2010 marks the 25th anniversary of the Society, which has a growing membership of 650 physicians, residents and medical students. SEA offers two annual meetings and two workshops on teaching each year.

The theme of the 2009 Annual Spring Meeting held June 4-7, 2009 in Seattle was themed “Educating About Safety: Educating Safely.” This meeting was attended by over 200 participants. There were 16 invited speakers and 54 SEA faculty for keynote and plenary sessions and teaching in 21 workshops. A special program presented by the APSF covered topics in education and safety, introduction of new equipment and working with industry.

Gary Loyd, M.D., M.M.M. (University of Louisville), SEA President, and Karen Souter, M.B.B.S., F.R.C.A. (University of Washington), Meeting Chair, opened the meeting. Debra Schwinn, M.D., Professor and Chair of Anesthesiology and Pain Medicine, University of Washington, gave the opening keynote address “The Safety of Academic Medicine.” She discussed her 2006 article from the journal Anesthesiology, which warned that without strategic vision, academic medicine will not be preserved in a difficult economy. To develop the next generation of academic and non-academic anesthesiologists, high standards need to be set by not training just “safe” physicians but training physicians who show mastery through deliberate practice, rigorous fellowship training and research. In this research effort, the most important questions need to be asked. With the advent of the health care team, there will be more pressure to be leaders, not just practitioners. This is a marathon effort, not a sprint, and will require research mentors, multidisciplinary teams and the need to overcome discouragement through clear visions and “outrageous ambition.”

The second speaker, Paul Preston, M.D. (Kaiser Permanente), spoke about the safety initiative in an HMO. He described practical ways to address error reduction. Critical elements include structured communications in the perioperative area and medication safety alerts. Strong leadership and incentives based on quality of care with descriptors that are transparent and known to all physicians are two key factors for success. Dr Preston stressed the use of “in situ” simulation to train teams and to test new procedures and technology. Building a “culture of safety” is inherent in Kaiser’s plan.

Highlights of this meeting were the APSF plenary sessions and workshops. The first plenary session was chaired by Matthew Weinger, M.D. (Vanderbilt University) and was titled “Developing a Safety Curriculum for Residents and Medical Students.” An international perspective was offered by Tim Shaw, M.D. (University of Sidney), who discussed the development of safety curricula that draws on many different examples from Australia and the international forum. He emphasized how developing a curriculum in safety can be both exciting and engaging and related the importance of using “stealth,” i.e., introducing the curriculum gradually using many clinical examples to offset a misconception (probably arising from poor teaching techniques) that safety is boring! He introduced the concept of spaced education, a process whereby educators e-mail short, case-based questions to participants in a repeating pattern over the period of the program. Participants are required to answer a question correctly twice before the question is “retired.” Succinct feedback with relevant links to more information is then provided.

The second speaker, Edward Dunn, M.D. (National Center for Patient Safety, Department of Veterans Affairs), expanded on the development of safety education, including a safety fellowship offered by Northwestern University and the collaboration with IOM on the Patient Safety Education Project. Finally, Dr. Weinger presented curricula being developed in simulation at Vanderbilt University in the departments of Anesthesiology, Surgery and Emergency Medicine. He emphasized that the use of simulation must include a robust evaluation process. M.D.s and nurses should be trained together, and measured outcomes should include a change in behavior or improvement in patient care.

The second APSF plenary session was chaired by Michael Olympio, M.D. (Wake Forest University), who noted in his introduction that due to the current changes in continuing medical education policy, expert representatives from industry will be less likely to participate in educational meetings. This observation was developed by the first speaker, Nikolaus Gravenstein, M.D. (University of Florida), who discussed the complex relationship that must exist between industry and educators so that the safe use and development of technology can advance without conflict of interest. James Eisenkraft, M.D. (Mount Sinai School of Medicine) spoke about how to best teach residents about anesthesiology technology. James Szocik, M.D. (University of Michigan) presented the difficulties of learning and teaching new technology. “Leaders need to know more than the knobbyology of the new technology. They must understand the underlying principles of technology, its capabilities, and know how to apply it in different situations to maximize the benefit.”

