



# SLEEPY TIMES

VOLUME 18, ISSUE 1 JANUARY 2024



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## MESSAGE FROM THE CHAIRMAN: HAPPY NEW YEAR

-SCOTT T. REEVES, MD, MBA

I am sure that early on Monday, January 1st you heard the expression **HAPPY NEW YEAR!** As I celebrated the gift of another year with family and friends, I began contemplating what exactly makes me happy. Research has shown that the three things that make people the happiest are:

**PLEASURE** (doing things you enjoy),

**ENGAGEMENT** (feeling interested in your activities and connected to others) and

**MEANING** (feeling like what you do matters).

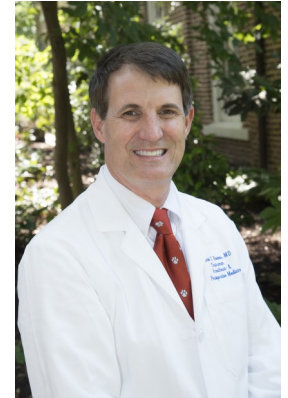
I do a lot of things that I enjoy such as flyfishing, having a nice steak etc. I consider these things transient. They are short lived and make me happy for the moment.

In 2024, I plan to concentrate more on the latter two areas of engagement and meaning. I want to **ENGAGE** deeper with my colleagues, friends and family. I want to reestablish the **CALLING** and **MEANING** that comes with being a physician and caring for the sick. Being happy may not be the word I am trying to convey in this message. I think I am trying to express more than the outward expression of being happy. Maybe the word is **JOY**. That inner piece that can endure hardship and trials but connects us with meaning and purpose.

Despite all the hassles and challenges we face on a given day at work, I hope you would agree with me that what we all do daily at MUSC truly matters!

I am looking forward to navigating 2024 with the whole department.

I wish you all a **JOYFUL NEW YEAR!!!**



**AUDREY WILDER, MSN, RN RETIREMENT FROM PREOP CLINIC BY KATIE BRIDGES, MD**

Audrey Wilder, MSN, RN retired on October 31st, 2023 after 42 years of service at MUSC. Audrey began her career working in pediatrics then moved to perioperative services where she helped start the ambulatory pediatric surgery unit with Dr. Charles D. Smith. She then moved to the Preoperative Assessment Clinic where she worked until her retirement. Audrey was a beloved member of the preoperative team and mentor to many of the preop clinic staff members. Her smile and words of wisdom will be greatly missed. Clinic staff threw quite the party for Audrey, complete with customized chocolates and a surprise visit from her family members and pastor. We congratulate Audrey on her much deserved retirement and thank her for her service to our institution.



**SOUTH CAROLINA PEDIATRIC AND CONGENITAL HEART TEAM RECOGNITION**

Eric M. Graham, MD, FAHA, FACC, Chief, Pediatric Cardiology

Once again our Pediatric and Congenital Heart Program is recognized as providing exceptional care by the Society of Thoracic Surgeons Congenital Heart Surgery Public Reporting! Our overall 4 year observed mortality is 1.2% (STS average 2.68%) and our observed/expected mortality is 0.45 (95% CI: 0.23, 0.69) – significantly better and over 50% less than expected! Over this 4-year period, 17 children survived that would not have if we performed “average”. Since public reporting began in the spring of 2015, the number of programs that have been significantly better than expected has ranged from 6-12 for any given harvest (out of ~120 programs nationally), with us being one of them every year highlighting our consistency in providing exceptional care!

In addition to outstanding survival, our length of stay is lower than the national average for 9 of 10 benchmark operations and all 5 STAT Categories! This is an amazing accomplishment for our talented surgeons, entire group here, and our truly amazing statewide team! Without all your contributions this would not be possible. We should all be very proud.

**STAFF HOLIDAY BREAKFAST**

Dr. Reeves treated the administrative staff to breakfast at Ruby Sunshine on December 19th. Thank you all for everything you do!



**SAFETY HERO: SYLVIA WILSON, MD**

Dr. Sylvia Wilson played a crucial role in ensuring the well-being of a patient scheduled for a kidney transplant in Charleston. Her keen observation of the patient's chart and recognition of severe pulmonary hypertension indicated a potential risk during the procedure. This prompted a thoughtful discussion with the transplant surgeon and, subsequently, the nephrologists and cardiologists. The collaborative effort among these medical professionals led to the realization that the patient's health condition might not withstand the stress of kidney transplant surgery. Ultimately, they decided that proceeding with the transplant at that time might do more harm than good for the patient. Dr. Wilson's dedication to patient safety not only protected the patient from potential harm but also ensured that the allocated organ was not wasted and could be used for a different patient in need.

