



SLEEPY TIMES

VOLUME 18, ISSUE 12 DECEMBER 2024



MESSAGE FROM THE CHAIRMAN: MERRY CHRISTMAS, HAPPY HANUKKAH AND HAPPY KWANZAA

-Scott T. Reeves, MD, MBA

Where did 2024 go? It was an amazing year as we saw a phenomenal growth in our health system. We cared for record numbers of patients in our OR's and NORA sites. This would not have been possible without the dedication of all our faculty, residents, CRNAs, anesthesia techs and administrative staff.

Individual members of the department continue to be recognized by university leaders for their substantial contributions to MUSC. This year we had three nominations for 2024 President's Values in Action (VIA) Award.

President and Mrs. Cole selected winners for each of MUSC's five core values: Collaboration, Compassion, Innovation, Integrity, and Respect. Our nominations this year included Dr. Nicole McCoy, Dr. Mariah Tanious and, Anesthesia Tech Sherry Morris.

As we enter the holiday season, I wish we will all have the opportunity to reflect on the past year and celebrate the season with our loved ones. I am looking forward to being together at our Holiday party on December 7 with the return of our departmental band, *Special K and the Electrolytes*.

Merry Christmas, Happy Hanukkah and Happy Kwanzaa!!!



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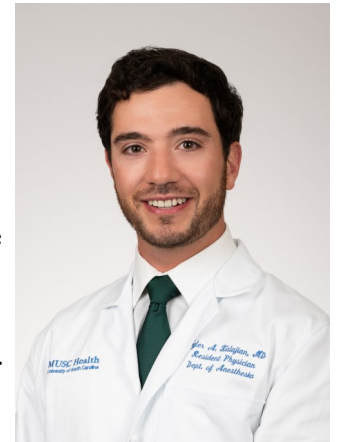
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COLLEGE OF MEDICINE RESIDENT OF THE MONTH



College of Medicine

Weekly Update
November 19, 2024



Tyler Kalajian, M.D., a PGY-3 in the Department of Anesthesia & Perioperative Medicine, has been named Resident of the Month. In part, his nominator shared the following:

“Tyler goes above and beyond to make every nurse, patient, family member, etc. feel safe, comfortable, and well taken care of. He is quick to think/act— he is already doing something before I even have to ask. He deserves this more than anyone I know.”

“I have had the pleasure of working with Dr. Kalajian for the last two years. I have taken care of patients of his in the MAIN PACU as an RN and can confidently say that my patients’ experiences and my experience as a nurse are noticeably different after being under his care. He takes care of patients well in the OR so that nurses and patients are set up for success in recovery. He stays with the patient in PACU until they are comfortable, stable, and the nurse feels confident about the patient’s condition. I have witnessed Dr. Kalajian come back after several hours to check on patients of his from earlier in the day, and I even watched once as he gowned up to enter his isolation patient’s bay in PACU to draw labs for the nurse, because the patient was a challenging stick. Dr. Kalajian not only values his patients, but he also values the relationships he has with his coworkers and periop staff. He takes the time to educate nurses and answer any questions they may have about the patient or anesthesia care. He is a leader and incredible doctor to work with.”

“Even though Tyler’s shift ended at 3:00 he stayed to help me get labs (not even on his own patient). Three nurses had already tried and the patient was under contact precautions. Even though it was 3:30, Tyler gowned, masked, and gloved up and was successful getting labs. This is just one of the many examples of how Tyler cares for his patients and nurses.”

Congratulations to Dr. Kalajian, and thank you for being such an invaluable team member for patients and colleagues.

WELCOME TO THE DEPARTMENT



Andrew Mendelson, DO
Assistant Professor

Andrew Mendelson is excited to join the Pain Medicine Division at MUSC. He is originally from Marlboro, New Jersey. He completed his undergraduate degree at Penn State and medical school at Lake Erie College of Osteopathic Medicine. Following medical school, Andrew completed residency at Thomas Jefferson in Philadelphia, PA and a pain medicine fellowship at NYP-Cornell, Hospital for Special Surgery and Memorial Sloan Kettering Cancer Center in New York City. Prior to joining MUSC, Andrew was an attending physician at the University of Virginia where he served as the Associate Program Director of the Pain Medicine Fellowship. Outside of work, Andrews enjoys exploring all the restaurants throughout Charleston and going to the beach with his wife, Melanie, and two-year-old daughter, Ellie. Saturdays in the fall you can find Andrew watching college football and cheering on the Penn State Nittany Lions.