The plenary sessions were followed by a series of workshops on how to teach safe practices in various “high tech” areas of anesthesia and the operating room. Albert de Richemond, M.S., P.E. (ECRI Institute) and Mike Boyer, D.O., M.S. (Northwestern University) presented a comprehensive program on how to teach fire safety in the operating room. Drs. Szocik, Sarah Bodin (Wake Forest University), and Pamela Nagle (Wake Forest University) ran a successful workshop on teaching about infusion pump operation. The participants were given a guide from the ECRI

Continued on page 4
Institute on infusion pump criteria with the suggestion that the key differences between pumps are in the software and not hardware performance and features. Three different pump were evaluated in an attempt to identify the heuristic applicability to our practice and the teaching points involved with each characteristic. An in-depth consideration of teaching anesthesia machine safety, including a number of teaching scenarios and cautionary tales, was presented by Drs. Olympio, Eisenkraft, and Roger Johnson, CBET (Children’s Hospital of Wisconsin) and William Paulsen, Ph.D. (South University, Georgia).

The secondary theme of the meeting, “educating safely,” was addressed by a number of workshops that explored serious issues such as “how to teach safely and effectively in the operating room,” “how to deal with traumatic perioperative events” and “managing depression in anesthesiologists, particularly trainees.” The safety of educational programs was also considered. A lively panel discussion led by Kristin Miles, J.D., Assistant Attorney General of Washington State, and Joseph York, Ph.D., Past Associate Dean for Graduate Medical Education at the University of Washington, reviewed the legal implications for residency programs when disclosing information. Drs. David Wilks and Richard Driver (West Virginia University) continued this general theme in their workshop “My Program Could be Placed on Probation: Strategies to Survive and Prosper.”

Other workshops offered during the conference included “The Safest Generation,” The future of our specialty currently resides in the Millennial Generation (born 1982-2002). Attributes of this generation include team-orientation, desire for predictability and ease with technology, traits that are favorable for the millennial anesthesiologist of the future. The concern, however, is that anesthesiology is not predictable and requires independence and quick thinking. The SEA Committee on Simulation presented four workshops since simulation remains an important educational tool to teaching residents in a safe environment away from the operating rooms.

Pitt Stop: SEA Annual Meeting, Spring 2010

The SEA 2010 Spring Meeting will be held in Pittsburgh, Pennsylvania, at the Renaissance Pittsburgh Hotel on June 4-6, 2010, and will be sponsored by the University of Pittsburgh. The theme of the meeting is TECHNOLOGY - “Innovative Use of Technology in Anesthesia Education.” The plenary sessions are planned to explore topics such as: simulation, Web-based curriculum, telemedicine, automated evaluation systems, Internet-based curriculum and internet peer-reviewed journals. The SEA membership will have workshops on many educational topics, including an opportunity to participate in a hands-on workshop at our world-renowned Peter M. Winter Institute for Simulation Education and Research (WISER). Experienced educators may want to take advantage of the “Advanced Education Seminar” that will be held on Thursday, June 3, 2010, before the meeting.

Pittsburgh is a beautiful city with a bustling cultural district full of restaurants, museums, theaters and shopping. The Renaissance Pittsburgh Hotel is located in the center of the cultural district in downtown Pittsburgh. This will be a wonderful venue for family members.

We look forward to welcoming you to Pittsburgh in June 2010!
This has been an exciting year for the SEA-HVO Traveling Fellowship. Especially remarkable this year, in light of the economic difficulties, is that the number of scholarships awarded exceeded our goals. Nine senior residents, from an applicant pool of 43, the largest since SEA and Health Volunteers Overseas (HVO) first collaborated to run the program eight years ago, will be given the opportunity to teach anesthesia at an HVO training site in India, Peru or Tanzania this year. The SEA-HVO Fellowships are made possible by the support of some very generous and special donors. This article acknowledges their philanthropy and shares some of the reasons behind their commitment to anesthesia education in the developing world.

