

ADVANCED PRACTICE NEWS

Celebrate
NATIONAL CRNA WEEK



January 23-29, 2022

Advanced Practice News

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OUR VISION STATEMENT

The UCI Health Advanced Practice Providers Program aims to be a leader in **patient-centered care, research,** and **“top of the license practice.”** We believe that when APPs are used to their fullest potential, the entire healthcare system benefits.

A MESSAGE FROM OUR DIRECTOR OF ADVANCED PRACTICE PROVIDERS

VASCO DEON KIDD, DHSC, MPH, MS, PA-C



Happy New Year! Welcome to the 7th edition newsletter to commemorate National CRNA Week from January 23-29, 2022.

Certified Registered Nurse Anesthetists (CRNAs) have been providing anesthesia care to patients in the United States for more than a century. Our highly qualified and educated CRNAs are integral members of the healthcare team. With more than 57,000 CRNAs practicing in the United States,

research consistently supports the safety and cost-effectiveness of the delivery of anesthesia care administered by CRNAs. Because of the outstanding contributions of our CRNAs, we have seen continuous improvements in operating room efficiency, throughput, and capacity. As we have seen throughout the pandemic, there is significant pent-up demand for CRNAs, which is outstripping supply. We are very fortunate to have a consistent, thriving, and innovative CRNA workforce. Please join me in acknowledging and celebrating National CRNA Week.

In closing, the year is off to a chaotic start due to the Omicron variant of the pandemic, which has moved with unprecedented speed, creating significant core staffing challenges throughout the healthcare system. Despite these challenges, we are blessed to have a remarkably talented team of dedicated and committed advanced practice providers, which continues to pull together at a time of crisis. We are immensely proud of the many invaluable contributions and sacrifices made by our APP team in ensuring high-quality and patient-centered care during these challenging times. Please stay healthy and strong. We will come through this together.

Best regards,

Vasco Deon Kidd

CRNA WEEK: WHAT IS A CRNA?

MICHAEL MARINO, FNP-C, CRNA

Certified Registered Nurse Anesthetists (CRNAs) deliver more than 49 million anesthetics to patients each year around the country, from pediatrics to geriatrics. CRNAs work in a variety of settings such as traditional hospital operating rooms, obstetrical delivery rooms, critical access hospitals, ambulatory surgical centers, dentist offices, ophthalmologist offices, plastic surgery suites, and pain management centers. In the military, CRNAs continue to be the primary providers of anesthesia in combat zones.

The practice of anesthesiology for CRNAs includes, but is not limited to:

- Patient care before, during and after surgery
- Patient care before, during and after labor and delivery
- Diagnostic and therapeutic procedures
- Trauma stabilization and critical care interventions
- Acute and chronic pain management
- Management of systems and personnel that support these activities



Michael Marino, FNP-C, CRNA



*Julie Pham, CRNA
and Christen Hebl, CRNA*

The education and training required to become a CRNA is extensive. It takes over eight years of coursework and thousands of clinical hours for a student nurse to attain a master's or doctoral degree in nurse anesthesia. After finishing CRNA training, they've accrued an average of 12,000 hours of clinical experience. CRNAs are the only anesthesia professionals required to have clinical experience prior to entering an anesthesia program as well as being board certified prior to providing anesthesia. The minimum requirements to practice as a CRNA are: a BSN or graduate degree in nursing, an unencumbered license as an RN or APRN, one-year experience as an RN in a critical care setting, graduate with a master's or doctorate degree from an accredited program, and pass the National Certification Examination (NBCRNA).

CRNA WEEK: WHAT IS A CRNA?

MICHAEL MARINO, FNP-C, CRNA

Managed care plans recognize CRNAs as providing high quality care with reduced expenses to patients and insurance companies. Because of this, healthcare facilities depend on CRNAs to serve patients while positively impacting our nation's growing healthcare cost crisis. CRNAs are recognized in all 50 states, however 19 states have opted out of the federal physician supervision requirement. This allows CRNAs in those states to practice independently and at their full scope of practice, California being one of those states. In many healthcare settings, CRNAs and Physician Anesthesiologists work together to provide quality care. This is referred to as an anesthesia care team model and is what is practiced here at the University of California, Irvine Health (UCI).



Bernadette L Flowe, CRNA

At UCI there are currently 58 CRNAs on our team with a wide range of backgrounds and training. In addition to the 20 operating rooms in Douglas Hospital, UCI's CRNAs provide care for outpatient procedures, labor and delivery, interventional radiology, cath lab, GI suites at the Chao Digestive Center, Chao Cancer Center, pre and post-operative patient assessments, as well as responding to emergencies throughout the campus. Many of the CRNA's, here at UCI, are also involved in additional work from teaching and proctoring of students, to research, and involvement in many councils and committees.

With the increased number of surgical cases and building of the new hospital, our department is continuously growing. Our department is involved in many aspects of our profession, and we are grateful we can provide excellent care and service to our patients.

Happy CRNA Week!

