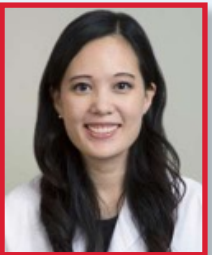




WICTA CHAIR
Abimbola (Bola) Faloye
MD, FASA, FASE



WICTA VICE-CHAIR
Emily Methangkool
MD, MPH

MESSAGE FROM THE CHAIR AND VICE-CHAIR

Dear WICTA Members,

The results of the recent United States election have been a source of uncertainty for some, while serving as a recognition for others of the need for change. While WICTA is not a political platform, it is often impossible to divest the impact of political influence from our work and careers. What is clear is that, going forward, we must continue to work for the ideals on which WICTA is based, ensuring that opportunities for professional development and career advancement for women and underrepresented groups continue to grow and permeate amongst our institutions. We invite all of you to engage with WICTA on this journey.

It was a pleasure to engage with so many of you at the ASA Annual Meeting in Philadelphia. At the medical student reception, WICTA representatives engaged with scores of medical students interested in anesthesiology, introducing them to the subspecialty of cardiac anesthesiology. This event was critical for us to connect with, inspire, mentor, and sponsor the next generation of cardiac anesthesiologists.

In this newsletter we are excited to share with you opportunities to nominate yourself or someone else for the 2025 Annual WICTA awards. Winners will be honored at the SCA Annual Meeting, April 26 - 29 in Montreal, Canada.

The next WICTA election cycle starts in January 2025! This is an opportunity for you to become involved with the executive committee. Positions are 2-year terms (2025-2027) and will commence after the 2025 SCA Annual Meeting.

Wishing you all best wishes for the New Year!

WICTA MISSION STATEMENT

THE MISSION

of the SCA Women in Cardiothoracic Anesthesia Special Interest Group (WICTA SIG) is to ensure excellence in quality of patient care through promoting a diverse, inclusive, and equitable professional community in our specialty.

OUR PURPOSE

is to recruit, develop, and promote women and under-represented minority (URM) physicians and leaders in cardiothoracic anesthesiology.





RESEARCH GRANTS

SCA supports cardiothoracic and vascular research projects. This is the basis for the creation of the **SCA Starter Grant, SCA Diversity and Inclusion Grant, SCA Mid-Career Grant, and the In-Training Grant.**

Grants Information

Four types of grants will be awarded in 2025 to SCA members ONLY:

- **SCA Starter Grant** – up to \$25,000 per year for two
- **SCA Diversity and Inclusion Grant** – up to \$25,000 per year for two years.
- **SCA Mid-Career Grant** – up to \$50,000 per year for two
- **SCA In-Training Grant** – \$15,000 for one year.

[Click Here to Apply](#)



BRAINTEASER

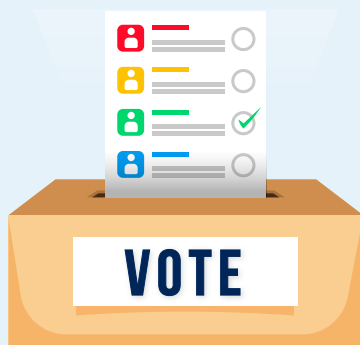
QUESTION OF THE QUARTER:

A pacemaker dependent patient with an ICD comes to the OR for an emergent treatment of a Type A dissection. You are concerned that electrocautery will inhibit the pacemaker. What is the BEST way to ensure that there is no inhibition of pacing during the case?

- Place a magnet to put the pacemaker in asynchronous mode.
- Reprogram the device to put the pacemaker to be put in asynchronous mode.
- No action is needed as the device is most likely already in asynchronous mode.

Would like to submit a brainteaser or ACA Exam prep question? Email WICTA@scahq.org with your question, answer with explanation, and headshot for publication in a future newsletter.

Answer on page 11



WICTA ELECTIONS

Elections for WICTA executive committee members will be coming up in a few months. You are qualified if you are enthusiastic about being involved in supporting women and URM cardiothoracic anesthesiologists. Please contact WICTA@scahq.org if you are interested in nominating yourself or someone you know.

If you are curious and want to learn more, please email WICTA@scahq.org if you are interested in learning more about WICTA leadership and sitting in on an executive committee leadership meeting.



RECOGNIZING NON-PROMOTABLE TASKS

Women seem to be likely than men to fall into the trap of spending valuable time on work that has no potential to get them promoted. How can you recognize these non-promotable tasks? Go to the promotions and tenure website for your institution.