Ronald L. Katz, M.D., serves as an appropriate introduction to the SEA-HVO Traveling Fellowship donors as he was the first to give financial support. His generous donations began even before SEA and HVO joined forces eight years ago and it is unlikely that the program would even exist without his vision. Dr. Katz’s professional history has taken him from the East to West coast and around the world. He has served as Professor of Anesthesia at Columbia University and Professor and Chair in the departments of anesthesiology at the University of California, Los Angeles, and the University of Southern California. In the mid-1970s, Dr. Katz met Dr. Vincente Garcia Olivera, the “father of Mexican anesthesia.” Together they instituted an exchange program for residents from the Hospital General de Mexico and UCLA. The benefit of sharing knowledge and skills was quickly appreciated by both groups. He was deeply saddened when 11 young residents were killed during the Mexico City earthquake of 1985. A presidential citation from the Mexican government was awarded to Dr. Katz for the medical recovery aid he provided to the hospitals of Mexico City during the disaster. Dr. Katz has often stated that he hoped his actions would stimulate others to fund similar efforts. It seems that his hopes are being realized.

Gary Loyd, M.D., M.M.M., long before he became president of SEA, has been a loyal major donor to the SEA-HVO Fellowship. Dr. Loyd has been very humble about his philanthropic gifts and his many talents. He is a leader by training (M.M.M. from Carnegie Mellon) and by career as Professor and Acting Chair in the Department of Anesthesia at the University of Louisville, Kentucky. He is also a devoted father of three with enough heart to spare for mentoring and supporting our SEA-HVO Fellows on a yearly basis.

Jo Davies, M.B.B.S., F.R.C.A., an Assistant Professor of Anesthesia at the University of Washington, Seattle, has also been a generous benefactor. Dr. Davies is energetic as an educator, clinician and committee member (including SEA’s Committee on International Outreach). She has volunteered for multiple international medical trips each year, most recently to Mongolia. She writes that “volunteering takes me back to why I became a doctor in the first place: changing lives through basic medical care.” When asked what motivated her donation, she replied “Millions of people are not as fortunate as us with regards to nutrition, education, and particularly, health care. Every individual’s efforts to improve health care in these countries can help reduce this discrepancy. The ability to share our resources, especially our time, experience and education, is a privilege. I’m lucky to be in a position to facilitate other health care professionals in their quest to make a difference.”

To those of us interested in anesthesia education, Saundra Curry, M.D., has served as an example to follow as a long-time SEA member and past president. Dr. Curry is Clinical Professor of Anesthesia and Director of Medical Student Education at Columbia University and has been an educator and mentor to countless young staff, residents and especially medical students. Dr. Curry is also an ABA Board examiner. At the fall SEA meeting last year, she received the well-deserved Duke Award for Excellence and Innovation in Anesthesia. After an inspiring talk on mentoring, Dr. Curry surprised us all by announcing that she would donate the entire award (a significant amount) to the SEA-HVO Traveling Fellowship program. “I grew up overseas as a child of missionaries, and service has always been important to me. It seemed to me that the SEA Award should be used for some educational initiative. Combining service and education, I came up with HVO as the ideal recipient for my award. I hope that it enables some worthy person or persons to carry on HVO’s great work. That’s what mentoring is about, enabling others to do great things.”

Drs. Chris and Rebecca Dobson from Florida are members of our most generous donor group. They gave two full scholarships this year. Dr. Dobson is also generous with his time and has repeatedly volunteered overseas, starting during his residency when he worked in Umtata, South Africa. He is now Medical Director and Board member of Project SHARES, a charitable organization of Florida Hospital that arranges more than 10 medical missions a year to needy countries. Dr. Dobson comments: “I believe that teaching, coupled with hands-on medical care, leaves the largest footprint. The SEA-HVO Fellowship program has the added benefit of targeting residents at the beginning of their career, thus having the best shot at getting those individuals into patterns of service that can continue over their careers.” This philosophy was exactly what inspired the beginning of the SEA-HVO Fellowship.

