

As we head for another wonderful summer in Pittsburgh, we are pleased to present you with great news that has occurred in the Department during the past half-year.

As usual, production of this newsletter depends on volunteer efforts by the Newsletter Committee members. This time we are particularly grateful for input from Drs. Winter, Pinsky, Kochanek, and Buffington. Joanne Woodson has continued her outstanding work as newsletter secretary.

However, in December, our publications editor, Lisa Goetz, was to obtain the position of Editor of *The Lawyer's Journal*, the official publication of the Allegheny County Bar Association. The loss was profoundly felt, especially in the production of this newsletter. Thanks to great collaboration by all faculty and staff reported on in this spring edition, it was still possible to provide a timely publication. We have just been blessed with the hiring of Patti Boyle, who succeeds Lisa Goetz as publications editor. She immediately assumed Lisa's former responsibilities. We greatly appreciate Patti's expertise in finalizing this issue, and we welcome her earnestly to our group.

We wish you all the best for the upcoming summer months, which are always so great in Pittsburgh. We hope you will enjoy reading our spring edition of our Department's newsletter.

Tuus,
Ake Grenvik, MD, Editor

Human Simulation Center is Theater of the Mind — and Hands

Hours of boredom, followed by moments of terror" can sometimes describe an evolving medical crisis.

Whether in the OR, ICU, ER, or out in the street, proper management of a critical incident involves life-and-death decisions and prompt action.

If the situation is mishandled, there may not be a second chance for the patient. That is, unless the patient is a real dummy.

The University of Pittsburgh Human Simulation Center uses such a "dummy" to allow residents and students to get hands-on experience before they find themselves in a critical incident with a living patient. The Simulation Center's director, **John Schaefer, MD**, believes that crisis management in critical care and anesthesiology involves skills that can be studied, taught, practiced, and improved.

The School of Medicine purchased a full-scale human simulator in 1995, but the expense of the full-size model, and its lack of portability, limit its distribution and use. In addition, the large simulator does not provide proper clinical feedback for difficult airway management. This is a concern because problems in airway management can be

life threatening and are, according to Dr. Schaefer, the number one source of litigation in anesthesiology and critical care practice. So he and co-developer Rene Gonzalez, MD, designed a smaller simulator especially suitable for training in airway management. Medical Plastics Laboratory, Inc., of Texas is marketing their creation. Dr. Schaefer believes it will revolutionize the way difficult airway management is mastered.

"We all know of people who can ace a test, or memorize an

algorithm, but in practice, they can't tie their own shoes," Dr. Schaefer smiles. He has developed a teaching method for use in the Simulator Center that divides essential skills into cognitive, psychomotor, and affective domains. Each of these areas is further broken down into specific and practical objectives. Simply knowing an algorithm is not enough; it must be enacted with the requisite manual finesse, and all of this must be accomplished in an atmosphere unclouded by emotional issues, personality conflict, or





John Schaefer

ego defense. As Dr. Schaefer tells students, "What matters is 'What is right?' not 'Who is right?'"

Trainees at the Center must be willing to suspend their disbelief long enough to forget that their "patient" is a mannequin, to allow the "make believe" to make them into believers. It isn't difficult in the Simulator Center, where the "patient" generates EKG output and breath sounds (both normal and abnormal), exhales carbon dioxide, and produces heart tones and both radial and carotid pulse. Computerized controls allow simulation of tongue edema, laryngospasm, and other airway obstructions, as well as various cardiac arrhythmias.

Participants are presented with any of a number of scenarios that simulate a case with an unexpected event and a potential adverse outcome. The script and stage directions are impromptu, and – just as in life – the outcome is unknown. Assistants are cast in support roles, but are given only a general outline of how to behave, supplemented, as needed, by coaching from the control center via wireless headsets. Maintaining strict confidentiality, the entire drama is captured on videotape so that participants can see, discuss, and evaluate their performance.

The Simulator Center's theater can be staged and equipped as an operating suite, an emergency department bay, or a bedside in an ICU. The Center offers several courses, tailored to meet the specific needs of different professionals.

Dr. Schaefer conducts other courses in addition to "Difficult Airway Training." The goal of the "Anesthesia Basic Skills" program is to give anesthesiology residents practice in safely managing uncomplicated general anesthesia in a simulated OR. An "Anesthesia Crisis Management" course is designed to instill and develop teamwork, leadership, and communication skills.

Dr. Schaefer is not the only faculty member to use the Simulation Center. Drs. **Paul Rogers** and **Marie Baldisseri** have used the facility in the Critical Care Medicine fellowship program, to teach crisis management in cases of difficult airway, chest pain with hypotension, and cardiac arrhythmia. The curriculum stresses communication and preparedness. It emphasizes anticipating possible adverse events ahead of time, and it gives participants the opportunity to refine their reactions in a crisis.

For several years now, simulator training has been an integral part of the clerkship in



anesthesiology at the University of Pittsburgh School of Medicine. Beginning next academic year, as part of their clerkship in adult inpatient medicine, third-year medical students will complete a course on initial recognition and management of acute respiratory distress and hemodynamic instability. According to Dr. Rogers, the entire focus of the course will be in the Simulator Center. Also beginning this summer, simulation sessions will replace certain didactic lessons for CCM fellows.

Dr. **Rita Patel** directs a course in Obstetric and Gynecologic Critical Event Management at the Center. This course covers management of critical scenarios unique to obstetrics – such as amniotic fluid embolus and severe preeclampsia – as well as events possible in gynecological surgery, such as

postoperative acute myocardial infarction. Courses in critical event management of the pregnant patient are provided for all levels of trainees, including residents in both anesthesiology and OB/GYN. Specialty care unit nurses (from the ICU and labor and delivery) participate in the sessions with residents and fellows. An educational grant to the Department of Anesthesiology from the Department of Obstetrics and Gynecology supports the training of fellows in Maternal/Fetal Medicine in the Simulation Center. Simulator training in the management of critical events in OB/GYN has been used to provide Continuing Medical Education for attending physicians in obstetrical anesthesia at a variety of national meetings, and will be expanded to include obstetricians and gynecologists in community hospital settings.

Rita Patel



Nor is the Simulator Center for MDs only. **John O'Donnell**, CRNA, director of the Nurse Anesthesia Program at Pitt's School of Nursing collaborates with Dr. Schaefer in a three-pronged approach to teaching student nurse anesthetists through simulation. First, there is a basic OR training module for the beginner. The second stage gives nurse anesthesia students a chance to practice teamwork, leadership skills, and crisis management with anesthesiology residents in a simulated emergent situation.

"This is the only program of its type in the United States, where nurse anesthesia students and residents train together as colleagues," says Mr. O'Donnell. "It focuses on enhancing not only the individual's performance, but also performance within the overall OR team."

The third part is an intense, day-long program in which students perform a case (on videotape), undergo debriefing, receive a short lecture on the pathophysiology or pharmacology behind the event, and then move on to the next scenario.

