

# Anesthesiology & Critical Care News

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## EDITOR'S NOTE

This is the third issue of the departmental newsletter since its publication resumed in the Fall of 1995. Two issues were published during the past academic year, but it was decided not to have a Fall 1996 issue because of the many changes that occurred at that time with reorganization of the department following the new Chairman's appointment in July 1996. Therefore, this issue includes information on major events in the department throughout the current academic year.

Ongoing health care reform and the introduced managed care system greatly influence our current practice of both anesthesiology and critical care medicine. The University of Pittsburgh Medical Center (UPMC) is expanding beyond its traditional borders in Oakland with incorporation of several community hospitals in the area. The activities at these hospitals and their relations to UPMC, particularly in regards to anesthesiology and critical care medicine will be discussed in future issues.

As before, the readership is invited to submit suitable material for publication in our newsletter. Its production depends heavily on input from the editorial group including Charles Buffington, MD, Pat Kochanek, MD, Jim Krugh, MD, Michael Pinsky, MD, Lisa Sinz, MD, Jan Smith, MB, ChB, Joanne Woodson, and most importantly Francie Siegfried and Lisa Cohn, MPH.

Heading for a most welcome spring of 1997, we wish you all a pleasant summer until we meet again with another newsletter in the Fall.

Ake Grenvik, MD, PhD, Editor

## New Department Chairman Ready to Face Challenges

In July 1996, Leonard L. Firestone, MD, Professor of Anesthesiology and Critical Care Medicine, became the third chairman of the Department of Anesthesiology and Critical Care Medicine, University of Pittsburgh, since its founding in 1961. He was awarded the Peter and Eva Safar Professorship in November 1996.

Dr. Firestone came to Pittsburgh in 1987 from Harvard Medical School where he completed a research fellowship and held a faculty position. He attended medical school and completed his internship, residency training, and a clinical fellowship in cardiac anesthesia at Yale University. "I have always been inspired by a challenge. I was a postdoc for five years because I was challenged by how hard it was to be truly successful in research. I was inspired to do an anesthesia residency because of the challenges of hyperacute medicine," said Dr. Firestone. Before his appointment as chairman, Dr. Firestone was the department's Vice Chairman for Research and Clinical Director of Cardiac Anesthesia for the University of Pittsburgh Medical Center (UPMC).

Dr. Firestone's rigorous academic training and adminis-

trative experience helped prepare him for his new role as chairman. Heading the largest academic department of its kind in the nation brings with it enormous challenges. Chief among them is to



maintain quality in an academic department in the face of managed care. "Helping to guide the largest and most complex academic anesthesia department in the country

through times of transition has to be one of the greatest administrative challenges in my field," said Dr. Firestone.

The Department of Anesthesiology/CCM provides perioperative medical and intensive care for surgical patients at UPMC's tertiary care hospitals and nearby community hospitals, as well as Children's Hospital of Pittsburgh, Magee-Womens Hospital, and the Veterans Affairs Medical Center in Oakland, and provides medical and research direction for Pittsburgh's multidisciplinary Pain Evaluation and Treatment Institute.

Dr. Firestone cited three prerequisites to doing a good job in this chairmanship position: "a large capacity for unremitting hard work, a high degree of organization and tenacity, and a personal life that supports a 100-hour work week," adding, "I am fortunate to have the





good health, family life, and desire to make this possible."

### ***Changing Demands in the New Health Care Environment***

The structural and functional changes in medicine in the United States will have a great impact on academic health centers and their hospital-based specialties such as anesthesiology and critical care. As chairman, Dr. Firestone is committed to helping department faculty plan ahead for these changes. "One of my most important functions as chairman," he said, "is to help faculty members with the transition by sharing what I've learned about the relevant economic and social trends, and preparing them for the inevitable future. To be realistic, I expect a difficult transition for physicians in this department who, like myself, grew up in an era of virtually unlimited resources and unquestioned authority. The managed care era has curtailed both rather sharply." "Implicit to managed care will be declining revenues, alterations in hospital use patterns, and peripheralization of clinical demand toward the community with use of hospitals in our integrated network rather than one central hospital in Oakland," according to Dr. Firestone.

"These changes impose new imperatives for efficiency on the part of physicians in this department, and fiscal constraints on education and research programs."