THE POST & COURIER: AS MUSC MARKS ITS 200TH ANNIVERSARY, A LOOK BACKWARD AND FORWARD BY JERRY REVES, MD—NOVEMBER 7, 2024

Friday marks the bicentennial of the first school in the Deep South to offer medical education, and its lifespan has been like that of so many people it has taught, hired and healed — one defined by moments of great hope and vitality but also anxiety and illness. Overall, it has been a life well-lived and still brimming with potential in the years to come.



Dr. Jerry Reeves of the Medical University of South Carolina

Its staying power reflects a committed faculty and a few exceptional leaders. The College of Medicine's calamitous, near-ruinous episodes stemmed from sparse funding, uneven governance, geography, war, poverty, national education reform, economic depression, limited aspirations and politics.

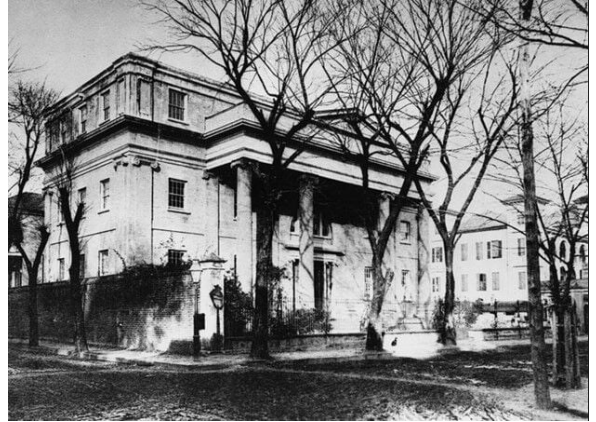
When the state chartered the new Medical Society of South Carolina, it provided no money. The Medical Society itself also refused to support the school financially. The seven original faculty members, most graduates of the University of Pennsylvania School of Medicine and all but one under 35 years of age, chipped in to build a wooden school on land donated by the city of Charleston at Franklin and Queen streets.

The state later replaced that with a brick building, and a school once strapped for cash began to flourish thanks to a determined faculty that included some of the nation's best and brightest academic physicians.

In 1833, however, the faculty resigned from the Medical College of South Carolina and formed a competing school at New and Broad streets: the Medical College of the State of South Carolina. Six years later, the split was resolved, and the new school, having won out, returned to the Queen Street campus. James Moultrie Jr., M.D., was its dean and the president of the American Medical Association in 1850.

The college closed during the Civil War, but its faculty and alumni contributed to the Confederate Medical Corps led by Surgeon General Samuel Preston Moore, who is credited with running a medical service superior to the Union's; the Confederacy had a 30% lower mortality rate from disease and combat injuries, despite difficulty obtaining supplies. Before the war, the College of Medicine was the nation's fifth-largest and among its most prominent; after the war, it was a shell of its former self, much like the city around it.

At one point, the college even waived tuition fees so students could attend the poorly equipped school; then the earthquake of 1886 caused extensive damage to its building, nearly finishing the college off. Philanthropic gifts from the Vanderbilts, Astors and many other Northeastern families helped save it. The school was rebuilt, and a new Memorial Hospital was built on marshland filled mostly with rubble from the hundreds of destroyed homes in what today is known as Charleston's Medical District. Dean Francis LeJau Parker led a faculty of 11 physicians, members of the Medical Society who worked in the new Roper Hospital constructed on the site of Memorial Hospital on Jonathan Lucas Street.



The first College of Medicine building for what now is known as the Medical University of South Carolina.



The Medical College building on Franklin Street was built in the early 19th century to replace the original building constructed by its faculty.

**THE POST & COURIER: AS MUSC MARKS ITS 200TH ANNIVERSARY,
A LOOK BACKWARD AND FORWARD BY JERRY REVES, MD—NOVEMBER 7, 2024**

Dean Robert Wilson Jr., an honor graduate of the Class of 1892, knew the school had the American Medical Association's lowest grade and was considered unacceptable by many. "The order had to change or the college must perish," he wrote, but the College of Charleston and the University of South Carolina both refused to merge with it. Wilson then persuaded populist Gov. Coleman Blease to have the state take over the College of Medicine in 1913, and Charleston residents raised \$75,000 to build a new College of Medicine Building on the east side of Jonathan Lucas on city land, a building that survives to this day.



