



# SLEEPY TIMES

VOLUME 18, ISSUE 5 MAY 2024

## MESSAGE FROM THE CHAIRMAN: BOOSTING RESEARCH ONE STUDY AT A TIME!

**-SCOTT T. REEVES, MD, MBA**



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In this month's edition of Sleepy Times, I wanted to take an opportunity to highlight our significant basic, clinical and translational science research efforts. I want to thank Drs. Sylvia Wilson, Ken Catchpole, Mike Scofield and Haley Nitchie for comprising the summary that follows.

The Department of Anesthesia continues to experience growth in multiple research domains including the science of addiction and relapse, pain management, and patient safety. Highlights include:

- The Human Factors research team participated in grant funding of ~ \$4.5 million.
- The Basic Science research team has ten active grants focusing on establishing 2-photon imaging of brain cell activity in opioid craving live animals' models.
- Twenty-seven clinical faculty serve as Principal Investigators across all subspecialty teams including one translation grant involving faculty from both basic and clinical science.

While the Departmental support of our research efforts has increased, we also attribute the continued success of our research teams to leadership and mentoring provided by Drs. Jerry Reves and Scott Reeves, regular Departmental research meetings, statistical and administrative support, and the dedication, curiosity, and insight of our individual investigators.

### Research Leadership:

- Jerry G. Reves, MD: Ultimate research leader and enthusiast
- Sylvia H. Wilson, MD: Vice Chair for Research, J. G. Reves Endowed Chair for Clinical Research
- Ken Catchpole, PhD: S.C. SmartState Endowed Chair in Clinical Practice and Human Factors
- Michael D. Scofield, PhD: J. G. Reves Endowed Chair for Basic Science Research
- Haley Nitchie, MHA: Research Program Coordinator (organizer of all things for clinical research)

### Statistical Support:

- Beth Wolf, PhD: Professor, Public Health Sciences
- Laney Wilson, PhD: Assistant Professor, Public Health Sciences

### Administrative Support:

- Jenny Ann Smoak
- Trey Hiott
- Mary Chiappardi

## OPENING STATEMENT CONTINUED

### Human Factors Group Update

- Ken Catchpole, PhD: S.C. SmartState Endowed Chair in Clinical Practice and Human Factors
- Connor Lusk, PhD
- Gabe Segarra, BS
- Julia Meilan, BS

In 2023, the Human Factors Team completed major funding focused on the safety of robotic surgery and delivery of anesthesia medications. Highlights of the robotics work included training approximately 100 OR staff across three sites in teamwork, communication, docking and room turnover procedures. An 82-page guide was developed to disseminate techniques to design, develop and deploy gamified training. In addition, the team worked on evaluating the delivery of anesthesia care utilizing a systems models of anesthesia delivery that lead to the identification of more than 100 potential interventions, with innovations in drug labelling, incident reporting, and OR design.

New funded work for 2024 includes a major grant on retained foreign objects, collaborations on neonatal resuscitation, pediatric intubations, speech communication in the operating room, and diagnostic safety. Our ongoing work in sterile processing, which includes systems modeling, data analytics and prediction, teamwork and coordination, and data visualization continues to support the ongoing work in SPD. Through these grants, the team is collaborating with Children's Hospital of Philadelphia, Boston Children's Hospital, Clemson University, Johns Hopkins, Corewell Health, and Ohio State. Though our publication rate in 2023 – 13 papers – has been a little lower than in previous years, this includes a letter in the New England Journal, and a collaboration in Nature Medicine. The team gave 12 presentations at a variety of national and international conferences.

### Current Funding:

A Human Factors Approach to Mitigating Speech Communication Interference in the Operating Room 1R01 HS29508-01A1 (Sutkin)	AHRQ 2024-2028	\$102,309
Smart checklist implementation for pediatric tracheal intubations in the ICU- multicentre study: SMART PICU 1R01HS029188-01A1 (Nishisaki)	AHRQ 2024-2028	\$101,580
Retained Foreign Objects Reduction and Mitigation Patient Safety Learning Laboratory (ReFORM)* R18 HS029637-01 (Catchpole)	AHRQ, 2023-2027	\$1,994,865
Re-engineering Patient and Family Communication to Improve Diagnostic Safety Resilience R18 HS029346-01 (Bonafide / Walsh)	AHRQ 2023 -2024	\$244,584
Applying Human Factors Science and Design Thinking to Mitigate Threats to Neonates Undergoing Resuscitation and Stabilization R18 HS029123-01(Halamek)	AHRQ 2023-2026	\$248,528
Systems Optimization for Advances in Sterile Processing (SOAP)* 1R01HS027912-01A1 (Catchpole/Rayo)	AHRQ, 2021-2026	\$1,995,995

