



ASA Mentoring Program Opens Doors for Cutting-Edge Research on Health Equity in Cardiovascular Anesthesia

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The mentee perspective (Ervin Ham)

When I was in college working on bio-engineering research, I was struck with a realization: millions of people would not benefit from the incredible technology in development, while those with access to the most advanced technology would continue to receive exponential benefits. The dissonance between my interest in contributing to the most cutting-edge research and my passion to help and serve others drove me to learn about health inequity and the ways people are working to address these issues.

I was incredibly lucky to have found a mentor, Dr. Trevor Sutton, who has allowed me to stay true to my values while also helping me develop knowledge and skills that will provide me with a strong foundation to pursue anesthesia. Working with Dr. Sutton allows me to learn from someone actively trying to address disparities, something I was afraid I might have to wait until graduation to find. While educating me about foundational science, he is also providing me with insights into the layers of barriers faced by patients seeking care. The patient interactions afforded to me by this opportunity have strengthened my resolve to continue this work for the rest of my career.

The research I am involved in, which is funded by the ASA Mentoring Grant

Program, gives me the opportunity to work with patients in a community health clinic and see the various challenges they face in seeking care. This immersive experience is invaluable to my education and has given me a better understanding of the diversity of roles anesthesiologists play in both patient care and population health research. Through this project, I am also able to collect qualitative and quantitative data that may inform improvements in the coordination of health care with a long-term goal to make care more accessible to vulnerable populations. This project aligns perfectly with my values and gives me the opportunity to work with patients, anesthesiologists, cardiologists, primary care providers, surgeons, nurses, and data scientists.

In addition to this research, the ASA Mentoring Grant will broaden my understanding of anesthesiologists' leadership roles by supporting my ability to attend a state component society meeting focused on anesthesia resident education, attend a national anesthesia legislative conference, and meet and exchange ideas with other medical students from across the nation who are at a similar stage of their professional development. These will be invaluable experiences in shaping my understanding of the professional opportunities available to anesthesiologists. They will help shape my understanding of the

future of anesthesia as a career that embraces caring physicians who not only are engaged in research, education, and advocacy but also have a holistic view of the concerns and needs of their patients in the perioperative period.

I am so grateful for this amazing opportunity and cannot wait to see where it takes me in my career. I know that the lessons I learn and the experiences I have through this project will shape the way I approach my work as a future anesthesiologist and help me make a meaningful difference in the lives of my patients.

The mentor perspective (Dr. Sutton)

We are thrilled to be recipients of the 2022 ASA Mentoring Grant. This grant supports our research efforts to complete a study in an adult primary care clinic at Hartford Hospital. Our objective is to determine if physicians and patient questionnaires can be utilized to evaluate patient care trajectories that lead to physician inertia in referring patients to cardiovascular specialists or, alternatively, lead to patients resisting medical service offers for cardiovascular specialty care.

We hypothesized that racial and ethnic disparities in utilization of cardiovascular procedural services, which have been reported nationally and also observed in our regional health system, may



