

UPDATE

Association of University Anesthesiologists UPDATE | 2023 | Winter Issue

PRESIDENT'S MESSAGE Looking Back and Forward

The Association of University Anesthesiologists (AUA) had a momentous year of transition and promise. 2023 was marked by both the important decision to return to an independent organization and the work to actualize the process. Many people stepped up in remarkable ways to complete the transition to new society management. I would like to recognize the many efforts of our AUA leaders, team members from the International Anesthesia Research Society, notably Tom Cooper, and our wonderful colleague Vivian Abalama, who has been instrumental in helping us advance the mission of the AUA while also making this transition. I am pleased to announce that, as of December 2023, the Association Resource Center (or ARC) is our new association management company. ARC works with other important organizations in the field, such as the Society of Academic Associations of Anesthesiology & Perioperative Medicine and the Society for Education in Anesthesia, among many others. We look forward to their expert support and partnership moving forward.



George A. Mashour, MD, PhD
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 Robert B. Sweet
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2023 was also marked by the inauguration of the AUA Mentoring Program, with more than 100 AUA members volunteering to guide the next generation of academic anesthesiologists. The AUA represents the best and brightest in our field, which means there is a wealth of experience and wisdom amongst our members. As noted in the past, we have shifted from an almost exclusively honorific society to a more functional one because it is no longer sufficient merely to celebrate excellence in academic anesthesiology, we must also actively promote it. Mentorship of our Associate Members is an important part of that process. I would like to thank our AUA mentorship task force for guiding us through this process, Vivian Abalama for her support, the many senior faculty anesthesiologists who signed up to be mentors, and the AUA mentees who have engaged in the process.

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[Click here to view or print the AUA Update newsletter.](#)

Shaping the Future
of Academic
Anesthesiology

**70TH
ANNUAL
MEETING**

**AUA 2024
ANNUAL
MEETING**

MARCH 22 – 24

 Washington University
School of Medicine in St. Louis
Knight Conference Center

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President's Message *continued from page 1*

In 2023, the AUA took an important next step in addressing sexual harassment in academic anesthesiology. As you might recall, the Association of American Medical Colleges (AAMC) published a report in 2022 identifying academic anesthesiology, among a total of 27 clinical and basic science disciplines, as the worst field for gender-based harassment. However, the AAMC report lacked critical data for understanding and addressing this systemic and unacceptable problem. Through the outstanding efforts of Dr. Maya Hastie and the AUA Leadership Advisory Board, in partnership with the British Medical Association, we gathered and analyzed data from the U.S. and Canada to give us a more complete picture of the problem so we can act accordingly. The quantitative and qualitative data will be submitted for publication, with the intent of developing recommendations that can be implemented in academic anesthesiology departments. There is a long road ahead, including expanding the scope of these efforts, but the work of Dr. Hastie and the Leadership Advisory Board paves the way for important new directions. I thank them sincerely for their efforts.

Looking forward to 2024, I am excited by the start of the first year of the AUA as an independent organization in more than a decade and a fantastic annual meeting—our 70th, in fact!—at Washington University in St. Louis. This exceptional institution is a perfect setting for the transition to our new AUA President, Dr. Dolores Njoku, who serves as Vice Chair and Professor in the Department of Anesthesiology at Washington University School of Medicine. Dr. Njoku is passionate about advancing academic anesthesiology, has served as a leader in the field in many ways, and will no doubt be an outstanding and highly effective AUA President. I would also like to thank Dr. Njoku, Dr. Michael Avidan (Chair), and the rest of the team in the Department of Anesthesiology at the Washington University School of Medicine for their work in hosting this annual meeting. The conference will be a true meeting of the minds in academic anesthesiology.

As I look ahead to the end of my term as President, I would like to express my gratitude to all our AUA members, AUA Executive Officers, AUA Council members, AUA Boards, and our dedicated colleague Vivian Abalama. It has been a privilege to serve at the helm of the premier elected society in our field and I am optimistic about the future of the AUA and the positive impact it is positioned to create for anesthesiology and, ultimately, medicine, science, and society. 

HOTEL RESERVATION DEADLINE: FEBRUARY 29, 2024



Secure Your Housing for the 2024 AUA Annual Meeting



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Communications & Website Committee Report

As the Chair of the Communications Committee, it is my privilege to share insights into the Association of University Anesthesiologists' (AUA) most transformative year in the past decade. The transition to full independence and our distinct University-based Annual Meeting mark an exhilarating era, deserving acknowledgment of all parties involved. I encourage you to read [Dr. Mashour's President's Message](#) for an insightful recap of our journey and a glimpse into what lies ahead.

This Winter's *AUA Update* Newsletter is brimming with noteworthy contributions from the Council, Boards, and our members. Dr. Martinelli and the Educational Advisory Board (EAB) shed light on the upcoming Annual Meeting, focusing particularly on the pivotal role of artificial intelligence (AI) in medical education. This session, enriched by the expertise of leading professionals, will delve into AI's practical applications, offering perspectives from both the AMA and AAMC.

Dr. David Mintz and the Scientific Advisory Board (SAB) eagerly await an upcoming session that promises to stimulate dialogue on developing diverse research programs. The SAB will continue its highly acclaimed Mock Study Section, empowering junior faculty with practical grant review experience.

Additionally, forums for T32 directors and research award presentations highlight our commitment to fostering research excellence at all career stages in anesthesiology.

Drs. Armstead and Aziz report on the Membership Engagement Advisory Board's (MEB) innovative strategies



**Shahzad Shaefi,
MD, MPH**

*Chair, Communications
& Website Committee*


Beth Israel Deaconess
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to engage and add value to our members' experiences, including initiatives for military member anesthesiologists and the exploration of a user-friendly electronic app.

Dr. Odmara Barreto Chang and Niti Pawar from UCSF provide a critical analysis of the challenges and opportunities in cultivating a diverse pipeline of anesthesiologists. Their article offers valuable data and strategies for departments to consider in addressing diversity considerations.

In 'Using Coaching Skills as a Mentor,' Drs. Hopf and Martinelli eloquently discuss the importance of understanding the unique experiences of mentees. They advocate for integrating coaching skills in mentoring, emphasizing active listening and goal-setting. This approach will be further explored in a workshop at the AUA Annual Meeting, underscoring its significance in professional development.

