Our 2024 Annual Meeting (March 22-24) of the Association of University Anesthesiologists (AUA) will be a return to form. For the first time in a decade, we will host an independent meeting in a university setting, with the goal of providing a uniquely academic experience. The Department of Anesthesiology at Washington University is graciously co-sponsoring the event, which will take place on campus in the Charles F. Knight Executive Education & Conference Center.

An exciting program is starting to take shape and will commence with a keynote address on the opioid crisis by Dr. Wilson Compton, psychiatrist and Deputy Director of the National Institute on Drug Abuse, part of the National Institutes of Health (NIH). Dr. Biyu He, a neuroscientist on the faculty of New York University, will deliver the President’s lecture on the neurobiology of consciousness. Dr. He is simply brilliant, and her work is illuminating new directions for cognitive neuroscience. She is also a true leader in the field, having recently convened an international working group at NIH to map the future of consciousness science.

The host program at Washington University will include first-rate scientists, with discussions ranging from the gut microbiome to primatology. Our Scientific Advisory, Educational Advisory, and Leadership Advisory Boards are currently crafting their sessions, with the goal of providing cutting-edge information and inspiration. However, the most important intellectual contributor to the meeting will be you. AUA members are leaders in anesthesiology and beyond, carefully selected based on their nationally recognized accomplishments. The opportunity for our members to interact in an intimate, university setting—or during a social event at the Saint Louis Art Museum—is what will make this annual meeting a true meeting of the minds.

Click here to view or print the AUA Update newsletter.
2024 CALL FOR AUA BOARDS & COMMITTEE VOLUNTEERS

Applications Accepted: September 1, 2023 to November 19, 2023 | 11:59pm PT

Applications for the Secretary, Councilor-at-Large and Council of Faculty and Academic Societies (CFAS) Representatives on the AUA Council should email a letter of interest and CV to vabalama@iars.org by November 19, 2023, 11:59 pm PT.

Welcome to the AUA volunteer community. The AUA is committed to diversity, equity, and inclusion across race, gender, age, religion, identity, and experience. Organizations that are diverse are proven to be better organizations. The volunteers should represent the diversity of our specialty and our society and are selected based on a consistent history of engagement, productivity, and activities to promote the AUA.

The AUA standing committee, advisory boards and serving on the AUA Council are a great way to get involved and promote excellence throughout the academic anesthesia community.

As a volunteer leader you have an opportunity to:

• Advance and foster the field of academic anesthesiology
• Collaborate and engage with other members in the academic anesthesia community
• Network with other AUA members

If you’re interested in becoming a volunteer leader, view the Volunteer Leadership Guide.

AUA STANDING COMMITTEE & ADVISORY BOARDS

Communications and Website Committee
The Communications and Website Committee is responsible for production of the AUA Update and production and maintenance of the website and other technological communications.

The Committee meets in person each year at the Annual Meeting and throughout the year via conference call. Members serve a three-year term.

Education Advisory Board (EAB)
The EAB is responsible for planning the educational program for the AUA Annual Meeting and providing content to the AUA Update. Members contribute to this process by advising on topics for the Annual Meeting and the newsletter.

The EAB meets in person each year at the Annual Meeting and throughout the year via conference call. Members of the EAB serve a three-year term.

Leadership Advisory Board (LAB)
The LAB is responsible for professional development of AUA members, so that AUA members will develop as leaders in academic anesthesiology. The LAB shall collaborate with other AUA leaders to establish an equitable and inclusive environment for AUA members.

The LAB meets in person each year at the Annual Meeting and throughout the year via conference call. Members of the LAB serve a three-year term.

Membership Engagement Advisory Board (MEB)
The Membership Engagement Advisory Board (MEB) is responsible for managing the AUA member portfolio to drive engagement, recruitment, and retention of a diverse AUA membership.

To review and consider any revisions to the membership eligibility requirements and member benefits for each of our membership categories. To identify the needs of members and recommend the development of services and engagement opportunities to meet those needs.

The MEB meets in person each year at the Annual Meeting and throughout the year virtually. Members of the MEB serve a three-year term.

Scientific Advisory Board (SAB)
The SAB is responsible for planning the scientific program for the AUA Annual Meeting and providing content to the AUA Update. Members contribute to this process by advising on topics for the Annual Meeting and the newsletter.

The SAB meets in person each year at the Annual Meeting and throughout the year via conference call. Members of the SAB serve a three-year term.

Volunteer
The Call for Volunteers is open between September 1, 2023, and November 19, 2023, 11:59 pm PT.
Welcome to this edition of the AUA Update! I’m thrilled to serve as the chair of the Communications and Website Committee, and there’s a wealth of exciting news and initiatives to share with our esteemed membership.

First and foremost, the anticipation is palpable for our 2024 AUA Annual Meeting scheduled for late March at Washington University in St. Louis. This promises to be a vibrant gathering, offering a fertile ground for academic dialogue, peer interaction, and knowledge dissemination, all set against the backdrop of this distinguished institution.

Our mentoring program galvanized by the Council is developing quickly and will be moving into the next phase. The aim is to nurture and mentor early-career academics by pairing them with seasoned and established professionals across the country, allowing for real alignment of interests and styles within the wider academic anesthesiology community.

In this edition of the AUA Update a highlighted feature is the Mock Study Section initiative contributed by Kimberly Rengel from Vanderbilt University. Collaboratively designed by our Scientific Advisory Board, this initiative serves as an invaluable resource, particularly for mid-career professionals keen on acquiring nuanced insights into the complex arena of grant assessments and will be available at the Annual Meeting.

Our tireless efforts in professional development also shine through in a new Education Mentorship Workshop conceived by Susan Martinelli’s Education Advisory Board group. Slated for its official unveiling at our spring meeting in St. Louis, the program aims to support mentorship in our respective departments and spheres by giving the tools of mentorship in a workshop format.

