THE QUARTERLY NEWSLETTER OF THE AMERICAN SOCIETY OF ANESTHESIA TECHNOLOGISTS AND TECHNICIANS

PRESIDENT'S MESSAGE...



LET'S CAPITALIZE ON OUR SUCCESS

by Ruth A. Ochoa, CerAT

Congratulations to the 316 anesthesia technicians who passed the ASATT National Certification Examination in May of '96

and the 62 who passed in October in New Orleans at the ASATT 7th Annual Meeting and Educational Seminar. You are truly pioneers in our field.

The next few years will be very challenging for ASATT as an organization. We must take advantage of our success with National Certification and carry that momentum into the future. The idea for my motto for my term as your President is taken from John F. Kennedy: Ask not what ASATT can do for you, but what YOU can do for ASATT. Many organizations fail for lack of participation from its membership. ASATT is not just a handful of people or the Board of Directors. It is YOUR professional organization. As a member, there are many ways for you to be involved: write articles for *The Sensor*, serve on a committee (several are being formed or already exist), vote in elections, run for national office,

participate on the local level by being active in your state /local societies and attending meetings. For information on how you can participate, contact your Regional Director.

As your President for 1996-97, I have several goals for the coming year:

- 1) Continue the long process of preparing for the "Technologist" level. This has been a work in process, but there is still plenty to do; guidelines, drafting a workbook/study-guide, etc. We need technicians to help with this. If you are interested, please contact me.
- 2) Coordinate efforts for national recognition of the anesthesia technician. Now that we are recognized as a profession by our peers, we need to be recognized nationally by the public as well, Dave Mastalski, CerAT, is working on this project by writing Congressmen and Senators to ask for a declaration of a national Anesthesia Technician Day. If you would like to help with this project, please contact Dave.

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<u>Classified Ads:</u> Individuals seeking employment, or employers seeking candidates in anesthesia technical support.

Rate: \$8/line, 5-line minimum $3^{1}/2$ " wide

[Times-Roman type, 12-pt, typeset by editors.]

For further information, contact:

The ASATT Sensor Dianne Holley, CerAT, Editor 3810-A Tonkawa Trail Austin, TX 78756 (512) 451-7457

or

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THE SENSOR: Quarterly Newsletter of the ASATT

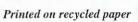
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The opinions expressed herein are those of individual authors, and do not necessarily reflect the views or opinions of the ASATT.

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All submissions pertinent to the objectives of the ASATT will be considered for publication. Preferred format: micro diskette, (PC or Mac), or email text file. Photographs, preferably black-&-white are also welcome and will be returned.

Deadline for the next issue is February 15, 1997





ASATT BOARD OF DIRECTORS

Jacqueline C. Polak, CerAT - Region 1 Director

Jacqueline has been involved in anesthesia technology since the mid '60s. She was one of a few lab technicians who participated on the first heart transplant team in the U.S. Jackie also

was involved with the research and development of the first PCA pump under the direction of Dr. Phillip Sechzer. She has been ASATT Region 1 Director since 1992. Jackie is married and has two grown children, Phillip II, a NYC Policeman, and Christine, who is in college. She enjoys biking, traveling, and knitting. She and her husband Phillip also enjoy spending time at home with their pets-two dogs, a cat and a parrot.



Jacqueline Polak at the ASATT booth at the ASA Exhibit Hall in New Orleans, October 1996

especially the Civil War era, where she participates in reenactments. Linda also raises Boston Terriers and runs a business making arts and crafts.



Sam Ortiz - Region 4 Director

Sam recently was appointed ASATT Region 4 Director by the ASATT Board of Directors at the 7th Annual Meeting in New Orleans. This position was vacated by Sheila White, CerAT, who was elected Vice President/President-Elect. Sam is presently employed by Mercy Hospital and Medical Center, Chicago, IL where he worked as a Certified Cardiopulmonary Technologist (CCT) in the pulmonary function lab from 1982-87. He then transferred to the Anesthesia Department when the Pulmonary laboratory merged with Respiratory Therapy. Sam



Sam Ortiz gives his input at the ASATT Board of Directors' Meeting (Wilma Frisco, left, and Sheila White, right)

has been an Anesthesia Associate for 10 years. He has been an active member of the Board of Directors of the Illinois Society for Anesthesia Technology (ILSAT) for 4 years. Sam enjoys spending time with his 2 children—a daughter, 23, and a son, 12.

Linda C. Cotton, CerAT - Region 3 Director

Linda has been involved with ASATT for several years. She also served as Vice President and President of the Florida Society of Anesthesia Technologists and Technicians (FSATT).



Linda Cotton accepts her "Certified Anesthesia Technician Pin" from Jerry Guttery, 1995-96 ASATT President

Linda's medical career and education come from her experience as a medic in the US Army. She has been a volunteer for the American Red Cross, and volunteered for medical aid during Hurricane Andrew. Linda loves History,

OFFICIAL NOTICES....

Certification Exam: The next opportunity to take the ASATT Certification Exam will be May 17, 1997. Test sites are Albany, NY, Philadelphia, Atlanta, Chicago, Oklahoma City, Las Vegas, Seattle, and Honolulu. Please contact the ASATT office for more information.

Advertising Rates: New advertising rates will go into effect for ads placed in the January 1998 issue of *The ASATT Sensor*. The new rates are per insertion and are as follows:

1/4 page: \$125 1/2 page: \$250

Current members will receive a 20% discount.

CONTINUING EDUCATION FOR THE CERTIFIED ANESTHESIA TECHNICIAN

by Wilma Frisco, CerAT ASATT Secretary and Director, Region 2

ASATT is very proud of all the anesthesia technicians who passed the certification examination. ASATT extends another "Congratulation Salute" to all of you.

Because certification is a very vital step to the future practice, it is necessary that ASATT require, just as other professional societies require, an ongoing pursuit of education. This pursuit has been called by many professionals continuing education.

Continuing education has been defined as: structured educational and training experiences for personal or professional enhancement in which the individuals participating are assumed to have previously attained a fundamental level of education, experience, or training.

The following preliminary requirements were approved by the ASATT Board of Directors at the October 1996 Annual Meeting. Until the continuing education process review is completed by the Board, please use these as guidelines for your current continuing education needs.

ASATT CONTINUING EDUCATION REQUIREMENTS FOR RECERTIFICATION

1. A total of twenty (20) continuing education contact hours in the areas relevant to anesthesia are required for a two-

- year period. A contact hour is defined as a minimum of fifty (50) minutes.
- 2. A minimum of ten (10) continuing education contact hours must be acquired and reported within one calendar year.
- 3. You will be mailed directions for submitting your continuing education contact hours.

