Greetings, Alumni and Friends:

How do you impact lives around you? In the Department of Anesthesiology we have the opportunity to impact many lives, in many ways, every day. “Good morning ma’am, I’m going to be your anesthesiologist today so I’ll be watching out for you during your operation.” “So, Professor, I assume you read about time constants last night!” “Congratulations! It’s been 12 months since a ventilator associated pneumonia occurred in our Surgical Intensive Care Unit.” “Sheila, thank you for preparing that med tray.” “Yee haw, we got our patent letter today!” “I learned more in that simulation session than I have ever learned in a lecture.” Yes, every day we have the opportunity to touch lives through thoughtful patient care, through innovative education strategies, and through long hours in the lab. Recently the department came up with a new way to touch lives.

In July of this year the ASA joined with the Lifebox Foundation in a campaign to bring 70,000 pulse oximeters to operating rooms around the world. By August the campaign was brought to the department’s attention by Sephalie Patel, one of our terrific senior residents, and her parents who had read about the campaign in the ASA Newsletter. Seeing a wonderful opportunity for synergy, the Patel family, through their foundation, the Wise Foundation, challenged the
Message from the Chair

(decontinued from page 1)

department to raise funds for this worthwhile cause and they would supplement the department’s donations. We had bake sales, raffles, parties, directed donations, and peer pressure. The department in conjunction with the Wise Foundation raised $33,750 for the Lifebox Foundation in less than 6 weeks. Wow! How many lives can you touch with 135 pulse oximeters? Millions. I proudly thought we had raised enough for pulse oximetry in 2 or 3 hospitals. When we made our donation to the Lifebox Foundation they informed us it was enough for an entire country. We are moving on to the next phase of our Lifebox campaign, deciding where to place this precious resource and plant our UF outreach flag. It is an exciting challenge that will allow us to touch even more lives every day.

F. Kayser Enneking, MD

GO GATORS!

The Burchardi Award

Our very own, Andrea Gabrielli, MD received the Burchardi Award this year at the American Society of Critical Care Anesthesiologists annual meeting.

The Burchardi Award is an award that is jointly sponsored by the American Society of Critical Care Anesthesiologists and the Society of Critical Care Medicine's Anesthesiology Section. It was named after its first recipient, Dr. Hilmar Burchardi, a pioneer in the field, a revered teacher and founding member of the European Society of Intensive Care Medicine, which he presided over from 1998 to 2000. The award was first established in 2002 at the SCCM Annual Congress and will be presented every two years, alternately at an ASCCA or SCCM event.

The individual should be an anesthesia-based intensivist, who has been practicing for at least 12 years and who has held a leadership position in at least one of the established national or international critical care societies/organizations. He/she should have made considerable contributions to the specialty, not necessarily in terms of research, but especially in terms of ability to motivate and touch people. His/her greatness and leadership should be defined equally by competence, humility, humanity, and a sense of humor; in short, this is a “Good Guy/Good Gal” award.

Congratulations
Dr. Gabrielli!
An EPIC Adventure – Implementing an Electronic Medical Record at UF & Shands

On February 17, 2009, President Obama signed into law the American Recovery and Reinvestment Act (ARRA), which made available $781 billion in federal funding. This law offers financial incentives (up to $40 billion) for Medicare and Medicaid providers to invest in their health information technology (HIT) infrastructure if these providers switch to electronic medical records (EMR) and agree to share information electronically with other appropriate organizations. In the summer of 2009, members of the UF & Shands administration elected to purchase the EPIC medical record system and began plans for a roll-out strategy.

In early 2010, multispecialty workgroups were formed to understand the workflows of hospital departments, both outpatient clinics and inpatient sites. Each clinical department identified EPIC Physician Champions to oversee various tasks, including converting existing paper orders into electronic order sets, as well as creating templates for different documents such as the Pre-op Anesthesia Evaluation Record, Anesthesia Procedure Note, Critical Care Medicine Daily Note and others. In addition, members of the Shands Information Technology Department helped guide the interface of clinicians and the EPIC system, especially with ancillary areas such as laboratory, admission and discharge, and billing.

As orders and documents were being built, EPIC training began with our clinicians from January through April of 2011. EPIC staff members modeled the initial training courses after level-specific courses. For example, “EPIC Physician 100” was designed to show a physician several basic skills about logging onto the system and locating a patient, and “Anesthesia Physician 200” gave more specific examples of how anesthesiology resident may enter orders in the Post-Anesthesia Care Unit. After the original round of training, select anesthesia residents and attendings gave feedback to improve the training process for new users, specifically identifying gaps in the anesthesia workflows.