Further adding to our membership benefits, Maya Hastie, the chair of the Leadership Advisory Board, has contributed a piece to celebrate Women in Medicine month showcasing members of the organization. Maya’s group continues be focused work around leadership within the organization and beyond.

Thanks to the concerted efforts of the Membership Engagement Board, headed by Mike Aziz and Valerie Armstead, we have refined the criteria for membership at various levels. The result is a more transparent and inclusive membership model, as elucidated in their enclosed article that delineates this progressive change. Additionally, the Membership Engagement Board has introduced three new distinguished awards: the Lifetime Achievement Award, the Active Member of the Year Award, and the Rising Star Associate Member of the Year Award. Details can be found on our AUA website, offering well-deserved recognition to our members’ contributions.

We are issuing a call for volunteers to join our various Boards and Council. This presents a fabulous chance for both associate and active members to grasp the workings of the AUA and to shape its future trajectory.

Last but not least, our AUA president, Dr. George Mashour, the Robert B. Sweet Professor and Chair of the Department of Anesthesiology at the University of Michigan, recently offered a candid and enlightening webinar entitled, ‘Failure: The Dark Matter of an Academic Career.’ The talk resonated profoundly, reminding us that the pathways to professional success are often nonlinear and fraught with challenges that can also serve as learning experiences. This is available on the website for viewing also.

In closing, the collective efforts of our dedicated members continue to invigorate the AUA, ensuring that we remain at the forefront of academic excellence, innovation, and community building. Onward to an exciting and fulfilling year ahead!

Stay tuned for more updates, and thank you for your continued support and engagement with the AUA!
In recent membership surveys, the AUA community requested more offerings related to mentorship. In response to this call, the LAB is developing a mentorship program. (Thank you to those of you who already signed up to be mentors!) To complement the LAB’s mentoring program, the EAB will be offering a Mentorship Workshop preceding the annual meeting in St. Louis on Friday, March 22, 2024.

Good mentorship is one of the most influential factors in one’s career. However, there is often very little training for mentors to understand what good mentoring is and how to mentor effectively. This training program will give mentors the basic skills to serve as an effective mentor and is geared toward individuals who are currently mentors and would like to improve their mentoring effectiveness. This program is not specific to research mentoring, although research mentors may gain important insights about the process of mentoring in general. We encourage all AUA members to take advantage of this opportunity as you all serve as mentors in at least one capacity.

We are fortunate to have Dr. Harriet Hopf, Professor and Executive Director of Faculty Development and Academic Affairs in the Department of Anesthesiology at the University of Utah, lead this Mentorship Workshop. She is a recognized expert in developmental relationships, including mentoring, advising, sponsorship, and coaching. She is Co-Director of the Utah Coaching and Advancement Network (U-CAN), which provides professional effectiveness and career advancement coaching programs and coaching and mentoring skills workshops at Utah Health. Numerous awards highlight her success as a mentor, including the 1999 UCSF Inaugural UCSF Graduate Students Association Faculty Mentorship Award, 2013 FAER Mentoring Excellence in Research Award, the 2017 University of Utah Linda K. Amos Award for Distinguished Service to Women, and the 2019 Inaugural Women in Anesthesiology Distinguished Service Award.

The Mentorship Workshop will cover the following topics:
• Introduction to (Career) Mentoring
• What You Bring to the Table as a Mentor
• Setting Ground Rules and Commitments
• Building Trust in a Mentoring Relationship
• Using Coaching Skills in Mentoring

First preference for workshop registration will be given to those who signed up to serve as AUA Mentors. More information on details of registration will be sent out soon. Jump on this opportunity quickly, as space is limited! We look forward to seeing you in St. Louis.

On July 11, 2023, AUA President George Mashour, MD, PhD, presented “Failure: The Dark Matter of an Academic Career” to AUA Associate members. Watch the recording.
The Association of University Anesthesiologists (AUA) is delighted to launch two new awards managed by the Education Advisory Board. Any member of the AUA can submit the name of individuals for consideration for these awards. Members are also encouraged to self-nominate. Applications are being accepted September 1, 2023 through November 19, 2023 at 11:59 pm PT.

**EDUCATION RESEARCH AWARD**

The EAB Education Research Award is to acknowledge outstanding achievement and success in education research by an anesthesiologist. Its purpose is to publicize, motivate, encourage, and suggest models for original education research at its best. Nominations are invited from AUA members and should include the PubMed IDs of the relevant educational research that has been published in the previous three years. The letter of nomination should also describe how the research contribution has advanced the field of medical education.

**EDUCATION INNOVATION AWARD**

The EAB Education Innovation Award celebrates and recognizes new and innovative developments in medical education. Impacts may include a policy or programmatic change, a revelation of a pedagogic tool or methodology, increased awareness of an issue, implications for research by other contributors, or a change in thinking among anesthesiology education professionals. Nominations are invited from AUA members and should describe the nominee’s contributions and how the innovation contributes to medical education.

**General guidelines include:**

- Current members of the AUA council shall not be eligible for selection.
- Eligible nominees are members of the AUA and are in good standing.
- Initial nominations are reviewed by the corresponding advisory board. Recommendations are then submitted to the AUA council and AUA president. Final selection is made by the AUA council.
- Documents needed:
  - Application (unified application for all nominees): demographics, professional information, contributions that merit the award, narrative justification of why the candidate should be considered for the award.
  - Nomination Letter or Letter of Support.
  - Nominee’s CV.
AUA LAUNCHES MENTOR DIRECTORY

The AUA is pleased to announce its new AUA Mentor Directory!

Comprised of more than 100 AUA members representing the preeminence of academic anesthesiology, the AUA Mentor Directory is organized into eight areas of interest: Administration, Advocacy, Education, Leadership, Practice, Management, Quality, and Research.