Dr. Vidya T. Raman's insightful piece, 'Lessons to be Learned from Academic Setbacks,' addresses the current challenges in academic anesthesiology, such as workforce shortages and burnout. This article provides strategies to navigate and mitigate these issues effectively.

In closing, I am excited to be a part of the AUA's vibrant future. The buzz surrounding our upcoming Annual Meeting and its return to a university setting, complete with an outstanding agenda and opportunities for engaging dialogue, science, and networking, is palpable. Here's to a year of continued success and innovation! 

**Don't forget to
follow AUA on X!**


 @AUA_Anesthesia



Educational Advisory Board (EAB) Report

The utilization of artificial intelligence is rapidly gaining traction in the clinical realm and beyond. How can we best apply this developing technology in medical education? The two expert panelists delivering the Educational Advisory Board's Annual Meeting session will answer this question.

Dr. Kim Lomis is the Vice President of Undergraduate Medical Education Innovations at the American Medical Association (AMA). Prior to joining the AMA, Dr. Lomis was a Professor of Surgery and the Associate Dean for Undergraduate Medical Education at Vanderbilt University School of Medicine. She will be joined by Lisa Howley, PhD, an Educational Psychologist who has dedicated her career to the advancement of medical education. She currently serves as the Senior Director of Strategic Initiatives and Partnerships at the Association of American Medical Colleges (AAMC).

Drs. Lomis and Howley will discuss the use of artificial intelligence in medical education, both how to utilize it in medical education and how to educate our physicians on its utilization in clinical practice. They have been asked to speak on their personal perspectives as well as those of the AMA and AAMC. There will be plenty of time for questions as well. We hope to see you all in St. Louis! 



**Susie Martinelli,
MD, FASA**

*Chair, AUA Educational
Advisory Board*
The University of
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Chapel Hill, NC



AUA 2024 ANNUAL MEETING

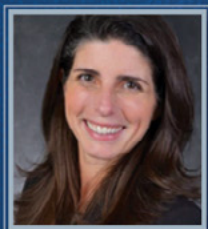
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SATURDAY, MARCH 23, 2024 | **EDUCATIONAL ADVISORY BOARD PANEL**

Artificial Intelligence in Medical Education



LISA HOWLEY, PhD, MEd

Senior Director of Strategic
Initiatives and Partnerships,
Association of American
Medical Colleges



KIMBERLY LOMIS, MD

Vice President for Undergraduate
Medical Education Innovations,
American Medical Association

Using Coaching Skills as a Mentor

Mentoring can be defined as “a dynamic, reciprocal relationship in a work environment between an advanced career incumbent and a beginner aimed at promoting the development of both.”¹ The mentee defines where they want to go; the mentor contributes through reality checking, sharing what the desired path could look like, giving advice on decisions and commitments, and role modeling success. As the mentor, you bring experience and perspective on a path similar to the one the mentee is pursuing, but it’s important to remember that your paths are not the same. When a mentee shares a goal or challenge, it may remind you of your own experiences, inspiring you to jump directly to giving advice. Giving advice based only on your experience, without exploring what the mentee is experiencing, can be a source of misalignment and frustration. When advice is predicated on goals assumed by the mentor, it can lead to mentee dissatisfaction, lack of progress, and burnout.

A valuable approach to avoid these pitfalls is to incorporate coaching skills into your mentoring sessions. [The International Coaching Federation](#) defines coaching as “partnering with clients in a thought-provoking and creative process that inspires them to maximize their personal and professional potential.” While a mentoring relationship is not coaching, core coaching skills can be used in any interaction to increase connection, creativity, and effectiveness.

Applying core coaching skills as a mentor requires curiosity, active listening, and thoughtful, mentee-centered questions, such as “What are your goals?” and “How can I help you reach them?” Core coaching skills require you to:

- **Listen actively.** Go beyond facts and advice to learn about the mentee’s feelings, values, goals, and needs. Ask questions, clarify, summarize, and reflect back what you heard. Remember that silence is golden: it creates space for the mentee to reflect, synthesize, and share.
- **Ask powerful questions.** Brief, open-ended questions that come from curiosity rather than wisdom are powerful in eliciting insights from the mentee. Useful options include “Tell me more.” “What would success look like?” “How would that feel?” “What is most important to you?” “What is getting in the way?” Avoid “que-gestions” (suggestions disguised as questions).

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**Susie Martinelli,
MD, FASA**

*Chair, AUA Educational
Advisory Board*

*Residency Program
Director*

*Edward A Norfleet,
MD '70 Distinguished
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*Professor of
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*The University of
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of Medicine*

Chapel Hill, NC



**Harriet W. Hopf, MD,
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*Professor and Executive
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Salt Lake City, UT*

Using Coaching Skills as a Mentor *continued from page 5*

- **Challenge with support.** Recognizing the mentee's feelings and concerns is an effective way to build trust, provide support, and encourage the mentee to explore their values, goals, and opportunities. Providing support allows you to challenge the mentee to imagine alternatives, rethink assumptions, explore possibilities, and recognize what is required to achieve each goal. Powerful questions might include, "What story are you telling yourself?" or "What do you control?"
- **Partner to create goals, actions, and accountability.** As the mentee's goals become clear, coaching skills will help you partner with them to define next steps informed by their values and your experience, and then to create accountability for follow through. Powerful questions might include "How will you know if you are successful?" or "How would you like to be held accountable?"

To learn more about coaching skills—and get the opportunity to practice using them—we encourage you to join us at the AUA Annual meeting in St. Louis for the [Pre-Meeting Workshop](#), Fundamentals of Professional Mentoring, on Friday, March 22, 2024, from 11 am to 3 pm CT. 

REFERENCE

1. Healy CC, Welchert AJ. Mentoring relationships: a definition to advance research and practice. *Educ Res* 1990; 19:17-21.