Not all airway emergencies happen with an anesthesiologist and a CRNA in attendance. Emergency medical personnel

often must deal with uncontrolled situations in the field, where they don't always have the resources available in the hospital. They must be adept at assessing the situation and confident in their ability to use the necessary equipment.

To meet their needs, Center staff developed a program and offered simulation sessions to City of Pittsburgh paramedics. Over a three-month period, all 180 City medics received training in difficult airway management. The medics were first given a difficult airway scenario, which "they managed the best they could," according to Dr. Ronald Roth, associate medical director of the city's emergency medical services. "We conducted the simulator training and then gave them a second scenario. Almost all of the medics did subjectively better after the training. And all felt more comfortable with the use of the Combitube for difficult intubations."

"This is teaching at a pretty sophisticated level," Dr. Schaefer says. "It gives trainees hands-on experience, and allows us to do things that we can't provide with just a lecture."

Some things are better learned from a dummy, after all.

Dr. Rita Patel Chairs Educational Advisory Council

Rita Patel, MD, director of medical student education in the Department of Anesthesiology/CCM, has been named Chair of the Department's Educational Advisory Council.

Dr. Patel has a record of interest and accomplishment in medical education dating back to her own days in residency and fellowship. In 1984, she developed and initiated a much-admired and frequently imitated program of patient-controlled anesthesia. This novel and creative activity attracted an interview by CNN and other interested lay audiences. She has led educational efforts directed toward medical students, residents and fellows, student nurse-anesthetists, and medical technology students. Among many other endeavors, Rita created and standardized a neonatal resuscitation course for physicians and other delivery room professionals. These accomplishments were recognized in presentations at national meetings.

Dr. Patel has taken an active and leading role in training programs utilizing the anesthesia simulator. (See previous article.) Her sessions, some focusing on obstetrical anesthesia, have become extremely popular. Dr. Patel recently accepted the position of director of

medical student education for our department. As such, she is responsible for programs involving every year of the medical students' education. She and her colleagues manage the following courses for the University of Pittsburgh School of Medicine:

- FIRST YEAR - Summer Preceptorship Program
- SECOND YEAR - Clinical Procedures Course (for all second-year students)
- THIRD YEAR - Required Clerkship in Anesthesiology
- FOURTH YEAR - Senior electives. For Pitt and qualified visiting students in their final year, electives include: anesthesiology, critical care medicine, pain evaluation and treatment, research electives in anesthesiology and CCM, and subspecialties in anesthesiology

Dr. Patel believes that, "It is a privilege to be able to teach another, and so to influence lives, particularly in medicine, where education has an impact upon more than one life."

Dr. Patel's appointment to the chairmanship of the Educational Advisory Council is a well-deserved honor and will place her in a position to influence, innovate, and improve on the full scope of the Department's teaching activities.



Victor Scott

Pittsburgh-Palermo Axis Established

When it opens, the Istituto Mediterraneo per i Trapianti e Terapie ad Alta Specializzazione (IsMeTT-Istituto) in the Sicilian city of Palermo, Italy, will be the first freestanding hospital of its kind in Europe. It will be the result of an idea conceived in 1996 to establish a center dedicated to all types of solid organ transplantation and advanced specialty medical services. The hospital now being built is a joint venture between the University of Pittsburgh Medical Center Health System and two public hospitals in Palermo: Civico and Cervello hospitals. Dr. Ignazio Marino of the Starzl Transplant Institute, who oversees the project, established a relationship with the Cervello Hospital, home of one of the largest hepatology clinics in the Mediterranean basin. Professor Luigi Pagliaro, world-renowned for his contributions to the field of hepatology, heads this clinic. **Victor Scott, MD**, of our department, serves as the chief anesthesiologist.

Renovation of a 23-bed inpatient unit in the thoracic surgical building at the Civico Hospital will serve as a temporary location for start-up

of clinical activity. This facility will have 16 non-acute beds, four ICU beds, three post-anesthesia recovery beds, and two operating rooms.

Outpatient activities will be housed on site at both Civico and Cervello hospitals. The Istituto's permanent facility will eventually be located entirely at the Civico site. It will have 75 inpatient beds and all of the support services required for transplantation procedures.

Personnel for the new facility will include Sicilians and Americans. The UPMC Health System is committed to providing all physician personnel as well as senior administrative staff, to develop a management style that is adaptable to business administration in Sicily. In addition, the UPMC Health System will provide nursing staff and other health professionals essential to the development and training of a team of clinicians prepared to confront all facets of solid organ transplantation.

The Department of Anesthesiology/CCM has made a commitment to provide staff who have expertise in Critical Care Medicine and Anesthesiology. The medical management of the operating rooms will also come under the Department's direction. This



Invited participants in the recent dedication of IsMeTT included the Hon. Thomas Foglietta, US Ambassador to Italy (second from left), and Palermo Mayor Leoluca Orlando (far right).

will allow an OR management style that is exported from the US, but adaptable to the Sicilian model.

"A unique feature is the ability to participate in all areas of clinical administration, in order to create this new facility and develop innovative management strategies," says Dr. Scott.

Additionally, along with the Information Technology group, Dr. Scott has developed an anesthesiology electronic medical record for the OR, using the UPMC Health System EMTEK database system.

Pediatric Anesthesia Fellowship Accredited

Peter Davis, MD, director of the new Pediatric Anesthesia Fellowship at Children's Hospital, proudly announces the accreditation of this program by the Accreditation Council for Graduate Medical Education. The Pediatric Anesthesia Fellowship program will be surveyed the next time its parent Anesthesia Residency program is visited by the Anesthesia Residency Review Committee. The new training program has already accepted fellows for the academic year beginning July 1, 1999. Congratulations to Dr. Davis for his successful efforts in starting the first program of this sort in the nation.



Navy Grant Supports Suspended Animation Research

At the Safar Center for Resuscitation Research, Drs. **Peter Safar** and **Samuel Tisherman** have been investigating novel ways of resuscitating victims of prolonged hemorrhagic shock and exsanguination. This work is sponsored by the Office of Naval Research and includes four subcontractors with extensive expertise in brain resuscitation research. A meeting was held in San Francisco on Jan. 28, 1999 with the subcontractors and several consultants to develop concrete recommendations for the coming year.

For the exsanguinating trauma victim, the overall goal of the project is to develop a method to induce suspended animation – preservation of the entire organism – to enable transport and resuscitative surgery during pulselessness. The simplest method for initiating preservation includes hypothermia induced by a rapid aortic flush of a cold solution and beneficial drugs. This concept is currently being tested in a clinically relevant dog model of prolonged exsanguination cardiac arrest focusing on neurologic outcome. So far, cerebral cooling, even by only 2° or 3°C, seems to have a much

greater impact on outcome than single-drug therapies.

