For almost two years, I have had the privilege of serving as your president. We have endured, hopefully, the worst part of the national economic recession while maintaining our focus on anesthesia education. SEA has continued to increase its membership and strengthen its meetings and programs during this time thanks to the dedicated hard work of its members.

Since I was elected Vice President/President-Elect, our membership has increased from the mid 400s to almost 700 now. Meeting attendance has doubled and scientific posters have quadrupled. SEA’s website has been transformed into a more modern version to attempt to meet the evolving needs of the membership. Website usage is increasing and the website is proving a vital conduit for information for many of us. Our stable financial position has improved beyond the critical, minimal thresholds the Board recognized and set years ago. The financial condition of SEA is entering into a phase where investing in resource developments is now feasible. I will not speculate on which resources could be developed, but the truth is, we now can.

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At the end of the 2010 Spring Meeting, the Board of Directors stayed behind and met in a Strategic Planning Session, facilitated by the ASA’s Robert Fine. The session was extremely productive, with the Board creating a useful working document to help guide SEA energies for the next couple of years. SEA’s Mission Statement was modernized and updated so 15 major goals were identified. Even though the details of the plan will be available at the Fall Meeting in San Diego, I want to mention a few of what I consider are the more important goals set forth in the plan.

One of the most exciting aspects of the plan was the initiation of exploring how to create a systematic curriculum or program that could potentially lead to a certificate in teaching through SEA. Many of the offerings could be made during our annual meetings, while some may have to be offered in specialized courses. Many SEA members come to our meetings to improve their teaching skills, and the proposed formal program would not only provide for this need, but also provide evidence of competence in new or established teaching skills. Such an endeavor would not be easy or quick to develop, but the outcome would be well worth the effort.

Another exciting initiative is creation of a task force to explore the development of online CME courses for SEA. If feasible, this avenue would allow us to develop courses that meet the skill development needs of anesthesia educators and address the needs of practicing clinical anesthesiologists while providing a peer-reviewed educational product that would help the educator receive credit for the work. We could even potentially make this part of the teaching certificate program. The past focus of SEA was on medical students and residents. Now we are exploring whether we should be also addressing the needs of the practicing anesthesiologists and the skills we will need to teach them. How do you teach a master anesthesiologist new tricks?

The strategic plan also continues to underline the importance of the Milestones Project. The Board fully realizes the impact that a successful Milestones product will have on our teaching and on our specialty. This heavily collaborative effort seeks to identify the major milestones that a resident/fellow will need to achieve in anesthesiology, pain, perioperative medicine and...
SEA 25th Anniversary Meeting: ‘Innovative Use of Technology in Anesthesia Education’

The 2010 SEA Spring Meeting, held June 4-6, 2010 in Pittsburgh, marked the 25th anniversary of the Society for Education in Anesthesia. The theme of the meeting was “Innovative Use of Technology in Anesthesia Education.” The meeting was attended by over 200 participants. There were 14 invited speakers and 50 faculty for nine general sessions and 21 workshops, including six special simulation workshops at the Peter M. Winter Institute for Simulation Education and Research (WISER) at the University of Pittsburgh campus.

The meeting consisted of general sessions followed by workshops each day. The speakers at the general sessions were as follows:

Gary Loyd, M.D., M.M.M., University of Louisville, SEA President, and Ryan C. Romeo, M.D., University of Pittsburgh, Meeting Chair, opened the meeting. John P. Williams, M.D., Safar Professor and Chair of Anesthesiology, University of Pittsburgh School of Medicine, gave the opening keynote address, “Taking Your Department Viral – Innovative Use of Technology in Education.” by discussing how to take your department to the next level in web management. He also discussed the use of social networking sites (principally Facebook and Twitter, and stressed the importance of webcast and podcast use in the educational process.

Robert Hanscom, J.D., Vice President of RMF Strategies, Harvard University, spoke about “Using Malpractice Data to Propel Simulation Training.” He described what changes can come from data collected from malpractice cases and how simulation can be used to educate staff in key risk areas, introduce interventions and compel change to improve outcomes.