Lisa Feintech, M.D., is our most recent full scholarship donor. She has volunteered for many international trips herself. She writes: “Though there are a multitude of ways to contribute in the world of anesthesia, it would seem that as teachers we have the ability to multiply our efforts and leave behind lasting skills that providers can build upon. I am hopeful that through the fellowship program, I can provide opportunities for more teachers of anesthesia to share their knowledge and skills in parts of the world that depend upon visiting teachers to provide an anesthesia curriculum.”

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2009 Fall Annual Meeting:
Education in the Face of Adversity

Friday, October 16, 2009
Hilton New Orleans Riverside
New Orleans, Louisiana

Jointly sponsored by the American Society of Anesthesiologists (ASA) and is offered one day prior to the ASA 2009 Annual Meeting.

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<th>Time</th>
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<td>7-8 a.m.</td>
<td>Breakfast and Committee Roundtable Discussion</td>
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<td>8-8:15 a.m.</td>
<td>Welcome and Introductions</td>
<td>Stephanie B. Jones, M.D. - Program Chair, Gary E. Loyd, M.D., M.M.M. - SEA President</td>
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<td>8:15-9 a.m.</td>
<td>General Session: Dean As Change Agent</td>
<td>Benjamin Sachs, M.B., B.S., DPH, FACOG</td>
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<td>8-9 a.m.</td>
<td>Question and Answer Session</td>
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<td>9-10 a.m.</td>
<td>McLeskey Lectureship: Health System Reform: Moving from Volume to a Value Base</td>
<td>Gary E. Loyd, M.D., M.M.M.</td>
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<td>10-10:15 a.m.</td>
<td>Networking Session with Refreshments</td>
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<td>10:15 a.m.-noon</td>
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<td>Noon-1 p.m.</td>
<td>Luncheon and Business Meeting</td>
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<td>1:30-2 p.m.</td>
<td>ASA Update</td>
<td>Alexander A. Hannenberg, M.D.</td>
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<td>2-3:15 p.m.</td>
<td>General Session: Debate - The Addicted Anesthesia Resident: Return or Retrain?</td>
<td>A Pro-Con Debate, Michael G. Fitzsimons, M.D., F.C.C.P., Keith H. Berge, M.D.</td>
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<td>3:15-3:30 p.m.</td>
<td>Networking Session with Refreshments</td>
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<td>Workshops</td>
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Register online at www.SEAhq.org today!
Join Us for the SEA Breakfast Panel at ASA 2009 Annual Meeting

Providing Anesthesia Education in Universal Care System

Wednesday, October 21, 2009
7-8:15 a.m.
Hilton New Orleans Riverside, Grand Ballroom A

Moderator: Gary E. Loyd, M.D., M.M.M.
Professor of Anesthesiology and Perioperative Medicine
University of Louisville
Louisville, Kentucky

Objectives: 1) Discuss the different approaches countries with universal health care have provided for anesthesia education; 2) Compare the pros and cons of each of the approaches; 3) Find common themes and issues with each approach; 4) Identify successful approaches to providing anesthesia education in a universal health care system.

The U.K./Scottish Perspective
Ronnie J. Glavin, M.B.
Victoria Infirmary
Department of Anesthesia
Glasgow, United Kingdom

The Austrian Perspective
Rainer Lenhardt, M.D.
Neuroscience-Anesthesia Intensive Care Unit
University of Louisville
Louisville, Kentucky

The Australian Perspective
Rodney V. Taylor, M.D.
Alfred Hospital
Department of Anesthesia
Victoria, Australia
Karen J. Souter, M.B.B.S., F.R.C.A.