Discussion topics at the January meeting included drug therapies targeting cellular energy failure, ion fluxes, protease activation, apoptosis, free radicals, and mitochondrial injury. Although many of these drugs have been beneficial in brain slice preparations or focal ischemia models, very few have undergone sufficient testing in reliable global ischemia models to recommend trials in the dog model.

Clinical feasibility and appropriate patient selection were also discussed at the meeting. Participants made plans for more frequent and open discussion among investigators by making use of the Internet.

Department Welcomes New Editor

The Department of Anesthesiology and Critical Care Medicine has a new publications editor. Patti Boyle is now on board to help to produce the departmental newsletter, the annual report, and any collateral materials, such as capabilities brochures, fact sheets, etc. She will also maintain our Internet page and assist Department faculty and staff with the preparation of books and manuscripts for publication.



Patti Boyle

Patti comes to us directly from the UPMC Department of Pathology, where she enjoyed several years working as a microbiology technologist. For three years prior, she held a position as a medical writer and communications specialist in the UPMC Department of Public Relations. Some of you may recall a periodical entitled *University Medicine*, which Public Relations circulated among 30,000 health care professionals in the tri-state area in the early '90s. Patti was the editor and chief writer for that publication, whose primary purpose was to highlight the clinical programs and research protocols that have contributed to the UPMC's reputation for excellence in academic medicine and specialty care.

Patti is a native and lifelong resident of the Pittsburgh area, and an old hand around the Scaife/Presby scene. She "worked her way through college" as a technician for the PUH section of (what was then Children's Hospital's) "Central Hematology" laboratories. She holds a Bachelor of Science degree in Medical Technology from Indiana University of Pennsylvania. Patti has worked as a registered medical technologist (ASCP) in a general laboratory at Forbes Health System, in the microbiology lab at Jefferson Hospital, and

in the hematology labs at West Penn Hospital and Presby.

After spending a few years raising three children, Patti undertook graduate studies in Communications in the Master of Arts program at Duquesne University. Those studies led directly to a position as the writer/editor for Mercy Hospital and the Pittsburgh Mercy Health System.

"But my calling is medical and science writing," says Patti. "So when a medical writing position opened at UPMC, I reached for the opportunity. I held that job for some time beyond the expiration of *University Medicine*, but then I wanted to return to science. For me, that meant 'back to the lab.'"

"Now, as this department's publications and science editor, I believe that I've found not only an alliance between my two loves, medical science and writing, but, I hope, a friendship that brings out the best of both."

Patti's campus location is in the Department's office suite on the 13th floor of Scaife Hall, room A1314. She is available Monday through Friday from 8:30 am to 5 pm. You can reach Patti by phone at 648-9619, or by e-mail at boylepa@smtp.anes.upmc.edu.

Unsung Heroes

Bob Petrick Heads Information Group

When Bob Petrick started working in the Department of Anesthesiology/CCM in September 1982, he was a student and part-time assistant to researcher Bob Boston, PhD. "We weren't even using IBM or Apple computers at that time," he recalls.

Bob is currently the Department's information services director, a position that has evolved over the past 16½ years, along with the development of computers and technology.

"Back then, we were collecting EEG signals from study subjects into an Intel 80-30 computer – a very, very early predecessor of today's Intel Pentium processors," says Bob. "Dr. Boston, the other team members, and I would actually write the software used to collect the data. After acquiring the data, we would upload it via 1200 baud modem (today's modems are about 50 times faster) to the Pitt mainframe, where data analysis could be performed."

In August 1985, a full-time position became available, and Bob came on board as the Department's "slide-maker," responsible for creating all 35-mm slides and graphics



Bob Petrick

required for lectures and publications. "The original intention was for my job to be strictly limited to graphs and slide creation. At the time, the Department had – at most – six personal computers and four printers. But my responsibilities quickly expanded into supporting the needs of all the Department's computers and users – training, answering questions, and installing and maintaining all of the hardware and software."

The Department now uses more than 250 computer systems, plus 3 Novell and 2 Web servers, and more than 40 printers, spanning the entire Health System from UPMC-Oakland to UPMC Beaver Valley to UPMC Lee Regional in Johnstown. As the Department's use of computers and information technology has expanded over the past 14 years, so has the demand for support services. The Information Technology (IT) group,

which Bob oversees, includes professionals to provide those services. The group includes: John Lutz, web/database administrator; Brad Stezoski, media services coordinator; Mark Williams, desktop services analyst; and Jim Clougherty, network analyst. The IT group supports the Department in all phases of the use of computers and technology to carry out its administrative, educational, clinical, and research objectives.

Bob has both a BS and MS in Information Science from the University of Pittsburgh, and has also taken advanced classes in Novell Netware. He recently began study for the Microsoft Certified Systems Engineer (MCSE) exams. Bob's current challenges include: assisting in the integration of the Department's administrative software to meet UPP standards; upgrading the IT infrastructure to be prepared for the rollout of the latest operating system and applications (Microsoft Windows 2000 and Office 2000); and (of course) "Year 2000" (Y2K) assessments and upgrades of all of the Department's electronic equipment.

Regarding Y2K, when asked if it will be the cataclysm often predicted in the media, Bob feels that: "It will not be a

problem for most businesses. The biggest concern may be power outages, especially in areas where the power grid is very old and maintained by smaller companies that do not have the resources to test all of their equipment on the grid. Having said that, I would be surprised if there are many power outages, especially of any length, in the local area. Y2K assessments and fixes have been under way for months in advance here, so Y2K will certainly pose no great problem here at the University or at UPMC."

Liza Paparella Manages Compensation

Liza Paparella started with Anesthesiology/CCM in April 1981, shortly after the Department's incorporation. In her early years, she recalls the chairman's administrative offices being located in a trailer situated on the roof of Scaife Hall. This helped develop her sense of humor, especially on blustery days when the staff thought the trailer would lift off and perhaps touch down in the Land of Oz.

Although the Department the included only 70 faculty members, it was a bustling productive time for Liza, who at first had to wear four

Paul Rogers



different hats: accounting, compensation, benefits, and purchasing. As the Department continually grew, she began to specialize in benefits and compensation.

Liza received her degree in Business Administration from Robert Morris College. Several years and two children later, she pursued her interests further by attending post-graduate certificate programs, in Employee Benefits at Duquesne University, and in Payroll Administration at Robert Morris College.

Her background helped her to bring a new level of benefits service to the corporation. Liza was able to manage complete in-house administration for the corporation's pension and cafeteria plans, as well as payroll and all related tax filings. She is a long-time member of, and currently serves as an officer for, the Western PA Chapter of the American Payroll Association.

Recently, orchestrating the faculty transition into the University of Pittsburgh Physicians, while simulta-



Liza Paparella

neously winding down the business affairs of the previous corporate benefit plans, has proved to be quite an exhausting task for Liza. She credits all of her coworkers for continually providing an outstanding team effort and countless hours toward the success of the UPP transition project.