How to Obtain Continuing Education Credits:

- 1. In House Inservices
- 2. Monthly State Meeting Seminars/Regional Seminars
- 3. ASATT National Annual Seminar
- 4. Professional Seminars (ASA, AANA, AAMI, Respiratory, Blood Bank, EKG, ACLS, Basic Life Support, etc.)
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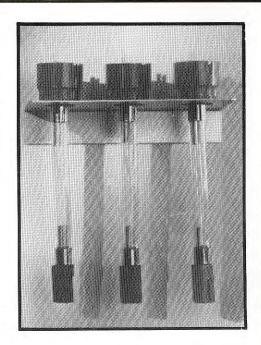
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OPEN FORUM...

by David G. Mastalski, CerAT ASATT Region 7 Director, SENSOR Associate Editor Chief Technician, VA Medical Center, Portland, Oregon

Dear OPEN FORUM:

Now that certification is a reality, does the ASATT have any plans for a licensure and/or registration program for the future? I think that it would certainly create more job stability as well as eliminate the dilution of the anesthesia tech into nursing areas such as: central core tech, surgical aide, orderly, etc.

Gregory A. Swaim Dallas, TX

The ASATT does not currently have plans for "licensure and/or registration" in the near future. There is still plenty of work in progress putting the final touches on National Certification. I have a feeling this will be an ongoing process to ensure that certification is professionally administered and maintained. The idea of licensure is certainly something that is of interest in any professional occupation, but is nearly impossible to attain on a national level. It would involve extensive lobbying and passage of legislation to be legal. Physicians, attorneys, and nurses are the primary professional groups who are licensed either nationally or on the state level. As a young and growing organization, we are concentrating our resources on certification and continuing education.

However, the idea of a national registry is certainly an area which we could investigate. I would encourage you or any of our members to find out any information you can about the rules and regulations regarding "registry," and arrange to present your findings to the Board of Directors. ASATT belongs to the membership, and if the membership is interested in a professional national registry, then certainly it would be in everyone's best interest to seek more information in this area.

DEAR OPEN FORUM:

Can you give me some information about "Bear Hugger" warming units? My hospital is thinking about buying these and I would like more information.

San Diego, CA

Although Augustine Medical, Inc. (the makers of Bear Hugger) developed the technology for forced-air blanket style warming, and has sponsored considerable research in this area, there are several manufacturers presently marketing various versions of this, including Mallinckrodt and Cincinnati Sub Zero. You should note, that although many OR's have used these units intra-operatively for several years, they originally were designed for post-operative warming in the PACU or intensive care units. The units, themselves, were big and bulky, and did not have the adequate micro-filtering system required for OR use. Now, there are a couple of models which are portable and have the proper filtering abilities. Some studies show these warm air blankets

to be the only means to, intra-operatively bring a cold patient to normal-thermic ranges. These units have field tested very well and are currently on my hospital's "wish list".

From "the Net" (GasNet.com)....

Bill Collins MD, the ASA's JCAHO liaison writes:

"The subject of locking anesthesia carts between cases, etc. has drawn a great deal of attention in the last several months as a result of some misinformed JCAHO surveyors stating a position in this regard that is contrary to the intent of JCAHO Standards. ASA, through its liaison representatives, has contacted JCAHO and received assurances that these stated positions are indeed in error and will be corrected. Surveyors are to have been advised by voice mail and clarification of the official position was to be published."

The following is quoted directly from the JCAHO publication, Joint Commission Perspectives (Vol.16, #3, May/June 1996, pg 9):

Medication Security Alert

Recent information has come to the attention of the Joint Commission about a misrepresentation that the only way to have a "secure drug supply" is to keep all drugs under "lock and key."

The area of greatest concern appears to be for medications that have been prepared for use by an anesthesiologist or CRNA. These drugs are placed on the anesthesia cart in the operating room while the anesthesiologist or CRNA goes to the holding area to get the patient and bring him or her back to the operating room. Some believe that these drugs are "unsecured" because they are not locked or constantly attended.

The drugs are "secure" in that they are not readily available to anyone other than operating room personnel. In the absence of evidence to the contrary - that is, there have been no instances of drug abuse, misuse, or diversion - this practice is considered to be safe and the drugs are considered secure.

For questions or further clarification, call the Department of Standards Interpretation Unit (630) 792-5900.

continued on page 12...

All OPEN FORUM questions and "Did You Know ..." ideas may be addressed to:

ASATT SENSOR OPEN FORUM 9805 NE 116th Street Kirkland, WA 98034-4248 FAX (503) 721-7859

Those chosen for publication in this column will receive a free ASATT T-shirt.

ARTERIAL BLOOD GASES

by Gail Walker, CerAT, Anesthesia Technician Team Leader University of North Carolina, Chapel Hill

(Editor's note: Explanations of abbreviations used in this article can be found in the Sample Blood Gas Report on page 7. Please remember that protocols vary among institutions and specific instruments.) The definition of a "blood gas" is any element or compound that is a gas under normal circumstances and which is, to some extent, dissolved in the blood. Carbon dioxide (CO₂), carbon monoxide (CO), helium (He), krypton (Kr), nitrogen (N₂), and oxygen (O₂) all fall under this definition. Krypton, helium, and nitrogen are essentially inert gases and because they do not cause clinical problems, they are not included as part of an arterial blood gas (ABG). Nitrogen can cause the "bends" and other difficulties associated with underwater diving, but this is a specialized area of medicine.

Glucose, hemoglobin, and bicarbonate are not gases, but are typically included on all ABG's. For example, glucose is in a solid crystalline state when at room temperature, yet it quickly dissolves in blood. Hemoglobin is the molecular carrier of oxygen within the red blood cell. Bicarbonate is the anion of carbonic acid. Base excess is a calculation that reflects how much acid or base is needed to normalize the total buffer base in the blood. Carbon monoxide is a gas and is measured in its combined form with hemoglobin as a percent carboxy-hemoglobin (%COHb). Some blood gas labwork also includes measurement of electrolytes present in the blood including Na⁺, K⁺, Ca⁺⁺, and Cl⁻. In short, not all gases are measured, and some are not gases at all.

Arterial blood gases are run through one of two types of machines. The first type, a blood gas machine, will measure pH, pCO_2 , and pO_2 , and will allow for the calculation of base excess and bicarbonate. The second machine, a co-oximeter, measures SaO_2 , %COHb, %Methemoglobin, and hemoglobin content. CaO_2 can be calculated from this information.

Several factors must be taken into consideration when interpreting even normal values. Is the patient breathing room air, or is supplemental oxygen being administered? What were their previous ABG's, chest X-rays, or pulmonary function tests? What are the patient's vital signs, mental status, and state of tissue perfusion? Also, while most blood gases are arterial, some are mixed venous such as those drawn from a PA catheter.

The reason for an ABG is to find out a patient's pO_2 , pCO_2 , and pH. In conjunction with other lab and clinical information, we can assess three physiologic processes: alveolar ventilation, oxygenation, and acid-base balance.

There are four basic equations used for interpreting ABG's. These equations are not so important for the numbers they produce, but for their qualitative relationship.

Equation Physiological Process Assessed

pCO₂ Alveolar Ventilation

Alveolar Gas Equation Oxygenation

Oxygen Content Equation Oxygenation

Henderson-Hasselbalch Equation Acid-Base Balance

Simply put, the pCO_2 equation deals with a patient's respiration rate and breathing effort. The alveolar gas equation assesses if the lungs are properly transferring oxygen into the blood. The oxygen content equation is exactly what it sounds like, the oxygen content of the blood, whether it is arterial or venous blood. The Henderson-Hasselbalch equation relates pH to components of the bicarbonate buffer system.