Lawrence F. Chu, M.D., from Stanford University, spoke about “The Stanford Ether Project: What Do Residents Really Want? Lessons Learned From Building an Anesthesia E-Learning Intranet Website.” He discussed an integrated e-learning online environment to support anesthesia education using evidence-based principles that support clinical work and enhance patient safety. He also spoke on the process of evaluating and improving intranet resources through resident needs assessment, usage audits and continuous quality improvements.

Robert L. Willenkin, M.D., Professor Emeritus of Anesthesiology, University of Pittsburgh, one of the founding fathers of our Society, gave a great talk titled “Why SEA?” on the history of SEA, from its beginning in 1985 to the present. He impressed upon all of us how important it was for the Society to be formed and what it has done for the education of our past, present and future anesthesiologists. From its humble beginning with seven members in 1985 to more than 700 today, I’m sure many agree with the sentiment of great thanks we have toward Dr. Willenkin and his important role in SEA.

Rita M. Patel, M.D., Professor and Vice Chair of Education, University of Pittsburgh, moderated a panel discussion on “Linking UME, GME and CME.” Shawn T. Beaman, M.D. was the expert on Undergraduate Medical Education (UME), while David Metro, M.D. was the expert on Graduate Medical Education (GME) and Manuel Vallejo, Jr., M.D. was the expert on Continuing Medical Education (CME). From each of their perspectives, they provided concrete examples of “links” in medical education that exist between medical school, residency, fellowship and continuing medical education programs in the department of anesthesiology.

Dr. Patel stressed how this “linking” improves the quality of health care we provide to our patients and to society as a whole.

Edward Nemergut, M.D., University of Virginia, spoke on “The OpenAnesthesia Initiative: Graduate Medical Education on the World Wide Web.” The OpenAnesthesia Initiative was developed with the broad intention of promoting evidence-based medicine in the disciples of anesthesiology, critical care, and pain management. The structure of the website facilitates the discovery of content, the intelligent exchange of ideas, and an enhancement of each individual’s appreciation of the primary medical literature in the subspecialty of anesthesiology for medical students, residents and practitioners, with different pages targeted to different audiences. OpenAnesthesia also provides program directors with a tool to document core competency activities for the Accreditation Council for Graduate Medical Education (ACGME)-mandated learning portfolios. When OpenAnesthesia began in July 2009, the International Anesthesia Research Society (IARS), in conjunction with Anesthesia & Analgesia, became the first major medical society to sponsor an online toolkit specifically designed to advance graduate medical education in anesthesiology. OpenAnesthesia.org is divided into two overlapping components, a Journal Section and a Wiki section. The ultimate goal of IARS, its journal and this new initiative is to improve patient care.

Paul Phrampus, M.D., University of Pittsburgh, Director of WISER, talked on “Conception to Reality - Developing a Successful Simulation Center.” He provided insight into consideration of governance models, faculty development and partnering models, attention to administrative, technical and operational issues, equipment selection and curricular creation to enhance productivity. He armed participants with the information that they need to develop the underpinnings of a successful simulation program.

Lena Dohlman, M.D., M.P.H., Harvard Medical School, presented the 2010 SEA-Health Volunteers Overseas (HVO) Traveling Fellowships to nine anesthesia residents. They were: Manoj Kumar Dalmia, M.D. (Beth Israel Deaconess Medical Center), Litisha G. Deal, M.D., M.B.A. (University of Florida), Jennifer L. Hay, M.D. (University of Vermont), Shaka James, M.D. (University of Maryland), Samuel Timothy McIlrath, M.D.

Continued on page 4
Continued from page 3

(University of Tennessee), Sarah Pae, M.D. (University of Chicago), Swetha R. Pakala, M.D. (University of California, San Francisco), Tor Sandven, M.D. (Oregon Health and Sciences University), and Olof Viktorskodttir, M.D. (Massachusetts General Hospital). Each Fellow will serve a one-month assignment at an HVO anesthesia training site in Ethiopia, Peru or South Africa.

