



Payment Progress Series
Part 1: The 33% Problem 7

Commercial Health Insurance
Trends and Implications 10

Safety Tip of the Month:
Pediatric Airway Update 37



American Society of
Anesthesiologists®

Volume 85 ■ Number 5 ■ May 2021
asamonitor.org

ASA Monitor®

THE LEADING SOURCE FOR PERIOPERATIVE HEALTH CARE NEWS

Strength in a Time of Fear: Brigham and Women's Confronts COVID-19

Kelly Jong

In the face of a crushing surge of cases that halted elective surgeries, strained resources, and threatened to overwhelm staff, Brigham and Women's Hospital in Boston acted quickly to transform its facility into one of the most efficient and successful COVID-19 programs in the country. Much has changed since the days when its staff had to carefully reuse PPE as it managed an ICU capacity of more than twice its usual number of patients. In early March 2021, Brigham and Women's achieved a 70% vaccination rate among

staff and a growing campaign to help educate and vaccinate the community.

Riding the bumps

As COVID-19 gripped the nation in early 2020, the staff at Brigham and Women's began the tenuous work of developing its own strategy for containing the pandemic. The hospital experienced a surge that peaked in late April. According to James P. Rathmell, MD, Executive Editor of *Anesthesiology*, and Professor and Chair, Department of Anesthesiology,

Continued on page 8



Lindsey Baden, MD, an attending physician in infectious disease, associate professor of medicine at Harvard Medical School, and lead investigator of the international clinical trial that enabled FDA Emergency Use Approval of the Moderna COVID-19 vaccine, receives his first vaccine dose in January 2021.



You're Vaccinated... Now What?

Richard Simoneaux Steven L. Shafer, MD
Editor-in-Chief

We've learned a vast amount about SARS-CoV-2 in the past year. We know it comes from bats, most likely from Yunnan, China (asamonitor.pub/3rVUMXJ). We know that variants are emerging that increase infectiousness and escape humoral immunity (*Science* 2020;370:1464-8; *Nature* March 2021). We can track coronavirus evolution in



Continued on page 12



Rx/Museum: A Weekly Dose of Art and Healing

Gordon Glantz

So much – perhaps too much – is made of the struggle between those who are left-brained (linear thinkers) and those who are right-brained (holistic thinkers). On one side of the brain, the left, you will find those motivated by logic. On the other, the right, people are more motivated by emotive gut instinct.

But that doesn't mean that there cannot exist a literal meeting of the mind – or minds – by providing those in the science-based medical field with a respite founded in the arts. During this stressful pandemic, the need is clear.



Aaron Levy, PhD

Critical Care at Penn Medicine in partnership with the Health Ecologies Lab at the University of Pennsylvania.

Aaron Levy, PhD (University of Pennsylvania), and Lyndsay Hoy, MD (Penn Medicine), are the faculty directors of the virtual program that delivers emailed artworks and reflections to its 1,100+ subscribers. These artworks – via partnerships with the Philadelphia Museum of Art, Barnes Foundation, and Slought Foundation (run by Dr. Levy on the Penn campus) — arrive every Monday for a year.



Lyndsay Hoy, MD

Since its launch in July 2020, Rx/Museum has received positive press

Continued on page 17



SPECIAL SECTION

**Pediatric Pain: New Approaches for Our
Most Vulnerable Patients** 24-33

Guest Editor: Muhammad Rafique, MBBS, FASA

Facility Spotlight: Rx/Museum

Continued from page 1

from numerous outlets, including *The Washington Post*.

“Fundamentally, it’s an attempt to bridge the arts and humanities with medicine,” said Dr. Levy, a senior lecturer in the Departments of English and History of Art who teaches and writes about social medicine and equity in health care and society. “These are two disciplines that Lyndsay and I like to think of as sharing something fundamental in common – a focus on caregiving and helping their communities.

“Our collaboration in this project extends to other clinicians, trainees, undergraduates at Penn, PhD students, and museum educators, all of whom help to write the weekly pieces. It’s really a beautiful and unique process.”

“In a time when visiting a museum or attending a workshop is a juggling act for physicians, the Rx/Museum initiative is the right fit.”

Personal view

Dr. Hoy, an Illinois native who completed her training at Penn, graduated in 2016, and remained on faculty, said the project holds a different meaning for everyone on the team. Dr. Hoy’s personal and professional clinical experiences shaped the way she is impacted by Rx/Museum.