**SAFETY HERO: KAREN MOTLEY, CRNA**

Karen Motley, CRNA in Charleston, exhibited extraordinary dedication, compassion, and expertise in a critical medical situation, ultimately making a significant impact on a patient's health and well-being. Her actions were truly remarkable and played a crucial role in ensuring a positive outcome during an urgent and challenging situation. A close family friend called her regarding his wife's postpartum bleeding. Karen recommended Charleston's ART Emergency Department (ED) and met the family there. The ED team was having some difficulties placing an IV; recognizing the urgency of the situation, Karen's swift and skillful intervention in establishing the needed IV lines allowed for the immediate administration of fluids, blood, and necessary medication to address the hemorrhage. Her actions likely averted the need for emergent surgery or more serious consequences. Karen's professionalism, rapid response, and willingness to take charge in critical and challenging circumstances showcased her dedication to patient care. Her presence and actions left an indelible mark and, most importantly, contributed significantly to the patient's journey to recovery.



This is a prime example of healthcare professionals like Karen who go the extra mile, providing exceptional care that can change the trajectory of a patient's experience and outcome. It's commendable. Such healthcare professionals make a profound difference in the lives of their patients, and recognition of their exceptional contributions is certainly warranted.



**Safely Speaking™**

**MUSC Health Daily Safety Tip**



DEPARTMENT HOLIDAY PARTY



**DEPARTMENT HOLIDAY PARTY**

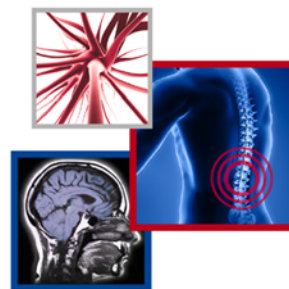


**RESEARCH CORNER**

Research Article

For reprint orders, please contact: [reprints@futuremedicine.com](mailto:reprints@futuremedicine.com)

**Pain Management**



**Parasternal intercostal plane block catheters for cardiac surgery: a retrospective, propensity weighted, cohort study**

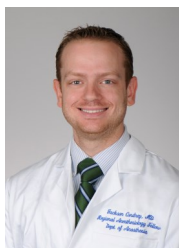
Loren Francis<sup>\*,1</sup>, Jackson Condrey<sup>1</sup>, Christopher Wolla<sup>1</sup>, Tara Kelly<sup>1</sup>, Bethany Wolf<sup>1</sup>, Ryan McFadden<sup>1</sup>, Adam Brown<sup>1</sup>, Sanford Zeigler<sup>1</sup> & Sylvia H Wilson<sup>1</sup>

<sup>1</sup>Medical University of South Carolina, 25 Courtenay Drive, Suite 4200 MSC 420 Charleston, SC 29525, USA

\*Author for correspondence: [francil@musc.edu](mailto:francil@musc.edu)



Loren Francis, MD



Jackson Condrey, MD



Chris Wolla, MD



Tara Kelly, MD

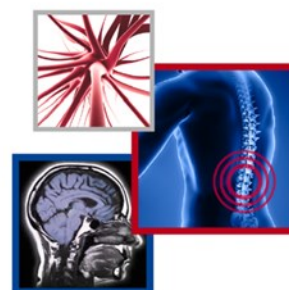


Bethany Wolf, PhD

Short Communication

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**Pain Management**



**Prolongation of spinal duration by escalating doses of intrathecal epinephrine in lower limb arthroplasty**

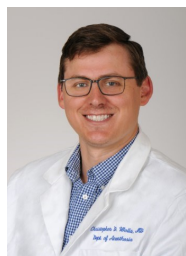
Christopher D Wolla<sup>\*,1</sup>, Tom I Epperson<sup>1</sup>, Erick M Woltz<sup>2</sup>, Bethany J Wolf<sup>3</sup> & Eric D Bolin<sup>1</sup>

<sup>1</sup>Department of Anesthesiology & Perioperative Medicine, Medical University of South Carolina, Charleston, SC 29425, USA

<sup>2</sup>Department of Family Medicine, Prisma Health, Greenville, SC 29605, USA

<sup>3</sup>Department of Public Health Sciences, Medical University of South Carolina, Charleston, SC 29425, USA

\*Author for correspondence: [wollac@musc.edu](mailto:wollac@musc.edu)