"But rather than viewing these changes in health care as the lamentable end of an epoch, our department will help define the new era. Society's mandate for rational, evidence-based use of resources will require experienced perioperative medicine physicians to redefine anesthesia and chronic pain management, and experienced intensivists to reengineer expensive but life-saving critical care treatment," said Dr. Firestone. He sees an urgent need for the chairmen of hospital-based departments to partner with their hospitals and provide clear medical direction.

### ***New Structure***

Part of Dr. Firestone's new role is being "a clear communicator of the changes on the table, whether they are welcome or not." Information must be disseminated in order for members of the department to respond to changes. "It is my responsibility to integrate the feedback from various sources that will help set the rudder for the department." Dr. Firestone has streamlined the department's

structure to meet new demands. "I came into the position with the belief that a slimmer administrative structure would be more appropriate to the future we are facing," said Dr. Firestone. "However, necessary adjustments will be made, based on the needs of our faculty and system."

Structural changes at the administrative level reflect Dr. Firestone's cabinet style management philosophy and his belief that "...the best decisions are made by the most knowledgeable people through small group discussions." The department is now governed by two broad-based executive committees, the Clinical Advisory Council and the Education Advisory Council. These executive committees are asked to define, then "grapple" with problems in their respective domains, to give advice to the chairman, and to suggest the action plans. Dr. Firestone continues personally to represent the research domain, based on his seven years of prior experience as Vice Chairman for Research, although the newly emphasized Clinical Trials Program will be headed full-time by W. David Watkins, MS, MD, PhD. Council members were appointed on the basis of their record of accomplishment and

demonstrated interest either as clinical directors or educators and speak on behalf of their "constituents." Through this structure, it is Dr. Firestone's hope that all faculty will be given an opportunity to express their views. "It is vitally important that all members of the faculty have a voice in what will affect them." The advisory councils are also helping to determine the department's strategic vision.

Dr. Firestone credits the Clinical Advisory Council with helping, so far, to successfully resolve some of the "thorniest" issues facing the department related to new Health Care Financing Administration (HCFA) regulations, reengineering of the department's Merit system, and the transition into a centralized practice plan.

### ***Clinical, Research, and Educational Goals***

"This department, by objective criteria, is considered among the best research, education, and clinical programs in the country," said Dr. Firestone. "The challenge for the future is to maintain that level of quality in the managed care era. My personal hope is to exceed current levels in one or more of these areas of endeavor."

"Fortunately, the clinical talent of our faculty, and the depart-





ment's research and teaching traditions were highly cultivated by my predecessor and have given my administration a great head start," said Dr. Firestone speaking of former chairman Peter Winter, MD. "In the clinical area, the network-building strategy of JPMC will require a higher level of professional clinical management than ever before." Dr. Firestone is confident that the current faculty have the talent to meet the challenges of the transition, but concedes that the crystal ball is hazy regarding the intermediate and long-term clinical needs.

Educational programs must maintain or exceed the level of excellence previously achieved, according to Dr. Firestone, to survive the impact of the recent American Society of Anesthesiologists-sponsored anesthesia workforce report. "I believe that with judicious fiscal management, we will still be able to have outstanding educational and research programs, although I also believe that the days of the triple-threat physician are over. Instead, we will more likely have physicians that are either superb educators or superb researchers in addition to being excellent clinicians. This is a commonly held belief among clinical chairmen and

deans throughout the United States."

### ***Reflections on the Chairmanship***

The diversity of problems that require input from the chairman has surprised Dr. Firestone. He has also been surprised by the "sheer bulk of administrative work that it takes to manage a company with a \$30 million dollar plus budget," referring to the University Anesthesiology and Critical Care Medicine Foundation (UACCMF). One of the most pleasant revelations according to Dr. Firestone has been "discovering just how exceptionally competent and professional our long-term UACCMF administrative staff members are."

When asked whether the days of the 17-year chairmanship (held by Dr. Winter) are over, Dr. Firestone replied "I'd be surprised if anyone could do this job as it currently exists for even a few years, but I'm optimistic that the current demands are a function of this transitional time. We won't be evolving into a central practice plan/central billing office every year, nor will we be implementing newly-potent HCFA teaching regulations and an entirely new benefits program on an annual basis. Perhaps as in other industries

### **Department Expands Use of Intranet Technology**

The Department of Anesthesiology and Critical Care Medicine is making increasing use of Intranet technology through its Web server to disseminate and collect information internally.

A weekly calendar may be viewed by faculty members, trainees, and staff through the department's Web page. The calendar includes information on lectures, grand rounds, and conferences within the department. Internal users may also access a departmental directory electronically.