Typically, they list the types of activities that they assess when looking at promotion's packets, such as publications in scholarly journals, mentorship of trainees, and speaking at institutional grand rounds, medical school, national meetings. Other tasks that female faculty often perform, like sitting on departmental recruitment committees, reviewing trainee applications, giving feedback to trainees, taking on extra clinical work, and serving in mentorship roles, do not help with promotions. How to manage these non-promotable tasks? If they bring you professional satisfaction, they may still be worth doing. Particularly early in your career, you must participate in these citizenship tasks. As a general guideline, you should try to avoid spending more than 15% of your time on these non-promotable tasks.

[CLICK HERE](#)



Check out this OpEd from Doximity for more information

ASK WICTA

WE LOVE YOUR QUESTIONS

Do you have career or clinical questions that you want to post to the WICTA membership?

Email WICTA@scahq.org with your questions so that you can make the most of the experience of our members!

MEMBER VOICES

WE WANT TO HEAR FROM YOU!

We want to hear from you! We are seeking contributions from our members for future newsletters.

If you have case reports, clinical updates, or other information that might be calculable to WICTA members, please email WICTA@scahq.org to submit.

MENTOR CORNER

WHO'S YOUR MENTOR?

Do you have a mentor you would like to highlight?

Please send information and a photo to

WICTA@scahq.org.

Watch your inbox for the mentor/mentee workshop invitation.

HAPPY HOUR

LOOKING FORWARD TO CONNECTING

The next happy hour will be announced soon.

Please join check your email for details and join us to casually chat virtually.

SPEAKER DATABASE

The WICTA speaker database has contributed to multiple speaking engagements for many of our members and is actively sought by Grand Rounds planners. This is an excellent medium for members seeking these opportunities. If you have given local lectures, grand rounds, talks at regional or national meetings, etc., you are more than qualified! If you have not done so already, we encourage you to register at www.scahq.org/WICTA Database.

If you or someone in your department is looking for speakers for Grand Rounds, conferences, etc. please submit an inquiry directly to WICTA@scahq.org to be provided with a list of speakers in the content areas you specify.



Join us for the next **FREE WICTA Webinar** series.



TUESDAY, JANUARY 21, 2025
6:00 PM - 7:30 PM EST

How to Diversify Your Cardiac Anesthesia Practice Entrepreneurship, Medical School Leadership, Locums and Legal Consulting

*Hosted by The Society of Cardiovascular Anesthesiologists
Member Engagement Committee and the WICTA Special Interest Group*

PANELISTS



Sasha K. Shillcutt
MD, MS, FASE
University of Nebraska
Medical Center



John Edward Reynolds
MD
Wake Forest University
School of Medicine



Zeest Khan
MD
Independent Anesthesia
Practice



Daryl A. Oakes
MD
Stanford School
of Medicine

MODERATORS



Agnieszka Trzcinka
MD, FASE
Tufts Medical Center



Choy Lewis
MD
Northwestern Medical Center

[**Click to Register**](#)





WICTA FREE WEBINAR

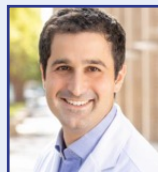
SOCIETY OF
CARDIOVASCULAR
ANESTHESIOLOGISTS
Knowledge • Care • Investigation

Professional Development Webinar

TUESDAY, FEBRUARY 4, 2025
7:00 PM - 8:00 PM EST

Non-Traditional Avenues to Research

SPEAKERS



Vikram Fielding-Singh
MD, JD
Stanford University



Alina Nicoara
MD, FASE
Duke University

MODERATORS



Kiran Belani
MD, FASE, FACC
Northwestern



Ragini G. Gupta
MD
Emory University
School of Medicine



Abimbola (Bola) Faloye
MD, FASA, FASE
Emory University
School of Medicine



Emily Methangkool
MD, MPH
Olive View, UCLAe

REGISTRATION OPENING SOON!



FELLOW WEBINARS RECAP



Recap of the September 25, 2024, webinar

“How Do You Find a Job and Begin Building Your Professional Brand as a Cardiac Anesthesiologist.”

Network. Network. Network. This will help you tremendously during job search and contract negotiation in both academic and private practice realm.