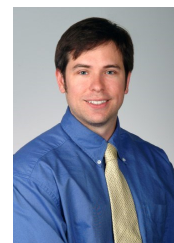
Chris Wolla, MD



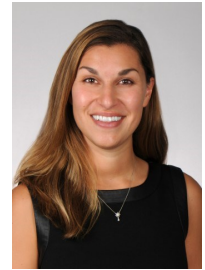
Tom Epperson, MD



Bethany Wolf, PhD



Eric Bolin, MD

**RESEARCH CORNER****CASE REPORT****CLINICAL CASE****Cardio-Obstetric Shock****Mechanical Circulatory Support as a Bridge to Pregnancy Viability**

Loren Francis, MD

Sayyad Kyazimzade, MD, MPH,<sup>a</sup> Jan M. Griffin, MD,<sup>a</sup> Jessica L. Atkins, MD,<sup>a</sup> Gregory R. Jackson, MD,<sup>a</sup> Chakradhari Inampudi, MD,<sup>a</sup> Brian A. Houston, MD,<sup>a</sup> Christopher Goodier, MD,<sup>b</sup> Loren Francis, MD,<sup>c</sup> Lucas Witer, MD,<sup>d</sup> Bhavadharini Ramu, MD<sup>a</sup>

**NCA STUDY BY HALEY NITCHIE, MHA****N-acetylcysteine vs Placebo on Opioid Consumption for Minimally Invasive Hysterectomies Trial is Now Enrolling**

On 11/30/23 the first patient was enrolled in the NAC vs Placebo for minimally invasive hysterectomy trial. As a reminder, this study is funded by a Translational Team Since grant awarded to Dr. Mike Scofield, and Dr. Sylvia Wilson with the goal of addressing suppression of clinical opioid administration after surgery in patients undergoing a minimally invasive hysterectomy, to gain a better mechanistic understanding of how opioids produce enduring changes in the brain, and how to reverse these adaptations. To complete these goals, we are using a glial modulator drug called N-acetylcysteine (NAC), both as an adjunct treatment to surgical procedures to reduce opioid intake, and as a tool to better understand the mechanistic underpinnings of drug craving.



NAC has been shown to interrupt nociceptive transmission (pain) pathways in the setting of acute pain stimuli in both animal and human models. We are aiming to examine its usefulness in patients undergoing minimally invasive hysterectomy as a means of reducing total opioid consumption. This trial is occurring at both UH and RT. It is both randomized (we don't pick what the patient receives) and blinded (we do not know what the patient receives) with a placebo control (only half the patients will receive NAC).

NAC is considered a very safe medication and commonly used to treat hepatotoxicity, including acetaminophen poisoning, in critically ill patients. Rare side effects of N-acetylcysteine include anaphylaxis and anaphylactoid reactions, as well as bronchoconstriction. For this reason, we have excluded people with a known allergy to NAC, and those taking bronchodilators in the last 6 months. Please stay vigilant for these symptoms and inform the anesthesia, research, and/or surgical team if there are concerns.

This study will not restrict the amount of pain medication provided to patients after surgery. Attendings, Residents, and CRNAs will be provided a cheat sheet on the day of surgery to refer back to that includes order sets and what should be administered before, during, and after surgery. The afternoon prior to enrolling a patient, surgeons, anesthesia attendings, residents/CRNAs assigned to the case will all receive an email informing them of the potential study patient with the protocol and tip sheet attached.

We appreciate everyone's support and welcome questions/concerns.

Sylvia Wilson, Haley Nitchie, Katie Bridges, Whitney Graybill, Joel Sirianni, Ryan Wilson, Jackson Condrey, Savannah Hurt, and Jolie Neilson.



## 2023 HOLIDAY DOOR DECORATING CONTEST

Thank you to everyone that participated!

Our 2023 winners are:

1st Place – with 45 votes—ART CRNAS – Patient Grinch

2nd Place – with 39 votes—UH CRNAS – We see you when you're sleeping

3rd place – with 37 votes—Education office – Pets of Anesthesia



## TOYS FOR TOTS

Thank you for filling our boxes this year!



## **CULTURAL AWARENESS CORNER: HAPPY NEW YEAR BY MICHAEL C. LEWIS MD, FASA**

Have you ever wondered how our New Year traditions started. The piece below by Michael C. Lewis MD, Chair of the Department of Anesthesiology, Pain Management, & Perioperative Medicine at Henry Ford Health System helps answer that question.

As we stand on the threshold of a new year, it's a perfect time for us to dive into the intricate tapestry of New Year's traditions celebrated worldwide. Understanding the origins and customs of this global event not only adds depth to our knowledge but also strengthens the cultural ties that unite us.