The last day of the meeting started with a pro/con debate titled “The Mannikin Should Die,” moderated by Elizabeth H. Sinz, M.D., Penn State University. The pro speaker was Jeffrey M. Taekman, M.D., Duke University, while the con speaker was Harold K. Doerr, M.D., Director of Anesthesia Patient Simulation, University of Texas Health Science Center. Dr. Sinz asked the questions: should a simulation instructor ever allow the manikin to “die”? What sort of effect will this have on the students? Will they become distracted, angry, defensive or sad? Will this make them indifferent or callous? What will they take away from the experience when they treat their real patients? Experts in the field debated the pros and cons of allowing the manikin to die during a simulation-based learning experience with opportunity for input and advice from the experts in the audience.

“Fresh START- A Blended-learning, Virtual Mentorship and Social Networking Pre-residency Anesthesia Program Outline” was presented by Lawrence F. Chu, M.D., Stanford University. START stands for “Successful Transition to Anesthesia Residency Training.” It is composed of video podcasts with clinical vignettes and demonstrations, lectures on anesthesia fundamentals, pre- and post-quizzes on podcast and lecture content, interactive and collaborative activities and a mentorship program with CA-1 residents.

The SEA Research Committee selected 30 curriculum abstracts and eight scientific abstracts for moderated poster sessions and two oral presentations. The oral poster presentations were moderated by Franklyn P. Cladis, M.D., University of Pittsburgh. The first presentation by Laura E. Kaufman, M.D., University of Rochester, was titled “Multimodal Educational Days” (authors: Laura E. Kaufman, M.D. and Suzanne B. Karan, M.D.). The second presentation by Andrew B. Casabianca, M.D., University of Toledo, was titled “The Use of Standardized Patients to Evaluate Interpersonal and Communication Skills of Anesthesiology Residents: A Follow-up Study” (authors: Andrew B. Casabianca, M.D., Thomas J. Papadimos, M.D., Andrew H. Roth, M.D., Amy Capwell-Burns, M.D. and Elizabeth A. Davis, M.D.).

The workshops held each day of the three-day meeting focused on using different technologies in anesthesia education. Veena Salgar, M.D., presented her workshop on “Emotional Intelligence: What Does It Have to Do With Safety?” (offered twice). Lawrence F. Chu, M.D. and Kyle Harrison, M.D. repeated their workshop “Anesthesia 2.0: Incorporating Web 2.0 Technologies Into Anesthesia Education.” Jeffrey S. Berger, M.D. and Suzanne B. Karan, M.D. taught about “Creating Value in your Department’s Internet/Intranet for the Residency Program: An Idea Exchange.” Paul W. Kramer, M.D. led a


Concurrently on Saturday, several workshops on simulation were run at WISER, which included “How to Teach With a Human-Patient Simulator” by William R. McIvor, M.D., Manuel C. Pardo, Jr., M.D. and W. Christopher Croley, M.D., F.C.C.P., “Using Simulation to Introduce New Equipment” by L. Jane Easdown, M.D., Herodotos Elinas, M.D., Christopher J. Gallagher, M.D. and Thomas Corrado, M.D. (offered twice), “Interdisciplinary Team Behavior: Demonstration of Simulation-Based Team Behavior Instruction for Operating Room Crisis Management,” by Iolanda Russo-Menna, M.D., M.Ed. and Azhar Rafiq, M.D., M.B.A., M.Ed., “Simulation: Feedback and Debriefing for Affective Learning” by Meir D. Chernofsky, M.D., Susan Staudt, M.D., Jeremy Moore, M.D. and Sarah Granger, and “Integrating Simulation Into Curriculum,” by Christine S. Park, M.D. and Manuel C. Pardo, Jr., M.D.

On Saturday evening, a special SEA 25th Anniversary Dinner was held in the Symphony Ball Room at the Renaissance Pittsburgh Hotel. The live band No Bad JuJu rocked the evening. At the evening’s end, a spectacular fireworks display courtesy of the Pittsburgh Pirates was seen at PNC Park located across the river from the hotel.

The SEA Faculty Development Committee offered peer assessment and mentoring for members who requested expert feedback on their presentation and teaching skills. This program accomplishes one of the SEA missions of assisting educators with their own academic development. A workshop for advanced educators held on the Thursday before the meeting was another activity to aid academic development. To foster the development of future anesthesiology educators, SEA continued to host the Chief Residents Leadership Workshop. SEA subsidizes 40 senior residents to attend the meeting and provides a parallel session on Saturday devoted to leadership strategies and networking.