While it is important for anesthesia technicians to have a basic understanding of arterial blood gases, it is just as important for us to have the knowledge of how to correctly handle these samples. We are often the ones drawing them and in some hospitals, actually run them in a blood gas machine that is set up in the OR.

Below is a list of common problems associated with arterial blood gases.

- Not an arterial sample: If blood pulsates into the syringe and the plunger rises by itself, the sample is most likely arterial. Peripheral vein pressure is almost always less than 40mmHg and often less than 30mmHg.
- Patient not in a "steady state": This can occur if a patient was recently connected to a ventilator or changed to a different FIO₂. (A patient with healthy lungs will only take about three minutes while a patient with COPD can take up to thirty minutes to reach "steady state.")

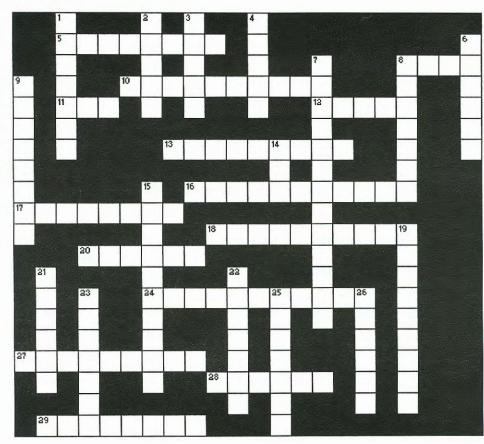
SCIENCE AND TECHNOLOGY... (continued)

- Sample syringe contains too much heparin: This problem seems to occur most often when a gas is drawn through an indwelling arterial line. Because these lines are routinely flushed with heparinized saline, the first few cc's of blood should be discarded.
- Sample contains an air bubble: Air in the syringe can cause miscalculations of pO₂, pCO₂, and pH.
- Sample not place in ice: Metabolizing blood cells alter blood gas values much more slowly when iced

- than at room temperature. pO_2 is the value most likely affected.
- Patient Temperature: Blood gases are always analyzed at normal body temperature (37°C). If a patient is febrile, the pO₂ and pCO₂ will be lower than the patient's. If the patient is hypothermic, the pO₂ and pCO₂ will read higher than it actually is.
- Verbal lab reports: Don't rely on your memory! Write it down!

Patient ID 12345		La Do	st Nam	е		First Name John	Sex Male		Age 50
Date		Tir				Date Drawn	Time Dra	wn	
01/01/97	ă.	00	00			12/21/96	2359		
Source		Typ	pe ood			Temp 37.0°C			
Arterial		ВК	Jou			37.00			
Sample Si	te	FIG				Allens Test	Adjunct		
Line		.40)			NA	Vent		
Blood Gas 3			450			C. A. Series			
Parameter pH	Value 7.319	Units	Refere 7.350		e Range	Explanation Measurement of acid	ity or alkalinity		
	47.9	mmHg	35.0			Partial pressure of ca			
pCO ₂	140.8	mmHg	75.0			Partial pressure (tens			
pO_2		mmol/L	75.0	-	100.0	Actual bicarbonate	sion) of oxygen		
HCO ₃ -act	24.1						hasa pandad ta bui	na 11 of his	and to normal all
BEvt tCO ₂	-2.4 25.5	mmol/L mmol/L				Base excess (acid or Total carbon dioxide	nase needed to bill	ng IL of bic	ουα το ποτιπαι ρΗ)
Oxygenation	n Parame	eters							
Parameter	Value	Units			e Range	Explanation			
tHb	15.0	g/dL	12.0	-	18.0	Total hemoglobin			
O _s SAT(est)	98.6	%				Estimated oxygen sa			t (SaO²)
O2Hb	95.1	%	94.0		97.0	Oxyhemoglobin (oxy			
CÔHb	NA	%	0.5		1.5	Carboxyhemoglobin	(carbon monoxide-b	ound hemo	oglobin)
MetHb	NA	%	0.0	-	1.5	Methemoglobin (unbi			
HHb	NA	%	0.0	-	5.0	Deoxyhemoglobin (ne			
Hct	NA	%				Hematocrit (ratio of p	acked red cells to b	lood volum	e)
Electrolytes									
Parameter	Value	Units			e Range	Explanation			
Na ⁺	NA	mmol/L	135.0			Sodium ion			
K+	NA	mmol/L	3.50			Potassium ion			
Ca ⁺⁺	NA	mmol/L	1.13			Calcium ion			
Cl-	NA	mmol/L	98	-	106	Chlorine ion			
Matabalitas									
Metabolites						Evalenation			
Parameter	Value 103	Units mg/dl	Refere	ene	ce Range	Explanation Simple blood sugar			

TECHNICIAN





SCIENCE AND TECHNOLOGY POST TEST: Arterial Blood Gases

Use this crossword puzzle to test your knowledge on the "Science and Technology ..." article on pages 5-6. Puzzle answers can be found on page 11 of this issue.

Across

- 5 The __ Gas Equation assesses whether the lungs are properly transferring O₂ into the blood.
- 8 BEvt stands for __ excess.
- 10 Methemoglobin is __ hemoglobin.
- 11 Gas values change more slowly when a sample is place on ___.
- 12 tCO, is __ carbon dioxide.
- 13 O₂SAT(est) stands for __ oxygen saturation.
- 16 HCO₃ stands for ___.
- 17 _ is the gas that can cause the "bends."
- 18 tHb stands for total ___.
- 20 A patient's blood gases are not __ soon after a ventilator setting change.
- 24 The Oxygen Content Equation assesses ___.
- 27 K+ stands for the __ ion.
- 28 Na+ stands for the __ ion.
- 29 Carboxyhemoglobin (carbon __-bound hemoglobin).

Down

- 1 Ca++ stands for the __ ion.
- 2 Oxyhemoglobin is oxygen-__ hemoglobin.
- 3 A hematocrit is a __ of packed red cells to blood volume.
- 4 Glucose measurement shows simple blood ___.
- 6 A sample drawn from a PA catheter is mixed __.
- 7 MetHb stands for __.
- 8 The Henderson-Hasselbalch Equation assesses acid-base ___.
- 9 Cl stands for the __ ion.
- 14 Blood samples should not contain _ bubbles.
- 15 Hct
- 19 HHb or deoxyhemoglobin is __-bound hemoglobin.
- 21 pCO2 stands for partial pressure of __ dioxide.
- 22 pO2 is partial pressure or __ of oxygen.
- 23 Arterial lines are routinely flushed with __ in saline.
- 25 pH measures alkalinity and ___.
- 26 Base excess shows how much acid or base is needed to bring 1L of blood to __ pH.