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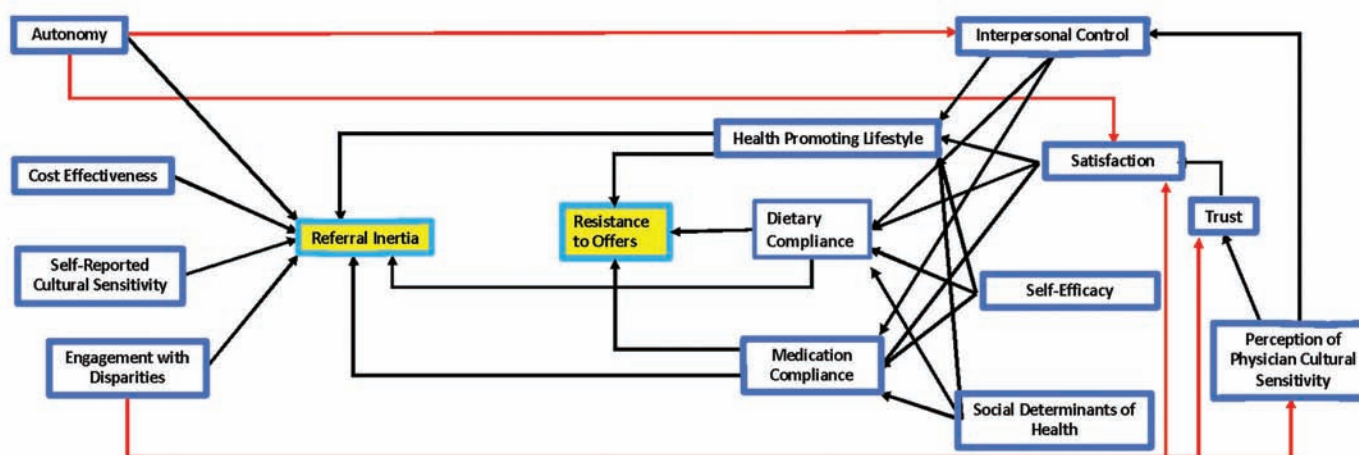
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reflect doctor-patient interactions and physician attitudes (*Cardiovasc Revasc Med* 2022;37:7-12; *JAMA Netw Open* 2021;4:e210247; *JAMA* 1999;282:261-6; *J Fam Pract* 2001;50:130-6). We've created a framework (Figure) that is derived from patient and physician surveys and based on concepts related to candidacy theory and patient-centered culturally sensitive health care models to test our hypothesis through a prospective, blinded study with a matched control group (*Soc Sci Med* 2016;168:101-10; *Health Psychol* 2011;30:342-50). Enrolled African American and Hispanic patients will have qualifying diagnoses that might require evaluation by cardiologists, cardiac surgeons, or vascular surgeons. We will follow patients for one year after enrollment to evaluate referral, non-referral, and failure to follow up in correlation with symptoms, diagnoses, and data related to disease progression in the medical record. The long-term goal is to determine if similar survey administration or queries involving patients and physicians can support future development of clinical decision support tools that can

Figure: C.A.R.E.S. Framework for Referral Inertia and Patient Resistance to Medical Service Offers



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program. Dr. Pawlowski recalled, “Early on, I realized that I can’t force wellness upon the residents; they would have to lead and implement this themselves with our support and guidance. Each residency class has wellness champions who recommend, plan, and carry out the rotating wellness initiatives.” Examples of events the program has organized include volleyball games for physical wellness and bonfires for social wellness. During the pandemic, their social events required some creativity. A meme competition featured residents submitting memes about hospital work and their daily lives with the goal of winning a gift card.

Dr. Pawlowski emphasized the power of praise and recognition. “At every graduation, we gush about the residents. We say how great it is working with them, how grateful we are to have them on our team. But for the rest of the year, we never talk about it again. I thought about what kind of a program we would be if we could do that year-round and just appreciate each other,” Dr. Pawlowski shared.

When he asked the residents what would help them feel more recognized, residents expressed interest in having a non-clinical day off for their birthdays. Now all members of the department receive an extra day off on their birthdays. Another newly established program allows faculty and residents to use QR codes placed all over the hospital to submit appreciation forms, and recipients have been grateful for the recognition.



Photo courtesy of University of Nebraska Medical Center.

Peer support is another particularly important part of the wellness program. “We wanted to recognize the fact that the second victim syndrome is very real and that you can be impaired if you’re trying to take care of a patient, but your mind is still stuck two hours ago in something traumatic that happened,” Dr. Pawlowski remarked. The peer support program is built around a schedule that allows for backup, so there is always someone available to relieve residents, faculty, and CRNAs of their clinical duties if they need time to recover from a traumatic event. Whether that

means a two-hour break to decompress or going home for the day to recalibrate, this program shows residents and physicians that there are other people who can take over for them if they need to care for themselves. Initially, program developers thought it might be implemented once or twice a year, but it was frequently utilized in the first year or two after rolling out.