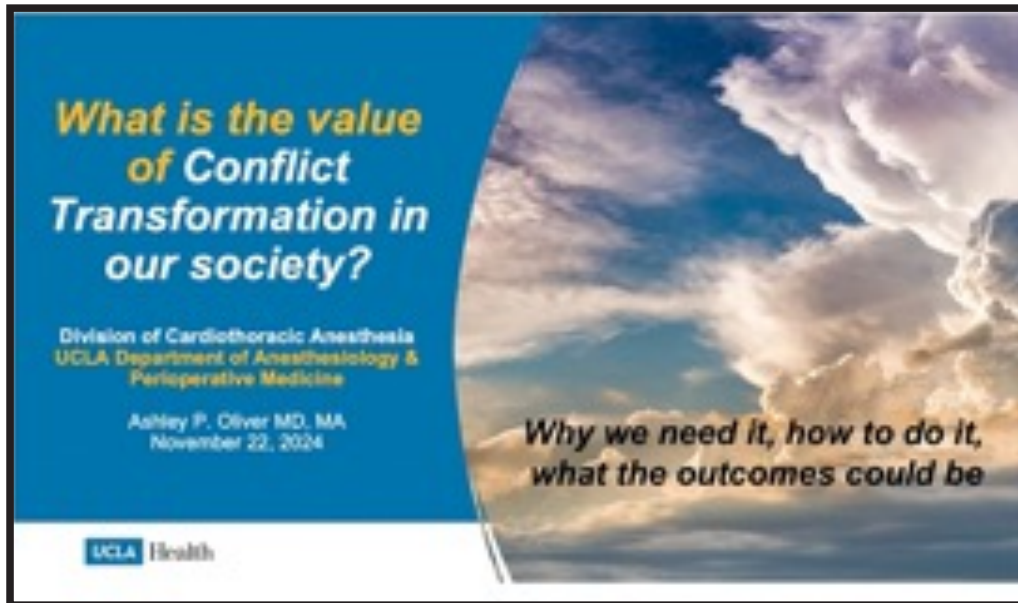
Society of Cardiovascular Anesthesiologists provides salary survey data with results posted on the SCA website.

Practice CULTURE is of utmost importance. This will determine your long-term job satisfaction and growth potential for your professional brand.

[Click Here](#) to view the recording of this and other past webinars on the SCA website.



UPDATE ON PDMP



Recap of the last Professional Development webinar on November 21, 2024, “Conflict Transformation to Improve Diversity and Organizational Influence.”
Featuring: Ashley P. Oliver, MD, MA | UCLA

Panelists

Seema P. Deshpande, MBBS, FASA
University of Maryland

Samhati Mondal Ghosh, MBBS, MD, MS, FASE
University of Maryland

Trevor S. Sutton, MD, MBA, CPE
IAA, Hartford Healthcare

Moderators

Kiran Belani, MD, FACC, FASE
Northwestern

Abimbola (Bola) Faloye MD, FASA, FASE
Emory University Medical Center

Emily Methangkool, MD, MPH
Olive View, UCLA Medical Center

Ragini G. Gupta, MD
Emory University Medical Center

[Click Here](#) to view the recording of this and other past webinars on the SCA website.



JOB LISTINGS

Please email WICTA@scahq.org with any job postings as well as open fellowship spots or candidates seeking fellowship for the 2025-6 academic year.

Birmingham, AL - University of Alabama Birmingham Heersink School of Medicine (UAB) is recruiting seeks an innovative and accomplished leader to serve as its next Endowed Vice Chair of Education, Department of Anesthesiology and Perioperative Medicine. The Vice Chair will be an exceptional academic leader with a substantial record of teaching, clinical, and administrative accomplishments to lead the educational mission of the department. This is an outstanding opportunity for a contemporary and inspirational leader well versed in the academic mission to serve at one of the nation's premier Departments of Anesthesiology.

The UAB Department of Anesthesiology and Perioperative Medicine is a recognized international leader in the fields of clinical anesthesia, graduate and postgraduate education, and scientific inquiry through basic and translational research. The department consists of more than 150 faculty members involved in the delivery of patient care and research activities, more than 90 residents and fellows, and more than 70 staff members. With a focus on scientific innovation, the department consistently ranks in the top clinical departments of anesthesiology in funding from the NIH. The department's key areas of research focus include mechanisms and treatment of pain, free radical biology, inflammatory diseases, acute lung injury, cardiovascular disease and endothelial dysfunction, artificial intelligence, precision, and predictive medicine. The department hosts accredited fellowships programs in cardiothoracic anesthesiology, critical care medicine, obstetric anesthesiology, pain medicine, and pediatric anesthesiology.