As you can see, the 2010 Spring Meeting had a lot to offer. You are invited to join us at our Fall meeting held the day before the ASA Annual Meeting in October in San Diego, focused on “Anesthesia Education: Pathways for Improvement.” See www.SEAhq.org for more information.
S
ave the date! Please join us in San Diego for the SEA Fall Annual Meeting on the Friday preceding the ASA Annual Meeting. The meeting theme, “Anesthesia Education: Pathways for Improvement,” refers to structural changes and innovations in medical education and the field of anesthesiology.

This year’s keynote speaker is David Irby, Ph.D., Vice Dean for Education and Professor of Medicine at the University of California, San Francisco. For several years, Dr. Irby was a senior scholar at the Carnegie Foundation for the Advancement of Teaching, investigating the challenges of preparing physicians for the complexities of modern medical practice. On the centennial of the Carnegie Foundation’s historic 1910 Flexner report on medical education, Dr. Irby and his colleagues released the results of their study titled “Educating Physicians: A Call for Reform of Medical School and Residency.” During his keynote address at the SEA meeting, Dr. Irby will highlight innovative curricular structures and approaches to teaching and assessment that will be needed to meet contemporary challenges in clinical education.

Jeanine P. Wiener-Kronish, M.D., Anesthetist-in-Chief at Massachusetts General Hospital and Henry Isaiah Dorr Professor of Anesthesia, Harvard Medical School, has accepted this year’s McLeskey lectureship, titled “Training Anesthesiologists for the Next 30 Years.” She will address changes in the expectations of anesthesiologists and new opportunities for our profession.

Workshops related to the meeting theme include:
• Leading a BIG Curriculum Change: Strategies for Success
• The Expert Pathway in Anesthesia Resident Training
• Innovative Structures in the Anesthesia Residency
• Innovative Structures in Anesthesia Medical Student Clerkships
• Milestones in Anesthesia Resident Training
• Improving the Structure and Approach to Regional Anesthesia Rotations

Additional sessions include an address by ASA President Mark Warner, M.D., an update from Anesthesiology RRC Chair Neal Cohen, M.D., and a panel titled “New Pathways in Anesthesia Education.”

As always, the key to success for our meeting is broad participation by our members. We look forward to seeing you there, and we hope you bring a colleague!

Register at: www.SEAhq.org

Back to the Future

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critical care as they progress toward competence. The plan so far is for the Task Force to describe and evaluate the milestones with a universal terminology against one set of standards. If the project is successful, the potential ramifications for further development of this project to the expert and master skill levels on MOCA® are evident. The Milestones Task Force, cognizant of the failures of the Core Competencies, is striving to collaboratively create a successful product that enhances and validates what we do. We must do it right. Our collaborative partners are very important to us, and the Milestone project is just another opportunity for us to work jointly with other organizations.

Many of the other goals in the strategic plan address issues related to the quality of meetings and committee work. As SEA continues to grow and mature, we are beginning to feel the accompanying growing pains. The Board expressed its desire to maintain the intimacy and easy networking of the membership, but increasing numbers of attendees mean we have to be creative in how we allow both to occur. This is a great problem to have.

As my term as president ends, I feel deeply grateful for the staff (especially Nicole Bradle and Tish Neff), the very active Board of Directors, and the hard-working committee chairs for making SEA even more successful. It has been a pleasure serving you, and I look forward to serving as a past president.
What an exciting and productive Spring Meeting for the task force and the SEA membership! The Spring Meeting was the exclamation point on a busy spring for the task force and the springboard to propel us into the next phase of the project.

In preparation for the SEA Spring Meeting in Pittsburgh, the task force organized a webinar in May to review progress made and discuss action items such as the language for development and implementation of the milestones. In line with preference of ACGME, there was a broad agreement to use the combination of the Dreyfus Model of Skills Acquisition, Bloom’s Taxonomy and language of the competencies as the primary language for the anesthesia milestones project. Since several anesthesia residency programs across the U.S. have been developing “their” individual milestones as a natural progression from implementation of the competencies, it was decided that a search to elicit what people are already doing and willing to share would be an important step in the process. That task was assigned and is in progress.