## OPENING STATEMENT CONTINUED

### Basic Science Group Update with a focus on addiction neuroscience

- Michael Scofield, PhD: J. G. Reves Endowed Chair for Basic Science Research
- Adam Denton, PhD
- Jackie Paniccia, PhD
- Rachel Clarke, PhD
- Anze Testen, PhD
- Annaka Westphal, BS
- Jayda Carroll-Deaton, BS
- Ayteria Crow, BS

In 2023, Dr. Scofield and his team developed several custom python pipelines for analysis of the activity of astrocytes, a type of non-neuronal cell, in rodents self-administering heroin. Astrocytes are fundamental mediators of the neuronal function linked to memory and research done here at MUSC has established that they are critical mediators of reward and drug memory, formation. Importantly, the Scofield lab is one of the only labs in the country capable of analyzing and tracking the activity of these cells in-vivo. The labs most recent advances in data science and signal processing include newly written and implemented digital recording and analysis pipelines that allow the comparison of in vivo imaging data obtained from studies focused on capturing either neuronal or astrocytic activity within animals performing a drug seeking task. We expect that manipulation of astrocytes will provide novel therapeutic approaches for the treatment of relapse vulnerability and will continue with neuronal and astrocyte analyses and manipulation in 2024 to better understand the multicellular neural mechanisms of opioid craving and relapse.

Drs. Sylvia Wilson and Michael Scofield were awarded a translational team science grant (TTS) from MUSC to foster collaborative efforts with a focus on translational relevance. In the preclinical component, the Scofield lab is performing a single cell gene expression analysis of astrocytes within critical brain circuits following exposure to opioids, evaluating the astrocyte modulator and antioxidant drug N-Acetylcysteine as a therapeutic in rodents prior to heroin seeking trials. In the clinical component, Dr. Wilson will evaluate the viability of the same glial modulator and antioxidant drug N-Acetylcysteine as an adjunct treatment in a population of patients undergoing hysterectomy surgery, with the expected outcome being shorter hospital length of stay and suppression of post-operative opioid intake. Given the promising results observed in our recently published pilot study, evaluating a population of patients undergoing spinal surgery, we eagerly anticipate the outcome of our study.

### Current Funding:

Nitroergic Interneurons and Cue-induced Cocaine Seeking R01DA054154 (Scofield, PI)	NIDA, 2021-2026	\$1,886,250
Center for Opioid and Cocaine Addiction P50DA0463734 (Scofield, Animal Core PI)	NIDA, 2019-2024	\$1,958,577
Adolescent Alcohol and Prefrontal Cortical Function in the Adult U01AA019967 (Scofield, Co-PI)	NIAAA, 2020-2025	\$376,250
Thalamostriatal Circuitry in Opioid Seeking R01DA054271 (Scofield, Co-PI)	NIDA, 2021 -2026	\$1,698,750
Long non-coding enhancer RNA controls stress-induced changes in reward-related behaviors R01MH129521 (Scofield, Co-PI)	NIDA 2023-2027	\$1,887,500
Vagus nerve stimulation modulates synaptic plasticity in the rat prefrontal cortex during the extinction of drug-seeking. R01DA055008 (Scofield, Co-PI)	NIDA, 2021-2026	\$ 1,776,675

