Did you know what happens?

Perioperative Catastrophes Provider Response Plan

Perioperative catastrophes, which are defined as major and possibly unanticipated adverse outcomes that result in harm to patients, are infrequent but can be devastating for providers. In addition to the well-developed infrastructure for supporting patients and their families, the Department of Anesthesiology is committed to a response to such events that recognizes—and aims to mitigate—the impact for care providers.

The floor runner plays a critical role in the immediate or initial response to catastrophes in the operating room or PACU, as he or she usually has direct knowledge of the event and the providers involved. After the clinical resolution of a perioperative catastrophe, the floor runner should:

1. Immediately relieve any resident, CRNA or faculty provider from duty.
2. Assess suitability for continued service by clinical care providers, keeping in mind the potential for compromised care of subsequent patients. The outcome of this assessment will likely vary based on provider level and clinical situation, so only the immediate relief for the discussion itself is mandatory. During regular working hours, residents should report to the education "office," CRNAs to their service chief, and
faculty can speak with floor runner. During weekends and nights, the attending faculty on call will make this assessment.

Go to the full document at Policy Stat

Staff Stat Relief?

Sometimes we need a break even if everything turns out OK

You may have been there. Patient's sats start decreasing and you don't know why. You call your staff, and after a whirlwind everything is OK and everyone goes back. You are left wondering "what just happened?!". Particularly early CA1 year, but anytime when things go wrong, this can bother providers.

1. If you need a break after an event like this, let the floor runner know
2. If you respond to an event like this, ask your fellow resident if he or she needs a few minutes

We have to watch out for each other in order to break the stigma around needing help and to ensure we are providing top-notch care by taking care of ourselves and each other.
Uof M at MARC & SEA

GATHERING AT BEER GROTTO
UPCOMING WELLNESS EVENTS

- Post Basic party- June 8
- OberRUN 5K- June 21
- Graduation- June 22
- TreeRunner ropes course- date TBD
- Gas Masters golf outing- summer date TBD

1. Where did you grow up and go to school?

I grew up in Columbus, Ohio (I know, enemy territory!). My family is still there, so I go back fairly frequently to visit. I went to Kent State University in Ohio for undergrad, followed by Northeast Ohio Medical University for med school. I completed a six-year B.S/M.D. program, where I finished my BS degree in 2 years, before matriculating into the medical school.

2. What are your hobbies or interests? What do you like to do in your spare time?

One of my favorite pastimes growing up was reading, which has continued into adulthood. I love reading a variety of genres, and am always looking for good recommendations! I'm currently working on the Crazy Rich Asians trilogy. I enjoy creative writing as well (when inspiration strikes) in the form of short stories and poetry. I also try to get outdoors when
the weather is nice. I’m usually down for a nice hike or canoeing/kayaking. I’ve been traveling more lately, which has been an aspiration of mine for a long time. My favorite vacation destination has always been Disney World, but it’s nice to check out new places!

Of course, can’t leave out spending time with my friends. I’ve met some amazing people in Ann Arbor and in the program, and love going out to try new restaurants when the time allows.

I also have a cat, whom I love with all my heart. He’s so precious and is a lot of fun to be around. He was probably a dog in a past life!

3. **What made you decide to pursue anesthesia?**

   My interests shifted quite a bit throughout med school. I started off interested in ENT, which morphed into general surgery. When I had my M3 year surgery rotation, I quickly realized surgery was not the right specialty for me. That being said, I still loved the OR environment. Luckily, I had a few weeks of anesthesia during my surgery clerkship, where I met a fantastic mentor who really showed me the ropes and got me interested. I worked with her a few more times throughout M3 year, and the decision to pursue anesthesia was really an easy one. Haven’t looked back since!

4. **Where do you see yourself in 5 years?**

   I have a general idea, but a lot left to flesh out still. In terms of career, I’m hoping to be working as a cardiac anesthesiologist, probably somewhere in the Midwest. At the moment, I’m leaning more towards an academic career (more education centered) than private practice, but who knows!

5. **Tell us one last thing that is special, unique, and wonderful that we just must know about you!**

   I did archery once upon a time
MENTAL HEALTH RESOURCES

U-M Psychiatric Emergency Services: (734) 936-5900 (available 24/7)

National Suicide Prevention Hotline: 1-800-273-8255 (available 24/7)

HOA Non-Emergency Mental Health Services Michigan Medicine

Office of Counseling and Workplace Resilience

Community Resources accepting UM Premier Care

Ann Arbor Consultation Services (evening and weekend hours available)
734-996-9111
www.a2consultation.com

Huron Valley Consultation Center (evening and weekend hours available)
734-913-1093
www.huronvalleyconsult.org

Lotus Consulting
734-478-7358
www.lotusconsultingpllc.com