



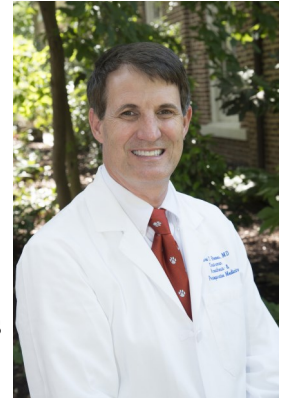
SLEEPY TIMES

VOLUME 18, ISSUE 3 MARCH 2024



MESSAGE FROM THE CHAIRMAN: PRESSING AGAINST THE WIND AND TIDE

-SCOTT T. REEVES, MD, MBA



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Recently, I was listening to a sermon by the pastor of East Cooper Baptist Church, Buster Brown. During his sermon he emphasized frequently that individuals have to press against the wind and tide. I thought his message resonated within my life and the world in which we find ourselves. As I started to craft this month's opening statement, I asked ChatGPT for inspiration. What follows is a summation of both my thoughts and artificial intelligence.

Pressing against the wind and tide is a metaphorical expression capturing the essence of perseverance and determination in the face of challenges. Much like a sailor navigating against strong currents or a runner facing a headwind, it symbolizes the relentless pursuit of goals despite encountering obstacles and resistance.

In a broader sense, pressing against the wind and tide speaks to the human spirit's ability to triumph over challenges. It celebrates the resilience that allows individuals to persevere even when faced with seemingly insurmountable odds. This concept has been a recurring theme in literature and art reflecting the universal human experience of confronting difficulties and emerging stronger on the other side.

Pressing against the wind and tide encourages us to embrace challenges as opportunities for growth and transformation. The challenge of professional development comes readily to mind. Trying to balance individual and family demands with the desire to investigate an intellectual problem, obtain an advanced degree or learn a new skill can be overwhelming at times. I am sure this is true for most of us. In my life journey, facing resistance frequently accelerates personal development, resilience, and the achievement of significant goals.

Whether striving for personal growth, professional success, or social change, we often find ourselves going against prevailing norms. I would encourage us all to lean into the wind and tide. Even though the journey may be challenging, the personal rewards will be worth it.

WELCOME TO THE DEPARTMENT



Chelsea Vitu, MD

Chelsea Vitu comes to Charleston with her husband Kristian, daughter Charlotte, and dog Hanna. She did her residency in Rochester, NY and her pediatric fellowship in Pittsburgh, Pennsylvania. She enjoys reading (there were A LOT of books to move), trying to outsmart the elements when it comes to gardening, and the great outdoors.



Maryam Siddiqui, MD

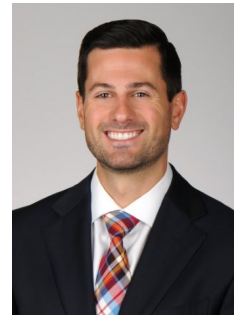
Maryam Siddiqui, MD is a pediatric anesthesiologist who is delighted to join the MUSC Dept of Anesthesiology. Born and raised in New York City, she completed residency at Saint Barnabas Medical Center and did her fellowship at Cincinnati Children's Hospital Medical Center. She enjoys baking and is excited to check out the food scene in Charleston.

HOW TO GIVE EFFECTIVE FEEDBACK—JOEL SIRIANNI, MD

One Big Thing: Craft Growth Through Feedback

Constructive and valuable feedback can provide growth opportunities for your learners in many ways. As instructors, we hold the key to unlocking our learners' potential through thoughtful feedback.

As you start to think about ways to improve and implement feedback, here are a few strategies for consideration:



1. **Be Specific and Timely:** Offer feedback that is specific to the task or assignment and provide it in a timely manner. This allows learners to connect the feedback to their work and make immediate improvements.
2. **Focus on the Process, Not Just the Product:** Acknowledge the effort and strategies learners used to arrive at their work, not just the final outcome. Highlight areas of growth and encourage continued progress.
3. **Use the Sandwich Method:** Sandwich constructive criticism with positive feedback to create a balanced and supportive approach. Start with praise, offer constructive feedback, and end with encouragement and support.
4. **Encourage Self-Reflection:** Empower learners to reflect on their own work by asking guiding questions such as "What went well?" and "What could be improved?" Encourage them to set goals for future growth based on their reflections.
5. **Offer Opportunities for Revision:** Provide opportunities for learners to revise their work based on feedback. This allows them to learn from mistakes, deepen their understanding, and take ownership of their learning journey.