## OPENING STATEMENT CONTINUED

### Clinical Research

- Clinical research office
    - Haley Nitchie, MHA: Research Program Coordinator (organizer of all things for clinical research)
    - Dylan Crawford, BS: Research Assistant
    - Lexi Schorg, BS: Research Assistant
    - Jolie Neilson, BS: Research Assistant
    - Clinical Principal Investigators
  - 27 Principal Investigators, and many others who are active in research
    - N. Barnett, R. Bowen, C. Brewbaker, A. Bunnell, G. Davis, A. Fisher, G. Fisher, L. Francis, R. George, G. Guldán, D. Gutman, K. Hatter, C. Heine, G. Hillegass, E. Johnson, N. McCoy, R. Patel, C. Pillow, L. Roberts, J. Sirianni, M. Tanious, P. Tarwade, G. Whitener, R. Wilson, S. Wilson, C. Wolla.
  - Medical Students working on research in our department 2023-2024
    - 4 FLEX Students 2023
    - 8 Longitudinal Research Elective Students 2023-2024
    - 8 Flex Students 2024
    - 2 Volunteers in 2023
  - Presentations at National Meetings in 2023-2024 (*Faculty with oral presentations, workshops presentations, or meeting awards noted*)
    - American Society of Anesthesiologists (ASA): C. Clark, R. George, T. Kelly, T. Pecha, P. Tarwade, R. Wilson, S. Wilson
    - American Society for Regional Anesthesia and Pain Medicine (ASRA): S. Wilson
    - Society for Obstetric Anesthesia and Perinatology (SOAP)
    - Society for Pediatric Anesthesia (SPA): N. McCoy
    - International Anesthesia Research Society (IARS): C. Clark
    - Society for Ambulatory Anesthesia: E. Johnson
- Dr. Ellen Johnson was winner of the Dr. Rebecca S. Twersky Research Award. The award is intended to recognize the research of a junior attending who is the first author of the highest rated research or quality improvement abstract at the SAMBA annual meeting.

Newsroom: Research from the Departments of Anesthesia has been highlighted in the news this year (MUSC and beyond)

- Haley Nitchie will be featured in an upcoming Staff Spotlight for the MUSC Office of Clinical Research.
- Other faculty noted in the media include R. George, N. McCoy, M. Scofield, C. Wolla, R. Wilson, S. Wilson
- ♦ <https://research.musc.edu/stories/news/2024/01/12/nac-for-surgical-pain#>
- ♦ <https://www.cnn.com/2023/07/25/health/weight-loss-diabetes-drugs-gastroparesis/index.html>
- ♦ <https://www.uab.edu/medicine/anesthesiology/news-events/departments-news/alumnus-spotlight-nicole-mccoy-m-d>
- ♦ <https://www.counton2.com/news/2-your-health/2yh-musc-doctor-revolutionizes-bone-marrow-transplantation/>
- ♦ <https://web.musc.edu/innovation/innovatively-speaking>
- ♦ <https://www.eurekalert.org/news-releases/1031201>
- ♦ <https://research.musc.edu/stories/news/2023/08/07/musc-studies-effects-of-popular-diabetes-and-weight-loss-drugs-on-surgical-patients>

## OPENING STATEMENT CONTINUED

What else can you expect in 2024?

- We have added an additional research symposium for a total of three a year during grand rounds. Our goals with the research symposium are to both present new projects to the Department for improved communication and to highlight completed projects that many in the department have had the opportunity in which to participate.
- We also continue to brainstorm for new ways to help identify more grant opportunities for our clinical researchers.
  - Translational Team Science Award
  - Funding for NAC clinical trial
  - PCORI grant opportunities.
  - FAER grant opportunities.
- We would love to hear additional innovative ideas to improve research in the Department of Anesthesia and Perioperative Medicine.

We thank everyone in the Department for working as a team to support research. If you have questions or would like to become more involved, please reach out to any of our research leaders or join us at our next research meeting. It takes all of us to continue to improve the care of our patients, one study at a time.

## Publications: JANUARY 1, 2023 – FEB 14, 2024

Anesthesia Research Intranet Horseshoe Webpage:

<https://horseshoe.musc.edu/university/colleges/com/departments/anes/anesthesia-research>

## RESEARCH CORNER

Cureus

Open Access Case  
Report

DOI: 10.7759/cureus.47629

### Quadratus Lumborum Blocks for Pediatric Bone Marrow Harvesting: A Case Report

Nicole C. McCoy<sup>1</sup>, Brittany P. DePriest<sup>2</sup>

Review began 10/16/2023  
Review ended 10/20/2023  
Published 10/25/2023

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Nicole McCoy, MD

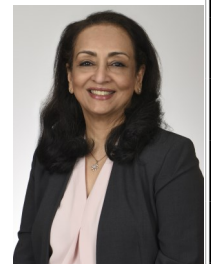
The Joint Commission Journal on Quality and Patient Safety 2023; 000:1–10

### Investigating Racial and Ethnic Disparities in Maternal Care at the System Level Using Patient Safety Incident Reports