AUA 
MENTORING PROGRAM
DEVELOP, GUIDE, AND SUPPORT FUTURE LEADERS



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FUNDAMENTALS OF PROFESSIONAL MENTORING

FRIDAY, MARCH 22, 2024 | 11:00 AM–3:00 PM CT

Please join us at AUA’s 70th Annual Meeting for an educational mentoring workshop* led by Dr. Harriet Hopf, Professor, Director of Faculty Development and Academic Affairs in the Department of Anesthesiology at the University of Utah. The mentoring workshop team includes Dr. Stephen Kimatian, Dr. Maurice Joyce, Dr. Susan Martinelli and Dr. Daniel Saddawi-Konefka.

AGENDA:

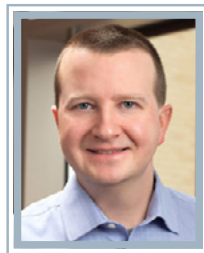
- 11:00 am–11:30 am
Introduction to Mentoring
- 11:30 am–12:30 pm
What You Bring to the Table as a Mentor
- 12:30 pm–to 1:00 pm
Lunch
- 1:00 pm–1:30 pm
Setting Ground Rules and Commitments
- 1:30 pm–2:00 pm
Building Trust in a Mentoring Relationship
- 2:00 pm–2:30 pm
Using Coaching Skills in Mentoring
- 2:30 pm–3:00 pm
Wrap-Up and Comments

LOCATION: Charles F. Knight Executive Education & Conference Center



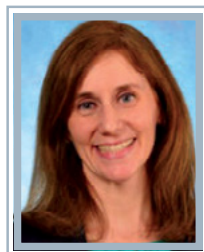
DR. HARRIET HOPF

Professor, Director of Faculty Development and Academic Affairs in the Department of Anesthesiology at the University of Utah



MAURICE JOYCE, MD, EdM

Program Director, Anesthesiology Residency Program; Assistant Professor of Anesthesiology, Tufts Medical Center



SUSAN MARTINELLI, MD, FASA

Residency Program Director, Professor of Anesthesiology, Division of Cardiothoracic Anesthesia, University of North Carolina



STEPHEN KIMATIAN, MD, FAAP

Professor of Anesthesiology, Vice Chairman of Pediatric Anesthesiology, Department of Anesthesiology and Pain Management, UT Southwestern



DANIEL SADDAWI-KONEFKA, MD, MBA

Anesthesia Residency Program Director, Massachusetts General Hospital and Assistant Professor in Anesthesia, Harvard Medical School

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**This workshop will be capped at forty registrants and is reserved for AUA Mentors*



FROM THE LEADERSHIP ADVISORY BOARD (LAB) Lessons To Be Learned from Academic Setbacks

Academic medicine is facing one of its most critical challenges with workforce shortages, burnout, and, overall, a rapidly changing and challenging healthcare environment. Anesthesiology has been one of those most critically hit healthcare fields with story after story of a diminished workforce. Hospital solutions involve disruption of services and shutting down revenue generating operating rooms with only essential operating sites staffed. Leaders in academic or private practices that have remained relatively stable are not relaxed and think this could be them tomorrow. Amidst all this background turmoil, imagine an academic setback?



**Vidya T. Raman, MD,
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Furthermore, in today's world of social media an academic setback is not merely your own private failure; it will be broadcast to all and sundry. The academic setback we are speaking of is not merely rejection of a paper or project. It is a more personal setback of your dreams, goals, aspirations—and even of yourself. How does one recover from such a devastation and what can be learned?

Leaving is one of the easiest solutions. Attrition of physicians is at an all time high of 38.3% of females and 34.2% of males as reported by Chen et al.¹ Financially, among other reasons, this may not be a viable solution. Another is litigation: a former disinformation scholar with Harvard recently filed a complaint with the Massachusetts attorney general's office against the university, alleging undue influence by Meta on independent research. Considering the increased reputational hit, this is not necessarily a pathway forward that most would choose to go.

The academic physician is one who has made a commitment to education, research, and furthering of the field. This requires dedication beyond the 40-hour work week and takes away from personal and family time. Nonclinical time without supported grant is becoming rare due to short staffing. So, what can be learned from an academic setback?

There are definite consequences of emotional failure which can take a toll on a person's mental health and well-being. Our training may not have prepared us for this failure, especially later in our career. Studies from Tartas et al² on the early career setbacks of

medical students mention reaching out to advisors and mentors. It is crucial to recognize if you need professional mental health assistance.

The most important lesson that comes from an academic setback is to reject the feeling that the setback reflects your personal abilities or attributes. One should recognize that academic setbacks may be even more widespread than we know or realize. In confidential, protected spaces academic setbacks may be shared more so than via public-facing venues. It is regarded as a taboo topic and there is an element of victim shaming. Is it truly possible that people who have invested so much in their career and ambition would simply toss it aside?

We live in a world of polarization that, unfortunately, does not allow for all viewpoints and ideas to be expressed, and this atmosphere is encroaching into academia. We are in a field that is still dominantly represented by white males.

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Learning from Setbacks *continued from page 8*


Although women and minorities are slowly progressing into leadership and positions of influence (societal leadership, editorial positions) there are different standards applied, especially to minority women of color.

Anecdotally, the advice also offered is see beyond your field to view a wider scope. A vice chair from an academic institution once shared that her biggest advances and sponsorship came from outside of her department. This also relates to accessing external networks, although it may be difficult to suddenly expand. LinkedIn has been popular for quite some time among professional groups in business, although it remains a relatively novel channel for physicians. Recruiters, professional societies, and hospital leadership belong to LinkedIn, and it has become a place to explore career, educational, and other opportunities.

Another approach is to generalize your approach from a fellowship trained specialty to something more general, such as an intensive care physician to a generalist. Part of this strategy is to remove yourself from a pressure cooker environment and another is to add value, although this may not be a permanent solution.

Coaching has also been touted during these times, delivering an unbiased supporter who maintains

confidentiality. Coaching can facilitate global insight and the regaining of confidence, allowing one the space to reflect on the situation and find resolution.

This is not by any means a comprehensive list of lessons learned or even a strategy after an academic setback however defined, large or small. These are some thoughts offered on a wide range of concerns regarding academic setbacks. Unfortunately, academic anesthesia faces workforce shortages that are stressing our healthcare systems. We need every anesthesiologist we have, and it is imperative to retain those of us who wish to remain. 