FIND A MENTOR

More than 100 Mentors!

Visit the AUA Mentor Directory

George A. Mashour, MD, PhD, and President of the AUA, provided a video message encouraging members to explore the AUA Mentor Directory and learn more about the AUA members who have volunteered to provide mentorship and sponsorship.

George Mashour, MD, PhD
President, AUA | Robert B. Sweet Professor & Chair of the Department of Anesthesiology, University of Michigan

AUA President George Mashour, MD, PhD; President-Elect Dolore B. Njoku, MD; Secretary Zhongcong Xie, MD, PhD, FASA; and Past President Jeanine Wiener-Kronish, MD, recently express their gratitude to AUA's inaugural slate of 100+ AUA mentors.

Watch the video.
UPDATES FROM THE MEMBERSHIP ENGAGEMENT BOARD

The MEB has announced a slate of awards to highlight substantial service contributions: Lifetime Achievement Award, Active Member of the Year Award, and Rising Star- Associate Member of the Year Award. Please nominate your colleagues by November 19.

The MEB has made substantial progress in editing AUA Active Member and Associate Member criteria to provide better clarity to the nominating member and candidate applicant. Stay tuned for these updated criteria.

AUA MEMBERSHIP ENGAGEMENT IN 2023

The National Medical Association (NMA) is the largest and oldest national organization representing African American physicians and their patients in the United States. It was founded in 1895 as the National Association of Colored Physicians (NACP) and renamed the NMA in 1901. The organization at its formation, was non-exclusionary and has continued to welcome and help healthcare professionals of all ethnicities. At the time of its establishment, African American physicians were excluded from membership in the American Medical Association (AMA) and other medical organizations due to the racial segregation that existed in the United States. Today, Black African-Americans represent only three percent of all academic medical faculty in the U.S. although they make up 13% of the U.S. population. Clearly, opportunity exists to further strengthen the pipeline of African-Americans to academic medicine.

It was with gratitude that the National Medical Association (NMA) welcomed Dr. Dolores Njoku during its Anesthesiology Leadership forum, moderated by Dr. Tracey Straker, at its August 2023 annual meeting in New Orleans. Dr. Njoku, the incoming president of the Association of University Anesthesiologists (AUA), made her second visit in two years on behalf of the AUA, to the NMA national meeting. During her speaking session, Dr. Njoku highlighted the positive aspects of AUA membership. Furthermore, Dr. Njoku informed the audience about the establishment of the inaugural AUA Membership Engagement Board (MEB) and gave a nod to the co-chairs of the MEB. Dr. Njoku also acknowledged the heavy lift given to the MEB kick-off activities by Vivian Abalama, IOM, CAE. Dr. Njoku also encouraged members of the NMA as well as those NMA members who were also AUA members to visit the AUA booth in the exhibition hall at the NMA meeting. This was also the second year that AUA was present as an exhibitor at the annual NMA meeting.

Since the last year of membership nominations and approvals by the AUA, ten NMA members were approved for active AUA membership. In a proactive effort to promote membership and engagement in the AUA, existing and newly joined dual AUA and NMA members have made a commitment to actively identify qualifications and nominate NMA members and non-members to become part of the AUA. Hopefully, other anesthesiology organizations will follow the example of the NMA in encouraging their colleagues to become part of the AUA.

REFERENCES:
The Association of University Anesthesiologists (AUA) is delighted to launch three new awards; Lifetime Achievement Award, Active Member of the Year and Rising Star—Associate Member of the Year Award managed by the Membership Engagement Advisory Board. Any member of the AUA can submit the name of individuals for consideration for these awards. Members are also encouraged to self-nominate. Applications are being accepted September 1, 2023 through November 19, 2023 at 11:59 pm PT.

**LIFETIME ACHIEVEMENT AWARD**

The Association of University of Anesthesiologist Lifetime Achievement Award is the highest and most prestigious award given to a member of the organization recognized by the broader academic anesthesia community as a significant leader in the academic anesthesiology profession. Selection for this honor recognizes an individual's outstanding and sustained contributions to the academic anesthesia profession and AUA, as well as exemplary professional practice and leadership.

**ELIGIBILITY CRITERIA:** The nominee must have served the AUA and the profession of academic anesthesiology in a significant leadership capacity, demonstrating the qualities of leadership and service to the academic anesthesiology profession by his/her professional and personal example.

- Must be an AUA Member or retired member.
- Must have served the AUA in a volunteer leadership position on the AUA Council, Board or Committee
- Current members of the AUA Council, Board and Committee are not eligible.

**ACTIVE MEMBER OF THE YEAR AWARD**

The AUA Member of the Year Award is given in recognition of an active member for their commitment to the advancement of academic anesthesiology and their dedication to developing scholars, educators, practitioners and the next generation of leaders in academic anesthesiology.

**ELIGIBILITY CRITERIA:** The AUA Member of the Year Award is given annually to a person who, though not a member of the AUA Council, has supported the mission of AUA by a notable contribution to 3 or more of the following activities:

- Current or past active participation on an AUA Board, Committee or Taskforce
- Serves as an Active Mentor
- Contributions to AUA Update
- Presentations at AUA Annual Meeting or Webinars
- Significant recruitment of new members
- Providing leadership in special efforts sponsored by AUA (e.g., creating collaboration opportunities with other organizations, creating a new program for the AUA)
RISING STAR – ASSOCIATE MEMBER OF THE YEAR AWARD

AUA is committed to cultivating the next generation of our profession. AUA’s Rising Star – Associate Member of the Year Award was established to identify the next generation of leadership in academic anesthesiology. It is designed to recognize associate members who have already made an impact on the profession and have demonstrated the ability to lead the next generation of academic anesthesiologists.