Myrte C. Alfred, PhD; Dulaney Wilson, PhD; Elise DeForest; Sam Lawton; Amarthia Gore, MD; Jeffrey T. Howard, PhD; Christine Morton, PhD; Latha Hebbar, MD; Chris Goodier, MD



Dulaney Wilson,  
PhD



Latha Hebbar,  
MD



**ANESTHESIA TECH WEEK—MARCH 26-APRIL 1**

Last month we celebrated our anesthesia technicians for Anesthesia Technician Week (March 26 – April 1), taking the time to recognize them for their work and their role as part of the practice. Our anesthesia technicians cover all areas and provide strategic support to all providers. From peds, to cardiac, to trauma you will always find our anesthesia technicians with helpful hands, knowledgeable minds, and possessing a “can do” spirit. With supply chain issues, staffing issues, and increasing case numbers, our technicians continue to demonstrate how they are an integral part of our system. Thanks to the members of each practice group and their leaders.

We would like to give a warm welcome to all our new hires and returning care team members. We are excited to have you join our team and look forward to working with each of you. Kudos to the UH anesthesia technicians who assisted with the Logiqiup conversion in the early Fall, as well as the Aysis anesthesia machine installation last Spring. Kudos to the ART anesthesia technicians who assisted with the Logiqiup conversion this past month for the 4th floor workroom.

From pizza parties to Bundt Cakes and Moe’s Southwest lunch, we wanted to be sure to celebrate our techs big because they deserve the recognition.



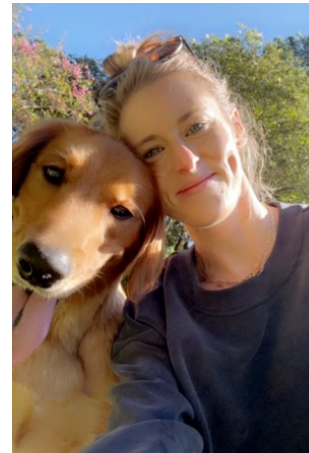
**WELCOME OUR NEW CRNAS!**

Hannah Sayles, CRNA

My name is Hannah Sayles (now Gidado). I am originally from Asheville, N.C. where I grew up on a small family farm. I graduated from MUSC with my Doctorate in Nurse Anesthesia Practice in 2021. I took a job with Trident Anesthesia Group and enjoyed my time there for over 2.5 years. In December 2023 I started working at MUSC Main. I recently got married on Valentine's Day of this year to my best friend Dylan. For fun I like to try new restaurants, spend time with my golden doodle named Lucca, and find new hobbies. I'm currently taking a beginners pottery class! Happy to be here!

My name is Ashley. I grew up in middle Georgia and moved to Charleston in 2019, from Atlanta, for Nurse Anesthesia school. I graduated from MUSC's program in 2022. I loved Charleston so much I decided to stay! The past two years I have been working with Trident Anesthesia Group.

When I'm not working I enjoy running half marathons, taking Jax (my golden retriever) to the beach, traveling, and spending time with my family and friends. I can't wait to get to know and work with you all!



Ashley Stevenson, CRNA



Amy Micek, CRNA

I'm Amy, I attended Rush University for anesthesia school and graduated in 2020. I grew up in Indiana and moved from Chicago to Charleston a few years ago with my husband, Dan, and miniature poodle, Vinny. Prior to joining MUSC, I worked at Trident and Summerville for 3 years.

In my free time I enjoy spending time with my family and friends, working out, going to the beach and traveling. Looking forward to getting to know you all!

My name is Alyssa Farber and I am from Marietta, GA. I moved to Charleston in 2019 for graduate school and have been enjoying this town ever since. You can find me (and my dog) at the beach, Shem Creek, or any of the county parks!



Alyssa Farber, CRNA



**CRNA TRAINING BY SONJA MCCASLIN, CRNA**

After a code at Rutledge Tower, the CRNA team decided that they wanted to do some training with the nursing staff. As you know, RT is a close-knit group, and nursing was excited to have this time. There is a large group of new nurses there who have minimal to no experience with this. Kathy So wards and Ben Sokol led the meeting. While the initial plan was to have a scenario and do a mock code, the meeting turned into more of a Q&A for the nurses about some of the things we ask for during an emergency and why it is important. Kathy and Ben did an excellent job explaining things to the group and were asked to do more! Thanks to both of them for being proactive and a great resource!