Although the implementation has had a number of hiccups, we must remember the real reason why we made this tremendous investment of money, time and effort: our patients. In an era when we have to face the reality of finite health care dollars, we as a nation must do more with less. Supporters of EMR adoption claim that the United States may produce efficiency and safety savings approaching $142 – 371 billion, or as much as $81 billion annually for the next several years. By creating a system that collects information electronically, it may be feasible to better manage a patient’s illness, especially long-term illnesses such as diabetes mellitus, or an acute hospital stay for complex cardiac surgery. Decision support tools can be added prior to order entry, such as referencing institution or industry guidelines prior to transfusion. Once data is collected electronically, it then becomes searchable and thus usable for research studies and population-based analyses. At the institutional level, we may be better able to understand individual health care organizations, operational efficiencies (or inefficiencies), and how different organizations pass patients and their health information between different organizations, hopefully reducing medical errors along the way.

The journey to fully reaching the potential of an EMR at UF & Shands has really just begun. With the commitment of top-level leadership as well as clinicians at the bedside, we look forward to further evolving the EPIC system in order to help us better care for our patients here in Gainesville and abroad.

Bibliography


“EPIC company and software description.” Downloaded 25 July 2011 at: http://www.epic.com


Kent Berg MD
Dr. Samsun “Sem” Lampotang
By Jessica Jinah Song

With all of his academic training deeply embedded in mechanical engineering, the relationship between medicine and Samsun “Sem” Lampotang, Ph.D., began “serendipitously.”

“My specializations in mechanical engineering might have led me to build aircraft and other machinery that might be used in warfare,” said Lampotang, a professor in the department of anesthesiology and director of UF’s Center for Safety, Simulation and Advanced Learning Technologies (CSSALT). “Fortunately, I’m instead using my background to help people save people.”

Originally from Mauritius, an island nation in the Indian Ocean, Lampotang came to UF in 1982 after obtaining his undergraduate degree at Brunel University in England to pursue a master’s degree in mechanical engineering.

What began as a mere interest in a research assistantship at the UF College of Medicine offered by David Paulus, M.D., led Lampotang to a series of achievements and inventions with some of the biggest names at the UF College of Medicine.

Lampotang, along with Joachim S. Gravenstein, M.D., founder of the UF department of anesthesiology, is part of the UF team, led by College of Medicine Dean Michael L. Good, M.D., that conceived the patented technology behind the Human Patient Simulator (HPS). Also known as Stan, it remains the most sophisticated mannequin patient simulator currently available and helped generate 200 high-tech jobs in Sarasota, Fla. where Medical Education Technologies Inc. manufactures the HPS under license from UF.

After completing his master’s degree, Lampotang was approached by Gravenstein who convinced him to stay at UF to pursue a doctoral dissertation addressing “unmet needs in anesthesia machines” and later to join the faculty.

As computers and the Internet became more powerful and based on earlier work he did with Gravenstein and Good, Lampotang partnered with Edwin Liem, M.D., David Lizdas and Walter Dobbins to design the interactive, transparent reality simulation on the web called the Virtual Anesthesia Machine, dubbed “VAM” for short, in 1999. VAM, available in 23 languages and six country-specific medical gas color codes, depicts the inner workings of an anesthesia machine showing how gases flow through pipes and hoses into lungs while enabling users to adjust dials, settings and machine configurations.

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Alumni News:

Ever wonder what’s happening with your colleagues with whom you spent your residency? Well, your department wants to hear from you. What’s happening in your life? Send an email to Shirley Graves, MD at sgraves@anest.ufl.edu.

I heard recently from a few of you:

Jayne Gunza, MD, class of 1991, is still practicing in North Carolina. She still owns an equestrian center and both her daughters have been winners in the equestrian world. Her eldest, a junior in high school, is passionate about horses and rides competitively in the world of Hunter/Jumpers. She was Reserve Champion at the Devon Horse Show this year. Her youngest daughter, a sophomore in high school, is now more interested in volleyball. Many of Jayne’s colleagues are Gator graduates—Pam Hanna, Richard Pollard, Brent Holoway, and Wes Robinson. Gators rule!

Mark Niblack, MD, class of 1985, has retired from the practice of anesthesiology and has a second, exciting career. Mark developed several retinal detachments in his right eye, which resulted in the loss of his three dimensional vision. This was an impairment to his practice of anesthesiology, thus, he retired and is the co-owner of a sailing business. Four years ago Mark and a friend bought Dennis Conners’ 1992 America’s Cup boat, “Stars & Stripes, USA-11,” and started their charter business in San Diego, California. To see their magnificent sailing vessel, go to their website at www.sailusa11.com.