REFERENCES:

- 1 Ya-Wen Chen, C. Orlas, T. Kim, D.C. Chang, C.M. Kelleher. Workforce attrition among male and female physicians working in US academic Hospitals, 2014-2019. July 2023 JAMA Network Open 6(7):e2323872. doi:10.1001/jamanetworkopen.2023.23872
- 2 M. Tartas, M. Walkiewicz, W. Budzinski, M. Majkovicz, K. Wojcikiewicz. The sense of coherence and styles of success in the medical career: a longitudinal study, 2014 Nov 28 BMC Medical Education. doi: 10.1186/s12909-014-0254-5.



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SUNDAY, MARCH 24, 2024 | LEADERSHIP ADVISORY BOARD PANEL

Successfully Bridging the Gap: Workforce Demographics and the Evolving Face of Academic Anesthesiology



MODERATOR
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FEATURED ARTICLE

The Leaky Pipeline: How Are We Addressing This Problem?

Despite the strides anesthesia has made to improve racial equity and strengthen the pipeline, diversity continues to be challenging.^{1,2} In 2020, <15% of anesthesia residents were URiM.^{3,4} A study from 2023 illustrated that Black and Latinx anesthesiologists lacked representation at each level of the pipeline: medical students (8.1%, 6.8%), anesthesia residents (5.0%, 4.6%), assistant professors (5.1%, 2.9%), associate professors (4.1%, 3.3%), and professors (2.4%, 1.5%).⁵ It is critical, now more than ever, to address barriers with increased support and intentional action starting from K-12 school, to significantly improve physician representation upstream.

Concerns regarding the leaky pipeline have come to light in the context of four decades of stagnating matriculation of URiM medical students.⁶ Not only are URiM groups significantly less likely to enroll to residency,⁷ but also, 18.7% of anesthesia applicants reported experiencing discrimination due to gender, race and/or ethnicity.⁸ The lack of URiM physicians is consistent beyond anesthesia; internal medicine and surgery residencies similarly have <15% URiM residents.^{9,10}



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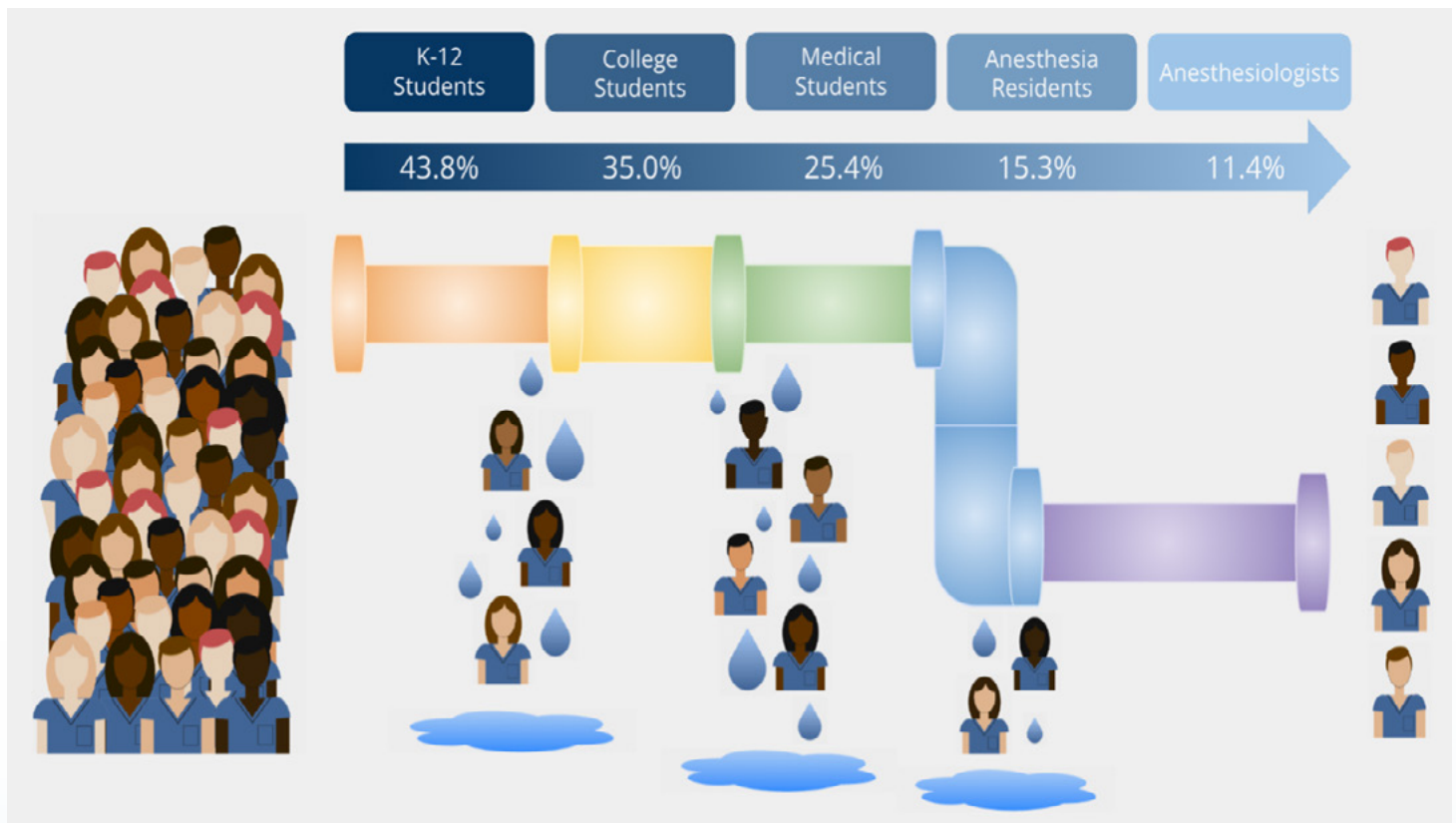


Figure 1. Image illustrates the percentage of underrepresented in medicine (URiM) trainees at each stage of education and career in the United States.¹¹⁻¹⁶ URiM trainees include those identifying as American Indian or Alaska Native, Black or African American, Hispanic, Latino, or of Spanish Origin and Native Hawaiian or Other Pacific Islander.