## SONJA MCCASLIN, CRNA COMPLETES MUSC'S ADVANCED LEADERSHIP PROGRAM

Sonja McCaslin, CRNA completed MUSC's Advanced Leadership Program! Along with many other things that the class brought, she also submitted a poster for Innovation Week with four others. The poster topic was "Enhancing Patient Safety through a Pathway to Respiratory Illness Testing for MUSC Care Team Members."



**Poster Title: Enhancing Patient Safety Through a Pathway to Respiratory Illness Testing for MUSC Care Team Members**  
**Submitters: Scott Curry, Kim Dove, Sonja McCaslin, Leslie Shields and Ben Smith**  
**Subcategory: Care Team member Wellness and Burnout**



### PROBLEM / OPPORTUNITY

- No access to respiratory illness testing at work for MUSC care team members
- No testing access results in
  - Working sick
  - Hospital-acquired infections (COVID-19, flu, RSV)
  - Absenteeism & burnout of CTMs who are responsible for coverage during staffing issues

### IDEA SUMMARY

- Pilot project** to provide readily accessible testing of respiratory infections to MUSC CTMs at Shawn Jenkins Children's Hospital
- Existing point of care molecular testing equipment will be re-deployed to a central location (peds ER)
- Testing will be 24/7 and voluntary and integrated to existing contact tracing
- Results in 15 minutes for 3 most lethal viruses

### VALUE PROPOSITION / BENEFITS

- Developing convenient, rapid, centralized access to viral testing for pediatric care team members:
  - More sensitive than home Ag tests
  - Tests for more than COVID-19 are important but not available (RSV often lethal in NICU/PICU)
  - Current state not sustainable (cost of home Ag tests not subsidized or free since May 2023)
- Improves safety for children & reduces threats to staffing
- Reduces "presenteeism" by establishing reason to leave work and avoid working sick with peers / patients
- Enhances MUSC brand at SJCH and fosters healthier communities.

### IMPLEMENTATION PLAN



### SUSTAINABILITY PLAN



- Cost of testing will be charged to CTM's insurer, when insured
- Integrates with MUSC's existing Contact Tracing team in Quality Department
- Preparedness for day when home COVID testing is no longer subsidized
- Scalable to other parts of MUSC if successful

### METRICS / RESULTS



Figure: Number of RSV (red), influenza (green) and COVID-19 (purple) tests positive in SJCH inpatients more than 120 hours (5 days) after admission (SickerDoor) by quarter

- Number of inpatient infections acquired at SJCH inpatient units (>5 days from admission) for RSV, influenza, & COVID
- Staff sick leave days taken per 1000 employee-days in clinical-facing personnel

### BUDGET / FINANCIALS

- ID Now Abbott Kit Promo: \$12,000
- ID Now Instrument: \$0 w/ purchase of promo kit  
Total, Annual Cost \$12,000
- Cost mitigation
  - Cost of HAC
  - Additional Absenteeism
  - Reduction in accrued EIH

### LESSONS LEARNED

- Gets MUSC Health closer to zero patient harm if rapid testing and home isolation for influenza, COVID, and RSV results in reduced hospital-acquired infections in patients
- Anticipated savings in workforce wellness
  - Fewer overtime shifts
  - Fewer travel RNs
  - Reduced critical staffing in pediatric inpatient units
- Reduced need for year-round masking as only mitigation measure

### ADDITIONAL INFORMATION

DIVISION: Charleston

Department: Advanced Leadership Program 2024 Cohort

Leader: MUSC Leadership Institute

## TIME TO ADJUST OUR “MONITORING, MASKING AND RETURN TO WORK”

### MUSC Health Symptom-Monitoring & Guidance for Returning to Work After Respiratory Infection

MUSC Health continues to monitor local, state, and national recommendations, policies, and best practices to ensure a safe working environment for both our patients and our care team members. Based on updates from the Centers for Disease Control and Prevention, our return-to-work guidance after confirmed and/or suspected COVID-19 infection has changed.

This guidance applies to all MUSC Health care team members, providers, contractors, clinical university staff, clinical faculty, and students on a clinical rotation or other learning experience in any MUSC Health healthcare facility. These guidelines apply regardless of your vaccination status, booster status, natural immunity status, and/or if you have been tested/diagnosed with a respiratory infection. Any questions regarding how to apply this guidance should be directed to your local infection prevention department or MUSC Contact Tracing.

**Self-monitoring** – All healthcare personnel are required to self-monitor daily for signs/symptoms of respiratory infection, including fever, cough, and shortness of breath.