PRESIDENT'S MESSAGE... (continued from pg 1)

3) Finalize the continuing education requirement process. There have been many questions regarding continuing education for National Certification. The Education Committee and the Board of Directors have been diligently working in this area. They will be meeting in late January in Houston to hopefully iron out all of the final details. This is a monumental project which must be done correctly in order for ASATT National Certification to be valid for scrutiny by other professional organizations. As soon as this project is complete, you will be notified of your continuing education requirements.

There are several companies that I would like to publicly thank for their support and participation at our 7th Annual Meeting this past October in New Orleans: Abbott Laboratories; AIME, Inc.; Augustine Medical; B.Braun; Baxter Healthcare Corp.; Carlow College; Ceramatec, Inc.; Cobe Cardiovascular, Inc.; Datex-Engstrom; Haemonetics Corp.; King Systems; Fischer-Paykel Healthcare, Inc.; Glaxo Wellcome; Hudson RCI; Mallinckrodt Medical; North American Drager; Ohmeda Machines; Ohmeda Pharmaceutical; Raincoat Corp.; Roche Laboratories; Rusch, Inc.; Sharn, Inc.; Sims-Smith Industries; and Western School of Health and Business Careers.

There are two ASATT corporate members which are offering annual awards for anesthesia technicians:

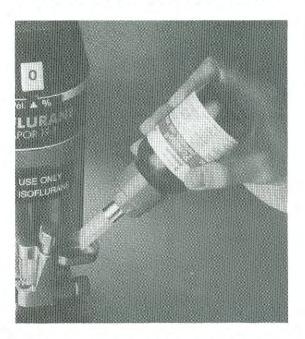
- 1) Augustine Medical Inc. awards \$1500 to the outstanding technical article published in *The ASATT Sensor*. This award is to be used to offset the cost of attending the ASATT Annual Meeting and Educational Seminar. Congratulations to Dianne Holley, CerAT, our 1996 winner!
- 2) AIME Inc. will begin annually awarding \$1000 to the ASATT member attending one of their Certification Preparation Seminars and achieving the highest score on the post-seminar exam, beginning in 1997. Thank you, Augustine Medical and AIME, for your tremendous support.

The next ASATT National Certification Examination will take place on May 17, 1997 at the following locations: Albany, NY, Philadelphia, Atlanta, Chicago, Oklahoma City, Las Vegas, Seattle, and Honolulu. If you are interested in taking the 1997 examination, please make plans now by contacting the ASATT home office. Please note that the National Certification Examination testing will only be offered once a year.

Planning and work has already begun on ASATT's 8th Annual Meeting and Educational Seminar to be held in San Diego, CA, October 17-19, 1997. Sheila White, CerAT, and Dean Rux, CerAT, are the Program Directors and have been busy putting together an excellent program. If you wish to help, feel free to contact Sheila or Dean. Please make your plans now to attend.

Finally, I would like to thank all of you for your support in my election as your ASATT President. I take this position with great pride, realizing the responsibility I have to you, the ASATT member. I would not be able to help guide ASATT into the future without the dedication of our Board of Directors. I look forward to the coming year and to all of the tremendous progress we will continue to make on behalf of our members.

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REGIONAL SOCIETY ACTIVITIES...

Let us announce what's happening in your area. Send a brief report of recent or future activities for the next issue by February 15, 1996 to your ASATT Regional Director or to Dave Mastalski (address and numbers on page 2). Send newsletters, if available, a brief write-up, or call with your info. Photos (captioned) are also welcome, and can be returned.

ASATT Region 1:

New Anesthesia Technician Program starting in 1997 at Columbia-Presbyterian. Program Director is Kathleen Kearney, RN, CNOR (212) 305-2575 X50037 for more info. Ohmeda "Essentials of Anesthesia Equipment" seminar: Feb. 4-6 at the Allen Pavilion. Contact Scott Cooley 1(800) 345-2700 X3452 "Focus Certification" seminar by AIME, Inc. is Feb 15-16 Contact Vilma Young (502) 549-7046.

For further information:

Jacqueline Polak at (718) 283-7188[W] or (718) 979-8644[H].

For information on future events: George Mann at (315) 471-6077.

ASATT Region 2:

Please see Ohio and Pennsylvania. For further information: Wilma Frisco at (216) 261-0649.

The following are scheduled educational meetings: February 22 - Akron General Hospital, Akron, OH March 22 - St. James Cancer Center, Colombus, OH April 26 - Children's Hospital, Akron, OH For further information: Wilma Frisco at (216) 261-0649.

Pennsylvania
The PSATT is sponsoring the "Anesthesia Patient Safety Seminar" on June 14, 7:30am - 3:30pm at the Mercy Hospital of Pittsburgh. The cost is \$50 and includes registration, continental

NCSAT JOB "HOTLINE"

The North Carolina Society of Anesthesia Technicians has started a nationwide job referral service for anesthesia technicians looking for employment and hospitals with positions to fill.

A technician seeking a change of employment should send his/her name, address, phone numbers, fax number, and the city or state in which one desires employment. Hospitals should send job opening information and the name of a contact person. NCSAT is asking that technicians send in a one-time-only fee of \$5 to help defray costs. Hospitals can register at no charge.

Hospitals can fax their job listings to (919) 966-4873, ATTN Gail Walker.

Technicians can mail their applications and a check made out to NCSAT to: Gail Walker, NCSAT President

6 Tamarack Ct. Chapel Hill, NC 27514

Phone: (919) 966-5136[W] or (919) 929-1865[H].

breakfast, and lunch. Selected topics for discussion relating to patient safety issues are: "Regulations Affecting Anesthesia Monitoring," "Issues of Safety and Regulations," "IV Equipment, Human Error, and the Anesthesia Machine." A total of five (5) continuing education contact hours will be awarded to each participant. Hotel accommodations will be made for out-of-town registrants. For a complete brochure or

For further information:

Vicki Carse at (412) 232-5807.

Virginia
For information on future events: Linda Ferris at (703) 985-8351.

ASATT Region 3:

For information on future events: Linda Cotton (904) 351-7343[W] or (904) 347-8118[H].

Florida For information on future events: Linda Cotton at (904) 351-7343[W] or (904) 347-8118[H].

Georgia
For information on future events: Marc Dickens at (404) 712-7710.

North Carolina For information on future events:

Gail Walker at (919) 966-5136[W] or (919) 929-1865[H].

Tennessee
For information on future events:

Sharon Baskette at (615) 322-4000[W] or (615) 646-1599[H].

ASATT Region 4:

Please welcome our new Region 4 Director, Sam Ortiz from Chicago, IL. Sam was appointed by the ASATT Board of Directors on October 21, 1996 in New Orleans to fill the vacant position after Sheila White was elected Vice President/President-Elect. Sam comes to the ASATT Board with excellent qualifications and job skills. He will be an asset to our organization. If you have any questions, concerns, comments, or For further information:

Sam Ortiz at (312) 772-7830[H] or (312) 567-2190[W].