Geoff Wolf, MD and Laura (Hill) Wolf, MD, class of 1997, have lived in Vero Beach, Florida since finishing their residencies. Geoff is the Medical Director at Indian River Medical Center and Laura practices on a part-time basis at the same hospital. They have five children, ages 5 to 12 years. They refer to themselves as “The Wolfpack” —a great name for a terrific family. Geoff and Laura, last January, completed the Walt Disney World 39.3 Mile Goofy Challenge. They are living a very full life!

Richard (Dick) Beebe, MD, class of 1973, after completing his residency was in the private practice of anesthesiology in Venice, Florida until 1995 when he retired and went back to primary care at a volunteer clinic. Sixteen years later he is still working at the clinic two mornings a week and helping on their Board of Directors. One of Dick’s sons is a pediatrician in Gainesville and leads the ‘After Hours Clinic’ at Shands/UF.

Calvin Burrichter, MD, class of 1992, practices in Nashville, Tennessee. He still has strong ties to the University of Florida as his daughter is beginning her sophomore year at UF this fall.

Charles Kottmeier, MD, class of 1968, received the Distinguished Service Award, 2011, from the Florida Society of Anesthesiologists.

Shirley Graves, MD, Professor Emeritus, received the 2011 Distinguished Alumni Award from her undergraduate college, Mississippi University for Women.

Jerome H. Modell, MD, Professor Emeritus, was honored to have a departmental research award named in his honor. The Jerome H. Modell, MD Resident Research Award was won by Sean Kiley, MD this year and was presented at the 2011 residents’ graduation party.

Abraham Joseph Layon, MD, class of 1987, Professor of Anesthesiology, Surgery and Medicine, has moved and has taken the reins as Director of Adult Critical Care Medicine at the Geisinger Health System in Danville, PA. Joe and his wife, Susana, will be greatly missed.

Florida Society of Anesthesiologists has some new faces. They are Kayser Enneking, MD, ASA Alternate Delegate; Chris Giordano, MD, FSA North District Delegate, ASA Alternate Delegate; Co-Chair, 2012 FSA Annual Meeting; Mark Rice, MD, nominated for a North District Delegate.

Your UF Anesthesiology Alumni Association of Florida (AAAF) continues its support of the residency program. This year all incoming housestaff received a complimentary copy of Clinical Anesthesia. Graduating residents received a one year free membership to AAAF.

Bylaws are up for review and the update process will begin this Fall. If you are not already a member, please consider joining. The organization benefits from input from all its members.

Many more of you have “Liked” us on Facebook. Remember, we would love to hear from you! Take a look on Facebook and find your department, UF Department of Anesthesiology! The link is http://www.facebook.com/#!/pages/UF-Anesthesiology/192448030789572.

Jamal A. Hakim, M.D.

Dr. Hakim grew up in a small town in Indiana, fishing and playing classical piano. He left his home state of Indiana in 1979, heading south to North Carolina, where he attended Duke University. There, he received his B.S. in Chemistry, graduating Magna cum laude. He spent his summers at Duke’s Marine Laboratory in Beaufort, NC, studying marine chemistry and biology. He next attended Indiana University where he completed Medical School. Dr. Hakim then headed south once again to the University of Florida where he successfully completed his Anesthesiology Residency.

He has been on staff at Orlando Health since 1991 to the present time. He worked as a member of the pediatric anesthesia team until 1999, and since then as the Director of Anesthesia for Women’s Services at Arnold Palmer Medical Center (APMC). He has served Orlando Health in various capacities over the years, including Chairman of the APMC anesthesia department, Chairman of the APMC Leadership Committee, Chairman of the Credentials Committee, Chairman of Medical Staff/Leadership Committee, Vice Chief of Staff, Chief of Staff, and is currently the Chief of Quality and Transformation for Orlando Health, and has served on the Board of Trustees since 2007. He is Board Certified in Anesthesia, and is an active member of the Society of Obstetric Anesthesia and Perinatology.

During his free time, Dr. Hakim enjoys spending time with his family and fishing offshore.
“VAM is on the Web so people can access it whenever and wherever they want,” Lampotang said. “Anesthesia providers from all over the world visited our site and wanted to tell their non-English speaking colleagues about it. So they offered to translate the content for free because it was helpful to them.”

Lampotang and his team, including Ira Fischler, Ph.D., professor emeritus in the UF’s department of psychology, noticed the different ways people learn new information and the difficulty of transferring what they had learned to real-life situations.