**Protect those around you** – Healthcare personnel who develop signs/symptoms of a respiratory infection should stay home. If you develop symptoms while at work, put on a surgical mask and notify your supervisor. Healthcare personnel should leave work once their clinical assignments are covered. Students should notify their program director or faculty advisor.

**Take care of yourself!** – Most respiratory infections are caused by viruses and in healthy individuals resolve in 1-2 weeks. If your symptoms do not improve and/or you have an underlying health condition, talk to your healthcare provider.

**Plan your return to work** – If 24 hours have passed with no fever (and not on fever-reducing medications) and your symptoms are mild and improving, you are allowed to return to work. After you return to work, you should continue to mask until all your respiratory symptoms (cough, runny nose, nasal congestion, etc.) resolve. You are not required to be tested or re-tested for a respiratory infection to return to work.

**Contact tracing** – MUSC utilizes a multifaceted, evidence-based approach to occupational health and infection prevention with contact tracing to prevent and respond to potential infectious disease outbreaks that may affect healthcare personnel and patients. As such, all persons affiliated with MUSC Health for work or school are expected to collaborate with MUSC Contact Tracing via self-report after testing positive for COVID-19, Influenza, or RSV. Effective contact tracing is time-sensitive and should be completed as soon as possible after testing positive. Use the following link to self-report a positive test:

[MUSC Contact Tracing Report](#)

## NOVEMBER 5TH ELECTIONS VIA ABSENTEE BALLOTING; CHARLESTON COUNTY

This year is a presential election. I would encourage us all to vote. Despite our desire to get to the polls, it is often difficult to make it due to our clinical schedules. I reached out to the Charleston County Election Committee about requesting an absentee ballot. Ms. Dakota Blitch's response is as follows. Please research out now to be included in the absentee process to assure your ability to participate.

Due to a decision made by the South Carolina State Election Commission last year, absentee application requests can no longer be done electronically (online, by fax, or email). To request an absentee ballot application a voter must now do so by phone, mail, or in-person.

Please give us a call at 843-744-8683 to request an absentee ballot or mail your request to PO Box 71419 North Charleston SC 29415. In a mailed request, please include the specific election(s) you are requesting. When requesting an absentee ballot for a primary, party preference must be stated. Let us know if you have any questions.



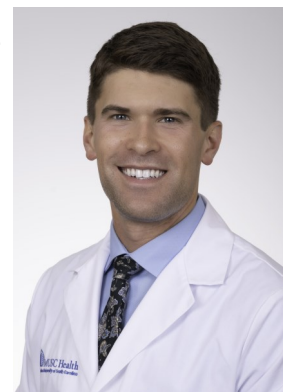
**Dakota Blitch | Absentee Services**  
Charleston County Board of Voter Registration and Elections  
p: 843.744.VOTE  
w: [chsvotes.gov](http://chsvotes.gov)





## ASRA BY PETER SCHNAAK, MD

Faculty members and fellows within our RAPS division attended the American Society of Regional Anesthesiology (ASRA) conference in San Diego last month. The theme for the 2024 national meeting was “Precise, Practical, Personalized, Patient-Centered”, and there was a variety of content offerings designed to provide our regionalists with the most up to date knowledge and information regarding how to personalize our care to the patient, clinical context, and practice setting. Furthermore, members of our division represented MUSC and helped contribute to the conference’s educational offerings. Dr. Brenden Moore presented a poster. Dr. Renuka George served as a breakout session moderator at the DEI special interest group meeting and represented our fellowship as the program director. Dr. Sylvia Wilson presented two talks, moderated a poster session, and attended two meetings (including the education special interest group, of which she is the chair). Even more attendees from MUSC mingled with colleagues throughout the country and helped spread the word about our awesome fellowship and active division. The weather was beautiful and the learning was aplenty!



**ASRA** PAIN MEDICINE

[Register](#) [Abstracts](#) [Program](#) [Faculty](#) [Location-Hotel](#) [Exhibition](#) [CME-CPD](#)

49th Annual Regional Anesthesiology  
and Acute Pain Medicine Meeting  
March 21-23, 2024 | San Diego, California  
#ASRASPRING24



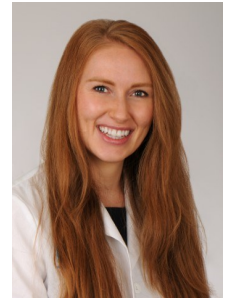


## SPA BY MARIAH TANIOUS, MD

The Pediatric Anesthesia division was thrilled to have a strong showing at the annual [SPA-AAP meeting](#) this month in Anaheim, CA.