General guidelines include:

• Current members of the AUA council shall not be eligible for selection.
• Eligible nominees are members of the AUA and are in good standing.
• Initial nominations are reviewed by the corresponding advisory board. Recommendations are then submitted to the AUA council and AUA president. Final selection is made by the AUA council.
• Documents needed:
  ▪ Application (unified application for all nominees): demographics, professional information, contributions that merit the award, narrative justification of why the candidate should be considered for the award.
  ▪ Nomination Letter or Letter of Support.
  ▪ Nominee’s CV.
SEPTEMBER IS
WOMEN IN MEDICINE MONTH

2023
September is the “Women in Medicine” month. Since 2020, we have dedicated the September newsletter of the AUA to women in academic anesthesiology. In this issue, we share the insights of a group of successful women leaders in academic anesthesiology, collected by open-ended survey questions. Each of our contributors is a leader in medicine who has used their position for advocacy and mentorship. Their reflections, their advice, and their insights are presented to recognize their contributions, to learn from their experiences, and to inspire the next generation of leaders in our field. We are grateful for our contributors’ time, candid advice, and thoughtful insights.

WHO ARE THE CONTRIBUTORS?

Dr. Odinakachukwu Ehie is an Associate Professor of Anesthesiology and Vice Chair for Diversity, Equity, and Inclusion at UCSF

Dr. Emily Gordon is Associate Professor of Anesthesiology at the University of Pennsylvania, Vice Chair of Education and System Director for Cardiovascular Critical Care and Postoperative Care

Dr. Harriet Hopf is a Professor of Anesthesiology, Perioperative, and Pain Medicine and Adjunct Professor of Biomedical Engineering, Executive Director for Faculty Development in and Academic Affairs in Anesthesiology, and the Academic Senate President-elect at the University of Utah

Dr. Lisa Leffert is Professor and Chair of Anesthesiology at Yale University

Dr. Cynthia Lien is Professor and Chair of Anesthesiology at Medical College of Wisconsin

Dr. Daryl Oakes is a Professor of Anesthesiology and Associate Dean for Post-Graduate Medical education at Stanford University. She is also the immediate past Chair of the Women in Cardiothoracic Anesthesia group at the Society of Cardiovascular Anesthesiologists

Dr. Tracey Straker is a Professor of Anesthesiology at Montefiore Medical Center and the Vice Chair for Clinical Operations and DEI officer. She is also the chair of the DEI taskforce in the Society for Education in Anesthesiology, Vice Chair of ASA Committee on Fundamentals of Anesthesiology and Committee on Professional Diversity, Chair of the National Committee on Foreign Medical Education and Accreditation, and member-at-large of the AUA council

Dr. Jeanine Wiener-Kronish is Distinguished Professor and past Chair of Anesthesiology at Massachusetts General Hospital. She is also a past President of the AUA

Dr. Cynthia Wong is Professor and Chair of Anesthesia at the University of Iowa and President-Elect of Society of Academic Associations of Anesthesiology and Perioperative Medicine (SAAAPM).

“*A single conversation with a wise [wo]man is better than ten years mere study of books*”

—Henry Wadsworth Longfellow.
**WHAT WERE THE TOP 5 MAJOR FACTORS THAT YOU BELIEVE CONTRIBUTED TO YOUR PROFESSIONAL SUCCESS?**

**Mentors, Sponsors, & Role Models**

Our interviewees support the importance of mentoring relationships for career advancement. According to Dr. Oakes, mentors help us “recognize [our] potential to take on leadership opportunities at key moments in [a] career.” She in turn was committed to “leveraging and elevating the excellence of colleagues around” her. Dr. Hopf describes effective mentors in her career who provided “guidance, space, and encouragement.”

Sponsorship by contrast is when people in positions of influence create opportunities for others. Dr. Ehie noted that “early engagement in professional societies and committees” opened the door for sponsorship. Likewise, leaders can help faculty members advance by recognizing abilities and potential, by being willing to support early-career faculty, and by providing the appropriate leadership positions. Dr. Wong describes the impact a former chair had on her career path by providing growth opportunities.

In addition, Drs. Oakes, Leffert, and Hopf noted the presence of strong women role models in their professional or personal lives, which undoubtedly contributed to their success and to their world views.

Peer networks create the opportunities for collaboration and for growth. These networks, within and outside one’s institution or specialty, allow for collaboration, for peer mentoring, and for encouragement. These networks can be a source of comfort and support; Dr. Gordon refers to them as “my work family.” Dr. Oakes, the inaugural chair of the Women in Cardiothoracic Anesthesia group, describes the value of the community as “a source of immense inspiration, strength, and support.” She summarizes the value of peer support as follows: “You need to find people who understand what you are navigating, and you will be surprised to find how much they also need you!”

**Personal characteristics**

Our interviewees shared several characteristics that promoted their success. The ability to listen to others, and to connect with people helped Dr. Leffert on her path. Several noted the need for hard work, perseverance in the face of adversity, tenacity, and not taking “no” for an answer. Dr. Hopf for example says she feels motivated to overcome the “pointless boundaries” when told “that’s not possible” or “you can’t do that.” The perspectives shared by our participants consistently describe a growth mindset: a willingness to take on challenges, the confidence to overcome them, and the willingness to acquire the know-how needed.

In addition, as Dr. Lien notes, resilience is an important attribute for success. Our interviewees had to demonstrate resilience and adaptability, and to be willing to change course when needed.