MUSC's original building following the 1886 earthquake

With state support, the school gradually added faculty, including its first full-time professor, Kenneth Lynch, in 1913. A self-described "benevolent dictator," Lynch had as his goal making the medical school a nationally recognized institution again by hiring clinical and non-clinical faculty from the best medical schools around. He overcame bitter opposition to build the school's own hospital in 1955 and staffed it with clinical faculty under the College of Medicine's control, effectively separating the school from Roper.

Dr. James William Colbert Jr. continued to build the academic programs and in 1969 helped resolve the contentious 100-day hospital-workers' strike; the school also became the Medical University of South Carolina that year, with six colleges and a clear aspiration to join the ranks of the nation's most distinguished academic health care institutions. MUSC President James B. Edwards embraced this and sought counsel from experts in academic medicine from all around the country from 1989 until 1996.

In recent decades, the college's deans — including Layton McCurdy, Etta Pisano, Ray DuBois, Deborah Deas and Terry Steyer — continued to work with our provosts, presidents and trustees to seek excellence in research, education and patient care.

U.S. News and World Report has ranked several adult programs at MUSC among the nation's best, and the National Institutes of Health has awarded the College of Medicine more than \$100 million a year for research. Currently, MUSC's congenital heart disease program ranks second in the country and No. 1 in patient outcomes.

Integration didn't come easy at the College of Medicine, but by 2005, it had the most African American men (10% of all nationwide) in a single medical school; Drs. Debra Deas and Thad Bell led robust efforts to recruit, retain and support students of all backgrounds — efforts that continue today.

Meanwhile, the past decade has seen a remarkable expansion of the mission of providing clinical care across the entire state — a reflection of leadership by President David Cole and MUSC Health CEO Pat Cawley. MUSC Health now operates 16 hospitals statewide, and 12 medical students per class spend their final two years of education in Anderson.

As MUSC's 200th anniversary arrives, South Carolinians should be proud that our state is home to this resilient, estimable institution, one whose continued health and vitality will give us all more of the same.

Dr. Jerry Reeves is an MUSC professor and the author of "South Carolina's Indomitable College of Medicine, The Bicentennial History," published by Evening Post Books.

SHOCK CALLS FROM MAIN HOSPITAL BY CARLEE CLARK, MD**To initiate Cardiogenic Shock Call**

Call 22123 and ask to initiate Cardiogenic Shock Page

Give patient's name, dob, location at time of page, call back number and **ask that initiating physician be added to the page list**

Once on the call, shock coordinator will make sure all participants have joined before report is given

**Participants**

- Shock Coordinator
 - Heart Failure
 - Critical Care
 - CT Surgery
 - Interventional Cardiology
 - ECMO
 - Perfusion
 - Life Guard
 - ATC
 - CVICU Charge, CICU Charge
- *STBICU attending for calls initiated from Main Hospital

Physician initiating call will give patient SBAR.

In addition to patient's SBAR (if available)

- Blood pressure, Heart rate & rhythm
- Oxygenation delivery w/ ABG
- Presence & current doses of Vasopressors, Inotropes, sedatives
- Labs- Lactate, Bun/Cr, LFTs/T. Bili, Troponin
- Urine output past 2 hours
- If patient has a recent RHC, leave in swan- CO/CI, SVO2, RA, PA, PCWP
- Recent echo with ejection fraction

If it is determined that patient requires VA ECMO cannulation at Main Hospital

- Trauma surgery team on call will cannulate for VA ECMO
- Discussion regarding transportation post cannulation will happen before the shock call is over
- VA ECMO patients will be managed in the CVICU in ART
- Further need for interventions will be assessed once patient arrives to CVICU

SHOCK CALLS FROM MAIN HOSPITAL BY CARLEE CLARK, MD

For ECPR Intra-op Calls Please Provide the following information:

- Patient Age, BMI, and relevant co-morbidities (active malignancy, chronic heart/lung/kidney/liver, recent stroke)
- Surgical Procedure
- Etiology of cardiac arrest, or severe cardiogenic shock
- Are they still receiving ACLS, what vasoactive infusions are running
- Last Lactate and pH, EtCO₂ if CPR is in progress
- Are they actively bleeding