Aside from her career, Liza is active in a variety of community efforts, from pounding nails in a playground construction project to fundraising for mentally and physically challenged adults. Residing in Robinson Township, she enjoys family sports, especially alpine skiing, with her husband Gary and daughters Natalie and Meagan.

Refocused MCCTP moves forward

Paul Rogers, MD, has succeeded David Powner, MD, as director of the Multidisciplinary Critical Care Training Program (MCCTP), effective December of last year. Soon after being appointed by the dean, Dr. Rogers met with faculty to get their input on ways to strengthen the program in the areas of educational curriculum, clinical response, and the research role of critical care fellows. He also met with MCCTP fellows themselves to learn how the program could better meet their educational needs.

With the assistance of education coordinator **Jim Rieker, PhD**, Dr. Rogers is initiating changes in the MCCTP beginning this coming academic year.

"Based on faculty input and fellows' needs assessment, we have reorganized the curriculum for 1999-2000," Dr. Rogers says. "A core curriculum will be presented in the form of didactic lectures from July through September. Beginning in September, the usual daily noon lecture series will be replaced by a series of weekly workshops, with a variety of speakers on selected topics. The new curriculum will be more interactive. There will be greater use of the Simulator Center, more hands-on practice of resuscitation skills. We are moving toward a more problem-based type of learning."

According to Dr. Rogers, there will also be some change in the research component of the MCCTP. Under the oversight of **John Kellum, MD**, first-year fellows will have some exposure to research, and second-year fellows will have a structured year and support to ensure the success of their project.

Dr. Rogers is also working with Drs. **Rita Patel** and **Charles Buffington** to consolidate educational resources on the sixth floor of Scaife Hall. The goal of this consolidation is to produce an education center that meets the needs of the anesthesia residency training program, the medical students program, and the critical care medicine fellowship training program.



Dr. Susan Firestone named Compliance Officer

The increasing burden and ever-changing nature of rules and regulations are nowhere more evident than within health care practice. Recognizing the importance of compliance with regulations governing documentation, billing, and reimbursement, many practices appoint a compliance officer to oversee the implementation of policies assuring proper documentation. Because of the specific needs of the Department of Anesthesiology and Critical Care Medicine, the Executive Committee realized the advantage of appointing a physician to manage this responsibility. **Susan Firestone, MD**, assumed this role last November, and she has been actively engaged in the task since then.

“This is truly ‘continuing’ education,” says Dr. Firestone. “The work will never be ‘complete.’ Both Medicare and HCFA (Health Care Finance Agency) regularly modify and refine their requirements. So my task is really a work in progress.”

Dr. Firestone sees her role as one of support to the Department and to individual physicians, citing the accountability of both to regulatory agencies, as well as to private insurers. Individually and collectively,

the Department is audited for compliance on a quarterly basis.

“It is our intent to be 100% compliant,” says Dr. Firestone. “We would like to reduce the burden of compliance on the practicing physician by creating methods that minimize redundancy and facilitate proper documentation. As far as the government is concerned, if it is not documented in the medical record, it did not happen. Because government agencies can hold individual physicians liable for documentation errors, we think it is important for the physicians to have a resource person from among their peers. As a physician myself, I can advise on methods that I have personally tried, and that work for me. A business manager might not be able to do this.”

Dr. Firestone points out the diversity of the Department and notes that the three main components – anesthesiology, critical care medicine, and pain management – all require separate policies and mechanisms for documentation and billing. Compound that by the number of different UPMC locations where Department physicians practice, and it becomes clear that the task is enormous.

One of the first steps in the process of compliance is to

understand a given regulation well enough to translate it into policy specific for the Department. Before writing a policy, Dr. Firestone checks the legal fine points of a regulation, relying on sources such as the legal departments of different national component societies – the ASA, for instance. The Department’s legal advisors must review the wording of policies for accuracy and legality before the Executive Committee passes judgment.

“I’m just the facilitator and the transmitter of the information,” Dr. Firestone says. “I don’t write the regulations, but I do write the policy.” She communicates approved policies by creating teaching materials and by conducting site-specific educational sessions for physicians and CRNAs. She views herself as a liaison between the practitioner and the University of Pittsburgh Physicians (UPP) business office. Since assuming her duties, Dr. Firestone has created a prospective auditing policy, to secure proper documentation prior to billing. She hopes that eventually the medical records documents can be redesigned, so that – without interference in his or her professional judgment or the care of the patient – the physician can be sure about all items requiring documentation. According to Dr. Firestone, standardization of documents

(making completion easier and more routine) would help ease the burden of compliance on practitioners, and at the same time reduce the time and expense of audit.

“In a department the size of this one, we should be able to offer an upgrade in service to our physicians,” Dr. Firestone says, “some help from a peer. Providing care in a regulatory compliant way is complex and highly individual. I can directly relate to physicians in practice and I can understand how regulations can have an impact on clinical care.”

Measuring the Value of Critical Care at the National Level

The Department’s critical care outcomes research endeavors have grown considerably in recent years, thanks in large part to the efforts of **Derek Angus, MD, MPH**, and his colleagues.

Dr. Angus completed his fellowship in Critical Care Medicine, combined with a Masters in Public Health, and joined our faculty in 1992. Since then, he has earned national recognition in the field of critical care outcomes and health services research. Much of his research focuses on the epidemiology of major ICU diseases, such as sepsis



Derek Angus

and ARDS, and the cost-effectiveness of ICU interventions. In addition, he has studied the effects of health care reform on national critical care delivery and examined workforce requirements for the future of critical care.

Dr. Angus serves on the Executive Committee of the University's Center for Research on Health Care. He recently co-chaired two international expert panels for the American Thoracic Society (ATS) – one on "Outcomes research in Critical Care," and the other on "Understanding Quality and Cost-Effectiveness in the ICU."

Dr. Angus' current research projects (total funding of more than \$3 million) include: an assessment of the epidemiology of adult and neonatal respiratory failure; the cost-effectiveness of inhaled NO in adult and neonatal ICU populations; the cost-effectiveness of recombinant protein C in severe sepsis; and the optimal use of liver transplantation. Several of these projects involve the combination of prospective data collection and existing data sets to generate decision models. The goal is to understand not only the cost-effectiveness of new therapies, but also their impact on overall health care budgets and national burden of

disease. To describe the scope of these efforts, Dr. Angus points out that the protein C sepsis study is the largest sepsis study ever conducted, involving almost 3000 patients in 13 countries.

Dr. Angus was also appointed chief health services researcher to the combined ATS, American College of Chest Physicians, and Society of Critical Care Medicine Committee on Manpower in Pulmonary and Critical Care Societies (COMPACCS). This three-year study, just completed, provides detailed and compelling estimates of the changes likely in critical care medicine in coming decades. The report was delivered recently to the three societies represented and is being condensed into a working document for Capitol Hill, where it may have major ramifications for the future practice of critical care medicine.