NATIONAL CERTIFIED REGISTERED NURSE ANESTHETIST WEEK: JAN. 23-28, 2024

I hope we enjoyed, in our own ways, a week dedicated to recognizing the value CRNAs bring to the health system. I am proud to represent our practices and profession. Our representation stretches in a variety of ways. We have practice members who are deeply involved in professional development, practice specialization, and education. Members of our group represent us on the state, national, and international level. With all this, it is the approach taken every day with every patient that matters most. That is where the proof lies in our national statement, we are trusted anesthesia experts.

Dennis McKenna, DNAP, CRNA , Director MUHA Anesthesia



NATIONAL ANESTHESIOLOGISTS WEEK: JANUARY 28-FEBRUARY 3, 2024

Physician
**Anesthesiologists
Week**
JANUARY 28-FEBRUARY 3, 2024



**Your Guardians
Before, During,
and After Surgery**



American Society of
Anesthesiologists

Made for
This Moment



SAFETY HERO: ALSTON HAMILTON, CRNA**Safely Speaking™
MUSC Health Daily Safety Tip****Safety Hero: Alston Hamilton, CRNA**

Alston Hamilton, a CRNA in Charleston, exhibited quick thinking and decisive action during a procedure involving a patient under general anesthesia for bilateral nephrostomy tube placement in the interventional radiology (IR) setting. Just before the procedure, Alston observed subtle changes in the cardiac leads that raised concerns about myocardial ischemia. Recognizing the urgency, Alston brought the issue to the attending's attention and made the immediate decision to roll the patient from prone to supine. This allowed for prompt evaluation, and a 12-lead EKG confirmed the presence of myocardial ischemia. In response to this critical finding, the patient was swiftly transferred to the cardiac cath lab, highlighting Alston's crucial role in identifying and addressing potential cardiac complications during the procedure. His swift action and attention to detail contributed to the timely response and appropriate intervention to ensure the patient's well-being.

Would you like to nominate a Safety Star or Safety Hero? Click here: [Safety Hero Nomination](#) to submit your nomination to our Patient Safety team.

👍 Like | Comment

200 YEAR HISTORY OF MUSC'S COLLEGE OF MEDICINE BY JERRY REVES MD

On February 5, 2024, Dr. Jerry Reeves completed the manuscript on the history of the 10th oldest medical school in the country, our alma mater, MUSC's College of Medicine. Jenny Reeves assisted as the editor and type corrector. The book was given to the publisher for final processing. I know I cannot wait to have the opportunity to learn more of our history. The book will be available for the 200th anniversary in November.



RESEARCH CORNER

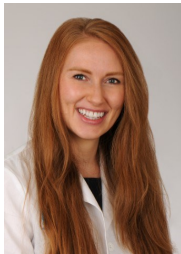
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Relationship Between Palliative Care Consults and Outcomes of Pediatric Surgical Patients During Terminal Admissions

Mariah K. Tanious, MD, MPH, FAAP,¹ Natalie Barnett, MD,¹ Cora Bisbee, BS,² Nicole C. McCoy, MD,¹
Bethany J. Wolf, PhD,^{1,4} and Joshua Arenth, MD, FAAP³



Mariah Tanious, MD



Natalie Barnett, MD



Nicole McCoy, MD

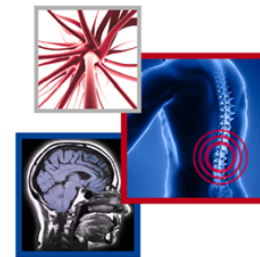


Bethany Wolf, PhD

Short Communication

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Pain Management



The impact of intraoperative N-acetylcysteine on opioid consumption following spine surgery: a randomized pilot trial

Sylvia H Wilson*,¹ Joel M Sirianni¹, Kathryn H Bridges¹, Bethany J Wolf², Isabella E
Valente³ & Michael D Scofield¹