At the SEA Spring Meeting in June, the task force used multiple occasions to present the progress made, promote the cause of the milestones, and to motivate SEA members to participate in this exciting process. First, a detailed update was presented to the Board of Directors, stimulating a spirited discussion about the development process and ramifications of the milestones for our specialty. Second, the task force met on the following day to identify the stakeholders in the process and how to partner with these groups to facilitate broad-based input during every phase of the project. The groups we identified include the ABA, ACGME, the anesthesiology RRC, all the subspecialty societies in anesthesiology, SAAA and its divisions, and SEA. As we get further into development and implementation, other groups may be identified. We have been in contact with the educational leadership of many of these groups and will continue to facilitate broad-based input at every step. We also discussed how we will develop a glossary of terms. Finally, the task force organized an open panel discussion on Saturday of the Spring Meeting. The open panel discussion started with a general overview of the milestones project to the attendees that led to a discussion about short- and long-term goals as well as an initial timetable. The scope and implications of the milestone project were explored with the attendees. The ideas and support from the SEA membership were tremendous. That support is evidenced by the fact that the task force has now grown to over 20 members since the Spring Meeting. The discussion originally scheduled for an hour lasted for almost two and a half hours, again highlighting the building interest in the milestones by our members.

Looking ahead, and with help of all members of the task force, we have embarked on a very ambitious plan: over the summer, four teams will create a milestones glossary of terms for each Dreyfus level (excluding expert level for now) that will combine the Dreyfus Model language with the language of Bloom’s Taxonomy as well as the competencies. This is an unprecedented undertaking, but we have to start with the language so that we can adequately describe behaviors associated with each Dreyfus level for all involved. This will be the springboard for all the stakeholders to have a common understanding of the milestones since we will have a common language that is understandable, workable and applicable.

We will continue to keep you up to date on our progress through this newsletter as well as having open sessions at our Fall and Spring Meetings and, as always, the task force is always open to ideas and suggestions as we move through every phase of this project. We look forward to seeing you in San Diego!
Many of our SEA members have devoted their entire academic career to promote and improve education in anesthesia. Thus, one of the major objectives of SEA has been to assist members in their career development by providing the skill set, knowledge, tools and network essential for success.

In this context, I am excited to inform you about a new faculty development initiative – the SEA Teaching Scholar Program (TSP). The idea behind TSP is to provide members with an intensive development program in order to foster academic careers and to train future educational leaders in anesthesia. After proposing this faculty development initiative to the Board, I am now spearheading efforts to transform this idea into reality. Having completed the Teaching Scholar Program at UCSF School of Medicine, I gained enormous theoretical knowledge and developed teaching strategies, research skills and a network of like-minded colleagues. Since a TSP is not available to every motivated educator at his or her individual institutions, the goal of a TSP is to close this gap and equip interested SEA members with the right tools for their academic advancement as well as actively promote the educational agenda at the national level.

I envision the TSP to last two years and consist of at least five parallel components:

1. **Intensive seminars during SEA meetings.**
2. **Regular Web-based seminars.**
3. **Self-study of assigned reading materials.**
4. **Scholar project to be completed during the TSP.**
5. **Pairing with a mentor to assist with the scholar project with the underlying idea of developing a long-term mentorship relationship.**

The curriculum would cover all aspects related to educational research, learning theories, teaching methods, curriculum development and evaluation, and assessment of learning as well as leadership skills. The TSP will provide the participants with an excellent preparation and solid foundation to lead the field of scholarly education in anesthesia. Participants will receive an official Certificate of Completion of the TSP at the conclusion of the program.

We are at the beginning stages of creating this exciting faculty development program with an aim to fully implement the curriculum by the end of 2011. The success of the TSP depends on your feedback and input. A task force may need to be assembled to iron out the logistics. Interested members with a focus in education are encouraged to volunteer their time, expertise and willingness to mentor a junior faculty.