Dr. Angus would like to recognize his collaborators and colleagues, both within and outside of the Department. He has worked most closely with Drs. Mark Roberts and Michael Fine of the Department of Medicine, and with Dr. **Gilles Clermont** of the Division of CCM, whose unique blend of medicine and mathematics Dr. Angus describes as "an essential element of the team's success."

Update on Pain Evaluation and Treatment Institute

Pain Medicine Services Expanded

The Pain Medicine Division of the Department of Anesthesiology and Critical Care Medicine now offers outpatient evaluation and procedures at their new clinics at UPMC Shadyside and UPMC St. Margaret. The new sites are able to offer rapid consultations and invasive treatment modalities. Fluoroscopy adjacent to the clinic area streamlines the process of prompt intervention for acute pain. For complex chronic pain, the Pain Institute's Baum Boulevard site continues to offer pain rehabilitation, including interdisciplinary evaluation and treatment.

The Pain Medicine Division maintains acute intervention for perioperative and trauma pain for patients at Presbyterian, Magee-Womens, Montefiore, Shadyside, and St. Margaret hospitals, as well as at WPIC. For inpatients with chronic or complex pain at these same hospitals, the Division offers consultation services, which include examination and evaluation within 24 hours of request.

The Division will soon be welcoming **Dr. Nashaat Rizk** as a faculty member in pain intervention, following the completion of his fellowship, which included focused study and experience in radiofrequency and advanced interventional modalities with Dr. Gabor Racz in Lubbock, Texas.

Under the able leadership of **Wendy O. Kang, MD, JD**, the pain management fellowship program maintains its ACGME accreditation. It will be reevaluated this year along with the anesthesiology residency program.

Dr. Ron Glick, director of Pain Medicine rehabilitation, is offering prolotherapy to selected patients, as well as acupuncture and work evaluations at the Baum Boulevard site.

As research director at the Pain Institute, **Dr. Tom Rudy** continues to lead a strong and vital research group. **Dr. Dawn Marcus**, the Division's internationally acclaimed neurologist, conducts research and practice in the areas of headache and chronic pain.

The Division is hosting a CME program at UPMC Shadyside June 4 for primary care physicians in Western Pennsylvania and Ohio.

"The Division of Pain Medicine has grown in tandem with the Department of Anesthesiology and Critical Care Medicine," says **Doris Cope, MD**, clinical director. "We now have the opportunity to practice in a number of locations and with varied patient populations, providing our fellows with a rich educational experience."



Dan Martich

Dr. Dar: Martich Named First Medical Director of CIS

Physicians, nurses, pharmacists, and information services personnel from UPMC Presbyterian and UPMC Shadyside, along with corporate partners of Cerner, Inc. are collaborating to develop a clinical information system (CIS) for the UPMC Health System. The CIS, when fully developed and implemented, will allow clinicians of all types to access the most up-to-date patient data from a single source.

Leading the design, development, and implementation team for the physicians of UPMC is **G. Daniel Martich, MD**. A group led by Mr. Dan Drawbaugh, chief information officer, and Dr. Gail Wolf, chief nursing officer, chose Dr. Martich as the first medical director of the CIS. The organizational structure of the CIS places Dr. Martich alongside Dr. Wolf and Mr. Drawbaugh in directing the activities of process redesign and improvement, as well as automation of an electronic medical record.

According to Dr. Martich, "The use of a single CIS represents an opportunity for the Health System hospitals to pursue an integrated information system for patient care.

"One of the major challenges of the CIS project will be to re-

educate physicians to perform documentation and ordering at the computer, as opposed to simply writing on paper. The benefits to the individual physician, the patient, and the entire health care team will be realized when the system contains a critical mass of data, allowing 'one-stop shopping.' Physicians will be able to review data of all sorts, document, and enter orders on-line (including from remote locations, such as home or office.) Clinical alerts and decision-support systems are being built into the system to assist physicians in decision-making and to both decrease cost and improve care by reducing the frequency of adverse drug reactions – one of the clearly documented benefits of clinician order entry and electronic medical records."

Cerner Corporation was chosen as UPMC's partner in developing the CIS software after staff evaluated several companies' products last year at the Presbyterian and Shadyside campuses. This software will be phased in at UPMC Presbyterian over the next three years. Long-range plans include its use at hospitals throughout the Health System.

Dr. Martich has selected a team of associate medical directors for this project. They include



Carol Rose

Drs. **Arthur Boujoukos** (Anesthesiology/CCM), Neil Busis (Neurology), Anthony Fiorillo (Internal Medicine), William Hogan (Center for Biomedical Informatics), Satish Muluk (Vascular Surgery), Steven Reis (Cardiology), and Mark Roberts (Institute for Quality and Medical Management). Darcy Waechter, RN, former nursing director of the Cardiothoracic ICU at Presby, is the medical team's project coordinator. Two additional physicians, from UPMC Shadyside, will join the Physician Advisory Council to help with design and implementation plans.

Dr. Carol Rose Elected VP of PA Medical Society

Carol E. Rose, MD, of our Department was recently elected vice president of the 18,000-member Pennsylvania Medical Society (PMS). She will serve in this capacity until October 1999, when she will accede to president-elect, and the following year become the PMS president. Dr. Rose will be the first anesthesiologist to hold this position. In addition, she currently serves as an alternate delegate to the American Medical Association (AMA) from the PMS.

Recent activities of the PMS have been related to E&M

guidelines, tort reform and revision of the CAT fund makeup, the development of the Division of Representation within PMS, opposition to the change of the motorcycle helmet law, domestic violence issues, and of course, the many issues of managed care. Dr. Rose says that she is looking forward to serving her fellow physicians as the spokesperson for PMS to the public, the legislative and regulatory branches of the state government, the media, and to member and non-member physicians.

According to Dr. Rose, in recent years the AMA/PMS organized medicine focus has evolved to give greater emphasis to specialty societies. She is also a member of the American Society of Anesthesiologists (ASA) Section Council at the AMA, and attests that the ASA has been very active within the AMA. A recent ASA Bulletin notes that, at its interim meeting in December 1998, the AMA overwhelmingly voted to proclaim as official policy that "Anesthesia is the practice of medicine." The Pennsylvania delegation strongly supports this concept. Anesthesiologists have become quite active and influential within PMS in the past eight years, and Dr. Rose is earnestly recruiting among the faculty of our department.



Nick Bircher

At the UPMC, Dr. Rose is medical director of the PACU, and she provides anesthesia service at WPIC. She also serves as a Faculty and Students Together (FAST) advisor and is a presenter of the Glaxo-Wellcome Pathway Program to third-year medical students.

Faculty Promotions

The University of Pittsburgh School of Medicine announces the following promotions, effective July 1, 1999:

Yan Xu, PhD, to Associate Professor with Tenure, Associate Professor of Anesthesiology and Pharmacology.

Shekbar Venkataraman, MD, to Associate Professor without Tenure, Associate Professor of Anesthesiology/CCM and Pediatrics

Promotions Elsewhere

Dr. Rinaldo Bellomo, was promoted to Associate Professor of Medicine at the University of Melbourne in Melbourne, Australia.