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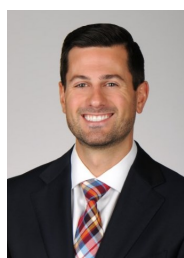
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Sylvia Wilson, MD



Joel Sirianni, MD



Katie Bridges, PhD



Bethany Wolf, PhD



Michael Scofield, PhD

RESEARCH CORNER

ORIGINAL ARTICLE

Prevalence, Management, and Outcomes Related to Preoperative Medical Orders for Life Sustaining Treatment (MOLST) in an Adult Surgical Population

Preoperative MOLST and Code Status Discussions

Mariah Tanious, MD, MPH,✉ Charlotta Lindvall, MD, PhD,†‡
Zara Cooper, MD, MSc,‡§ Natalie Tukan, MD,|| Stephanie Peters, MD,||
Jocelyn Streid, MD, MPP,|| Kara Fields, MS,|| and Angela Bader, MD, MPH§||*



Mariah Tanious, MD



RESEARCH ARTICLE



NPAS4 in the medial prefrontal cortex mediates chronic social defeat stress-induced anhedonia-like behavior and reductions in excitatory synapses

Brandon W Hughes¹, Benjamin M Siemsen^{1,2†}, Evgeny Tsvetkov¹, Stefano Berto¹, Jaswinder Kumar^{3,4}, Rebecca G Cornbrooks¹, Rose Marie Akiki¹, Jennifer Y Cho¹, Jordan S Carter¹, Kirsten K Snyder¹, Ahlem Assali¹, Michael D Scofield^{1,2}, Christopher W Cowan^{1,3,4*}, Makoto Taniguchi^{1,3*}

¹Department of Neuroscience, Medical University of South Carolina, Charleston, United States; ²Department of Anesthesiology, Medical University of South Carolina, Charleston, United States; ³Department of Psychiatry, Harvard Medical School, Belmont, United States; ⁴Neuroscience Graduate Program, University of Texas Southwestern Medical Center, Dallas, United States



Michael Scofield, PhD

CULTURAL AWARENESS CORNER: CELEBRATING BLACK HISTORY MONTH 2024; AN INTERVIEW WITH MERON SELASSIE, MD AND UCHENNA UMEH, MD



Dr. Umeh: Can you tell us your name, where you work and your current roles at your home institution, and other societies or organizations?

Dr. Selassie: My name is Meron Selassie, and I'm an assistant professor in the department of anesthesia at the Medical University of South Carolina (MUSC) in Charleston, SC. I serve as the chronic pain fellowship director at MUSC and serve on the Board of Directors for the Pain Society of the Carolinas.

Dr. Umeh: How do you celebrate Black History Month?

Dr. Selassie: Black History Month is a reminder to celebrate the achievements and impact black people have had in American life. I honor black history by supporting black-owned businesses in my city of Charleston. I make it a mission to educate myself on the lived experiences of black people in America. This year I plan to watch one of my favorite film makers, Ava Duvernay's, movie entitled Origin and tour the newly opened International African American Museum in Charleston.

Dr. Umeh: Why do you think Black History Month is important to recognize?

Dr. Selassie: I'm a firm believer that black history is American history and should be acknowledged throughout the year. Black civil rights icons have long served as the moral compass for this nation, reminding America to live up to its founding principles that all people are entitled to life, liberty, and the pursuit of happiness. Though we have a lot of work ahead to achieve justice and opportunity for all, I am horrified to think where we'd be as a nation without Harriet Tubman, Martin Luther King, Jr., John Lewis, and countless other American heroes. My favorite history teacher would often say "the past is prologue." We cannot contextualize modern day events or address current and future societal challenges without truthfully acknowledging our past. Black History Month affords us this time of reflection.

Dr. Umeh: Who has served as an inspiration in your life? Who inspired you to be a leader and why?

Dr. Selassie: I was born in Ethiopia and immigrated to the United States at the age of four. My father has had the biggest impact on my life and career because of his unyielding belief in my potential even when I doubted myself. He pushed me to take chances and move out of my comfort zone. Most importantly, he led by his example as he climbed the ranks of academia despite the barriers in his path. In my career, Brooke Chidgey, Gabe Hillegass, and countless other friends and mentors have inspired me along this journey.