Dr. Hoy explained she was diagnosed with an extremely rare, progressive lung disease, lymphangioliomyomatosis (LAM) during her residency. “In effect, I was having to deal with both the demands of training and the emotional experience of my disease. It was overwhelming and traumatic and, oftentimes, lonely,” she said.

Gordon Glantz is a contributing writer with a BS in Journalism from Temple University. He worked for 25 years in the newspaper business, as a sports reporter, crime reporter, and managing editor/columnist. He now covers the science and medical fields.



Claude Monet. Water Lilies, 1906. The Art Institute of Chicago.

Dr. Hoy also realizes that, while she has a rare diagnosis, others are dealing with their own struggles in the profession at large.

“Rx/Museum is very personal for me,” she said. “It has provided a sense of community and a creative outlet, not only to learn about the arts, but perhaps to find more nuanced ways to think about caregiving through the lens of visual art.”

As an anesthesiologist and a rare disease patient, Dr. Hoy gained deeper insight and a heightened awareness of the need for this initiative. She believes the arts can be utilized to address the struggles of so many right now.

Building bridges

Dr. Levy, an art historian interested in practices of caregiving, said the project also has deep meaning for him. His work often involves bringing faculty and students together for discussion of topical issues, so the Rx/Museum’s cultivation of reflection really spoke to him.

“Each artwork also becomes a lens to understand the world – its inequities, promises, and challenges,” he said.

Dr. Levy said that includes the many questions raised by the pandemic itself: “This project is an amazing opportunity to reflect on what we value as a caregiving community as we work through the many issues facing health care in this country.”

Unique evolution

Just like a movie altered from the book, the original script has changed, with COVID-19 being the major impetus. The project originally began as an attempt to create interdisciplinary connections but has bloomed over the course of the pandemic into an emotional wellness experience, helping clinicians reflect on illness, death, and more.

Dr. Hoy said she believes the pandemic has illuminated self-care and well-being as a priority for all front-line workers, not just anesthesiologists. She hopes the Rx/

Museum provides a sense of community during this isolating time.

In a time when visiting a museum or attending a workshop is a juggling act for physicians, the Rx/Museum initiative is the right fit. “What sets Rx/Museum apart from other approaches that bring together the arts and medicine is that we bring the museum to the clinician,” said Dr. Hoy. “We are not asking physicians to spend three to four hours in a gallery or even to join a virtual lecture.”

Future plans

Since discussing personal struggles is still often stigmatized and resisted, Drs. Hoy and Levy hope the weekly art selections serve as a way to facilitate these important conversations. They believe the Rx/Museum can become a healthy way for front-line clinicians to process the incredible toll of the pandemic.

As successful as the takeoff has been for the project, the flight has just begun. Both Drs. Hoy and Levy see clear skies ahead. They said they are now shifting focus to measuring the qualitative and quantitative impact of this weekly dose of art. Plans for expansion now include a patient-facing portal and a subscriber community outside of Penn. ■

Join us on Twitter and Facebook



Read up and share your favorite *ASA Monitor* articles on our brand-new Twitter and Facebook accounts! Follow us to take advantage of timely, informative, and leading-edge resources. Don’t miss out, join us here on Twitter: **@ASAMonitor** and Facebook: **@ASAMonitor**.

Administrative Update

Continued from previous page

(Linda Shore-Lesserson, MD, Chair), Critical Care Medicine (George Williams II, MD, FASA, FCCP, FASA, Chair), Geriatric Anesthesia (Julie McSwain, MD, FASA, Chair), Neuroanesthesia (Dorothea Rosenberger, MD, PhD, Chair), Obstetric

Anesthesia (Mark Zakowski, MD, FASA, Chair), Pain Medicine (David Dickerson, MD, Chair), Palliative Care (Rebecca Aslakson, MD, PhD, Chair), Pediatric Anesthesia (Sulpicio Soriano, MD, FASA, Chair), Regional Anesthesia and Acute Pain Medicine (Edward Mariano, MD, Chair) and Transplant Anesthesia (Evan Pivalizza, MD, MB, FCMSA, Chair). Each

committee addresses pressing issues of their subspecialty area. These committees are very engaged and busy; for instance, the Committee on Pain Medicine has been extremely busy dealing with issues surrounding the ongoing opioid crisis, while the Committee on Geriatric Medicine is addressing the Perioperative Brain Health Initiative.

The Division of Scientific Affairs is a busy and productive division within ASA. I certainly appreciate all the dedication and hard work members of the division do each day. As a group, we will continue our hard work in order to provide the highest level of science and education to our membership so that our patients receive optimal care. ■