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PIPELINE INTO ANESTHESIA

To improve diversity in medicine and anesthesia, the pipeline into medical school must be improved in parallel efforts—starting at a young age and continuing each step of the way. Many programs host educational opportunities in STEM and health careers to expose K-12 students to science and medicine. This is valuable to elucidate physicians' journeys and challenges and provide mentorship navigating the arduous road and building confidence that they too, can become doctors. Many also aid with college, medical school, and residency applications including test preparation, career counseling, mock interviews, essay editing, and more. Lastly, grants and scholarships for research, rotations, and schooling are invaluable to helping reduce the barrier of cost that many URiM and first-generation students face. Investing in these pipeline programs will pay forward in multifold to increase the percentage of URiM students graduating from college, medical school, and residency, as well as entering leadership, academia, and becoming physician-scientists, ultimately creating a more diverse workforce more accurately mirroring our patient populations.



LIMITATIONS

Despite the positive impacts of these diversity, equity, and inclusion (DEI) and pipeline efforts, it is essential to address limitations. For instance, the effectiveness of upstream initiatives is limited by the low number of URiM students downstream. Those who make it through are then burdened with the “minority tax”—the expectation that URiM physicians should take on the responsibilities of diversity initiatives, which can hinder training, rest, self-study, and other professional advancement.⁶ A study evaluating “minority tax” showed that increasing URiM residents helped mitigate “minority tax” by redistributing the responsibilities among a larger URiM pool. Additional strategies should encourage engagement of the whole anesthesia community, including non-URiM participants that can help promote these efforts.

WHAT SHOULD WE DO?

Departmental strategies, framework, and recommendations are eloquently summarized by Nwokolo et al., including early outreach programs, de-emphasizing entrance metrics (i.e., USMLE scores), bias training for selection committees, targeted recruitment/cluster hiring, fair and transparent opportunities, as well as promotion transparency.¹⁷ There is no single solution to this problem, rather, it is crucial to have active participation by the whole medical community to promote early exposure, mentoring, and retention to fix the “leaky pipeline.”

It is known that patients who receive care from providers from the same cultural and socioeconomic backgrounds, speak the same languages, look similar, and can relate to them have better patient and provider outcomes.^{17,18} Working on building systems for a diverse workforce has also been associated with improved healthcare access for underserved populations and more expansive research.¹⁹

Investing in the anesthesia pipeline will pay itself back many times over; a future generation with a truly diverse physician workforce would reap the many benefits this would bring to patient and physician well-being.

A summary of state and national DEI and pipeline initiatives in the U.S. will be available on AUA's website in early 2024.



REFERENCES:

1. Toledo P, Wright CC, Vetter TR. Diversity, Equity, and Inclusion: More Than Words. *Anesth Analg*. Oct 1 2023;137(4):722-723. doi:10.1213/ANE.0000000000006636
2. Toledo P, Lewis CR, Lange EMS. Women and Underrepresented Minorities in Academic Anesthesiology. *Anesthesiol Clin*. Jun 2020;38(2):449-457. doi:10.1016/j.anclin.2020.01.004
3. Hucko L, Al-Kharsan H, Lopez Dominguez J, et al. Racial and Ethnic Diversity of U.S. Residency Programs, 2011-2019. *N Engl J Med*. Jun 2 2022;386(22):2152-2153. doi:10.1056/NEJMc2200107
4. Association of American Medical Colleges. Table B3. number of active residents btoms, GME specialty, and sex. AAMC, 2019. Available at: <https://www.aamc.org/data-reports/students-residents/interactive-data/report-residents/2019/table-b3-number-active-residents-type-medical-school-gme-specialty-and-sex> Accessed July 26, 2023.
5. Armaneous M, Boscardin CK, Earnest GE, Ehie O. A Summary of Diversity in Anesthesiology Among Medical Students, Anesthesiology Residents, and Anesthesiology Faculty. *Anesth Analg*. Oct 1 2023;137(4):800-802. doi:10.1213/ANE.0000000000006606

continued on page 12

The Leaky Pipeline *continued from page 11*

6. Hoff ML, Liao NN, Mosquera CA, et al. An Initiative to Increase Residency Program Diversity. *Pediatrics*. Jan 1 2022;149(1) doi:10.1542/peds.2021-050964
7. Nguyen M, Chaudhry SI, Desai MM, et al. Rates of Medical Student Placement Into Graduate Medical Education by Sex, Race and Ethnicity, and Socioeconomic Status, 2018-2021. *JAMA Netw Open*. Aug 1 2022;5(8):e2229243. doi:10.1001/jamanetworkopen.2022.29243
8. Patel S, Lin KK, Milam AJ, et al. Diversity, Equity, and Inclusion Among Anesthesiology Trainees. *Womens Health Rep (New Rochelle)*. 2022;3(1):414-419. doi:10.1089/whr.2021.0123
9. Boatright D, Anderson N, Kim JG, et al. Racial and Ethnic Differences in Internal Medicine Residency Assessments. *JAMA Netw Open*. Dec 1 2022;5(12):e2247649. doi:10.1001/jamanetworkopen.2022.47649
10. Nieblas-Bedolla E, Williams JR, Christophers B, Kweon CY, Williams EJ, Jimenez N. Trends in Race/Ethnicity Among Applicants and Matriculants to US Surgical Specialties, 2010-2018. *JAMA Netw Open*. Nov 2 2020;3(11):e2023509. doi:10.1001/jamanetworkopen.2020.23509
11. National Center for Education Statistics. (2023). Undergraduate Enrollment. Condition of Education. U.S. Department of Education [oESRS, 2023], from <https://nces.ed.gov/programs/coe/indicator/cha>.
12. Public School Enrollment, by Race/Ethnicity. Kids Data. 2021. Updated Aug 2021. Accessed September 9, 2023, 2023. <https://www.kidsdata.org/topic/36/school-enrollment-race/table#fmt=451&loc=1&tf=141&ch=7,11,70,85,10,72,9,73&sortColumnId=0&sortType=asc>
13. Baird M, Daugherty L, Kumar KB, Arifkhanova A. The Anesthesiologist Workforce in 2013: A Final Briefing to the American Society of Anesthesiologists. Santa Monica, CA: RAND Corporation, 2014. https://www.rand.org/pubs/research_reports/RR650.html.
14. Association of American Medical Colleges. Table B5. Number of Active MD Residents, by Race/Ethnicity (Alone or In Combination) and GME Specialty. AAMC, 2022. Available at: <https://www.aamc.org/data-reports/students-residents/data/report-residents/2022/table-b5-md-residents-race-ethnicity-and-specialty>.
15. Association of American Medical Colleges. Table A-14.3. Race/Ethnicity Responses (Alone and In Combination) of Matriculants to U.S. MD-Granting Medical Schools, 2019-2020 through 2023-2024. Available at: <https://www.aamc.org/media/8826/download>
16. Association of American Medical Colleges. 2022 Physician Specialty Data Report Executive Summary, AAMC, January 2023. Available at: <https://www.aamc.org/data-reports/data/2022-physician-specialty-data-report-executive-summary>.
17. Nwokolo OO, Coombs AAT, Eltzschig HK, Butterworth JFt. Diversity and Inclusion in Anesthesiology. *Anesth Analg*. Jun 1 2022;134(6):1166-1174. doi:10.1213/ANE.0000000000005941
18. Gomez LE, Bernet P. Diversity improves performance and outcomes. *J Natl Med Assoc*. Aug 2019;111(4):383-392. doi:10.1016/j.jnma.2019.01.006
19. Cohen JJ, Gabriel BA, Terrell C. The case for diversity in the health care workforce. *Health Aff (Millwood)*. Sep-Oct 2002;21(5):90-102. doi:10.1377/hlthaff.21.5.90