Dr. Umeh: What motivated you to step up and become a leader within your institution?

Dr. Selassie: As an introvert, I tend to shy away from the spotlight. I identify an unmet need and brainstorm ways to help. My colleagues and I had long talked about the scarcity of subspecialty chronic pain care in our state and the need to grow the pool of fellowship trained pain providers for the people of South Carolina. This catapulted our effort to establish the only multidisciplinary ACGME-accredited fellowship in our state. I was asked to head the fellowship and accepted the invitation.

Dr. Umeh: What factors impact one's ability to lead others?

Dr. Selassie: I believe becoming a good leader is a skill that can be acquired through study and practice. Some of the leaders who inspire me are deeply empathetic people who are active listeners and great communicators. They are accountable, resilient, and adaptable to meet the demands of the situation.

CULTURAL AWARENESS CORNER: CELEBRATING BLACK HISTORY MONTH 2024; AN INTERVIEW WITH MERON SELASSIE, MD AND UCHENNA UMEH, MD

Dr. Umeh: What challenges have you faced so far as a physician and anesthesiologist? How did you overcome them?

Dr. Selassie: Like many physician moms, I have struggled to juggle both roles without feeling guilt or exhaustion or both. I am still actively working on this one but lean heavily on my tribe for support. I'm learning to give myself grace during my stumbles.

I have struggled with imposter syndrome at different points in my career which is doubly compounded for underrepresented in medicine females. Listening to Beyoncé and positive affirmations help me through it but it still rears its head from time to time.

Dr. Umeh: Many institutions have made great strides in diversity and inclusion over the years, why is diversity and inclusion important in medicine and specifically in pain medicine?

Dr. Selassie: Numerous studies in varied health care settings demonstrate undertreatment of pain for women and racial/ethnic minorities that have deep historical roots. We have known about this healthcare disparity for decades but have not made meaningful progress to remedy this. Diversity and inclusion efforts are important tools to redress these harms. Diverse teams are more productive, innovative, engaged, and tend to produce better results than teams lacking diversity. Inclusion in healthcare settings improves workplace culture leading to greater employee retention, engagement, and performance. Diversity and inclusion provide a means to deliver higher quality pain care to the patients we treat to optimize their quality of life and functioning.

Dr. Umeh: What career accomplishment makes you most proud?

Dr. Selassie: I am most proud of the mentoring relationships I've fostered in my career and witnessing the success of my mentees over the years. Other career highlights are creation of a diversity, equity, and inclusion committee in the department of anesthesia and a multidisciplinary pain medicine fellowship at MUSC.

Dr. Umeh: What advice would you give to young physicians as they navigate their careers?

Dr. Selassie:

1. Say yes to things. Don't let perfectionism, self-doubt, imposter syndrome, or anything else stop you from accepting opportunities that can open doors.
2. Seek out different types of mentors to meet different needs. Though it is great to find URM faculty mentors, many institutions simply don't have the numbers to support this. Find mentors and sponsors who believe in you and will support your career development.
3. Frequently remind yourself about the "why" motivating your career aspirations. Keeping your inspirations/motivations at the forefront can help you persist throughout the journey.

Dr. Umeh: Is there anything else you would like to note?

Dr. Selassie: Thank you to Dr. Renuka George and Dr. Umeh for this invitation.

Meron Selassie, MD, is a board-certified anesthesiologist and interventional pain physician. She is a strong advocate of compassionate and comprehensive pain management to return patients to a higher level of function and to improve their quality of life. Dr. Selassie received her medical degree from the University of Pennsylvania in Philadelphia, PA, and continued her education in the university's four-year residency in the department of anesthesiology and critical care. Following eight years in Philadelphia, she completed a chronic pain management fellowship at the University of North Carolina in Chapel Hill, NC. She worked in private practice for a year before returning to practice medicine in her home state of South Carolina. She is the program director for the pain medicine fellowship at MUSC.

Dr. Selassie serves on the board of directors of the Pain Society of the Carolinas and is a member of several regional and national anesthesiology and pain societies. She has published research articles in peer reviewed medical journals along with several book chapters and presentations on pain medicine topics. She is interested in diversity and inclusion in graduate medical education, neuromodulation and ablative therapies.