I received my anesthesiology training in the United Kingdom and Canada, and in 1998 I was appointed as a Consultant Anesthesiologist at the University of Southampton, U.K. In 2002, I had to rethink my career! I moved to Seattle with my new husband and started work at the University of Washington as an Acting Assistant Professor. Four years later, I became the residency program director, and shortly afterward I steered the program (100-plus faculty and 69 residents) through the RRC site visit, gaining a five year re-accreditation. I attribute much of my success in the educational world to my membership of the Society for Education in Anesthesia. SEA is an outstanding Society; and I have not missed a meeting since joining in 2002. In June 2009, I was honored to have the opportunity to chair the Society’s spring meeting in Seattle. My meeting theme was “Educating About Safety, Educating Safely,” partnering with the Anesthesia Patient Safety Foundation for some outstanding presentations and workshops. I was delighted when, despite the long journey and the economic difficulties, we had a near-record number of attendees. This just goes to show how the SEA membership, a tight-knit group, sticks together and supports one another no matter how many time zones they have to cross! As a member of the SEA Board these last two years, I have been honored to serve the Society. I am standing for re-election at this time because the experience I have gained from being a Board member and from hosting the spring meeting has helped me understand what the SEA is about, who the people are and what needs to be done to make this Society even better. I hope my experiences will enable me to contribute as SEA moves on to ever-greater achievements.

My goals, if re-elected, would be to:

• Support the work that has already been done to make SEA a place where anesthesiology educators can develop their academic careers.

• Continue the work started in the “program director forums.” Over the last couple of years, I and others have led informal discussions for program directors and people interested in the role. I am keen to continue to facilitate these sessions for the exchange of ideas and to provide support for educators interested in the program director role.

Tom McLarney, M.D.

I am an Assistant Professor with the University of Kentucky (UK), where I am Co-Director of the UK Center for Simulation. I am Chair of the Department of Anesthesiology Anesthesia Education Committee and also Co-Director of our acclaimed final-year medical student course. I have been awarded four UK Abraham Flexner Master Educator Awards and give much of the credit to my experiences in SEA.

I have been a member of the SEA since 2005, when I went to my first SEA Workshop on Teaching. I will never forget attending my first meeting in Louisville, where I met a group of people who had an intense passion for teaching and for finding innovative ways to help learners learn. My passion for teaching and the SEA soared! Since that time, I attended two more Workshops on Teaching and have been on the faculty for the last two years. I have also been on the faculty for two workshops at two SEA Spring Meetings. This past year, I was invited to co-chair the Chief Resident’s Program at the SEA Spring Meeting and am delighted to be next year’s chair for this program. This highlights one of the most important benefits of SEA membership, which is the willingness of members to facilitate each other’s growth in specific areas of interest within the Society. This is a critical attribute of a healthy, growing Society and one that is modeled constantly within SEA, especially by our leadership.

I believe we are at the beginning of a period of unprecedented growth in our Society’s influence on anesthesia education and evaluation. Our Society and our ideas should, and will, help shape the future of our specialty. As a Board member, I will continue to encourage the membership to speak out and get involved. The growth of SEA will come about through further development of our relationships with the ASA, ABA, AAMC and ACGME. As a Board member, I will work hard to facilitate and expand this development. I have benefited greatly from the people and programs of SEA, and my passion for our Society runs very deep. I wish to serve the growth of our Society through membership on the Board of Directors. As a member of the Board of Directors, I will continue to foster the spirit of development from which we have all benefited. This includes continued growth in membership and member participation in new and existing programs.
Sarah G. Bodin, M.D.

With another great SEA educational meeting freshly behind us, I am newly inspired for the eighth year by my colleagues from around the country. I met new colleagues and happily visited and collaborated with old. It was a unique meeting in the exciting collaboration between the APSF and SEA and included several great lecturers from outside our specialty. During my first Board of Directors (BOD) meeting, I learned more about the “behind the scenes” functioning of our Society and was able to see new ways to contribute to the Society.

This year, I coordinated the production of four Simulation Committee-hosted education workshops at the meeting, covering a broad range of subjects. Our committee is also representing the SEA at the ASA Annual Meeting by producing multiple simulation workshops this year. I am working closely with the Web site Committee to produce a rich resource for anesthesiology educators from the Simulation Committee in the next few weeks.