Illinois
The ILSAT held it's annual fall meeting in conjunction with the ISA on November 2, 1996. Fifty anesthesia technicians and 15 vendors were in attendance. Some of the educational topics covered were: neuromuscular blocking agents, cost containment, future anesthesia machines, and clean vs. sterile. The meeting was truly excellent in content and attendance. A winter educational meeting is scheduled for early 1997.

For more information:

Pat Zueck (217) 788-3780.

REGIONAL SOCIETY ACTIVITIES...(continued)

Iowa We will be holding our annual spring educational meeting in conjunction with ISA on Saturday, April 5 in Des Moines. Watch your mail for further information and registration form. These meetings have proven to be an excellent source for additional job-related knowledge and a great way to meet your fellow techs, anesthesiologists, and sales reps. ISATT is still looking for interesting and energetic anesthesia techs willing to hold an office and/or help locate other anesthesia techs. Please contact me if you are interested in helping. It can be a very rewarding experience. For further information:

Sheila White at (319) 589-8665[W] or (319) 556-8234[H].

ASATT Region 5:

See the ad in this issue for details on "CRASH'97". All anesthesia support personnel are invited.

For further information:

Ann Martin at (303) 270-8275[W] or (303) 987-3907[H].

Colorado For information on future events: Teresa Chavez at (303) 320-2440.

Mississippi
For information on future events: Earl Coleman at (601) 984-5951

ASATT Region 6:

A spring educational seminar will be held on May 3, 1997 at Stanford University. Mindy Bradley is the Program Director. Watch your mail for more information. (Please note: the date was incorrectly announced for May 17th.)

For further information:

Dean Rux at (602) 821-3279[W] or (602) 497-9709[H].

Arizona Anyone interested in starting a state society call Tom Maggs in Phoenix at (602) 267-5011(W) or (602) 939-3554(H) or Jane Fry in Tucson (numbers below).

For information on future events:

Jane Fry at (602) 885-5756[H] or (602) 721-3836[W], or

California. California is offering several educational opportunities in the near future. On Feb 7-9, in Fresno, a Focus Seminar will be presented by AIME, Inc. See ad on page 18. Monterey hosts the CAATT/CSA Annual Meeting and Educational Program, May

For further information:

Grainne Senier at (408) 735-1346.

New Mexico. For information on future events:

Chris Urso at (505) 286-1168[H] or (505) 272-0383[W]

15-17.

Texas Plans are underway for a spring meeting in Houston at Ben Taub Hospital in late March and the 1997 Annual Fall Meeting (in Irving). Dallas/Fort Worth technicians hold their regular meetings on the 2nd Saturday of each month. [Lisa Shelton (817) 685-4917] For Houston meetings, [Gerardo Trejo at (713) 793-2898]. San Antonio also meets regularly [Raul Sanchez at (210) 675-1564]. For further information:

Dianne Holley at (512) 451-7457.

Kirk Hanson succeeded Jeff Mann as the new state society President at the September '96 annual meeting. Look for the newsletter with meeting info in January '97.

For information on future events:

Kirk Hanson (801) 625-2700.

ASATT Region 7:

Mark your calendar for the Spring Educational Seminar and Meeting "Certification Preparation and Review": Saturday, March 8, 1997 at the Red Lion Inn, Downtown Portland, OR. All anesthesia technicians are invited for this exciting day. There will be many vendors on hand. Watch your mail for registration form and details.

For further information:

Dave Mastalski at (503) 642-1537[H] or (503) 273-5389[W]

Hawaii For information on future events:

Delbert Macanas (808) 547-9872

OAATT held an educational meeting on Dec. 7th at Providence St. Vincent Medical Center in Portland. Thanks to Jennifer McCalvy from Ohmeda Pharmaceutical Division for lunch and a lecture on Desflurane. The next OAATT Meeting will be held Sat. Feb. 8 at the VA Medical Center in Portland. OAATT wishes to express its gratitude to ASATT Region 7 Director and Founding OAATT President Dave Mastalski for setting up our booth at the ASATT Annual Meeting in New Orleans. Thanks to Dave, our organization had a visible presence and exposure to a large group of fellow anesthesia support personnel and practitioners.

For further information:

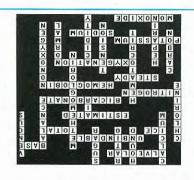
Linda Bewely at (503) 291-2151 Richard White at (503) 273-5389

Washington Watch your mail for information about our Spring Meeting. For further information:

Nora Tiffany at (360) 427-9562.

HISWERS TO PUZZLE:

(From page 9)



TO REGION 4 & ALL ASATT MEMBERS

Sheila White, CerAT Vice President/President-Elect

I would like to take this opportunity to thank everyone who has helped me during the past two years as I fulfilled my position as Region 4 Director. This has been a wonderful experience for me. I have met such great people, and made special friendships which I will always cherish. Getting involved with ASATT is probably one of the best things I could have done for myself. It has taught me many valuable lessons - some, possibly I would have chosen not to learn! But that is all part of the growing process.

As I move forward into my new role as Vice President/ President-Elect, I know there is a great deal more for me to learn and experience, and I accept this position and challenge with the best of intentions.

We have such untapped possibilities as far as our future as anesthesia techs goes. We have to remember we are moving ahead into unexplored areas of medical support, and we need to work swiftly and in support of one another in order to achieve the maximum benefit of what may lay ahead for us as professionals.

A good example of untapped possibilities is certification. So many people are hesitant to take the test, or take it but are discouraged because their hospitals/administration will not recognize it. Perhaps right now some of the hospitals are not acknowledging our status as Certified Anesthesia Technicians, but we are optimistic that within a very short period, JCAHO and other accrediting organizations are going to be looking at our role as qualified support personnel, and our performance possibilities in correlation with decreasing healthcare costs. Look at all of the other allied healthcare fields (respiratory therapists, radiology technologists, occupational therapists, etc.) and where they were a few years ago. They were not certified either, but now they cannot work in an accredited facility without certification or licensure. Everyone has to start somewhere! And we are here! We must stand united and strong, not divided and weak.

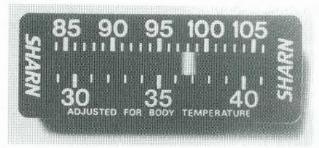
I feel it is going to be an exciting and successful year for ASATT, and I look forward to being a part of our growing and developing profession. Please stay in touch, and if there is anything I can help you with, or if I can find the answer to a question you may have, do not hesitate to call me.

I look forward to seeing you in San Diego in October 1997!! Thank you for your support and friendship.

OPEN FORUM.... (continued from page 5)

DID YOU KNOW ...?

The long-awaited new "APIC Guidelines for Selection and Use of Disinfectants" were published in the August issue of The American Journal of Infection Control (1996;24;313-42). Prepared by Dr. William Rutala, these guidelines cover everything from hot water pasteurization through liquid chemical disinfectants. For copies, contact APIC National Office (292) 296-2742



Clinically acceptable alternatives to more expensive electronic temperature monitors are now available at lower cost.

Crystaline™ Temperature Indicators using analog liquid crystal technology can be used in place of more expensive devices in most cases, resulting in a savings of \$1-\$3 per surgical patient.