In summary, the TSP will provide participants with the essential tools to continue their careers in anesthesia education and with the knowledge and skills to commence the next step toward a career in research in education. Moreover, the TSP will be an excellent way to develop networks, identify people with whom one might collaborate in the future and clearly signal your commitment to a career in education.

I will continue to keep you up to date on the progress. As always, I am open to your ideas and suggestions. I am looking forward to seeing you in San Diego.
Vice President-
President Elect
Ira Todd Cohen, M.D.

In 1993, telephones were for talking, not texting, top-selling songs were sold, not downloaded and slideshows actually contained slides, as my first-ever presentation did at that year’s Society for Education in Anesthesia meeting. Although much has changed over the years, the shared energy, enthusiasm and dedication I found at the SEA has not. In the last two decades the Society has grown remarkably in membership, educational offerings, financial health and national recognition. These advances reflect the hard work and vision of our members and leadership. If elected, I hope to support this trajectory as well as identify new needs and opportunities that lie ahead.

The SEA allowed me professional development through various positions: committee chair, meeting chair, workshop faculty, board of director and treasurer. The most rewarding role, though, has been that of learner. I feel I have made substantive contributions to the Society; I know the Society has made invaluable contributions to me and my career. Through continued service, I will work to ensure that present and future members will be afforded similar access to mentorship, experimentation, networking and growth.

The SEA and its members are now recognized as experts in a sought-after field. Our work in the past on the Competencies, presently on the Milestones and, undoubtedly, in the future for the new Proposed Standards, makes us the "go to" people for educational challenges. We must strive to maintain and build on this reputation by continuing our tradition of forward-thinking, high-quality products and by actively pursuing research, innovations and the nurturing of future leaders. I believe I have the experience and passion to steward the Society toward these goals.

It is a privilege to be a member of the Society for Education in Anesthesia and an honor to be nominated for Vice President-President-Elect.

Secretary
Steven Kimatian, M.D., F.A.A.P.

My name is Steve Kimatian, and I am asking that you re-elect me to the position of Secretary of the Board of Directors. I am currently Chair, Department of Pediatric Anesthesiology, Vice Chair for Education, Anesthesiology Institute, Cleveland Clinic.

Since starting my career as an academic anesthesiologist, I have been an active participant in the SEA and have served as a member of the SEA Board since 2005. I have held several other leadership roles in our Society, including Director for the SEA Teaching Workshop, Chair of the Committee on ACGME Competencies, and Chair of the 2004 SEA Spring Meeting. In these capacities, I have strived to focus the energies of our membership to establish the SEA as an undisputed leader in anesthesiology education. When I was elected to the Board, I stated that I wanted to pursue initiatives that result in valued products for our members, energize our members to become active participants, and encourage new members to join; and we have made significant progress in all these areas. We have garnered national recognition from the ACGME, RRC, ABA and ASA as the leader in education for our specialty. If re-elected to a position on the board of directors, I will continue to advocate for the SEA’s continued leadership in education, harnessing the momentum we have obtained to promote and grow our Society.

In short, I have a strong commitment to education, a long-term vision for our Society, and am fortunate to be part of a department that is willing to support my participation with time and resources. I have benefited from participation in the SEA, receiving mentorship, guidance and friendships that have shaped my career as an academic anesthesiologist. I consider serving as Secretary an opportunity to give something back to a Society that has given a great deal to me.

Elections will be held on Friday, October 15 during the SEA Luncheon and Business Meeting.
Director
Manisha S. Desai, M.D.

I received my training in anesthesiology at Brigham and Women’s Hospital in Boston about 22 years ago. Currently, I am Associate Professor of Anesthesiology at UMass Memorial Health Care, and Director of Educational Development and the Faculty Advancement Departmental Liaison (FADL) for the hospital.

The first time I attended an SEA meeting was about four or five years ago. The experience changed my whole outlook toward being an academic anesthesiologist! Since then, with the help of our dedicated SEA faculty, I have been successful in changing the culture of my department toward education and faculty development. I have been conducting workshops and seminars for the Massachusetts Society of Anesthesiologists. For these successful efforts, I give 100 percent credit to our “SEA family.”