Ideal ECPR Candidates:

- Reversible etiology such as acute MI, PE, drug overdose
- High quality CPR: EtCO₂ >15, SBP >90 with CPR on arterial line

Relative Contraindications to ECPR:

- Age >75
- Irreversible & terminal end stage co-morbidities
- Advanced Malignancy
- Cirrhosis
- Active intra-cranial hemorrhage
- Severe peripheral vascular disease
- Intra-abdominal aortic pathology, aortic dissection or large aneurysm
- Uncontrollable hemorrhage
- pH <7
- Lactate >10
- Extreme Obesity BMI >45

Purpose of Shock Call Page:

- Identify if patient is a candidate for MCS
- If shock call team decides patient is not a candidate for ECMO, it will not be offered
- Determine urgency of MCS initiation (intra-op cannulation versus stabilize & transfer to ART)
- Coordinate cannulation teams
- Notify CVICU Team

Special Considerations for Intra-operative ECMO at UH

- Have bolus heparin available, will be needed for cannulation
- If occurring during daytime hours (7am-3pm) and a member of the ICU or Cardiac team is at UH please involve them in the case to assist with management
- TEE guidance is a helpful resource
- Right Upper Extremity Arterial Line is preferred

2024 DOOR DECORATING CONTEST

The holiday season is upon us, and we’re bringing some cheer to the office with our **Annual Holiday Door Decorating Contest!**

Unleash your creativity and transform your office door into a festive masterpiece. Whether you go for classic, quirky, or something entirely unique, now’s your chance to spread joy and show off your holiday spirit! You can decorate your office door or a shared door (ex: resident library door, on-call rooms, etc.) in any fashion you’d like.

We will return to the panel of external judges who will vote for the winners. Additionally, we will continue the virtual voting for the department and award one “Popular” vote. Please send **Trey Hiott** a picture of your door by **Tuesday, December 17, 2024**. He will create the survey and send out for judging and then announce on Friday, December 20th.

There will be a prize for 1st, 2nd, and 3rd place and the popular vote!

As we continue through the holiday season, please review our [Decorations Guidelines](#) before decorating patient-facing areas. These guidelines include recommendations for safe and welcoming holiday decorations. Thank you for keeping our environment safe and inclusive for our patients, families, and care team members. Get your craft supplies ready and let’s make the office the most cheerful place to be. We can’t wait to see your creations!

Last years winners:

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



AMERICAN HEART ASSOCIATION HEART WALK—JOIN OUR TEAM!

To join our team or donate click [here!](#)

Date & Time

Location

2025 Lowcountry Heart Walk

Saturday, February 22, 2025

Saturday, February 22, 2025

8am Festivities Begin
9am Walk Begins

The Joe (RiverDogs Stadium)
360 Fishburne Street
Charleston, SC 29403

GWEN PRESIDENT—ANESTHESIA TECHNICIAN II

We would like to extend a big congratulations to Ms. Gwendolyn (Gwen) President for her achievement of successfully completing the requirements to reach Anesthesia Technician II tier level. Ms. President has devoted ten hard working years to MUSC as an Anesthesia Technician, having gained extensive experience while working across all anesthesia areas on campus. Now based at Rutledge Tower, Ms. President is both eager and well-equipped to embrace the additional responsibilities associated with her new position.



SC ASSOCIATION OF NURSE ANESTHESIOLOGY ANNUAL MEETING

Practitioners from the Charleston Division of MUSC were well represented during the three-day South Carolina Association of Nurse Anesthesiology Annual Meeting (SCANA)

The annual S.C.A.N.A. meeting was held in Myrtle Beach at the Marriott Grand Dunes Resort and Spa. Several MUSC CRNAs and many of our SRNAs attended. It was a robust meeting filled with education sessions, student research and poster presentations, and professional advocacy.

Dr. Dennis McKenna, Bylaw Chair, presented changes to the bylaws to the membership and Dr. Blake Frazier (PAC Chair) presented the PAC report during the Annual Business Meeting. A Hawaiian Luau themed PAC Event was held and was a sold-out event. MUSC CRNAs from Main, Rutledge, and West Campus contributed to the silent auction fundraising event.