When she was denied a career in internal medicine despite her clinical fellowship training and research experience, Dr. Wiener-Kronish pivoted to anesthesiology under the guidance of a supportive chair. In another testimony to the importance of flexibility, Dr. Straker notes the value of “wearing different hats” to avoid being confined to one area. Dr. Wong describes the ability to identify an opportunity and the willingness and readiness to take it on. Dr. Gordon took on what she believed to be an interim position and turned into “one of the most fulfilling” and “rewarding” albeit unplanned role. Dr. Lien felt that her drive was “a constant desire to make a difference.” For both Drs. Hopf and Ehie, such opportunities included interdisciplinary research and projects that have tangible outcomes that can “change practice.” Finally, Dr. Lien notes the value of keeping a sense of humor, despite the challenges.

**Support system**

Having a reliable support system at home helped women advance their professional careers. For Dr. Wiener-Kronish, her supportive husband provided valuable encouragement and practical help by taking on “any responsibility he could with childcare and other chores.” In addition to being “an equal partner,” her supportive spouse viewed Dr. Hopf’s success as his own and “supported her in all endeavors” and amplified her work when possible. Also, the presence of families, friends, and social networks provided another layer of support. This is not surprising given women’s larger share of domestic chores. In addition, parental encouragement during one’s formative years or their help with childcare needs were recognized. In turn, this shapes how women are raising their own children.

**WHAT ADVICE WOULD YOU GIVE YOUR YOUNGER SELF?**

The advice our interviewees gave ranged from believing in yourself and your abilities, seeking mentors that will support you, and honing personal and interpersonal skills consistent with emotional intelligence.

External research funding and formal degrees may smooth the path for those dedicated to a career in research. Dr. Lien notes that advanced degrees such as executive MBA may also help establish the much-needed networks for advancement. Dr. Wiener-Kronish advises to “seek out mentors and sponsors who have a record of success with their mentees” and who have demonstrated tangible support for women on their teams. In addition, Dr. Straker notes the importance of asking for support when needed. She says, “I believed that I had to do everything by myself all the time.” Instead, she advocates for working smarter by delegating, by seeking collaborations, and by asking for support.

Conflict is unavoidable in the workplace; managing conflict is therefore a necessary and important skill. Dr. Leffert shares a valuable reminder that being right is not enough: “Just because you are right, doesn’t mean that 1) you have to speak up at that...”
time in that way, 2) things cannot be done differently.” Dr. Ehie likewise reminds us to “pick our battles” and she says “if you want your voice to carry more weight, use it for the situations that you think matter the most.”

In addition, our interviewees advocate for learning to let go of the “small stuff” and to “be kind to yourself.” Dr. Lien recommends being “less concerned about” perceptions of failure or setbacks, but instead to “enjoy the journey” along with its challenges. For Dr. Oakes, this includes being deliberate in seeking a work/life balance that supports personal wellness. Dr. Gordon uses the “metaphor of task juggling” where the balls represent “work, kids, family, friends and your sanity.” When a ball falls, it invariably bounces back, some requiring more effort than others. The wisdom may be in recognizing and deliberately safeguarding the more fragile breakable balls.

Dr. Oakes notes that success is not about seeking perfection, but rather about trying different things, accepting mistakes, and learning from them. Likewise, Dr. Hopf learned early on “not to regret the past but to learn from it.” She adds that her “goal is not to be perfect, but to be better every day.”

**WHAT HAS BEEN THE MOST DIFFICULT CHALLENGE TO OVERCOME IN YOUR CAREER?**

What challenges, if any, were related to your gender?

How did you go about overcoming challenges?

What lessons did you learn from this?

Dr. Leffert recognizes that “academic work is time consuming and requires passion” and necessitates intentional support. However, Dr. Hopf cautions that a successful career in academic medicine ought not to be all-consuming. Likewise, Dr. Gordon recognizes in hindsight that she didn’t “have to spend all my time at the hospital to be successful.” In addition, Dr. Hopf notes that there remains in academic medicine different values placed on different contributions with “clinical faculty treated as second-class citizens.” Finally, our interviewees noted that women face different challenges than men on their career paths, which should be recognized and addressed.

**Gender Bias & Discrimination**

Women and physicians from minoritized groups may be denied opportunities based on their gender or race or identity. Dr. Hopf suggests that women and physicians from minoritized groups are more likely to be affected by these challenges than their colleagues, because “they don’t necessarily fit the way things have evolved to run.” Dr. Wiener-Kronish advises that a key metric is the success of women in a group, achieved through the support they receive and the opportunities they are offered. Likewise, Dr. Leffert notes that often the voices of women are ignored or not heard. Accordingly, she recommends to “choose a place where you will be heard and where your strengths and passions” are aligned with the offered opportunities. Dr. Ehie faced challenges when trying to enact change. She believes these were due to a reluctance to recognize the need for change, and to implicit and explicit doubting of her abilities, compounded by her gender and her race. For Dr. Straker, the most difficult challenges were experienced because of “the intersectionality of being a woman and African American.” To overcome those “prohibitive” challenges, she had to “work harder than everyone else” and endeavored to achieve “exceptional credentials” including advanced degrees and expertise. She poignantly says “I had to learn how to make people see beyond the exterior.” She hopes that women are seen as “valuable contributors to the specialty, who are judged by their credentials and experiences” and not by physical appearances. Dr. Oakes similarly notes that women in medicine “always need to prove and re-prove” themselves, and that hard work alone is not sufficient to advance a woman’s career. Dr. Oakes personally experienced that when she realized she was not moving ahead professionally as fast as her male colleagues despite working hard. According to Dr. Oakes, for women to advance professionally, they have to “figure out how to navigate the politics” in their place of work. She advocates for identifying one’s sphere of influence and using it effectively.

**Gendered Role Expectations**

Cultural experiences may shape men and women’s approach to problems differently. For example, Dr. Wong notes that men seem to deal with set-backs more constructively than women, being able to “pick up and keep going.” She suggests this may be partly due to early life experiences such as participating in competitive sports. Bridging the gap may require us as parents and society members to identify these necessary skills and to provide the developmental opportunities throughout a person’s formative years. In addition, these role expectations may be assimilated by women leading to feelings of guilt for falling short both at home and at work. Dr. Oakes reports feeling guilty when at work for not being “at home for her kids and

*continued on page 13*
How can women manage the line between being assertive and being liked?