Dr. Lucy Lumb, who worked briefly with Dr. Ann Thompson in the Pediatric Critical Care Center at Children's Hospital, and who is also the wife of Dr. Pat Tan, was promoted to Associate Professor of Pediatrics at the University of Malaya, Kuala Lumpur, Malaysia.

Hector Wong has been appointed Division Chief of Pediatric Critical Care at the Cincinnati Children's Hospital

Dr. Bircher Plays Key Role on Oversight Committee

Nick Bircher, MD, has long been an outspoken advocate of the academic mission. He has also recently served as faculty representative to the University Senate and chairman of the School of Medicine Planning and Budget Committee. As the centralized practice plan, University of Pittsburgh Physicians (UPP), began to form, it rapidly became evident that faculty representation in the process was needed.

Substantial questions arose regarding the interface between the clinical and academic missions. This concern led to the creation of the Faculty Ad Hoc UPP Oversight Committee by a motion at a meeting of the School of Medicine Faculty held March 24, 1998. The original charge to the Committee was to obtain information and all pertinent documents so that the faculty "could provide advice on, and ultimately approval of, a mutually acceptable proposal" for the creation of the UPP.

As part of a settlement agreement with the Department of Health and Human Services, the University, the UPMC Health System, and the Council of Clinical Chairs agreed to the formation of

UPP. This settlement was reached regarding alleged billing for patient services for which documentation was inadequate. As part of this settlement, the UPMC agreed to create the UPP and chose to make the UPP a subsidiary of the UPMC Health System. By virtue of the subsidiary status, and the now more formal separation of the University and the UPMC Health System as corporate entities, two unique circumstances arose: (1) According to UPP management, clinical and academic activity were now entirely separate entities, and consequently (2) the faculty were now employed by the University for purposes of academic activity, and by UPP for clinical activity.

Dr. Bircher, no stranger to the forum on various issues, has had unique opportunities to champion the faculty cause in their new state of joint employment. He has played a major role in reporting the Committee's activities to the University Senate, and in the legal analysis of the documents provided by UPP leadership. These documents include the bylaws of the UPP corporation, the UPP employment contracts for physicians, and the Corporate Compliance Plan. Dr. Bircher has also served on the Council of the Faculty Association of the

School of Medicine (FASM). FASM has been instrumental in providing the legal assistance necessary to the mission of the Oversight Committee.

In this era of the corporatization of medicine, Dr. Bircher has relished the opportunity to help preserve the academic mission.

"The simple fact is that there is a fundamental economic incentive to favor clinical practice over academic endeavors," says Dr. Bircher. "It pays better. Without contractual protections, department chairs would be placed under extreme economic pressure to follow Sutton's Law (i.e., 'Go where the money is.'). This trend, if taken to extremes, would cripple the academic mission of any department by removing opportunities for teaching and research. The efforts of the Oversight Committee have been directed at countering this trend with contractual protections for those who wish to continue the academic mission."

Dr. Peter Winter, Health Care Hero



Peter Winter, MD

Peter Winter, MD, was named by *The Pittsburgh Business Times* as the winner of its 1998 Health Care Heroes Award for Administrative Excellence. The award was published in the December 1998 issue.

Dr. Winter assumed leadership of the Department of Anesthesiology/CCM in 1979 and resigned in 1996 into emeritus status. During his tenure as chairman, Dr. Winter doubled the number of trainees and faculty members. He increased the sophistication and funding of our training and research programs. The impact on health care – in Western Pennsylvania and beyond – of Dr. Winter's nearly two decades of leadership was indeed phenomenal. Hundreds of physicians and non-physicians nationwide and abroad

were educated under his direction. His alumni are having a lasting impact on the tri-state area in management of critically ill patients inside and outside of the operating room.

The programs that contributed to the University of Pittsburgh School of Medicine fame in the 1980s and 1990s (including transplantation, neurologic and cardiac surgery) depended heavily on Dr. Winter matching talents within OR Anesthesiology and Critical Care Medicine.

As chairman of the Department, Dr. Winter was a compassionate listener and advisor to many faculty members and students. He brought our department to new heights, including financial and moral support of clinical and laboratory research. In his nomination letter, from which the above information is extracted, Dr. Safar referred to Dr. Winter as "the CEO of Academic Anesthesiology in the United States." Dr. Winter modestly considers himself to have been part supervisor and part seducer, in order to persuade researchers to come on board and maintain an atmosphere of intellectual inquiry in the Department. We congratulate Peter Winter on receiving the Health Care Heroes Award in 1998. It is an honor well deserved.

Das Österreichische Ehrenkreuz für Wissenschaft und Kunst 1. Klasse

Dr. Peter Safar Decorated

On March 19, 1999 at a special award ceremony and luncheon at the University Club, the University Center for International Studies hosted a rare program in honor of **Dr. Peter Safar**. After a brief introduction by Professor Burkart Holzner, Director of the University Center for International Studies, University of Pittsburgh, Dr. Harald Miltner, Consul General of the Republic of Austria, reviewed Dr. Safar's professional accomplishments and, on behalf of Thomas Klestil, Federal President of the Republic of Austria, presented Dr. Safar with the Austrian Cross of Honor (First Class) for Science and Art.

In his acceptance speech, Professor Safar indicated that he was overwhelmed by the honor, which he said he could accept only as a representative of all colleagues worldwide who have collaborated with him at his Resuscitation Re-



Dr. Peter Safar and Dr. Harald Miltner

search Center. That number includes more than 100 fellows who have trained in research at the Center over the past couple of decades. In his usual generous manner, Dr. Safar gave credit to all associates and research fellows. Among those present were former Pitt Chancellor Wesley Posvar and the immediate past Senior Vice Chancellor of Health Sciences, Thomas Detre. In characteristic fashion, Dr. Safar, who has just turned 75, departed immediately following the ceremony, along with Mira Klain, to lecture in Chechien, Russia and Germany.

Honors and Awards

Peter Safar was elected in December 1998 as honorary member of the Italian Society of Anesthesiology, Resuscitation, and Intensive Care. Dr. Safar also received the Annual Asmund S. Laerdal Memorial Award at the Society of Critical Care Medicine Meeting in February 1999.

Randy Woods has been awarded a prize from the Eastern Association for Surgery Trauma for his paper on *Suspended animation in dogs with hypothermic aortic flush at the beginning of cardiac arrest.*

Samuel Tisberman became a fellow of the American College of Surgeons in October 1997.

Dr. Dan Thompson Completes Year of National Chair

Dan R. Thompson, MD, FCCM, completed his year as Chairman of the American College of Critical Care Medicine at the College's annual meeting in San Francisco last February. The American College of CCM is an offspring of the Society for Critical Care Medicine and currently consists of more than 400 fellows. Dr. Thompson has



Dan R. Thompson, MD

been a most active member of the SCCM since 1977. He has been heavily involved in the governance of the College of CCM, having served as an officer over the past five years. Design and publication of guidelines for various CCM activities stand out among the College's many accomplishments under Dr. Thompson's leadership.