I enjoy working with colleagues who are co-members of the Educational Research and Faculty Development Committees. Although I am relatively new to SEA, reviewing abstracts for the spring meeting and discussing faculty development workshops for the next year have made me more enthusiastic about giving back to the SEA.

My goal as a member of the Board of Directors would be to reach out to all the 132 academic departments across the nation through SEA. I would aim to increase membership and standardize educational teaching and learning wherever needed. My main expertise and strengths are in the junior and mid-career faculty development programs. These include professional development as well as research and educational development. It is my hope that I can use my experiences and skills to continue to advance the mission of our Society.

Treasurer
Michael R. Sandison, M.D.

I received my medical degree and initial residency training at the University of the Witwatersrand, South Africa. I completed Fellowship training in Cardiothoracic Anesthesiology at Albany Medical Center (NY) in 1991 and was ABA Board Certified in 1993. In 1995, I was appointed Associate Professor of Anesthesiology and Director of Thoracic Anesthesia. I have been Director of Resident Education at Albany Medical Center and a member of SEA since 1999. I participated in the SEA Teaching Workshop in 2003. As a member of the SEA President’s Task Force on the ACGME Competencies in 2004, I co-chaired the Patient Care Workshop at the Harrisburg meeting. In 2006, I co-chaired two workshops at the Spring Meeting dealing with Phase 3 of the ACGME Outcomes Project, and we produced a final evaluation tool, which can also be used as a graduate employer assessment.

In April 2006, I was elected a Senior Inaugural Fellow of the Academy of Medical Sciences at Albany Medical College. I served as Program Chair for the SEA 2008 Fall Meeting in Orlando. I have served two terms on the SEA Board of Directors. SEA has nurtured my career in residency education, and this is my motivation to offer my services as Treasurer, or to the Board for another term.

My first priority for the SEA is to provide expert educational offerings to all physician teachers of anesthesiology while protecting our financial solvency and reserves. Second, we must develop and share educational tools, including curriculum and milestones products. Third, we must foster and protect the spirit of idealism, the principle of inclusion, and the shared mission that characterizes the SEA.
Board of Directors Position Statements Continued

**Director**

*Jane Easdown, M.D.*

As an active member since 1993, I am eager to serve you in a senior capacity as a member of the Board. As the Committee Chair for Educational Meetings, I attend Board meetings so I understand the issues and directions SEA is taking and the opportunities for Board members to serve the membership. As chair, I have been involved in steering the production of Spring and Fall meetings to inspire our members and transform the educational programs they oversee. I chaired the SEA Spring Meeting in Nashville and have served as a member on the committees for Simulation and Outreach. I am a member of the Taskforce for Milestones. I have presented workshops and posters at SEA, ACGME, ASA and AAMC on educational topics, especially resident selection. In my own department, I have just chaired the Vanderbilt Strategic Plan for Education, outlining our five-year plan. SEA has been the cornerstone of my career, and the mentorship and friendships I have enjoyed have been instrumental in opening many doors. It is my belief that with the opportunities for scholarship and networking, every SEA member should benefit directly. As a Board member, I would:

- Ensure members achieve personal development through mentorship and support at every level of SEA, turning teaching into scholarship.
- Have SEA lead in the development of national educational initiatives through association with other institutions, organizations and specialties with common goals.
- Create meetings and products for teaching every level of learner, which can benefit the membership here and overseas.

Thank you for your support and the chance to give back to others.

**Director**

*Michael C. Lewis, M.D.*

I graduated from medical school in 1983 at University College London. My anesthesia training took place in the U.K., Israel and U.S. Since graduating from my U.S. residency in 1995, I have served as Chief of Service at the Miami VA, Director of Medical Student Teaching, and now Program Director, Professor, Department of Anesthesiology, Miller School of Medicine, University of Miami.

Several years ago, I was a Fulbright Scholar. During my sabbatical, I developed a Web-based program designed to teach anesthesia residents about geriatric issues. I have been active in the Society, serving on a number of committees and have chaired the Spring Meeting in Miami. I am the Immediate Past President of the Florida Society of Anesthesiologists.