Dr. Amy Schmoll of our West Campus was awarded Researcher of the Year for her doctoral research: Succession Planning and Leadership Development for CRNAs. Dr. Schmoll received her DNP from the University of Northern Kentucky in 2024.

INTRODUCING SPECIAL K & THE ELECTROLYTES

As we all learned from the November edition of Sleepy Times, the department's band has reassembled under a new name, **Special K & the Electrolytes**. They will make their inaugural debut at our annual Holiday party. It will be a fine evening, and I hope everyone can attend. If you have not yet sent your RSVP, please do so by the deadline.



TOYS FOR TOTS

The holiday season is here, and so is our much-anticipated Holiday Party! This year, we're continuing our cherished tradition of supporting **Toys for Tots**! To spread the holiday cheer and make this season special for children in need, we ask that everyone brings an unwrapped toy to the party. Your thoughtful contributions have always made a difference, and we're excited to see that generosity shine once again!

The goal is to collect as many **new, unwrapped toys** for our holiday party on December 7th. We ask that everyone attending the holiday party to please donate a toy. You can bring a toy to the holiday party or weeks leading up to the party, whichever is easier. There will also be marines at our party to collect all the toys!

At the moment, there will be donation boxes at the following locations on campus:

Storm Eye Building- Suite 301

University Extension- EH525

Art- Suite 4200

We were able to collect three boxes last year. Let's see if we can fill four this year!

These toys will be distributed as Christmas gifts to less fortunate children in our community. You can find information on the program at <https://charleston-sc.toysfortots.org/local-coordinator-sites/lco-sites/about-local-toys-for-tots.aspx>.

Let's make this celebration one for the books – a night of joy, connection, and giving back!



TAGME CERTIFICATION

We would like to congratulate Angie Maguire on earning her TAGME Certification! The "Training Administrators of Graduate Medical Education" credential is accomplished through a combination of experience, continuous education, and successfully earning a passing assessment result.

The National Board for Certification of Training Administrators in Graduate Medical Education (TAGME) was established to advance the profession of those who manage residency and fellowship programs. By creating an assessment process that requires the demonstration of a high-level of competence and expertise in GME program management, TAGME certification has set the standard for administrators, coordinators and managers since 2005.

If you see Angie around the department, please congratulate her on this huge accomplishment!



RESEARCH CORNER

Local and Regional Anesthesia


Dovepress

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 Open Access Full Text Article

CASE REPORT

Prolonged Duration of Peripheral Nerve Blockade in a Pediatric Patient with Charcot Marie Tooth Disease: A Case Report

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Natalie Barnett, MD

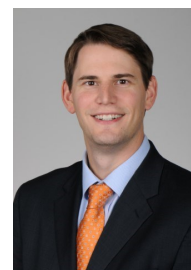


Amanda Bunnell, MD

Multidirectional Blood Flow During Cardiopulmonary Bypass Mimicking an Iatrogenic Aortic Dissection During Transesophageal Echocardiographic Examination

John C. Foster, MD, Maxwell Kilcoyne, MD, Lucas Witer, MD, and George Whitener, MD, *Charleston, South Carolina*

John Foster, MD



George Whitener, MD

GRAND ROUNDS- DECEMBER 2024



“1-hour NPO Times for Clear Liquids in Pediatric Anesthesia ”

Joelle Karlik, MD, Assistant Professor

December 3, 2024

**Dept. of Anesthesiology
Emory University School of Medicine**



“Human Factors and Patient Safety”

Ken Catchpole, PhD, Professor

December 10, 2024

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



“Remimazolam, A new tool for the toolbox. ”

Rishi Patel, MD, Assistant Professor

December 17, 2024

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

DEPARTMENT OF ANESTHESIA AND
PERIOPERATIVE MEDICINE

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I HUNG THE MOON

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

[CHECK OUT OUR WEBSITE](#)

Future Events/Lectures

CA 1 Lecture Series

12/4—Anesthesia for Patients with Kidney Disease—Tara Kelly

12/11—Hepatic Physiology & Anesthesia for Patients with Liver Disease—Joel Sirianni

12/18—ITE Review—Peds—Maryam Siddiqui



Follow us on Facebook, Instagram, and
Twitter:



 Follow @MUSC_Anesthesia



Holiday Party
Saturday, December 7, 2024
Carolina Yacht Club

[ONE MUSC Strategic Plan](#)

We Would Love to Hear From You!

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