Multiple posters were presented including:

- [Custom Knowledge GPT for Pediatric Anesthesia](#) led by **Dr. Gabrielle Fisher**
- [Impact of Social Determinants of Health on Same Day Case Cancellations in Pediatric Patients](#) led by **Dr. Mariah Tanious**
- [Replant, Restore, Revive: Anesthetic Management in Pediatric Limb Replantation](#) led by **Drs. Sarah Stender and Nicole McCoy**



**Dr. Nicole McCoy** was featured as a speaker for a lecture dedicated to the value of women in leadership, highlighting mentorship and sponsorship. Her lecture was entitled “Empowering Excellence: Harnessing Women’s Leadership to Transform the Workplace.” This lecture was part of a joint panel between the [DEI](#) and [Wellbeing](#) committees and [WELI](#).

**Dr. Natalie Barnett** was faculty for two workshops: “Pediatric Regional Anesthesia: Incorporate Plan “A to Z” Blocks Into Daily Practice” and “MOCA Simulation @ SPA.” For the simulation workshop, participants, both local and international, attended for hands-on simulation experience. Didactic lectures about teamwork and crisis management started off the day with 4 separate, hour-long simulation scenarios with incorporated debrief. For the regional workshop, participants rotated through 8 stations for hands on instruction with common and not so common ultrasound techniques and anatomy. There was even a cryoablation station! Each participant was able to tailor the session to his/her practice so that they could master the anatomy and strategy of their goal blocks.

**Drs. Nicole McCoy and Mariah Tanious** attended the Women’s Empowerment and Leadership Initiative ([WELI](#)) workshop dinner. The topic was “Sharing Achievements and Incorporating STARS into Written and Oral Presentations.” If you are interested in learning more about the helpful concept of STARS, check out this article: [STARS](#).

**Dr. Gabrielle Fisher** participated on the SPA Biomedical Informatics Committee and attended the Communications Committee for [CCAS](#) for which she is the website editor. Additionally, Dr. Fisher was nominated by the division to participate in the Rising Stars Reception. The Rising Stars Reception is a long-standing tradition at SPA, offering networking opportunities among honorees as well as with SPA leadership. It was a well-attended event full of collegiality and collaboration.

The conference provided an excellent platform for networking with old friends and new. We even got to spend time with [Dr. Emily Nasser](#), who will be joining us in September upon completion of her fellowship at Emory.

### Meeting highlights:

The conference showcased a variety of amazing lectures. The opening panel discussed autism and neurodiversity and how to optimize the perioperative environment for these special patients. Children’s Nebraska uses a parental questionnaire that ultimately lives in EPIC to assess children who are neurodivergent prior to their day of surgery. They have found it helpful in perioperative planning and have found high patient and parent satisfaction.

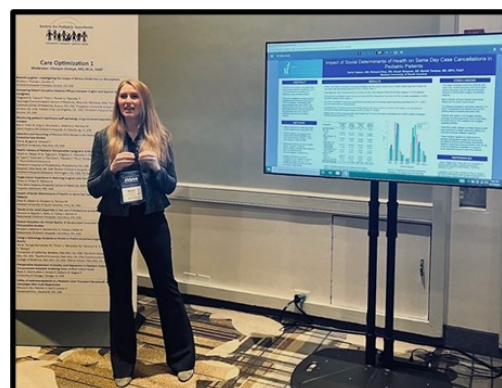
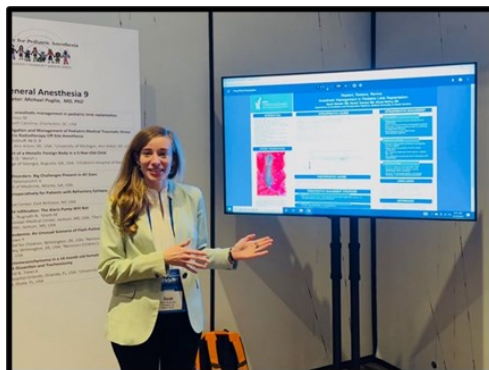
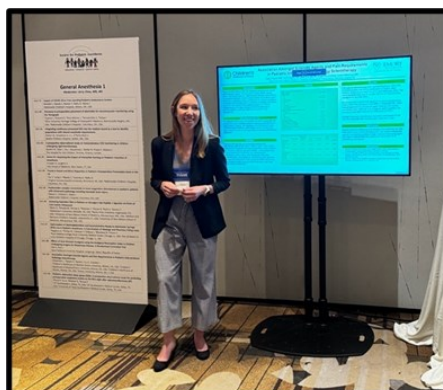
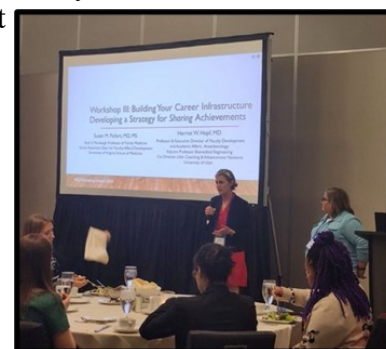
## SPA BY MARIAH TANIOUS, MD