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CRASH 97 TECHNICIAN PROGRAM

FACULTY

Michael B. Ochs, D.O.
Assistant Professor
CRASH 97 Technician Course Director

Rita Agarwal, M.D. Assistant Professor of Anesthesiology

Avninder Dhaliwal, M.D. Assistant Professor of Anesthesiology

Jim Hanneford, MA, RRT Instructor of Anesthesiology

> Clark Lyda, RPh Clinical Pharmacist

Ann Martin, AT
Executive Board Director/ASATT Region 5 Director
CRASH 97 Technician Course Assistant Director

Paul Baumgart Marketing Manager, Ohmeda

Matthew Flaherty, M.D. Assistant Professor of Anesthesiology

Joy Hawkins, M.D. Associate Professor of Anesthesiology

Howard Miller, M.D. Assistant Professor of Anesthesiology

W. Clayton Petty, M.D. Professor & Chief of Anesthesiology Madigan Army Medical Center

DDOCDAM

100	PRO	GKAM	
SATURDAY 6:30-7:00	- MARCH 1, 1997 Registration	7:00-7:45	Pediatric Anesthesia Rita Agarwal, M.D.
6:30-7:00	View Exhibits; Continental Breakfast	7:45-8:30	Obstetric Anesthesia Joy Hawkins, M.D.
7:00-7:45	ASATT Update Ann Martin, AT	8:30-9:15	Trauma Anesthesia Howard Miller, M.D.
7:45-8:30	Machine Fundamentals & Troubleshooting - Part I W. Clayton Petty, M.D.	9:15-9:30	Question and Answer Session Drs. Agarwal, Hawkins and Miller
	Paul Baumgart	9:30	View Exhibits; Recess
8:30-9:15	Machine Fundamentals &	3:30-4:30	View Exhibits; Refreshments
	Troubleshooting - Part II W. Clayton Petty, M.D.	4:30-5:45	WORKSHOPS
9:15-9:30	Paul Baumgart Question and Answer Session Ms. Martin, Dr. Petty and		A: Fiberoptic Intubation Michael Ochs, D.O. Avninder Dhaliwal, M.D.
9:30	Mr. Baumgart View Exhibits; Recess	1	B: Malignant Hyperthermia Drill Rita Agarwal, M.D. Howard Miller, M.D.
3:30-4:30	View Exhibits; Refreshments	5:45-7:00	Repeat Workshops A and B
4:30-5:45	WORKSHOPS		MARCH 3, 1997
	A: Invasive Monitoring Howard Miller, M.D.	6:30-7:00	View Exhibits; Continental Breakfast
	Jim Hanneford, MA, RRT B: IV Admixtures	7:00-7:45	ASA Difficult Airway Algorithm Avninder Dhaliwal, M.D.
5:45-7:00	Clark Lyda, RPh Michael Ochs, D.O. Repeat Workshops A and B	7:45-9:30	ASATT Sample Questions/Answers Ann Martin, AT Michael Ochs, D.O. Avninder Dhaliwal, M.D.
SUNDAY - I	MARCH 2, 1997		Matthew Flaherty, M.D.
6:30-7:00	View Exhibits; Continental Breakfast	9:30	Adjourn until February 27, 1998

NEW ORLEANS HOSTS ASATT 7TH ANNUAL MEETING AND ALL THAT JAZZ

A fresh aura of professional pride pervaded the 1996 ASATT Meeting in New Orleans. The 7th Annual Meeting and All That Jazz held in October 1996 was the 1st national meeting held after our 1st National Certification Examination in May 1996. Technicians, both certified and uncertified were treated to a well-organized educational program that culminated with the annual business meeting and the recognition of new CerAT's present at the meeting.

Much pomp and circumstance greeted technicians at the Opening Ceremony during which a Color Guard led the singing of the National Anthem. The Welcome was conducted by Jerry S. Guttery, CerAT, 1995-96 ASATT President. This was followed by two and a half days of educational lectures and workshops presented by a distinguished and world-renowned staff.

Lunches (sponsored by Datex Medical Instruments and Abbott Laboratories), and evening receptions (sponsored by A.I.M.E., Ohmeda, and King Systems), kept technicians well nourished, both by food and social interaction with fellow technicians. Breaks during the meetings allowed vendor exhibits to be viewed and the enormous ASA exhibit hall was also easily accessible.

Continuing education contact hours were credited to those who attended the lectures, and were also the focus of a discussion conducted by Wilma F. Frisco, CerAT, ASATT Secretary and Region 2 Director. At the end of the meeting, officers gave their annual reports, special awards were presented, and Jerry Guttery graciously passed the presidential gavel to Ruth A. Ochoa, CerAT, 1996-97 President. Ruth concluded the meeting with final words of hope and encouragement for the future.



Wilma Frisco, CerAT, Secretary and Region 2 Director behind the scenes



Murray John Welte, PEMET, CerAT, British Columbia and James R. Tibbals, CRTT, CerAT, Toronto are ASATT members and supporters from Canada



Wayne Griffith, CerAT, New Orleans, shows techs how to "Laissez Bon Temps Roulez" at one of the evening receptions



ASATT officers show a lighter side. (l to r) Dean Rux, CerAT, Jerry Guttery, CerAT, Jacqueline Polak, CerAT, Sheila White, CerAT, Linda Cotton, CerAT, Dave Mastalski, CerAT, Leanne Spaulding, Ann Martin, CerAT, Ruth Ochoa, CerAT, Dianne Holley, CerAT, Wilma Frisco, CerAT, and John Spaulding, CerAT

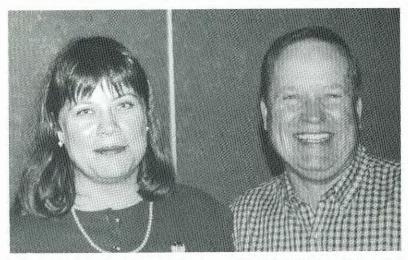


United Kingdom delegation including speakers Joy Catling, MD (left) and J.H.W. Ballance, MD (3rd from left), and Technic Editor, John Butterworth (4th from left)

DOUG DRAPER RECEIVES JAMI BLUE AWARD

by Ann Martin, Director, Region 5

I had the privilege of knowing and working with Jami Blue for seven years. Jami loved her job and was dedicated to the professional development of anesthesia technologists and technicians. Her dream was national certification for the profession and that dream is now a reality. Jami was one of the founders of the ASATT and was the first appointed Director of Region 5. In memory of this dedicated technician, this year's Jami Blue Lecture Series and Award presentation went to L. Doug Draper for his continuing contribution and dedication in the field of anesthesia technology. Doug, former Chief Anesthesia Technician, U.C. Davis, has provided many inspirational speeches at anesthesia tech meetings during the past few years. He also has supported worthy programs that have advanced our profession and the knowledge of anesthesia technicians across the country. With supporters such as Doug, our Society will continue to grow. Thank you for your dedication, hard work, and a job well done. Our warmest congratulations!