Year after year, we find ourselves engaging in those familiar rituals of bidding farewell to one year and welcoming the next. Crafting New Year's resolutions, though often met with mixed success, is one of those enduring traditions that define the spirit of New Year's Eve and Day.

The history of New Year's celebrations is a story that spans thousands of years, transcending borders and cultures. It takes us back to ancient Babylon, where the first recorded New Year's celebration took place nearly 4,000 years ago. It's fascinating to note that unlike our modern Gregorian calendar, which kicks off in January, the Babylonians celebrated the new year's arrival around March 21, coinciding with the March equinox.

As time marched on, calendars underwent adjustments, causing them to drift uncoordinated with the Earth's orbit. It was Emperor Julius Caesar, way back in 46 B.C., who embarked on a monumental calendar reform. He added 90 days to the year and declared January 1 as the official start of the new year. This change laid the foundation for the calendar we use today.

In today's world, New Year's Day serves as a moment of reflection, a time when we look back at our past accomplishments and shortcomings. It's also a time when we eagerly peer into the horizon of the new year, setting resolutions that act as guiding stars on our personal growth journey. The new year embodies the idea of a fresh start, a chance for renewed hope.

Interestingly, in the 7th century, pagans in Flanders and the Netherlands had the custom of exchanging gifts during the winter solstice. This practice didn't sit well with Saint Eligius (died 659 or 660), who cautioned against various traditions, including the exchange of New Year gifts. However, European Christians had their own customs. They exchanged gifts on the Feast of the Circumcision, which fell within the 12 days of the Christmas season in the Western Christian liturgical calendar. This tradition can be traced back to the Biblical Magi who presented gifts to the Christ Child. In Tudor England, January 1st, celebrated as the Feast of the Circumcision rather than New Year's Day, was one of the central festivities during the twelve days of Christmas.

The adoption of January 1st as New Year's Day varied across nations and their colonies. German made the switch in 1544, while France did so in 1564. The Netherlands followed suit in 1556 or 1573, depending on the sect. Italy, not being united, embraced the change on various dates. Spain and Portugal made the transition in 1556, and Sweden, Norway, and Denmark joined in 1599. Scotland got on board in 1600, and Russia made the shift in 1725. It took a bit longer for England, Wales, Ireland, and Britain's American colonies to make the change, which finally happened in 1752.

The practice of crafting resolutions has ancient roots, going back to the Babylonians who made promises to their gods in the hopes of earning their favor. Resolutions made a comeback in the 18th century when English churches began holding New Year's services centered on rectifying past mistakes.

So, what's the purpose of these resolutions? Achieving a resolution gives us a sense of purpose and accomplishment. Success in reaching a goal brings happiness, and this tradition of setting goals at the dawn of a new year provides the structure and optimism needed for future success and contentment.

However, there are common misconceptions about resolutions and New Year's itself. It's often believed that long-term resolutions must yield immediate results, which can lead to disappointment and stress. Instead, taking the time to assess our life situations and setting smaller, attainable goals can have a more profound impact on our personal growth.

Moreover, New Year's is sometimes seen as a magical day of instant transformation. But real change takes time, and one day alone won't dramatically reshape our lives. Rather than expecting an overnight metamorphosis, we should view New Year's as a starting point, a chance to initiate gradual changes in our thoughts and actions. Meaningful transformation is a continuous journey.

It's crucial to remember that self-reflection and the pursuit of personal growth need not be confined to New Year's alone. While the tradition of starting a new calendar year naturally lends itself to reflection, any day of the year can be an opportunity for introspection and change.

## **CULTURAL AWARENESS CORNER: HAPPY NEW YEAR BY MICHAEL C. LEWIS MD, FASA**

In conclusion, let's welcome the New Year with open minds and a dedicated commitment to achievable goals. By doing so, we harness the power of this global celebration to foster unity, embrace our diversity, and embark on a journey of success, accomplishment, and joy.

Best wishes for a happy, successful, and most importantly healthy New Year.

Deepest appreciation,

Michael C. Lewis MD, FASA

Department of Anesthesiology, Pain Management, & Perioperative Medicine  
Joseph L. Ponka Chair, Henry Ford Health System  
Professor, Chair (Interim), Michigan State University College of Human Medicine  
Professor of Anesthesiology, Wayne State University

## **EPIC UPDATES AND UPGRADES**

In December, EPIC provided us with several significant updates. Please take a moment to review the two attached links.

[Link to Anesthesia Upgrade PowerPoint](#)

## **EPIC UPDATE BY CARLEE CLARK, MD**

I wanted to make everyone aware of the 12/7/23 roll out of EPIC Secure Chat and make sure everyone knows what we want people to use it for and what we do not want people to use it for.