Michael Marino, FNP-C, CRNA
Advanced Practice Council - Chair
Department of Anesthesiology & Perioperative Care
UC Irvine Health

APN DNP PROFESSIONAL STATEMENT

ANN B. SINGLETON, DNAP, CRNA

Currently, Advanced Practice Registered Nurse (APRN) licensure requires a Master's degree unlike other professional clinicians who require doctoral degrees. Therefore, the American Association of Colleges of Nursing (AACN) 2004 Doctor of Nursing Practice (DNP) position statement called for a transitional change in the education requirement due to multiple factors including the expansion of scientific knowledge for safe practice, quality care, and complex health care delivery systems. In 2015, the AACN announced the entry level to practice will be the DNP and move all entry-level education to the DNP degree by 2025.



Ann B. Singleton, DNAP, CRNA

In 2007, the American Association of Nurse Anesthetists (AANA) approved the AACN 2004 position statement that entry to practice for CRNAs must be a doctorate degree by 2025, and nurse anesthesia programs transition to the doctoral framework before January 2022. As of August 2021, there are 128 accredited nurse anesthesia programs and of these programs, 113 award doctoral degrees for entry into practice.

In the midst of change in the nurse anesthesia profession and the need for more educators, I enrolled in Texas Wesleyan Nurse Anesthesia Postgraduate program in 2010 and earned my doctorate degree in nurse anesthesia practice in 2012. I prepared my doctoral dissertation in goal-directed fluid therapy and later authored a chapter in "Perioperative Hemodynamic Monitoring and Goal Directed Therapy" edited by Cannesson and Pearse in 2014. I am the clinical coordinator for USC, National and Kaiser nurse anesthesia programs. I provide clinical education and training to our CRNAs and students. With over 20 years of experience, I include clinical application and evidence-based practice to enhance my lectures - it adds depth and improves student understanding compared to traditional methods.

Does the DNP add value in today's nurse anesthesia practice? Yes. Our profession has evolved from a certificate program, to Bachelors, and to Doctorate programs. CRNAs advance their practice to keep up with the demand and changes in healthcare, quality improvement and patient care delivery systems. Also, in part, to elevate our professional image and perception. I chose to pursue my DNP early on because of my passion to teach. In order to fulfill my role as an educator, I feel I must possess the level of education that my students are aspiring to achieve.

A DAY IN THE LIFE OF AN APP: CRNA

MARIA CRISELDA BUI, CRNA

1) Tell us about your journey to becoming a CRNA.

The first time I heard about CRNAs was during my senior year as a nursing student. After school, I worked as a floor nurse in the stroke unit for 2 years. After shadowing a CRNA I was very intrigued, so I transferred to the Neuro ICU. I shadowed a second time and, again, loved the experience! I had a better understanding of what CRNA's do so I applied to CRNA school and luckily, I was accepted!

2) Why did you choose this specialty?

I loved the fact that we take care of one patient at a time. As a floor nurse, we sometimes care for 6 patients at the same time. Even in the ICU with very critically ill patients, we still care for up to 3 patients at a time when staffing is short. However, as a CRNA, you care for one patient at a time. You can be very thorough, apply all your skills that you've learned, and focus all your attention on your one patient. I love neatly labeled IVs and a clean room when it's possible.

3) Tell us about your day-to-day on the job.

We work in 12-hour shifts. Sometimes I work from 6:30 am to 7 pm, other days I work 9 am to 9:30 pm. I am assigned an OR room the day before. I look up my patients the night before my shift just to prepare for the coming day. Looking up my patients usually gives me an idea of what my day is going to look like. I can be assigned to any location that provides anesthesia services like the main OR, GI, radiology, or outpatient surgery. So, my day really depends on where I'm assigned, the type of cases, and the type of patients. Some days you have easy cases with healthy people, other days can be the complete opposite. However, every day presents its own challenges and rewards.



Maria Criselda Bui, CRNA

A DAY IN THE LIFE OF AN APP: CRNA

MARIA CRISELDA BUI, CRNA



Maria Criselda Bui, CRNA

4) What is the most rewarding part of your job?

I find it very rewarding when my patient says that they've had a really good sleep or when they ask if the surgery started when in fact we are already done. It's always a great day if all your patients wake up and they're stable in PACU. I also feel that being in this profession I've gained more than I have given. Being a CRNA is humbling and has taught me to be patient and appreciative of what I have. I meet patients who are similar to me in age and yet they are going through a lot in life. I always learn something valuable each day from these interactions.

5) What advice would you give an aspiring CRNA?

Make sure this is something you want to do since it's a considerable investment in time and money. Make friends in school to help you study and to create a support system

for each other. Don't be a FOMO (fear of missing out), there will be lots of parties and weddings and birthdays that you will miss and sometimes you'll have to live your life through Instagram and old pictures. That's okay! There is a light at the end of the tunnel!

6) What is one fun fact that most people don't know about you?

I came to the US when I was 18 and I polished my English by working at a call center for a community college. A lot of students in community colleges are also immigrants who are navigating their way into the US school system and I felt a connection with them since I was also in their shoes.