In the ASA, I serve as Chair of the Committee on Geriatrics and am a member on the Resident and Medical Student Affairs and Ethics committees. I am an ASA Political Action Committee Board member and have for many years been a member of the House of Delegates. Recently, I have been appointed Assistant Dean of International Graduate Medical Education and Vice Chair for Residency Affairs at the Miller School, University of Miami.

Over the last few years, I have served the Board and several of its committees. In the future, I would like to continue to serve and possibly advance to a leadership position in order to advance the cause of the academic practice of anesthesia.
I have been a member of SEA since 2005 and have witnessed a period of unprecedented growth in our Society’s influence on anesthesia education. I am seeking a position on the Board to contribute to this growth and to continue to foster the spirit of mentoring and collaboration that I have been privileged to be a part of over these five years. This spirit of mentoring and collaboration are hallmarks of our organization and are a significant part of the reason our Society functions at such a high academic and administrative level.

As Chair of the Milestones Task Force, I have been privileged to see firsthand the strength of the SEA, which is our membership. Since beginning the task force last fall, the number of people interested in serving has been inspiring. And not just interested in serving, but getting right to work and sustaining a very high level of academic quality and commitment to the project. It is that kind of character that our Society attracts, inspires, develops and puts to work, and that is exactly what has happened. The milestones project is huge in its scope, and we are fostering a spirit of collaboration both within the SEA and between every stakeholder academic group within our specialty, including SAAA, our RRC, the ABA, every subspecialty society, ACGME, and others. This is simply modeling what I have always seen within the SEA, and I am honored to chair this initiative that is such a huge part of the mission of the SEA.

I attended my first SEA Workshop on Teaching (WOT) in 2005. What a fantastic introduction to the SEA that was! My passion for teaching was fueled like it never had been before, and I returned to the workshop twice as an attendee and have now been faculty for the past three years. From my experiences in the SEA and WOT, I have received four University of Kentucky (UK) Abraham Flexner Master Educator Awards and am Chair of our Anesthesia Education Committee as well as Co-Director of our Center for Simulation at UK. The WOT faculty especially inspired and mentored me to get more involved nationally in anesthesiology education, and the SEA has been the perfect venue for this involvement, once again modeling within our Society our tradition of mentoring that I wish to pass on.

I also chaired the Chief Resident Program at this year’s Spring Meeting after becoming faculty for the program last year. The faculty spent a whole day with the future of our specialty and our Society, helping them get ready for the next year and beyond, an honor and privilege I do not take lightly.

The SEA is a strong, vibrant, growing organization and my goal as a Board member would be to promote our spirit of development as we increase our impact on anesthesiology education. It would be an honor and pleasure to serve on the SEA Board of Directors.
SEA Spring Meeting, June 3-5, 2011
San Antonio, Texas

The SEA Spring Meeting in 2011 will be held at the Hyatt Regency San Antonio in beautiful San Antonio, Texas. The meeting will be sponsored by Baylor College of Medicine in Houston and Co-Chaired by Sally Raty, M.D. and David Young M.D. The 4-diamond rated hotel is perfectly located on the famous San Antonio River Walk and directly adjacent to the historic Alamo.

The theme of the meeting is “Using Milestones to Achieve Excellence.” Several sessions in a variety of formats will be devoted to discussing the implications of milestones for medical students, residents and faculty. Many workshops on other topics will also be available, and most of these sessions will be facilitated by fellow SEA members.

We have planned several exciting plenary sessions on topics such as: understanding the ACGME milestone project, applying leadership skills to everyday life, building an educator’s portfolio, developing an effective workshop, and publishing in the educational literature. A panel will discuss the benefits for the educator of obtaining additional advanced degrees in business, health care administration, education and law.

We are also introducing problem-based learning discussions (PBLDs) to the SEA meetings for the first time. The topics will focus on nonclinical, education-relevant issues that are both common and challenging to educators in anesthesiology.

Sally R. Raty, M.D.  David A. Young, M.D.

We welcome all SEA members to submit for consideration their ideas for both workshops and PBLDs.

We are very excited about this upcoming meeting and hope you will share this enthusiasm with us!

Sincerely,
Sally R. Raty, M.D.
David A. Young, M.D.