Happy fish, happy pond

High-efficiency departments and programs addressing facility staff well-being are just two of the factors that build the

culture of wellness at UNMC. That culture is one of the things that initially attracted Dr. Pawlowski to UNMC. “One of my often-quoted lines for what took me to Omaha is that, rather than being a big fish in a little pond, or a little fish in a big pond, I had decided I want to be a happy fish in a happy pond. That’s really what stuck out to me about the department: people were happy there,” he recalled. Omaha’s Midwestern hospitality is real at UNMC, and it contributes to a satisfying work environment. Even when there are disagreements, Pawlowski expressed confidence that his co-workers will speak in a kind way and find solutions together. The culture of well-being starts with staff who are treated with respect, given the tools they need to be successful, and supported as they push the boundaries of care. Dr. Shukry notes that while UNMC is dedicated to the care of their local patients, they also have a larger, international footprint: “The department has a global mission supported by an endowment created by our anesthesiologists and nurse anesthetists. The faculty, residents/fellows, and CRNAs used to travel to Rwanda twice a year to provide free care. Now that health safety concerns have subsided, we are preparing to re-engage in our global mission.” UNMC continues to go beyond, consistently striving to grow in directions that will allow them to provide the best possible care for Nebraskans and the global community. ■

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be used to support patient and physician interactions and medical decision-making that enhances appropriate utilization of life-saving cardiovascular procedural services.

We are proud recipients of the ASA Mentoring Grant. The opportunities the grant provided for my mentee to obtain broad exposure to anesthesiology will undoubtedly support his decision to pursue a career in anesthesiology, and I have grown professionally from the experience of serving as an ASA grant mentor. In addition, the ASA Mentoring Grant has enabled my mentee to consider career pathways in anesthesiology where he will seek to engage population health, an area that is valuable for the future of our profession.

Grant application details

The application process opens on May 1, 2023, and closes on June 30, 2023. The matched mentee/mentor pair should submit the application form, their individual curriculum vitae, and a one-page description of their project to the ASA

Committee on Professional Diversity. The submission should include the following:

1. A detailed description of the project’s objective, along with an explanation of how it will enhance the professional growth and leadership potential of the mentee
2. A description of how this project speaks to the mission and duties of the ASA Committee on Professional Diversity
3. A designation of the length of time, required equipment/supplies, travel, meetings, and requested funding; also include any co-funding.

The project topic areas include scientific, educational, or clinical research as well as innovative approaches on political advocacy. The goal of the project should be to enhance the professional career, leadership potential, and future active involvement of the mentee within ASA.

Mentors should be well-established clinicians, educators, researchers, and current ASA leaders who have a passion for growing a future leader. They should be ASA members for at least two consec-

utive years. In addition, the mentor will have served on an ASA committee, editorial board, or House of Delegates/Board of Directors. They must be members of their state component society. The mentors offer the mentees the benefit of time, experience, advice, and guidance. They also open the door for a young person to explore the many facets of anesthesiology.

Mentees should be ASA members of diverse racial, ethnic, sexual orientation, disability, or gender backgrounds who are interested in gaining experience in leadership, exposure to research, education, or political advocacy opportunities within ASA. They may be a medical student, anesthesia resident/fellow, junior faculty member, or private practitioner. Upon receipt of an ASA Mentoring Grant (maximum of \$5,000) in summer 2023, they should:

1. Present a synopsis of their project at the annual Committee on Professional Diversity Mentoring Grant Presentation virtual event in November 2023
2. Provide a one-page written update of the progress of the project in June 2024
3. Along with their mentor, briefly present their project outcomes at the annual

Committee on Professional Diversity Mentoring Grant Presentation virtual event in November 2024

4. Remain active in their state component society and, if possible, attend at least one local meeting annually; volunteering for active involvement within component activities and local and ASAPAC participation is encouraged
5. Self-nominate for at least one ASA or subspecialty society committee and actively participate if selected.

The application form can be found at asahq.org/about-asa/asa-awards-and-programs/asa-mentoring-program.

For questions or comments, please contact DiversityMentor@asahq.org to reach Lauren Keith, staff liaison for the Committee on Professional Diversity.

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