How can women balance doing what they believe is right and avoid being labeled as aggressive?

Success for women does not come without a social cost. Dr. Leffert acknowledges that for women “there is little space between” being liked and being labeled as aggressive. Dr. Lien believes the challenges women face are further amplified by the contradictory expectations people have for women in leadership. As mentor and tireless advocate for early-career faculty, Dr. Gordon was dismayed to be once told: “You set such unrealistic expectations for women in our department and that sets us up for failure.”

Dr. Ehie reminds us that we’re not going to be able to please everyone. Dr. Straker believes that “being liked is irrelevant.” Likewise, Dr. Hopf recognized that “being liked is not my purpose and doesn’t serve my leadership.” According to Dr. Straker, it is unfortunate that the terms assertive and aggressive are conflated. In her opinion, assertive women should not be viewed as threatening. Instead, she believes women should strive to be strong and assertive while graceful. Dr. Hopf recognizes she often works harder than men colleagues to ensure her leadership style is not perceived as aggressive. Dr. Oakes acknowledges that need to balance both perceptions, leading to the well-recognized “competence vs likability paradox.” She recognizes the women have to be careful to avoid being seen as “the problem.” She notes that different standards are applied in the work environment where the behaviors of men and women are judged differently. Men’s behaviors are judged by their perceived intent, while women’s behaviors are “frequently judged on their impact” and “how they make others feel.” Accordingly, women should be deliberate about their comments and actions and recognize their impact on others. For example, Dr. Gordon reinforces with her mentees that her goal is to “help them achieve their [own] career goals” and “to develop careers they want and love.”

To navigate this conundrum, our interviewees focus on their leadership style and approach. Successful leadership often means identifying organizational goals, developing an effective approach, and doing the right thing. Dr. Wong built her credibility as an institutional leader by demonstrating a goal-focused, team-oriented approach. Dr. Wong notes that the success of a team leader comes from the success of their team and its members, and by creating a cohesive group with a clear mission. Likewise, Dr. Hopf used her assertiveness “in service of institutional goals and doing the right thing” while framing it with “diplomacy, kindness, respect, and listening.” Dr. Lien’s approach to leadership is to “remain focused on the goals, tune out the naysayers, and seek advice from supporters.” Credibility is also gained by being an effective problem-solver. According to Dr. Hopf, anesthesiologists adopt a system’s-based approach to problem-solving, which is a desirable leadership skill. This allowed her to “see the big picture in advocating for and leading policy changes and development.”

Dr. Leffert advises women in leadership to be respectful, to listen with compassion, and to be willing to “move forward boldly.” Similarly, Dr. Ehie strives to do the right thing, to lead with integrity, and to have the courage to do and to say what she believes is right.

Dr. Leffert recognizes the importance of emotional intelligence in managing these situations. This manifests as self-awareness and self-regulation of our emotions when interacting with others. Dr. Oakes describes the importance of being deliberate about one’s actions and recognizing their potential impact on others, especially when providing critical information. She reminds us to avoid expressing emotions or anger and to remember “this is not personal.”

Several suggestions were presented to help achieve this balance. Dr. Wiener-Kronish believes that coaching provides women valuable feedback, and practical resources for managing difficult situations. Dr. Oakes also advocates for “slowing down,” taking note of one’s non-verbal body movements, deliberately choosing non-judgmental words, and adopting an even voice pitch and tone. In particular, this means to remain professional, and avoid hurtful or condescending comments. Regardless of the situation and its complexity, Dr. Wong advocates for leaders to always act professionally. Dr. Oakes believes that this will then convey that we “are in control of the situation and its complexity.”
and the outcome.” Dr. Gordon strives to establish and nurture interpersonal connections by being “boots on the ground,” and by listening with curiosity to learn about “someone’s family and professional life.” She believes that the presence of these “long-lasting relationships” then allow us to “give each other grace in challenging situations.”

WHAT IS YOUR HOPE FOR THE FUTURE OF ACADEMIC ANESTHESIOLOGY? FOR WOMEN IN ANESTHESIOLOGY?

How can our societies and departments help us get there?
Dr. Hopf believes the “future of academic anesthesiology is bright” because anesthesiologists are “systems thinkers” who are trained to “solve big, messy challenges” in the operating rooms and in the perioperative environment. We are also well positioned to adopt Dr. Leffert’s recommendation of engaging in interdisciplinary projects with wide impact. As Dr. Wong notes, safeguarding academic anesthesiology includes supporting the growth of the educational and research missions, in addition to the provision of clinical services. This growth is achieved by attracting and promoting a talented workforce, by eliminating existing challenges, and by a commitment to meaningful DEI endeavors.

Professional Development
Dr. Straker believes the future of our specialty “hinges on our trainees” and on our ability to impart to them a combination of “clinical knowledge, business acumen, advocacy, and the importance of empathy.” Dr. Oakes notes that “promoting and developing junior faculty” is “critical to bring new talent and energy” into academic anesthesiology. Dr. Leffert advocates for a “personalized career planning approach” that helps faculty obtain the specific skills they need for their professional growth. Likewise, Dr. Wiener-Kronish reminds us to provide our faculty members with opportunities for mentorship, for advanced leadership, and for professional growth such as shadowing opportunities. She also advocates for supporting women “at every level” of their career paths, from medical school through residency training, and as faculty. Similarly, Dr. Gordon advocates for “providing sponsorship and continued offering of leadership positions.”