Dianne Holley, CerAT, and Doug Draper, ASATT 1996 Award Winners



Jerry Guttery, CerAT, 1995-96 President, and Ruth Ochoa, CerAT, 1996-97 President

AUGUSTINE MEDICAL HONORS DIANNE HOLLEY, CERAT

Dianne Holley, CerAT, Chief Anesthesia Technician at Seton Medical Center, Austin, Tx, was the 1996 recipient of the Annual Augustine Medical/ASATT Clinical Excellence Award. John Thomas, President of Augustine Medical, presented the award at the Annual ASATT Meeting in New Orleans. An all-expensespaid (up to \$1500) trip to the 1996 ASATT Annual Meeting in San Diego accompanies the award, which recognizes excellence in research and writing in the anesthesia technology field. Dianne's article in the April 1996 edition of *The ASATT Sensor* entitled "Blood and Blood Components" was chosen from among that year's technical articles appearing in *The ASATT Sensor*.

All technical articles printed in *The ASATT Sensor* during each given year are automatically entered and judged for accuracy, clarity, and technique. The winner is announced at that year's Annual Meeting. All those interested in competing for this prestigious award should submit their articles to *The ASATT Sensor* by the deadline printed on page 2 of each issue. All articles will be considered for publication Good luck.

EDUCATIONAL STAFF

Christopher Mills, MD William Henry King, MD Norig Ellison, MD Donald Harmon, MD Christine S. Zambricki, BS, CRNA, MS Frank L. Pyke, FIOT J.H.W. Ballance, MD Jennifer J. Fuller, AT Wayne Birch, AT Joy Catling, MD Julian Goldman, MD W. Clayton Petty, MD, Paul Baumgart, BA, MBA Lisa K. Fornicoia, BS, MT (ASCP), CerAT Grace Chien, MD William Buhrman, MD Claude Brunson, MD A. William Paulsen, MMSc (Anes), PhD, CCE James M. Yoder, BA Gene Baker, CerAT Klaus Becker, RRT



Dave Mastalski, CerAT, Region 7 Director, Sensor Associate Editor, and William H. King, MD, ASA



Jennifer Fuller, AT, New Zealand delivers her award-winning paper

NEW MEMBERS....

ASATT would like to extend a warm welcome to the following new members who joined from 9/1/96 to 12/31/96.

ACTIVE **MEMBERS**

Elizabeth Bliven Marshfield, WI

Karen Bett Canton, MI

Sara Bradley, RN Houston, TX

David C. Chastain Canton, NC

Guadalupe "Wally" Cisneros Garden Grove, CA

Solon W. Cook, Jr. Birmingham, AL

Kristen M. Curran Andover, MA

Susan G. Cescutti Rome, GA

Kellie S. Curtis, CerAT Reese, MI

Mildred Deckman Brandon, FL

Eric G. Dodge Rochester, NY

Michael D. Dowser Garden Grove, CA

Valerie Celeste Dreuil New Orleans, LA

Troy A. Eisman Terrell, TX

Jason R. Elsmore Quincy, MA

Burna J. Erwin Buda, TX

Melinda Johnson Clarksville, TN

Emilie B. Jones Houston, TX

Linda Joullian, RN Missouri City, TX

Kathleen R. Kettlewell Lincoln Park, MI

Narandra Kallian Miami, FL

Patricia A. Koehn Pewaukee, WI

Frederick C. Lewis, Jr. Centerville MA

Sheldon G. Liechty Salt Lake City, UT

Janie L. Lindsey, CerAT Horseshoe, NC

Lacreasia Mack Galveston, TX

Douglas McKay Seattle, WA

Sandra Jo Metelski West Hollywood, CA

Marceille Moore Madisonville, KY

Russell Morales, CerAT

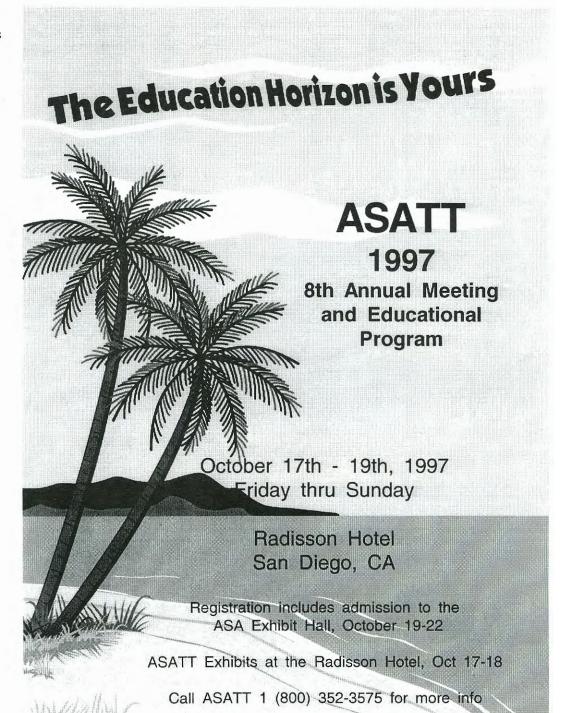
Bronx, NY

Michael Oneal, CerAT Culver City, CA

Adele A, Parker, CerAT Rogers, TX

Sheleasa L. Parrish Birmingham, GA

Steve C. Pearce Hoover, AL



Brad Pearson Tucson, AZ

Sharon R. Price Lincoln Park, MI

Cruz M. Quinan Cordova, TN

Jeffrey Randazza Everett, MA

Sherri Ann Rickett Taylor, MI

Dorothy J. Rippe Malcolm, NE Judith A. Roberts Tacoma, WA

John R. Rodriquez Lutz, FL

Tony M. Ross Roanoke, VA

Jeff L. Ryan Salt Lake City, UT

Steven R. Schempp TAMC, HI

Carol D. Shadd La Grange, IL Angel N. Shelton Jacksonville, FL

Timothy Shiblie Wheaton, MD

Christine O. Smith Birmingham, AL

Jeanine F. Smith Melvindale, MI

Rebecca L. Smith Metairie, LA

Gayle M. Sowards Plano, TX Armando Tamayo Gaithersburg, MD

Steven M. Teahan, CerAT Santa Rosa, CA

Taryn Thomas, RN Waycross, GA

Nora Tiffany, CerAT Bainbridge Island, WA

Jennifer Tomlinson Murfriesboro, TN

Felix C. Toscano, Jr. Odessa, TX

Frank Upton Hyannis, MA

Eduardo J. Vega Jefferson, LA

Mary Walker Birmingham, AL

Matthew T. Wellock West Bountiful, UT

Sharon Williams Akron, OH

Joseph Williams Jacksonville, FL

Heather D. Wintch Salt Lake City, UT

Felicia A. Young, CerAT Fayetteville, NC

Rhos Yumang Milwaukee, OR

ASSOCIATE MEMBER

Agustin Hernandez, Jr. Amesbury, MA

INDIVIDUAL MEMBER

Nirmalaben N. Patel Honolulu, HI

INSTITUTIONAL MEMBER

Sinai Hospital of Baltimore Baltimore, MD



announces

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For the next three years while Anesthesia Technician Certification Testing continues, AIME will award the amount of

\$1,000

to the recipient who tests highest in the Aime Preparatory Exam upon completion of a Focus Certification Seminar beginning with the 1997 Programs.