At home (Wake Forest), I continue joint educational projects with surgeons and internists, many guided by concepts that I have learned through the SEA. Some perioperative medicine projects will produce products that I plan to share with SEA members.

I enjoy serving as a bridge with the Education, Simulation, and Web site Committees, and my position on the BOD helps further all their missions. One of my professional strengths is initiating and coordinating timely collaborative projects, and I ask for your vote to continue using that strength to expand the scope of SEA through another term on the BOD.

Stephanie B. Jones, M.D.

I received my anesthesiology training at Washington University, St. Louis, and have held faculty appointments there, at the University of Texas Southwestern Medical Center, and currently Beth Israel Deaconess Medical Center/Harvard Medical School. I entered academic anesthesiology with no training in how to teach. You were expected to “teach as you were taught,” and that’s what I did. As I became more involved in residency program administration, I needed to do more than that. A colleague in Texas pointed me toward SEA, and I joined in 2001.

My participation in SEA began simply with gathering information at annual meetings. Soon, I sat down at the committee tables, beginning with Resident Evaluation, and then Education Meetings and Research. At that point, I truly began to appreciate the camaraderie and mentorship available to members of SEA. I give SEA and its work on the ACGME core competencies much of the credit for being able to make it through my first RRC site visit as Program Director. Reviewing submitted abstracts for the spring meetings always gets me thinking about ways to improve education for my own residents and medical students. I use the “Final Evaluation” tool, developed during a workshop I attended at the Spring 2006 meeting, to document my graduating residents’ competency.

My goals as a Board member would be to continue SEA’s growth in national reputation and membership, while maintaining the “family” feel that is so important to this Society. We should have educational resources that meet the needs of every core and subspecialty Program Director and every medical student clerkship director such that they feel compelled to become members. We should reach out through existing channels and through the new Web site to attract residents to SEA and add them to the ranks of clinical educators. SEA has been an essential part of my development in academic anesthesiology, and I would be honored to serve as a member of the Board of Directors.
**Board of Directors Position Statements Continued**

**Marek Brzezinski, M.D., Ph.D.**

As the Chair of the Web site Committee, I have had the distinct privilege of serving our Society by creating a dynamic and sophisticated “face” of SEA that reflects the energy of our members. I accomplished this through a leadership style that is inclusive and supportive, setting free the positive and creative power of all those involved. A few of our accomplishments include our member survey, creation of “Wiki-Pages” for every committee, transition to a new Web site host, creation of a “Tech Corner,” and development of new Web site design and structure focusing on the end-user. All this was accomplished in the assigned time and significantly under budget! Under my leadership, our committee was able to create the “go-to” site for educators in anesthesia.

After years of dedicated service to our members and SEA – including annually staffing the SEA booth, organizing a workshop, contributing two chapters for the “Students’ Guide,” and working on the Medical Student Committee – I wish to serve SEA as a Board member, where I will use my energy and dedication to support our organization and our members.

The position of the Web site Committee Chair has offered me significant insight into our Society. As a member of the Board of Directors, I would like to:

- Develop the SEA into the premier resource for anesthesia educators and education researchers.
- Leverage technology to showcase and grow our society.
- Promote the creation of educational tools for anesthesia educators.
- Provide a platform to disseminate educational tools and create a network of productive educators.

I currently serve as an Assistant Professor at UCSF. I received my M.D./Ph.D. degree from the Westfälische Wilhelms-University in Münster. I completed my residency in anesthesia at University of Chicago. Subsequently, I went to Massachusetts General Hospital and Duke University, where I completed fellowship training in Critical Care Medicine and in Cardiothoracic Anesthesia, respectively.

Since joining UCSF, I have been heavily involved in a broad spectrum of educational efforts, including directing multiple anesthesia clerkships. The innovative curriculum was recognized at the 2009 Annual IARS Meeting and was given the “IARS Best Scientific Exhibit Award.”