Navigating Challenges
Dr. Oakes observes that several structural barriers exist to women’s advancement, including “bias in metrics of achievement and value, assignment of non-promotable tasks, and [presence] of professional opportunities” as well as “equity in support, mentoring, and sponsorship.” In addition, she notes that different work structures may be needed to include flexibility in “promotion timelines, and in work schedules” to accommodate the personal and family needs of the workforce. Dr. Gordon describes the confluence of personal and professional demands leading her to experience symptoms of burnout. She believes those challenges are easier to overcome with a supportive leader and advocate, a peer network that provides advice, asking for the needed help, and to “job craft” more effectively. “Job craft” refers to strategies used to deconstruct a role into its needed tasks and customizing the approach to those tasks.

Diversity, Equity, and Inclusivity
The future of our specialty, according to our interviewees, also requires investing in meaningful work to promote diversity, equity, and inclusivity in academic anesthesiology. It is recognized that diverse groups are more innovative; achieving diversity would improve the clinical care and the health outcomes of our patients. As Dr. Lien notes “our patients, medical students and residents deserve” the investment to create opportunities for all to succeed. In addition, Dr. Oakes remarks that all physicians including women and those from minoritized groups deserve to work in an “environment that recognizes and values their unique talents, skillsets, and styles.” For example, Dr. Wiener-Kronish suggests that medical societies can express their support by choosing to “meet only in states where women’s rights are supported.”

Dr. Ehie notes women’s underrepresentation in academic anesthesiology and at the level of full professors. Per Dr. Oakes, “we continue to have large and persistent gender and race disparities in senior leadership.” Based on her work, she thinks that this leadership gap is partly because the “skillsets” of women in mid and advanced careers have been “under-supported, underdeveloped, and underutilized.” For example, Dr. Straker notes that throughout her career she had not had mentorship opportunities, and that her academic trajectory was the result of her “own initiative and willingness to go the extra mile.” Dr. Oakes further notes that the lack of support may lead to “frustration and burnout” and may partly explain the observed “attrition of mid and senior career women.” In addition, Dr. Hopf warns us to the pitfalls of “performative allyship” that manifests as polished discourse around DEI but falls short of tangible actions for “recognizing and promoting the excellence around us that doesn’t look like us.”

Increased women’s representation in positions of leadership in academic anesthesiology (for example at the chair level) may help “break systemic barriers” to women’s retention and advancement. Dr. Oakes references the quote that, in medicine and in life, “men fail up” while women are “often asked to step down from leadership roles in order to mentor junior colleagues.” She advocates for providing better opportunities for mid- and senior career women leaders, rather than sideling them. By doing so, she believes we “will improve the path for all women” in our specialty. She also reminds us that women’s way of leading may be different but not less effective.

For Dr. Lien, the reward of the journey is witnessing the growth of trainees and faculty into leaders in our specialty. She reflects on whether she would choose “the same path again”; her answer is “Absolutely, yes!”
The Association of University Anesthesiologists (AUA) is delighted to launch two new awards managed by the Leadership Advisory Board. Any member of the AUA can submit the name of individuals for consideration for these awards. Members are also encouraged to self-nominate. Applications are being accepted September 1, 2023 through November 19, 2023 at 11:59 pm PT.

**MENTORING AWARD**
Awarded to an AUA member in recognition of their commitment to mentorship and sponsorship of faculty members in anesthesiology. Letter of nomination should describe the details of extent of mentoring and sponsoring activities, and their outcomes for the mentees, such as scholarship, grant funding, promotions, leadership positions. Letters of support from past or current mentees are needed. Evidence of longitudinal mentoring practice is encouraged. In addition, presence of a mentoring chain linking nominee with their mentees, who in turn are mentors should be highlighted when possible.

**IDEAL AWARD – INCLUSION, DIVERSITY, EQUITY, ACCEPTANCE, AND LEADERSHIP AWARD**
Awarded to an AUA member in recognition of their commitment and leadership to promote diversity, equity, inclusivity, and belonging at the local or national level. A positive impact on healthcare outcomes is the ultimate goal. In addition, tangible impact on diversity and equity metrics of the healthcare workforce such as promotions, recruitment, retention, professional development is sought. Evidence of community service and its impact should be provided when available. Other supporting evidence such as publications, speaking engagements, and committee work are encouraged and will be taken into consideration.

**General guidelines include:**
- Current members of the AUA council shall not be eligible for selection.
- Eligible nominees are members of the AUA and are in good standing.
- Initial nominations are reviewed by the corresponding advisory board. Recommendations are then submitted to the AUA council and AUA president. Final selection is made by the AUA council.
- Documents needed:
  - **Application** (unified application for all nominees): demographics, professional information, contributions that merit the award, narrative justification of why the candidate should be considered for the award.
  - Nomination Letter or Letter of Support.
  - Nominee’s CV.
  - The mentoring award would also require letters of support from mentees.
On Thursday afternoon, as attendees of the 2023 AUA Annual Conference were mingling or preparing for the President's Reception, a group of early career faculty and senior AUA mentors were engaged in an exciting inaugural event—a mock study section. The program was spearheaded by Dr. Jamie Privratsky with help from Dr. Michael Andraae.

The idea was hatched during an AUA SAB discussion on ways to improve training and engagement of younger investigators. Jamie was inspired by his own experience serving on an NIH study section through the Early Career Reviewer Program. “It was eye opening to me, quite different than expected,” he recalls. “I feel like you write grants differently when you know how they are reviewed. I felt it would be valuable for other people to see.” The initial study section was planned for 2022 and unfortunately was cancelled when the AUA conference transitioned to virtual due to COVID-19. Having completed the initial groundwork and received a great deal of enthusiasm for the idea, Privratsky decided to submit it as a panel for AUA 2023.