7) What does National CRNA Week mean to you?

CRNA week means spreading knowledge about our profession; who we are, what we do, and how we impact our patients lives. Not many nurses have heard of our profession, and in order to grow in numbers, we must spread the word about CRNAs. Of course, it is also a week to celebrate us, our accomplishments and contributions to the healthcare field, and most importantly, food and goodies!

SPOTLIGHT ON APP ACHIEVEMENTS FOR NOVEMBER 2021-JANUARY 2022



The purpose of this section is to recognize any achievements of the APP workforce during the months of November 2021-January 2022. Achievements are listed in alphabetical order. Future newsletters will continue to highlight APP awards, research publications, book chapters, poster presentations, and leadership nominations in your professional associations or at UCI Health. We firmly believe in giving spotlight to our amazing and dedicated APP workforce.

Christen L. Hebl, CRNA

- **Christen L. Hebl, CRNA** was voted into the American Association of Nurse Anesthesiology (AANA) Practice Committee. Members of the Practice Committee shall be representative of current CRNA practice settings. The Committee reviews the practice of nurse anesthesia and the implications concerning work environment, practice management, and patient safety and formulates recommendations for consideration by the Board of Directors.

Alina Lund, NP, Christina D. Schibler, NP, and Christine A. Yoshioka, NP

- Dao, L., **Lund, A., Schibler, C.D., Yoshioka, C.A.,** Barsky, M. (2021). A case of COVID-19-associated free-floating aortic thrombus successfully treated with thrombectomy. *American Journal of Case Reports*. **Open access:**
<https://www.amjcaserep.com/abstract/index/idArt/933225>

Vasco Deon Kidd, DHSc, MPH, MS, PA-C

- **Kidd, V.D.,** Deng, M. "Assessing the productivity of advanced practice providers using a financial dashboard" has been accepted for a poster at the Association of American Medical Colleges (AAMC) Group on Business Affairs (GBA)/Group on Institutional Planning (GIP) 2022 Joint Spring Meeting.
- **Kidd, V.D.,** Vanderlinden, S., Spisak, J.M. (2021). An analysis of the selection criteria for postgraduate physician assistant residency and fellowship programs in the United States. *BMC Med Educ* **21**, 621 (2021). **Open access:** <https://doi.org/10.1186/s12909-021-03059-y>

SPOTLIGHT ON APP ACHIEVEMENTS FOR NOVEMBER 2021-JANUARY 2022



Susanne J. Phillips, DNP, APRN, FNP-BC, FAANP, FAAN

- **Phillips, S. J.** (2021). Transition to practice for California's nurse practitioners: lessons from other states. *California Health Care Foundation: November 2021*. **Open access:** <https://www.chcf.org/publication/transition-practice-californias-nurse-practitioners-lessons-other-states/>
- **Phillips, S. J.** (2021). 34th Annual APRN Legislative Update. *The Nurse Practitioner: January 2022*, 47(1), 21-47. **Open access:** <https://doi.org/10.1097/01.NPR.0000802996.14636.1c>

Gabriel Punsalan, CRNA

- **Gabriel Punsalan, CRNA** was awarded the UCI Beall Applied Innovation Startup Grant for his new medical device company. Punasalan and his partner Dr. Waylan Wong have since been accepted into the UCI Beall Applied Innovation Wayfinder incubator at the Cove. They've recently submitted an NIH SBIR Phase I Grant.

Ann B. Singleton, DNAP, CRNA

- Jones, D., **Singleton, A.** (2022). *Teaching operating room RNs how to prevent hospital acquired pressure injuries*. Manuscript submitted for publication.

Janette Villalon, PA-C

- **Janette Villalon, PA-C** was faculty and guest speaker on IBD for the Gastroenterology & Hepatology Advanced Practice Providers (GHAPP) Conference in Las Vegas.
- **Janette Villalon, PA-C** was elected by the Crohn's & Colitis Foundation to be a member of the National Scientific Advisory Committee.
- In 2021, Dr. Nimisha K. Parekh and **Janette Villalon, PA-C** were awarded a Susan Samuelli Integrative Health Institute Pilot Study Grant to do a research project

NEW APPS FY2022

We are pleased to welcome the new advanced practice providers to our team in FY2022.

Anesthesiology & Perioperative Care

- Soomin Kim, CRNA

Emergency Medicine

- Judith L. Eilmes, NP

Family Medicine

- Sonia Sedano, NP
- My Phuong T. Phan, NP
- Virginia A. Lopez, NP

Hospitalist Program

- Tiffany L. McVey, NP
- Ascencion M. Hernandez, NP
- Cynthia R. Pitchford, NP
- Blythe K. Huang, NP
- Inguna Reeves, NP

Medicine: Hematology/Oncology

- Jacquelyn Gonzales, NP

Medicine: Integrative Health

- Monica M. Essak, NP

Surgery: Cardiothoracic Surgery

- Jocelyn Choy, PA

Urology

- Erika A. Mei, NP