Based on my contributions to undergraduate education, I received the “Excellence in Direct Teaching Award” in 2006. I was elected into the Haile T. Debas Academy of Medical Educators at UCSF in 2007, an honor afforded to only the top 2-3 percent of all educators at UCSF. Finally, this year I have been awarded the UCSF School of Medicine’s Teaching Scholars Fellowship. In addition to my educational involvement, I am a funded researcher with a focus on post-traumatic stress disorder in the perioperative period.

It is my hope that I can use my accumulated skills and experiences to continue to advance the missions of our Society.

**Lena E. Dohlman, M.D., M.P.H.**

As an enthusiastic member of SEA since 2001, I am seeking a position on the Board of Directors. I first joined SEA thinking that my teaching skills might benefit. I also hoped for collaboration between SEA and another organization I was involved with, Health Volunteers Overseas (HVO), a volunteer organization with a mission to improve global health through education. SEA satisfied both these goals and so much more. SEA has helped to make the SEA-HVO Traveling Fellowship a success. This nurturing of interest, and support by colleagues and mentors, is what I appreciate so much about SEA and would like to extend to others.

My interest in teaching began in medical school, where I taught in early BLS courses, and later in ACLS and ATLS. Since 1981, I have taught anesthesia with HVO in countries in Asia and Africa. I have participated as a tutor, examiner and mentor at Harvard Medical School. After receiving an M.P.H. as a mid-career student at the Harvard School of Public Health, I mentored their international students. As Director of the MGH CA-1 Introductory Course at the Center for Medical Simulation, I taught first-year residents and trained new instructors for the course. I have lectured and run workshops on regional anesthesia at the MGH, BIDMC and at international conferences. At SEA meetings, I have lectured and taught workshops on intercultural communication and teaching in developing countries. Positions I have held include Associate Director, Pain Management Center, Director of Outpatient Anesthesia and Co-Chair Regional Anesthesia, all at the Beth Israel Hospital in Boston. I was Chair of Anesthesia Overseas (HVO) for 11 years and am currently Chair of the SEA Committee on International Outreach/Developing World.

SEA was one of the first organizations in specialty medicine to focus on improving education. SEA can take pride in being among the leaders of this movement. As a Board member, I would encourage recruitment of new members, both young and seasoned, with new ideas and energy to help maintain this position. I believe faculty development and maintaining the underlying support and collegiality characteristic of SEA is crucial. I would like to continue the upgrading of meeting programs and improve our educational resources, particularly on SEA’s Web site. It is clear that many SEA members are interested in research on educational issues, and this should be encouraged in planning our meetings. Financial stability is important, and I support the current Board’s desire to control costs while cautiously seeking additional funding. I believe in listening to and nurturing SEA members who want to bring new projects and ideas on education to the organization. I benefited eight years ago when Drs. Berend Mets, Cathy Kuhn and other SEA members listened and helped organize the SEA-HVO Traveling Fellowship.

SEA has helped me remain passionate about teaching and education. I would like to give back to the organization that has given so much to me. It would be a pleasure and honor to contribute to the future strength and vitality of SEA as a member of its Board of Directors.
Although not much seems to have changed on the surface, much work has gone on behind the scenes.

**Progress:** A needs-assessment utilizing a Web-based member survey was our initial project. It was clear from the survey that the site needed a change from the ground up.

Our first order of business was to move the site to a hosting service that could meet our growing needs and provide us support moving forward. ASA was able to provide these services in a cost effective way, while allowing us to develop closer ties and share infrastructure. Effective December 31, 2008, the site was successfully moved to ASA as our host. It has been maintained on a provisional basis, with only modest changes occurring, while the bulk of the work has focused on developing a completely new Web site.

Our committee reached out to other committees to develop a system of contacts to improve the flow of information and committee work products. In addition, we launched a series of Wiki’s for each committee so that there would be a place to share and collaborate on projects for the new Web site.