The event required a large collaborative effort. Successful anesthesiology researchers graciously offered previous grant applications to be reviewed by the mock study section. Grant reviewers consisted of early career investigators from the AUA and Early-Stage Anesthesiology Scholars (eSAS), an organization that provides mentorship, networking, fellowship, and support for early investigators across the country. Scholars were paired with experienced senior mentors who generously donated their time to read the grants and help the early investigators construct their feedback and review. Privratsky made an effort to match mentors and mentees by area of research and interests, providing a valuable networking connection in addition to the educational experience of grant review. The mentors and mentees met virtually, prior to attending the meeting, to complete the grant review based on NIH scoring criteria. In my case, my mentor offered guidance virtually from San Francisco while I was in Nashville through Zoom, emails, and phone calls.

The in-person session began with an overview of the grant review process including valuable insight and pearls of wisdom from National Institute of Neurological Disorders and Stroke program officer Natalia Strunnikova, PhD, MHS. The group then split into two rooms, one to review R awards and another for K awards. Study section chairs, Drs. Michael Andraae and Eric Gross, led the discussion for each of their respective panels. Each panel consisted of six early investigators who reviewed one of two grants (two grants total per study section). Each grant had a primary and two secondary reviewers. At the end of the review, the remaining reviewers and those in attendance were encouraged to ask questions, discuss the grant, and then provide a final score.

Overall, the study section was an amazing success. It provided early investigators the unique opportunity to connect through mentorship, review real grants generously submitted by anesthesiology researchers, and experience the review process. The early investigators unanimously agreed that the opportunity to spend time in a reviewer’s shoes was eye opening and led to a better understanding of engaging in the process in the future. As we seek to foster a supportive community that encourages anesthesiologists to pursue research and academic anesthesiology, events like the mock study section provide an unparalleled opportunity to make a daunting task feel more manageable while allowing attendees to foster connections and learn from one another. Congratulations to all involved on such a successful pilot of this event!

For more information on the Early Career Reviewer Program including eligibility and application, we encourage you to visit here.
Join us at the 70th AUA Annual Meeting hosted by Washington University in St. Louis from Friday March 22, 2024 to Sunday March 24, 2024! Connect and network with your AUA colleagues to gain access to the thought leaders throughout academic anesthesiology.

**REGISTRATION OPENS: END OF OCTOBER 2023**

### 2024 70th Annual Meeting Agenda and Program

**Friday, March 22, 2024**
- **AUA Council Meeting**
  10:00 am – 12:00 pm CT
- **Educational Mentorship Workshop**
  11:00 am – 3:00 pm CT
  Dr. Harriet Hopf, Professor, Director of Faculty Development and Academic Affairs in the Department of Anesthesiology at the University of Utah
- **Mock Study Section**
  2:00 pm – 3:00 pm CT
- **C.R. Stephens Lecture**
  4:00 pm – 5:00 pm CT
  Carolyn S. Caflbee, MD, MAS, Professor of Medicine and Anesthesia, Division of Pulmonary, Critical Care, Allergy and Sleep Medicine, University of California, San Francisco
- **C.R. Stephens Reception**
  6:00 pm – 9:00 pm CT

**Saturday, March 23, 2024**
- **President’s Welcome Address**
  8:00 am – 8:15 am CT
- **Keynote Speaker**
  8:15 am – 9:15 am CT
  Wilson M. Compton, M.D., M.P.E, Deputy Director of the National Institute on Drug Abuse (NIDA) of the National Institutes of Health
- **Scientific Advisory Board Panel**
  9:15 am – 10:15 am CT
- **Break & Discussion Time**
  10:15 am – 10:45 am CT
- **Educational Advisory Board Panel**
  10:45 am – 11:45 am CT
- **Break & Discussion Time**
  11:45 am – 12:15 pm CT

**Sunday, March 24, 2024**
- **AUA Business Lunch and Awards Ceremony**
  12:15 pm – 1:15 pm CT
- **Poster Sessions**
  1:15 pm – 2:15 pm CT
- **Scientific Panel, Host Program**
  2:15 pm – 3:45 pm CT
- **Membership Engagement Board Reception**
  3:45 pm – 5:00 pm CT
- **President’s Reception**
  6:00 pm – 8:00 pm CT
  Saint Louis Arts Museum
- **Women in Academic Anesthesiology Networking Breakfast**
  7:00 am – 8:00 am CT
- **President’s Session**
  8:15 am – 9:15 am CT
  Dr. Biyu He, Assistant Professor in the Departments of Neurology, Neuroscience and Physiology, and Radiology at NYU Langone Health
- **Poster Sessions**
  9:15 am – 10:15 am CT
- **Leadership Advisory Board Panel**
  10:15 am – 11:15 am CT
- **Lunch, Meeting Wrap-Up & Open Discussion**
  11:15 am – 12:15 pm CT

### Call for Abstracts: Visit the AUA Abstract Submission Site

**Deadline to submit your abstract is: November 30, 2023, 11:59 pm ET**
CALL FOR APPLICATIONS

HEAL National K12 Clinical Pain Career Development Program

HEAL K12
UNIVERSITY OF MICHIGAN

KEY DATES
10/20/2023: Letter of Intent Due Date
11/01/2023: Invitation to Apply
02/05/2024: Full Application Due Date
05/01/2024: Award Announcements
06/01/2024: Program Start

Don’t forget to follow AUA on Twitter!
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Are you interested in contributing an article to AUA Update? Please familiarize yourself with the submission guidelines before you proceed. Thank you for your interest and contact Shahzad Shaefi, MD, MPH, at sshaefi@bidmc.harvard.edu with any questions.

CALL FOR ARTICLES
FOR AUA UPDATE 2023

If you have an idea for an article, an announcement, or an opinion on a recently published article, please submit your proposal/article to Shahzad Shaefi, MD, MPH, shaefi@bidmc.harvard.edu. If your article is selected, we will contact you for editing and formatting.