The incoming Vice Chair will build upon a notable curriculum, propel fellowship programs of excellence, and enhance educational opportunities while providing strategic leadership and oversight of the department's clinical training infrastructure. The Vice Chair will maintain a strong and supportive relationship with other administrators, faculty, staff, fellows, and residents within the department and surrounding clinical entities by being a visible, proactive, and outstanding communicator who is able to build relationships and complex partnerships across the organization.

This physician leader will be an experienced medical educator in anesthesiology with a track record of building educational programs for anesthesiology residents and fellows. They will oversee the training programs in the department while passionate and skilled at building programs attracting best-in-class trainees who are prepared for an immersive training in a collegial atmosphere. The Vice Chair will have substantial impact on anesthesiology education at one of the nation's top clinical departments. Candidates must be board certified in Anesthesia, meet the academic requirements of the Department, and licensed to practice in the state of Alabama.

Requests for information, confidential nominations, and expressions of interest through candidate materials (including a letter of interest and CV) should be submitted via email to UAB search consultants Dr. Mike Anderson and Vinny Gossain through the office of Ashley Rittgers at arittgers@wittkieffer.com.

The Department of Anesthesiology at Wake Forest University School of Medicine and Atrium Health Wake Forest Baptist Hospital has two exciting professional opportunities open! Please see the open positions below. Interested individuals can contact me at csola@wakehealth.edu with any questions.

Vice Chair for Research [Click here](#) to view the online posting and apply

The Department of Anesthesiology at Wake Forest University School of Medicine and Atrium Health Wake Forest Baptist Hospital is seeking a dynamic and visionary leader to serve as the next Vice Chair for Research. With a unified data structure, electronic medical record, and IRB across all 69 hospitals of Advocate Health System, this is a unique opportunity to leverage the strength of the enterprise in data extraction, large registries, and clinical trials networks. This role will be pivotal in enhancing the department's research infrastructure, developing, and implementing a strategic plan to secure extramural research funding, coordinating research activities across the department, establishing a mentoring program, and fostering a culture of innovation and excellence.

Vice Chair for Community and Belonging [Click here](#) to view the online posting and apply

The Department of Anesthesiology at Wake Forest University School of Medicine and Atrium Health Wake Forest Baptist Hospital is seeking a dynamic and visionary leader to serve as the next Vice Chair for Community and Belonging. The role of the Vice Chair for Community and Belonging will involve developing an inclusive culture that celebrates and values diversity across backgrounds, perspectives, and experiences. This will include creating strategies across the organization for recruitment, retention, mentoring, and leadership development of highly qualified, talented faculty and trainees. The successful candidate will demonstrate integrity, strong leadership skills, emotional intelligence, empathy, and cultural awareness to help foster an environment of belonging for the long-term recruitment and retention of our faculty.



SOCIAL MEDIA CORNER

Check out our Beautiful New Website — [WICTA Special Interest Group](#)

To stay better connected, follow us on Twitter, Instagram, and Facebook, and join our WICTA Facebook group. Anyone can join our Facebook group, and any member can post to the page. This is a great place to network with other members, ask questions, list job openings, etc.

Got something exciting you need to tweet, send us an email at wicta@scahq.org and let us know about your recent publication, promotion, etc. and we will share on our social media sites.



Let Us Do the Bragging for You!

Twitter: @womeninctanes

Facebook: @wictamedia

Instagram: @WICTA



WICTA Newsletter Liaison

Chandrika Garner, MD, FASE

Associate professor of anesthesiology at Wake Forest Baptist Medical Center in Winston Salem NC where she holds dual roles as the Program Director for the Adult Cardiothoracic Anesthesiology Fellowship and Assistant Program Director for the Anesthesiology Residency. She is an ABA applied examiner and a question writer for the ABA Adult Cardiac Anesthesiology Exam.

Brain Teaser Answer

Question of the Quarter Correct Answer: B

Explanation

From the Heart Rhythm Society Expert Consensus Statement on the Perioperative Management of Patients with Implantable Defibrillators, Pacemakers, and Arrhythmia Monitors, “The only way to render a patient with an ICD to asynchronous pacing is to reprogram the ICD, as a magnet renders a defibrillator unable to treat tachyarrhythmias, but it does not change the pacing mode.”

<https://www.hrsonline.org/guidance/clinical-resources/2011-expert-consensus-statement-perioperative-management-patients-implantable-defibrillators>