We developed the “Tech Corner,” which collects resources on how to best use technology to enhance teaching and career development and an extensive list of helpful Web links and resources.

Following preliminary approval by the Board, Larry Chu, M.D., took on a major role as the site designer. We completed a sitemap and overall design. Committees were asked to deliver completed projects by June 30 to allow time for Board members to review and approve content for subsequent upload to the Web site. The site is set to “go live” by mid-October, so please watch for it and provide feedback as it comes online!

**New Functions**

**Site Flow:** The new site will allow experienced users quick access to the features and functionality they need, while those new to the site can explore based on an intuitive self-description of their goals.

The basic breakdown will be: Student, Resident, Educator or Education Researcher. As users select one of these categories, they will be routed to a page that concentrates the resources most applicable to their needs. Alternately, the same features will be available through menus on the top and side of each page. Easy access to PDF versions of files, and one-click printing or e-mailing of data will make sharing information a breeze! A keyword search from the top of the screen will make life easier for all.

**Site Feel:** The new site will be more colorful, more dynamic, and have more images of what it means to be a member and anesthesiology educator.

**Site Content:** In addition to all the content previously available, many committees have taken this opportunity to develop exciting new content for the Web site. For example, the Outreach/Developing World committee, under the leadership of Drs. Lena Dohlman and Jo Davies, are utilizing the site to promote the goals and share the lessons of international health opportunities. If you have some content you would like to share with the Web site, please contact the committee you feel is most appropriate. They will forward us finished products for review and upload. Don’t forget to list contributions on your CV as well!

**Future Goals:** We know the site won’t be perfect when it is launched. Indeed, some committees may have fallen behind on their projects and have slots occupied with “under construction” or Latin phrases as place holders. Don’t let this deter you from exploring the site and providing us feedback. The best part is that we have plenty of capacity to expand and modify things, so continued improvements will be part of our plans. We envision the Web site as a robust, one-stop shop for all your anesthesia education needs. It will provide resources for members and some free content to entice non-members to join. We appreciate the opportunity to help showcase all that SEA can provide and maintain its place as the premiere resource for anesthesia educators.
SEA-HVO Traveling Fellowship: The Donor Story

Continued from page 5

There are many more generous donors who contributed to make the SEA Scholarship and the most recent Northeast/Northwest Scholarship a possibility. Dan Lonergan, M.D., who received the SEA Scholarship, commented: “I am so appreciative of the generous donations . . . and so excited for my trip (only weeks away!!). Large and small donations are always welcome to give our residents the opportunity for a month dedicated to teaching overseas. This unique experience is beneficial for nurturing young educators while also benefiting our anesthesia colleagues and their patients in developing countries.”

SEA Scholarship donors: Drs. Victor Ryckman, Berend Mets, James Mayhens, Jeanette Harrington, Lisa Feintech, Sarah Bodin, Berne Braveman, Jane Easdown, Audrey Alleyne, Marc Bertrand, Keith Littlewood, Gail Randal.

Northeast/Northwest Scholar Donors: Drs. Lena Dohlman, Karen Souter, Gerard Bashein, Peter Buckley.

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<tr>
<th>Name</th>
<th>Residency</th>
<th>Fellowship Sponsor</th>
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<tr>
<td>Brian Cauley, M.D., M.P.H.</td>
<td>Massachusetts General Hospital, Harvard University</td>
<td>Dr. Jo Davies</td>
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<tr>
<td>Neil Hanson, M.D.</td>
<td>Duke University Medical Center</td>
<td>Northeast/Northwest</td>
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<td>Sonali Joshi, M.D.</td>
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<td>Julie Soong, M.D.</td>
<td>Brigham &amp; Women’s Hospital, Harvard University</td>
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<td>Stacey Swift, M.D.</td>
<td>Hershey Medical Center, Penn State</td>
<td>Dr. Gary Loyd</td>
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Information on contributing can be found on the SEA Web site www.seahq.org and the HVO Web site at www.hvousa.org.