This award will be presented at the A.S.A.T.T. Annual Meeting each October held in conjunction with the A.S.A. Convention.

The following locations for The 1997 Focus Certification Program is confirmed:

Ceruncation riogia	am is commined.
Sarasota, Florida	January 24-26, 1997
Fresno, California	February 7 -9, 1997
Columbia/Presby. Hos.,	
New York, NY	February 14-16, 1997
Baltimore, Maryland	February 21-23, 1997
Las Vegas, Nevada	March 7 -9, 1997
Birmingham, Alabama	March 20 - 22, 1997
Boston, Massachusetts	April 11-13, 1997
Western School, Pittsburg, PA	April 18-20, 1997
Toronto, Ontario	April 25-27, 1997
IISATT-Hinsdale Hospital Minis	Socus" 2 day only May 3 & 4 1997

We've lectured to over 520 anesthesia technicians within an 18 month period. Listen to what some of them have to say...

"This course was much more than I anticipated it would be in the area of interest, knowledge base and cohesiveness. Great job! I will be able to encourage my students to participate ASAP."

Andrea Williams, Program Director Western School of Health & Business Pittshurgh PA

"Your program was terrific, I could never have passed certification without it."

Alex Panay, Anesthesia Technical Supervisor Medical City of Dallas Dallas, TX

"I thoroughly enjoyed the class. It was the most informative educational series I have attended in 8 years."

> Theresa Reider, Anesthesia Technician P.S.U. Milton Hershey Medical Center Hershey, PA

"Thought the program was well presented and we were made to feel welcome and comfortable".

> Nancy Baude, Anesthesia Technician Lawrence Memorial Hospital New London, CT

"I enjoyed the workshop all the way,

everything was nice."

Delorise Bell, Anesthesia Technician
Bossier Medical Center

Bossier, LO

REGISTER TODAY CUT-OFF FOR THE AWARD IS SEPTEMBER 30, 1997.



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2 1/2 Day Review of the responsibilities associated with the Anesthesia Technologist and Technician, whether your choice is to take the A.S.A.T.T. Certification Exam in 1997 or within the next 4 years, this seminar and workshop will focus your attention towards the ultimate goal of becoming a well qualified team player in the operating room as described by A.S.A.T.T. Standards and Guidelines.

Armed with a manual especially compiled from over 2000 pages of medical reference books, each participant can follow the structure of the seminar throughout the 2 1/2 Day Program. Testing after this workshop allows you, the participant, to focus on strengths and weaknesses allowing time for study and research where needed

Endorsed by the Tennessee State Board of Nursing for 14 Credit Hours Provider Nbr. 3-0035-7-97004 TNA #03695 thru 7-1-97 & renewable thereafter.

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CRNA's RN's & LPN's and all other Healthcare Workers required to assist as part of the Anesthesia Care Team

Topics Covered:

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- Aseptic & OSHA Guidelines Related to the Healthcare Worker
- Airway Management
- Care and Positioning of the Patient
- How to Assist in Set Up & Placement of Arterial I.V. Lines
- Emergency Complications & Hazards in the O.R.
- Pharmacology / Drugs / Analgesics / Anesthetics, etc.
- Why Sterility is Important in the Operating Room
- Layout & Design Why the Operating SuitesAre Built the Way They Are
- Review on Cell Saver Techniques
- Anatomy & Physiology

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(All AIME programs begin at 1:30 p.m. Friday afternoon thru 5:00 p.m. Sunday afternoon)

Miami, FL	Jan. 24 - 26, 1997
Fresno, CA	Feb. 7 - 9, 1997
Baltimore, MD	Feb. 21 - 23, 1997
Las Vegas, NV	Mar. 7 - 9, 1997
Birmingham, AL	Mar. 20 - 22, 1997
Boston, MA	Apr. 11 - 13, 1997
Toronto, Ontario	Apr. 25 - 27, 1997
New York, NY	Feb. 14 - 16, 1997

\$389⁰⁰ per person per seminar

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Basic Pneumatics of the Anesthesia Machine

Monitoring Capabilities, their Alarms & Uses

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July 21 & 22, 1997 University of Louisville Hospital Louisville, Kentucky

September 22 & 23, 1997 Miami Valley Hospital Dayton, Ohio

November 10 & 11, 1997 Hospital to be announced Springfield, Illinois

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Pittsburgh, PAJul. 12 & 13, 1997
Chicago, ILAug. 9 & 10, 1997
Charlestown, S.C Aug. 23 & 24, 1997
Seattle, WA Sept. 6 & 7, 1997
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Two Day Seminar \$249

DAY ONE

Infection Control Practices:

- Rituals, Magic & What Really Matters
- TB Control in Health Care
- Meeting Current OSHA Requirements
 Emerging Infectious Disease Threats
- High Level Disinfection and
- Sterilization: Are we getting the job done?
- Hepatitis, HIV/Aids Update

DAY TWO

Understanding Airway Management

- Basic Anatomy & Physiology of the Respiratory System as it Applies to the Anesthesia Technician.
- How to Survive Airway Emergencies
- Equipment & Accessory Needs for Effective Airway Management
- Difficult Intubation Algorithm
- Pediatric Anatomy & Physiology
- Pediatric Emergencies
- The ABC's of Avoiding Airway Disaster

Membership Application

American Society of Anesthesia Technologists & Technicians 9805 N. E. 116th St. #A183, Kirkland, WA 98034-4248

(Please print clearly or type)

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City	, State (Province)	zip (mail code)
Home phone ()	, May ASATT releas	May ASATT release your name to other members? Yes, No_
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Applicants signature here to be valid	be valid	. Date

Please check your membership category listed below and send the correct amount of membership dues in U.S. currency.

supervision of an anesthetist and functions in the capacity of technologist, technician, assistant, or aide. (U.S. This category shall extend to anyone who works in a health care facility under the members only.) *Active: \$50_

*To authenticate that Active membership is the proper category, you are required to have your supervisor verify that you belong in this category by having his/her signature placed in the space provided below.

(Print your Supervisor's name and title here.) **Institutional: \$100 **Individual: \$60 **Associate: \$60

(Supervisor's signature here for application to be

_, This category is open to anyone who has an interest in the anesthesia field.

This category shall extend to Anesthesiologists, C.R.N.A.'s, and Anesthetists.

This category is open to academic, medical, hospital, philanthropic, scientific, governmental, or other nonprofit organizations with an interest in anesthesia technology.

This category is open to businesses and other profit oriented organizations that nanufacture, distribute, and provide services that otherwise have an interest in anesthesia technology **Corporate: \$100

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ASATT Region 7 Educational Seminar

"Certification Prep & Review"

Saturday March 8, 1997 7am-5pm

(six(6) contact education hours)

Downtown Red Lion Inn Portland, OR

Watch Your Mail for Registration Material or Contact:

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