Secure Chat is a message tool within EPIC that allows team members to send messages about patient to each other in a HIPPA compliant manner. It also allows a Group message for coordination of care. Attached are all of the tip sheets, so please take a look. These will be in the IS Know the Ropes emails as well.

The rollout on 12/7 is meant to be for NON-URGENT messaging for inpatient and outpatient services. So, for now, this really applies to our teams working on inpatient services such as our ICU faculty, APPs and residents on those rotations. You have access to these messages when logged into either EPIC, Haiku or Canto. When this goes live, push notifications will NOT be turned on. They are working to get push notifications turned on, and I will update teams when I have a time frame. If you have Haiku and once push notifications for Haiku are turned on, then you will be alerted to a new message about a patient within the app.

It will be functional within the perioperative space, but as of 12/7/23 we are not asking or requiring anyone to use this as the primary mode of communication in our perioperative spaces. Until we get more experience with Secure Chat and push notifications are turned on, we want people to continue paging and texting/calling for anesthesia team communication.

If anyone has used Secure Chat at other institutions, whether as inpatient or perioperative, and has tips, please share. I did already get a reminder that the messages are part of the chart and can be viewed by anyone, so professional language and messaging is important.

Please reach out with any questions/comments/concerns. We will continue to message about this as we progress through the roll out process.

**STAFF SPOTLIGHT**

Congratulations!

Sherry Morris, Tech of the Quarter

Amy Smith, CRNA of the Quarter

Dr. Madison Geating, Resident of the Quarter

Amanda Blum, NP/PA of the Quarter

We would like to thank everyone who participated in the nominations for the quarter. Please help us congratulate the four nomination winners! These care team members have gone above and beyond for our patients and the MUSC family.



**AMERICAN HEART ASSOCIATION HEART WALK—JOIN OUR TEAM!**

Join the MUSC Anesthesia Sleepwalkers [HERE!](#)



**Be a Heart Walk Hero**

**Register Today!**

By participating in the Heart Walk, you're joining Heart Walk Heroes from across the nation raising funds for lifesaving science. Science that can teach us all how to live longer and be Healthy For Good.

When you walk with us, you, yes you, are kind of responsible for saving lives. And if that doesn't make you want to do a victory dance right here and now, well, we don't know what will.

2024 Lowcountry Heart Walk

Charleston, SC

Saturday, Feb 24, 2024 Check-in 8am



## GRAND ROUNDS– JANUARY 2024



**“TBD”**

**Sarah Stender, MD, Pediatric Fellow**

**January 9, 2024**

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



**“The Butterfly Children: Perioperative Care for Epidermolysis Bullosa”**

**Jen Smith, MD, Assistant Professor**

**January 16, 2024**

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

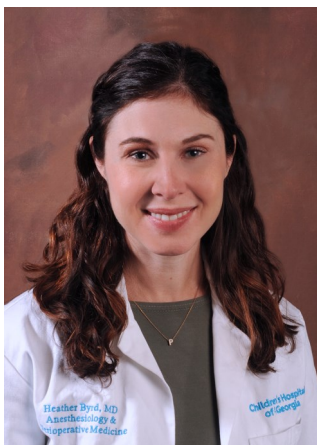


**“Transitional Circulation: Current Understanding and Anesthetic Considerations”**

**Stephanie Grant, MD, Assistant Professor**

**January 23, 2024**

**Department of Anesthesiology  
Emory University**



**“Neonatal Spinal Anesthesia—Old Techniques, New Applications”**

**Heather Byrd, MD, Associate Professor**

**January 30, 2024**

**Department of Anesthesiology and Perioperative  
Medicine  
Medical College of Georgia**

DEPARTMENT OF ANESTHESIA AND PERIOPERATIVE MEDICINE

Email: hameedi@musc.edu  
Phone: 843-792-9369  
Fax: 843-792-9314



**I HUNG THE MOON**

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

[CHECK OUT OUR WEBSITE](#)

**Future Events/Lectures**

**Intern Lecture Series**

**CA 1 Lecture Series**

1/3—Anesthesia for Patients with Neuromuscular Disease—Katie Hatter

1/10—Anesthesia for Patients with Kidney Disease—Tara Kelly

**CA 2/3 Lecture Series**

Per Rotations



Follow us on Facebook, Instagram, and Twitter:



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Graduation  
Friday, June 21, 2024  
Founders Hall

[ONE MUSC Strategic Plan](#)

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

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