Dr. Thompson was a fellow in our Internal Medicine CCM Training Program during academic years 1976-78. He has since served many years as medical director of the Trauma Life Support Center at Mercy Hospital in Pittsburgh. In that capacity, Dr. Thompson has trained many of our critical care fellows over the past 20 years. As an internist, he holds a position in our department as clinical associate professor of Anesthesiology/CCM.

Best Doctors in America

Congratulations to the following faculty members who have all been selected by peers as particularly prominent and included in the listing, *The Best Doctors in America, 1999*, compiled by Woodward/White, Inc.:

Barbara Brandom, MD, Professor of Anesthesiology/CCM, Department of Anesthesiology, Children's Hospital

Doris Cope, MD, Professor of Anesthesiology/CCM, director, Multidisciplinary Pain Program, UPMC Shadyside

Andre DeWolf, MD, Associate Professor of Anesthesiology/CCM

David Watkins, MD, PhD, Professor of Anesthesiology/CCM, medical director of the Pittsburgh Clinical Research Network

Dr. Leonard L. Firestone Inaugurated

On November 19, 1998, **Leonard L. Firestone, MD**, was honored as Peter and Eva Safar Professor and Chair of the Department of Anesthesiology/CCM. The event took place at the Frick Fine Arts Auditorium. Provost James Maher presided over the affair, presenting Dr. Firestone with the special University medal. "The Scope of Anesthesiology" was the title of Dr. Firestone's inaugural lecture. It was a most informative presentation on the panorama of Department involvement at Pitt, including all subspecialties and programs at UPMC member hospitals system wide. Dr. Firestone was generous in giving credit to his associates in the Department. The large audience obviously appreciated his richly illustrated and masterfully delivered presentation.



Provost James Maher, Mrs. Eva Safar, Dr. Leonard Firestone, and Dr. Peter Winter at Dr. Firestone's Inaugural ceremony last November.

SCCM 28th Educational & Scientific Symposium

Pediatric Critical Care

Dr. Joseph Carcillo of the PCCM division was the program co-chairman. Congratulations on an outstanding meeting.

Dr. Richard Orr received the Pediatric Award for the best pediatric paper at the meeting for his important work entitled "Pediatric specialty care teams are associated with reduced morbidity during pediatric intrafacility transport."

Dr. Ann Thompson presented lectures in the panels on both "Airway Management" and "Use of Nurse Practitioners and Physician Assistants in Critical Care"

Dr. Carcillo presented a lecture in the panel on "Care of the Patient with Hemodynamic Instability Due to Sepsis" Fellows and faculty from the PCCM division presented ten abstracts

Safar Center

Dr. Peter Safar was honored by the Laerdal Foundation, and presented the 1999 Asmund Laerdal Memorial Lecture. That lecture was delivered at a panel entitled "Hypothermia is Cool," which also highlighted lectures by **Dr. Samuel Tisherman** (also of the Safar Center) and by **Dr. Fritz Sterz** (former fellow at the Safar Center).

Drs. Safar and Tisherman also presented lectures in the panel on "Novel Ultra-advanced

Resuscitation methods." That panel also featured a presentation by former Safar Center fellow **Dr. Sten Rubertson**. **Drs. Robert Clark** and **Patrick Kochanek** presented lectures in the panel on "Mechanisms of Brain Injury: Lessons from the Bench." Last but not least, Safar Center Investigators presented 11 abstracts at the meeting. Notably, two Safar Center young investigators were honored for their research, capturing two of the four scientific awards for best paper at the symposium. **Dr. Michael Whalen's** work was entitled "DNA damage is temperature dependent early after traumatic brain injury in rats," while **Dr. Neal Seidberg's** study was titled "Inducible 72kd heat shock protein is increased after traumatic brain injury in humans: Evidence for the stress response." Drs. Whalen and Seidberg are also in the PCCM, and Dr. Whalen is the 1999 Schertz fellow in our department. Both of these specific projects represent work mentored by Dr. Robert Clark of the Safar Center and PCCM division. The total number of panel and abstract sessions moderated by Safar Center and PCCM faculty are too numerous to list.

CCM (Adult) Division

Michael R. Pinsky was a member of the Annual Scientific Program Committee. He is chairman of the International Liaison Committee, and was

the moderator of the following sessions: "Measuring whether things work," "Optimizing critical care delivery: an international perspective," and "Nitric oxide and the airways." Dr. Pinsky also gave an invited lecture on "Occult nitric oxide inhalation."

Derek C. Angus is a member of the International Liaison Committee and of COMPACCS. He gave invited lectures on "Alternatives to RCTs: better, worse, or indifferent?" and "The pharmacoeconomics of inhaled nitric oxide." Dr. Angus participated in a roundtable discussion on "Manpower forecasts in critical care," talking specifically on study methods and data.

Paul L. Rogers held a three-day workshop on "Simulator education in critical care medicine."

Peter K. Linden gave invited lectures on "Therapeutic options for the treatment of various Gram-positive infections in the septic patient," and "Infection control process to prevent transmission of infection."

Samuel A. Tisherman gave invited lectures on "Suspended animation research," and "Therapeutic hypothermia in traumatic shock."

Ake Grenvik is a member of the International Liaison Committee, and – along with **Michael A. DeVita** – gave an

invited lecture on "Transplantation medicine, 1999 and beyond: Ethics of sharing a precious resource, donation to distribution."

Alan Rosenbloom moderated a roundtable discussion on "Case studies in immunomodulation."

Abstracts Presented

Walter T. Linde-Zwirble, Derek C. Angus, Michael R. Pinsky. *Age-specific incidence and outcome of sepsis in the US.*

Anjad A. Musthafa, Derek C. Angus, Michael R. Pinsky. *The first year after ARDS: results of a multi-center study.*

Susan M. Sereika, John M. Clochesy, Margaret-Ann Carno. *Impact of left ventricular function on duration of mechanical ventilatory support.*

John A. Kellum, Martine Leblanc, Nagarajan Ramakrishnan. *Continuous versus intermittent renal replacement therapy: Is there a difference in survival?*

Peter Linden, David J. Kramer, Shimon Kusne, Anthony Pasculle. *Prediction of antimicrobial susceptibility in ICU patients with Gram-positive bacteremia based upon length of stay.*

John M. Clochesy, Susan M. Sereika, Margaret-Ann Carno. *Elevated Troponin-T levels in patients requiring prolonged mechanical ventilatory support (MVS).*

Other National Meetings

Abstracts Presented at IARS Congress

The following abstracts were presented at the International Anesthesia Research Society, 73rd Clinical and Scientific Congress in Los Angeles, March 12-16, 1999:

BA Williams, ML Kentor, CM Figallo, TC Bear, D Scaringe, G Salamié. *Turnover time does not predict surgical downtime in outpatient regional anesthesia practice.*