AUA STATEMENT

AUA Statement Condemning Antisemitic and Islamophobic Behaviors on University Campuses

The AUA is, by both definition and spirit, an organization focused on the university, a place where students, trainees, faculty, and staff should feel safe to learn, exchange, and create ideas in peace. As such, the AUA strongly condemns the recent rise of antisemitic and Islamophobic behaviors on university campuses as well as any form of discrimination, harassment, or violence that compromises the physical or psychological safety of university members, or that erodes the values of university culture. The AUA also reaffirms its staunch commitment to diverse, inclusive, equitable, and just academic communities, in anesthesiology and beyond.

Membership Engagement Advisory Board (MEB) Report

We are honored to provide an update from the recent Association of University Anesthesiologists (AUA) council meeting on October 15, 2023, where several important initiatives and updates were discussed that directly impact membership engagement and guidelines.



James P. Rathmell, MD
Chair, Department of Anesthesiology, Perioperative and Pain Medicine
Leroy D. Vandam Professor of Anesthesia, Harvard Medical School

During the meeting, the MEB members in attendance in person and virtually, presented the council various ideas for increasing membership and the membership experience. As the meeting occurred less than a month before the observance of Veterans Day (November 11, 2023), there was a focus on welcoming anesthesiologists who are members of the military. Dr. James Rathmell from Brigham and Women's Hospital (an affiliate of Harvard Medical School), gave a background to the status and activities of anesthesiologists serving in the military of the United States. The AUA leadership aims to create a supportive environment for military members within the anesthesiology community and to facilitate their seamless integration into the AUA. Membership of the MEB and others in attendance indicated their dedication to this initiative. Furthermore, the council emphasized the importance of recognizing Veterans Day, demonstrating the AUA's commitment to honoring and supporting veterans within the field of anesthesiology.


Additionally, Dr. Valerie Armstead proposed the creation of a user app exclusively for AUA members to assist with various forms of engagement available to members at all levels of membership in the organization. The intent is to enhance communication, networking, and perform tasks to allow access to resources.

In the realm of membership guidelines, the council was provided an update on the nomination checklist for active and associate members.

The MEB is pleased to announce that in the 2023 round two of membership nominations, 28 candidates were approved for AUA membership. Among the newly approved members, 16 were categorized as active members, 11 as associate members, and one is an affiliate member.

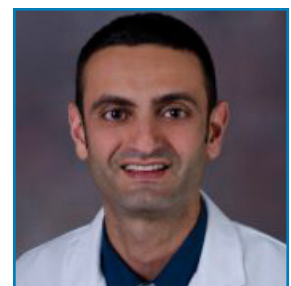
Looking ahead, the [nominations for the 2024 round one are now open](#), beginning from December 15th, 2023, and extending until April 15th, 2024. This extended nomination period aims to provide ample time for the identification and consideration of potential members who embody the values and expertise sought by the AUA.

Finally, nominations were received for [three MEB awards](#) and those winners will be announced shortly.

Please feel free to reach out if you have any further questions or require additional information.. 



Valerie E. Armstead, MD, DABA, FASA
AUA, Co-chair, Membership Engagement Advisory Board
Professor of Anesthesiology, Clinician Educator
Department of Anesthesiology
Temple University Lewis Katz School of Medicine
Philadelphia, PA



Michael Aziz, MD
AUA, Co-chair, Membership Engagement Advisory Board
Professor & Vice Chair for Clinical Affairs
Department of Anesthesiology & Perioperative Medicine
Oregon Health & Science University
Portland, OR

AUA NEW MEMBER NOMINATIONS

**Nominations are now open and
will close on Monday, April 15, 2024.**

Please review the AUA New Member Nomination Checklist and Guidelines for more information on the nomination process. The new checklists are examples to help members review their application to ensure that their accomplishments are consistent with that of a successful application (depending on the membership level). One of these examples alone may not suffice for election to membership and not all of these are required.

Please do not email nomination letters or CVs. We are no longer accepting nominations via email to ensure that we are accurately capturing all nominations.

Steps to nominate a colleague for AUA membership:

- Review the AUA New Member Nomination Checklist and Guidelines prior to submitting a nomination.
- Write nomination letter and obtain nominee CV.
- If nominating an Associate Member, obtain Current Research Funding information.
- Complete the AUA Nominations Form with the nominee's information and upload nomination letter and nominee CV.