CULTURAL AWARENESS CORNER: RAMADAN MARCH 11- APRIL 9, 2024

I want to continue to thank Dr. Michael Lewis for providing a nice writeup regarding different religious beliefs of members of his as well as our department. This month he discusses the significance of Ramadan.

This month marks the start of Ramadan, the ninth month in the Islamic lunar calendar. Many members of our team will be observing Ramadan, one of the most sacred times for Muslims worldwide, characterized by fasting, worship, service, communal gatherings, and spiritual development.

Fasting during Ramadan entails abstaining from food and drink, including water, from before the first light of dawn until sunset. This act of fasting serves as a private act of worship that fosters nearness to God, spiritual discipline, and empathy for the less fortunate. It is also one of the Five Pillars of Islam.

The fast is broken at sundown with a meal called iftar, which is often shared among family and friends. Believers gather after nightfall in the mosque for special communal prayers called tarawih.

Muslims are required to fast on each of the 29 to 30 days of Ramadan. If unable to fast, charity or fasting days outside Ramadan may suffice. A pre-dawn meal is common and considered highly meritorious.

Before consuming a full meal at iftar, it is customary to eat dates as the first taste of food after fasting. Dates have been a staple of Middle Eastern culture and cuisine for a long time, as they are indigenous to the Middle East and Northern Africa. Muslims break their fast with dates before heading to iftar each night, traditionally consuming seven pieces of the sweet fruit, sometimes accompanied by milk or yogurt.

In addition to the five daily prayers, gathering for additional communal prayers called Tarawih (night prayer) after the night prayer each night of the month is an important optional practice. On the evening of the 27th day of Ramadan, Muslims observe Laylat al-Qadr, sometimes referred to as the Night of Power, believed to be the night when Prophet Muhammad first received the Qur'an.

At the end of Ramadan, Eid al-Fitr, a feast celebrating the breaking of the fast, takes place. However, there is significant cultural diversity in preferred Ramadan cuisines, with some cultures emphasizing large and hearty pre-dawn meals and light fast-breaking meals, while others have light pre-dawn meals and larger fast-breaking meals.

While there is unity and diversity in the manner and degree of observance, each individual experiences Ramadan's challenges differently. Muslims may be excused from fasting temporarily or permanently due to health issues or other reasons. The last ten nights of Ramadan are especially important, and Muslims may increase their nightly prayers and devotion.

Michael C. Lewis MD, FASA

Department of Anesthesiology, Pain Management, & Perioperative Medicine

Joseph L. Ponka Chair, Henry Ford Health System



GRAND ROUNDS- MARCH 2024



“Examining Disparities in Regional Anesthesiology and Pain Medicine ”

Uchenna Umeh, MD, Clinical Assistant Professor

March 5, 2024

**Department of Anesthesiology
Weill Cornell Medicine—Hospital for Special Surgery**

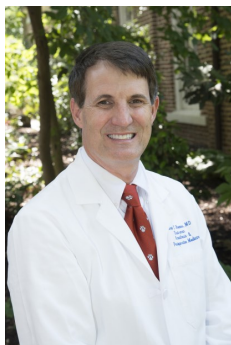


“Research Symposium”

**Sylvia Wilson, MD, Professor
Haley Nitchie, MHA. Program Manager**

March 12, 2024

**Dept. of Anesthesia & Perioperative Medicine
Medical University of South Carolina**



“Faculty Meeting”

Scott Reeves, MD, Professor

March 19, 2024

**Dept. of Anesthesia & Perioperative Medicine
Medical University of South Carolina**



“M&M ”

**Madison Geating, MD, CA-1
Daniel Couper, MD, CA-1
Taylor Ouellette, DO, CA-2**

March 26, 2024

**Dept. of Anesthesia & Perioperative
Medicine
Medical University of South Carolina**

DEPARTMENT OF ANESTHESIA AND PERIOPERATIVE MEDICINE

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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

3/6—Anesthesia for Cardiovascular Surgery—Maxie Phillips

3/13—Obstetric Anesthesia PBL—Abhi Madamangalam

3/20—Pediatric Anesthesia PBL—Jen Smith

3/27—Anesthesia Review/Jeopardy—Travis Pecha

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 April edition will be March 18, 2024.