M Vallejo, K Shannon, B Kaul, S Ramanathan, H Finegold, S Makishima. *Postoperative analgesia for m. gynecologic surgery: a prospective randomized trial of 3 regimens.*

BA Williams, ML Kentor, CM Figallo, TC Bear, JW Anders. *Same-day discharge after invasive knee surgery as a result of perioperative femoral and sciatic nerve blocks.*

S Ramanathan, S Makishima. *Single orifice soft-tip catheters vs. multi-orifice firm-tip catheters for epidural labor anesthesia.*

BA Williams, ML Kentor, CM Figallo, JW Anders, D Metro, V Kubit. *Fewer nursing interventions and lower symptoms frequency after anterior cruciate ligament reconstruction with nerve block anesthesia.*

Department Hosts AUA Annual Meeting

The 46th Annual Meeting of the Association of University Anesthesiologists was held in Pittsburgh on May 13-16, 1999. It was hosted and sponsored by the Department of Anesthesiology/CCM, under the aegis of **Dr. Leonard Firestone**. Foci of presentations included imaging research in anesthetic mechanisms, molecular biologic research, and information technology as it relates to our specialty. The social program included a banquet, a trip to the Frank Lloyd Wright house in "Fallingwater," and a tour of the Frick Art and Historical Center.

Membership in the AUA is limited to those academicians who have made substantive contributions to the science of anesthesiology and its related fields. Current departmental faculty who are members of the AUA are: Barbara Bandom, Charles Buffington, D. Ryan Cook, Doris Cope, Peter Davis, Leonard Firestone, Yoo Goo Kang, Miroslav Klain, Philip Lebowitz, James Snyder, Mahmood Tabatabai, Ann Thompson, W. David Watkins, and Peter Winter.

Abstracts presented at ATS Meeting

The following abstracts were presented at the meeting of the American Thoracic Society:

A Musthafa, D Angus, M Griffin, G Clermont, W Linde-Zwirble, MR Pinsky. *Correlating functional status with quality of life after ARDS.*

L Chelluri, N Bircher, S Bowles, S Tisherman, M Donohoe, T Smitherman, A Rotondi. *Costs and survival after cardiopulmonary resuscitation (CPR) in the hospital.*

L Chelluri, AB Mendelsohn, S Belle, M Donohoe, MR Pinsky, S Reeder, A Rotondi, R Schulz, C Sirio, S Wisniewski. *Does age predict hospital costs in patients receiving prolonged mechanical ventilation?*

L Chelluri, S Wisniewski, S Belle, M Donohoe, MR Pinsky, S Reeder, A Rotondi, R Schulz, C Sirio. *Are age and gender associated with outcome in patients receiving prolonged mechanical ventilation?*

M Dishart, J Gorcsan III, W Mandarino, M Pinsky. *Left ventricular (LV) contractility is minimally depressed in early porcine endotoxic shock.*

JA Kellum, LA Vergato, MK Dishart, DR Nunley, MR Pinsky. *Effect of hemofiltration filter adsorption on circulating IL-6 levels in septic rats.*

AJ Rosenbloom, P Linden, B Ray, S Nguyen, N Pencosky, A Dorrance, T Whiteside, MR Pinsky. *Effect of granulocyte-monocyte colony-stimulating factor (GM-CSF) on leukocyte functional molecules in patients with SIRS.*

C Adrie, M Monchi, AT Dinh-Xuan, JF Dbainaut, MR Pinsky. *Exhaled nitric oxide levels are higher in ventilated patients with pneumonia.*

F Michard, S Boussat, D Chemla, MR Pinsky, A Mercat, CH Richard, JL Teboul. *Use of respiratory changes in arterial pulse pressure to predict the efficacy of volume expansion in humans with septic shock.*

Mark Your Calendar

Safar Lecture to Address Neuronal Death in Cerebral Ischemia

The 20th Annual Peter and Eva Safar Lecture on Science and the Humanities will be presented Nov. 3, 1999, at 4 p.m. in the Scaife Hall Auditorium. The speaker, Dr. Bo Siesjo of the University of Hawaii, is an internationally renowned investigator in the area of mechanisms of neuronal death in cerebral ischemia. His presentation will address progress made in this important area over the past 20 years and will be part of the 20th anniversary celebration of the Safar Center for Resuscitation Research.



Marie Baldisseri

Dr. Marie Baldisseri Takes Course to the Middle East

For the past several years, the Society of Critical Care Medicine (SCCM) has offered a standardized two-day course entitled Fundamentals in Critical Care Support (FCCS), designed to teach physicians basic aspects of management of critically ill and injured patients. This course has been taught both nationally and internationally and has gained in popularity over the years, especially in countries where physicians are not specifically trained in CCM. As a member of the SCCM Steering Committee for FCCS, **Marie Baldisseri, MD** has traveled to many foreign countries to promote and teach this course.

In December 1998, Dr. Baldisseri, was asked to teach in the FCCS Course in Saudi Arabia on behalf of SCCM. Never having been to the Middle East

before, she was delighted to accept the offer, although somewhat hesitant because of the status of women in Saudi Arabia. However, her trip was a wonderful experience. The hosts were gracious and the course quite successful.

Upon completion of the course, there was a celebration in the home of one of the Saudi professors. During the party, the professor received an urgent telephone call, which provided Dr. Baldisseri with additional opportunities. The call came from a wealthy Egyptian whose teenage son had just been critically injured in a serious car accident. The father requested that "the American Intensivist" fly to Cairo and assist with the care of his son. It took Dr. Baldisseri only 30 seconds to decide that she would go to Egypt! Flown by a private Lear jet from Saudi Arabia to Cairo, she was whisked through

customs in minutes and was available at the boy's hospital bedside within a few hours.

Unfortunately, the boy had suffered a fatal head injury and died within hours of Dr. Baldisseri's arrival. Despite their terrible grief, the family insisted that she stay in Egypt for sightseeing. Over the next several days, Dr. Baldisseri had a wonderful opportunity to see and experience much of this fascinating country, including the ancient pyramids.

Faculty Bowling Team Earns Bragging Rights

by Charles "Ten Pin" Buffington, MD

The annual bowling competition between faculty members and residents took place on January 29 at the Pittsburgh Athletic Association. Traditionally, the residents

have won this competition, but the tide turned this time due to outstanding performance by Drs. Bjerke, Williams, Buffington, Metro, Oravitz, and Gelzinis with a combined score of 816. The residents and their significant others put up a valiant effort with a combined score of 745. Kelly and Ryan Romeo led the way for the residents with excellent contributions from Paul Davies, Andrea Ference, Shashank Saxena, and Maria (Randy Wood's SO). The evening was a good time for everyone. Thanks to the Residency's Social Chairman, Randy Wood, who organized this activity.

P.S. Planning is now under way for a canoe trip/volleyball contest this summer to welcome the new residents.

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