AUA 2024 ANNUAL MEETING



Washington University School of Medicine in St. Louis

Charles F. Knight Executive Education & Conference Center

Shaping the Future of Academic Anesthesiology | March 22 – 24

FRIDAY, MARCH 22

MOCK STUDY SECTION

R Study Section Leader



CHRISTINA PABELACK, MD
Mayo Clinic

K Study Section Leader



VESNA TODOROVIC, MD, PHD, MBA, FASA
University of Colorado

SATURDAY, MARCH 23

SCIENTIFIC ADVISORY BOARD PANEL

Building and Sustaining Anesthesiology Research



MODERATOR
C. DAVID MINTZ, MD, PHD
Johns Hopkins University
School of Medicine



JIAPENG HUANG, MD, PHD, FASA, FASE
University of Louisville



MAX KELZ, MD, PHD
University of Pennsylvania,
Perelman School of Medicine



RENE PRZKORA, MD, PHD
University of Florida

SCIENTIFIC PANEL, HOST PROGRAM

How Chimpanzees are Similar Behaviorally to Humans, and How They are Distinct



CRICKETTE SANZ, PHD
Professor of Biological Anthropology
James W. and Jean L. Davis
Professor in Arts and Sciences
Washington University
in St. Louis

The Human Gut Microbiome and Its Impact on Health and Disease




JEFFREY GORDON, MD
Dr. Robert J. Glaser Distinguished
University Professor
Professor, Pathology & Immunology;
Professor, Developmental Biology;
Professor, Molecular Microbiology
Washington University School of
Medicine in St. Louis

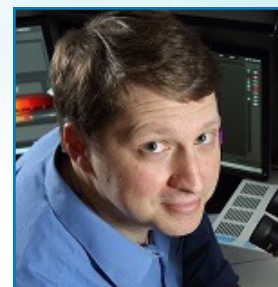
Scientific Engagement Advisory Board (SAB) Report

The SAB is looking forward to an exciting meeting in which the future of anesthesiology research is a central topic of debate and discussion. The centerpiece event will be a session entitled “Building and Sustaining Anesthesiology Research”. This interactive, moderated session will stimulate discussion through presentations of how three different successful research programs have been developed in diverse settings. Our hope is to share ideas and knowledge surrounding the common goal of continuing and growing scientific discovery in our field, even as we face a changing landscape in healthcare.

The other principal activity in this year’s meeting will be the second iteration of the Mock Study Section that was introduced for the first time last year. Junior faculty will have the opportunity to participate as reviewers in one of two study sections to review an R-series and a K-series grant, respectively. The study sections will be led by an experienced chair and each individual participant will receive coaching from a mentor who has served on numerous relevant study sections. The goal is to familiarize faculty who are early in their research careers with the mechanisms and criteria by which grants are judged and ultimately funded.

The SAB also will host a get-together for current T32 directors as an open forum to discuss current and future needs for this key element of the research infrastructure in many larger departments.

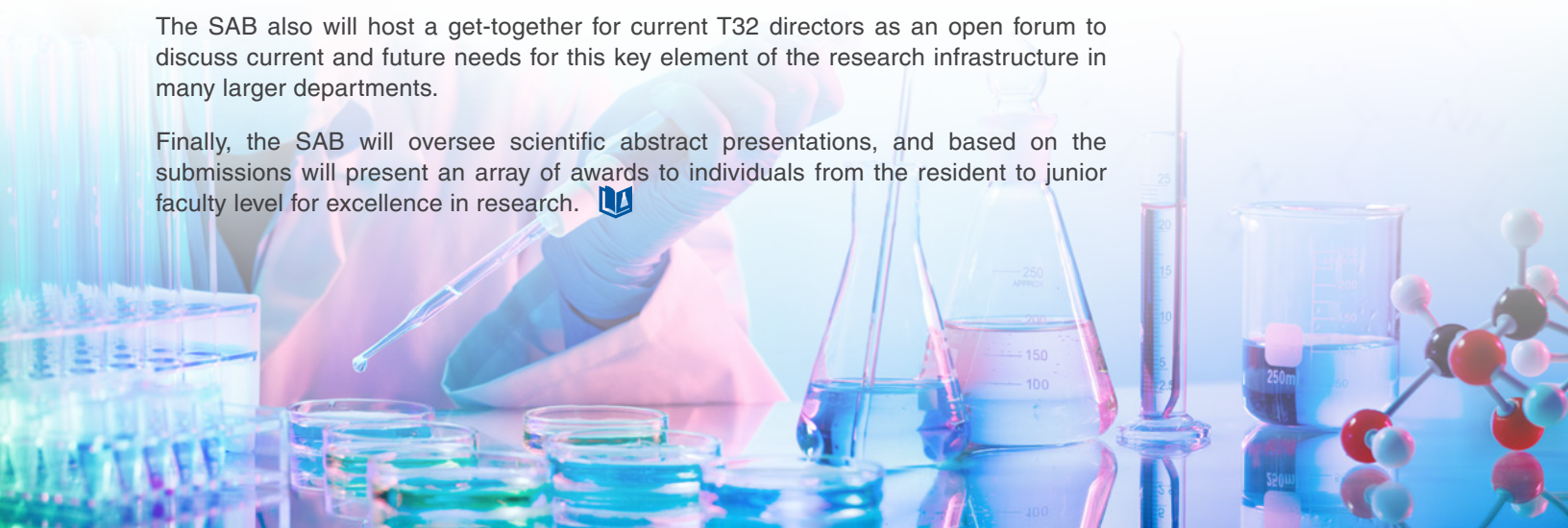
Finally, the SAB will oversee scientific abstract presentations, and based on the submissions will present an array of awards to individuals from the resident to junior faculty level for excellence in research. 