Another panel hosted the SPA's International Scholar, Dr. Andrey Vysotskyi, a pediatric anesthesiologist from Ukraine who discussed his experience providing anesthesia to children throughout the war. It was a powerful lecture from an incredible physician who has clearly suffered but has also prevailed. He spoke eloquently about key factors in how to manage war trauma including the high usage of regional anesthesia, whole blood administration and differences between physical and psychological trauma of patients and colleagues. It puts our daily challenges at work, which pale in comparison, into perspective.



The AAP Advocacy Session was devoted to [human trafficking](#). It was an excellent lecture from a child abuse pediatrician from Wisconsin. It was eye-opening to learn about trafficking especially as it relates to children's mental health and what minors could resort to meet their survival needs. As a former pediatrician (NM), I found this lecture profound, thinking that we may encounter these children at some point in the perioperative setting. My takeaway (NM) was that if we suspect abuse, neglect or possibly trafficking, you should involve the child abuse pediatrics team at your institution to guide the investigation.

Finally, a panel regarding childhood obesity discussed bariatric surgery for pediatric patients as well as anesthetic considerations in patients with obesity. The [TEEN-LABS study](#) has shown benefit to early intervention with bariatric surgery in patients over 13 years old with certain BMIs. The AAP has adopted a [policy statement](#) which includes the support for bariatric surgical interventions (gastric bypass or sleeve gastrectomy). Their outcomes have also shown a significant remission of diseases such as hypertension and diabetes. The group is about to publish their 10-year outcomes data which shows sustainable weight maintenance in their cohort.



**GRAND ROUNDS- MAY 2024****“Pediatric Abdominal Organ Transplantation: A Team Approach ”****Julianne Mendoza, MD, Associate Professor****May 7, 2024****Dept. of Anesthesiology, Perioperative and Pain Medicine  
Stanford Medicine****“Faculty Meeting ”****Scott Reeves, MD, Professor****May 14, 2024****Dept. of Anesthesia & Perioperative Medicine  
Medical University of South Carolina****“Research Symposium ”****Sylvia Wilson, MD, Professor****Haley Nitchie, MHA, Research Manager****May 21, 2024****Dept. of Anesthesia & Perioperative Medicine  
Medical University of South Carolina****“M&M ”****Taylor Ouellette, DO, CA-2****Jake Jarecke, MD, CA-2****May 28, 2024****Dept. of Anesthesia & Perioperative Medicine  
Medical University of South Carolina**



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## I HUNG THE MOON

Please don't forget to nominate your co-workers for going 'Beyond the Call of Duty.' I Hung The Moon slips are available at the 3rd floor front desk and may

[CHECK OUT OUR WEBSITE](#)

### Future Events/Lectures

#### Intern Lecture Series

##### CA 1 Lecture Series

5/1—Obstetric Anesthesia PBL—Abhi Madamangalam

5/15—Fellowship Fair—All Fellowship Directors, OB Faculty

5/22—Pediatric Anesthesia PBL—Jen Smith

##### CA 2/3 Lecture Series

Per Rotations



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Graduation  
Friday, June 21, 2024  
Founders Hall

Holiday Party  
Saturday, December 7, 2024  
Carolina Yacht Club

### [ONE MUSC Strategic Plan](#)

#### We Would Love to Hear From You!

If you have ideas or would like to contribute to *Sleepy Times*, the deadline for the June edition will be May 18, 2024.