“For residents, learning about a machine can be intimidating and confusing,” Lampotang said. “When it’s interactive and transparent, it helps users to identify the structures and processes inside the machine and see the consequences of what they do with the machine.”

The Virtual Anesthesia Machine website, with 44,000 registered users worldwide, has outgrown the “anesthesia” part of the name and covers learning objectives beyond the specialty, featuring 40 different web-enabled simulations.

Lampotang and his team, however, saw a further need to be met. They found that even though VAM enhanced understanding for most users, a small subset of users struggled to transfer what they learned on VAM onto a real anesthesia machine.

To address this issue, the team created a hand-held tablet device called the “Augmented Anesthesia Machine.” When held up against a physical anesthesia machine, the device will recognize and transform all parts of the machine into a virtual animation on its screen, making it easier for users to recall and make connections to what they previously learned.

Despite his impressive achievements, Lampotang continues to seek new ways to improve patient safety. The goal of CSSALT is to help clinicians use existing equipment and processes effectively while critically thinking and questioning the current way of doing things in the midst of advancing technologies. As an example, CSSALT is currently conducting a study led by Albert Robinson, M.D., and Nik Gravenstein, M.D., that uses a UF-developed mixed reality subclavian central line access simulator to train UF College of Medicine residents.

In addition, Lampotang and UF&Shands colleagues are investigating enhanced chest and urinary tract infections respectively.

“Technology is changing,” said Lampotang. “We look at ways to adapt new technology to develop advanced learning technologies and to reengineer devices and processes and make them better and safer.”

**Publications**

The Department remains busy publishing their new findings in a diversity of areas related to anesthesia, different languages, and in changing media. The topics include many areas of traditional interest to us as anesthesiologists (e.g., ventilation, regional anesthesia, medical devices, education methods) as well as new, emerging areas such as machine learning theory. Although too numerous to list exhaustively for this article, here are some interesting titles:


In addition, faculty members have produced talks for other media such as Audio-Digest from our annual winter ski meeting. You might wish to attend in 2012.


Peters, C: HIV for the Anesthesiologist. *Audio-Digest Anesthesiology* 53 (10), 2011
A hearty congratulations to our chief resident Sean Kiley, MD who is the first recipient of the Jerome H. Modell, M.D. Resident Research Award for his expansion on the use of ultrasound to detect pneumothorax.

This work was also recognized as top-notch by the President of the Foundation for Anesthesia Education and Research, Denham S. Ward, MD, PhD who selected it as the Best Research Award at our first annual Celebration of Research. Wouldn’t it be super to check for a collapsed lung after a central line with your handy ultrasound machine, instead of waiting for a chest x-ray (or not checking at all?).

Likewise, Patrick Tighe, M.D enjoyed the Faculty Research Award. He might have won this prize for his excellent research work using machine learning theory to extract new information for all the data collection technology in the hospital, or perhaps for his work to improve understanding of how regional anesthesia affects our patients, or maybe because he mentors and tutors residents and junior faculty in research methods. For all these reasons, we are proud to have Patrick onboard and moving our Department in the right direction.

Finally, Al Robinson, MD led a departmental effort to develop a simulation model for placement of subclavian central lines. After presenting at the ASA 2011 meeting in Chicago, IL, his exhibit, "Subclavian Central Venous Access Mixed Reality Simulator: Preliminary Experience," won first place!

Congratulations.

Research Awards

Research funding increased over the first six months with >$1M in awards. This revenue included several NIH awards to

- Sylvain Dore (Stilbene Contribution in Hemorrhagic Stroke),
- Nik Gravenstein (The Effects of Aging on Experimental Models of Pain),
- Sem Lampotang (A Mixed Reality Conscious Sedation Simulator for Learning to Manage Variability),
- Anatoly Martynyuk (Mechanism of Neurological and Cognitive Side Effects of Sevoflurane Anesthesia).

These and other funding represent a significant growth in the research portfolio in our Department at a time when funding for science is becoming more and more competitive.

Other NIH funding to Department faculty includes Drs. Ahmad, Booth, Dennis, Robicsek (PI), Gabrielli, Melker (PI), Morey (PI), and Wasdo.

Likewise, our collaboration with industrial partners continues to grow.

Well done to our basic and physician scientists!

To assist with these ongoing efforts, the Department has opened an Office of Research to assist researchers in their efforts to conduct this activity. Brenda Wise has joined us to work with Mary Brown and Jessica Mundorff to more easily maintain compliance with the many fiscal and ethical rules surrounding research activities.

This office complements the departmental editorial office that provides valuable assistance on the finishing end of research – manuscript writing and publications.