**C. David Mintz,
MD, PhD**

*Chair, Scientific
Advisory Board*

Johns Hopkins University
School of Medicine
Baltimore, MD



AUA **SPEAKER EXCHANGE**

Matching Speakers with Speaking Engagements



**70TH
ANNUAL
MEETING**

AUA 2024 ANNUAL MEETING

 Washington University School of Medicine in St. Louis
Charles F. Knight Executive Education & Conference Center

Shaping the Future of Academic Anesthesiology | March 22 – 24

SCHEDULE AT A GLANCE

FRIDAY, MARCH 22, 2024

Pre-Meeting Event: Fundamentals of Professional Mentoring
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

Daniel Saddawi-Konefka, MD, MBA, Anesthesia Residency Program Director, Massachusetts General Hospital and Assistant Professor in Anesthesia, Harvard Medical School

Stephen Kimatian, MD, FAAP, Professor of Anesthesiology, Vice Chairman of Pediatric Anesthesiology, Department of Anesthesiology and Pain Management, UT Southwestern

Maurice Joyce, MD, EdM, Program Director, Anesthesiology Residency Program; Assistant Professor of Anesthesiology, Tufts Medical Center

Susan Martinelli, MD, FASA, Residency Program Director, Professor of Anesthesiology, Division of Cardiothoracic Anesthesia, University of North Carolina

Pre-Meeting Event: Mock Study Section
2:00 pm – 3:00 pm CT

Study Section Leaders:

R Study Section

Christina Pabelack, MD, Mayo Clinic

K Study Section

Vesna Todorovic, MD, PhD, MBA, FASA, University of Colorado

C.R. Stephen Lecture
4:00 pm – 5:00 pm CT

Carolyn S. Calfee MD MAS, Professor of Medicine and Anesthesia, Division of Pulmonary, Critical Care, Allergy and Sleep Medicine, University of California, San Francisco

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)

Scientific Advisory Board Panel – “Building and Sustaining Anesthesiology Research”
9:15 am – 10:15 am CT

Moderator:

C. David Mintz, MD, PhD, Johns Hopkins University School of Medicine

Speakers:

Max Kelz, MD, PhD, University of Pennsylvania, Perelman School of Medicine

Jiapeng Huang, MD, PhD, FASA, FASE, University of Louisville

Rene Przkora, MD, PhD, University of Florida

Break & Discussion Time
10:15 am – 10:45 am CT

Educational Advisory Board Panel – “Artificial Intelligence in Medical Education”
10:45 am – 11:45 am CT

Lisa Howley, PhD, Med, Sr. Director of Strategic Initiatives and Partnerships, Association of American Medical Colleges

Kimberly Lomis, MD, Vice President for Undergraduate Medical Education Innovations, American Medical Association

Break & Discussion Time
11:45 am – 12:00 pm CT

AUA Luncheon and Awards Ceremony
12:00 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

HOST PROGRAM PANEL I
How Chimpanzees are Similar Behaviorally to Humans, and How They are Distinct

Crickette Sanz, PhD, Professor of Biological Anthropology; James W. and Jean L. Davis Professor in Arts and Sciences, Washington University in St. Louis

HOST PROGRAM PANEL II
The Human Gut Microbiome and Its Impact on Health and Disease

Jeffrey Gordon, MD, Dr. Robert J. Glaser Distinguished University Professor; Professor, Pathology & Immunology Professor, Developmental Biology; Professor, Molecular Microbiology, Washington University School of Medicine in St. Louis

Membership Engagement Board Reception
3:45 pm – 5:00 pm CT

President's Reception
6:00 pm – 8:00 pm CT
Saint Louis Art Museum

SUNDAY, MARCH 24, 2024

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, Associate 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 – Successfully Bridging the Gap: Workforce Demographics and the Evolving Face of Academic Anesthesiology
10:15 am – 11:15 am CT

Moderator: Cynthia A. Wong, MD, Professor and Chair, University of Iowa Department of Anesthesiology

Speakers:

Elizabeth W. Duggan, MD, Associate Professor and Director of Professional Development Collaboration, University of Alabama at Birmingham Department of Anesthesiology and Perioperative Medicine

Craig S. Jabaley, MD, FCCM, Associate Professor and Chief of Critical Care Medicine, Emory University Department of Anesthesiology

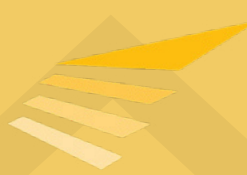
Business Meeting & Open Discussion
11:30 am – 12:30 pm CT

REGISTER NOW!

**Early Bird Registration
Deadline: February 1, 2024**

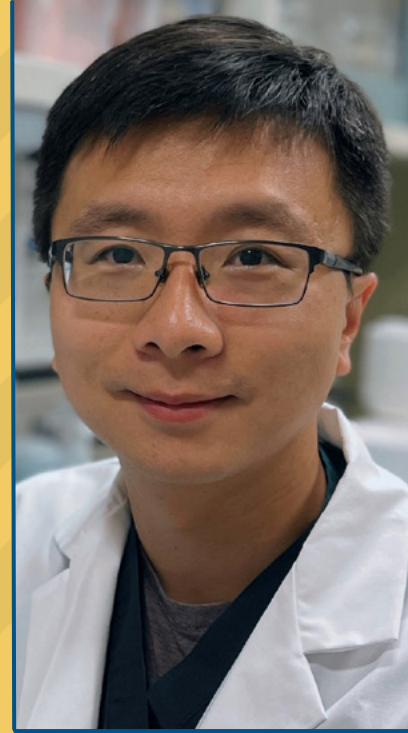


FAER



*Foundation for Anesthesia
Education and Research*

Spring 2024 Grant Cycle Applications Open December 1, 2023 - February 15, 2024



APSF-FAER Mentored Research Training Grant

Research Areas: Patient Safety	Letter of Intent Submissions: December 1, 2023 - January 1, 2024	Percent of Research Time: 60%	Funding and Duration: \$300,000 over two years
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Apply: FAER.org/APSF

Research in Education Grant

Eligibility:

Faculty member of any rank
(junior or senior faculty)

Research Areas:

Education research

Funding and Duration:

\$100,000 over two years

Percent of Research Time:

40%

Apply:

FAER.org/REG

Mentored Research Training Grant

Eligibility:

Faculty members who have completed
their core anesthesiology residency
training within the past 10 years

Research Areas:

All areas of research that contribute to
advances in patient care and can lead to
sustained extramural research will be
considered

Funding and Duration:

\$250,000 over two years

Percent of Research Time:

75%

Apply:

FAER.org/MRTG

Research Fellowship Grant

Eligibility:

Anesthesiology trainee after
CA-1 year

Research Areas:

Basic science, clinical,
translational, health services, or
education research

Funding and Duration:

\$75,000 over one year

Percent of Research Time:

80%

Apply:

FAER.org/RFG

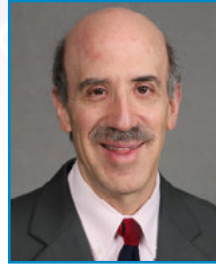
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SUBMISSION GUIDELINES

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 2024



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.