Faculty members' requests for non-clinical and vacation days are now made on-line, rather than using traditional methods such as electronic or interoffice mail to communicate with schedulers. Request forms are accessible through the department's Web page. Completed forms are sent electronically to a central scheduler and faculty are notified back through the system on the status of their request. Authorized users will also be able to access operating room schedules electronically.

To help track progress toward fulfillment of ABA requirements, residents may now submit cases electronically to a password-protected residents' case diary log. Residents may access the log at any time to review their cases.

Information on department programs is available through the department's Web page at <http://www.anes.upmc.edu>.

that have recently undergone restructuring, the demands will relax to a somewhat more modest plateau."

Despite some initial serious difficulties, Dr. Firestone expressed his optimism about the future of the department. "I have great confidence that

we have virtually all of the skill mix we need to meet the challenges of the future, and great faith that my colleagues have the spirit and sense of mission to do so, despite the many adversities around us."





## Critical Care Medicine Research Training Grant

The Division of Critical Care Medicine has long been a leader in academic critical care. From organizing the world's first critical care medicine physician training program 35 years ago to hosting the first annual meetings of the Society of Critical Care Medicine, the division has continually promoted critical care medicine as not only a legitimate medical subspecialty, but one worthy of high academic pursuit.

It was in this context that Michael Pinsky, MD, brought together a group of senior investigators from diverse fields to develop a unique multidisciplinary post-doctoral research program entitled "Experimental Therapeutics in Critical Illness." The training program was recently funded for five years by the National Institutes of Health's National Heart, Lung, and Blood Institute as a T32 Training Grant. The specific aim of the program is to provide post-doctoral fellows with research training in the basic sciences relevant to unsolved problems in the treatment of cardiopulmonary insufficiency states. The primary goal is to train clinicians to study clinical problems that can be answered through laboratory investigation. Clinicians will study human pathophysiology

and basic science in an environment that integrates clinical, methodological, and scientific skills.

Two post-doctoral trainees are supported in the first year and four in each subsequent year. The program relies on the support of assistant trainers from diverse fields such as cardiac anesthesiology, tumor cell biology, NMR spectroscopy, applied physiology, and public health.

## Long-Term Outcomes of Critically Ill Patients Focus of Five-Year Study

Lakshmipathi Chelluri, MD, MPH, Medical Director of the Surgical Intensive Care Unit at the University of Pittsburgh Medical Center (UPMC), recently was awarded a five-year grant from the National Institute of Aging for a proposal entitled "Quality of Life After Mechanical Ventilation in the Aged." This study will examine the long-term outcome, including survival up to one year and quality of life, of critically ill patients receiving mechanical ventilatory support in UPMC intensive care units (ICUs). Data on ICU and hospital course and on resource utilization will be recorded, and follow-up interviews conducted with survivors and caregivers.

Co-investigators on the study include Michael Pinsky, MD,

Armando Rotondi, PhD, and Carl Sirio, MD, Department of Anesthesiology and Critical Care Medicine; Steven Belle, PhD, Department of Epidemiology; Richard Schultz, PhD, Department of Psychiatry; and Michael Donahoe, Division of Pulmonary and Critical Care Medicine. Stephen Wisniewski, PhD, Department of Epidemiology, is the statistician on the study.

## Novel Project Focuses on Supporting Caregivers

Armando Rotondi, PhD, has received a National Institutes of Health R0-1 Grant for "Supporting Traumatic Brain Injury Families." This project will provide health services to families in their homes via a World Wide Web site. Family members caring for a relative with traumatic brain injury will be able to join electronic social support discussion groups, access references through an on-line library, ask medical experts questions via an electronic mail system, and locate information about community resources. This project is funded for 27 months.

Co-investigators include Richard Schultz, PhD, Department of Psychiatry; Steve Wisniewski, PhD, Department of Epidemiology; Michael Spring, PhD, Department of Information Sciences; and Carl Sirio, MD, and Derek Angus, MB, ChB, MPH, Department of

Anesthesiology and Critical Care Medicine.

## Safar Center Top Military-Funded Agency for Combat Care

Over the past 18 months, investigators at the Safar Center for Resuscitation Research have been selected by the United States Navy (MRDC-NMRI) and Army (USAMRMC) to receive over \$1.5 million in grant support for work in the area of novel resuscitation approaches to severely injured battlefield casualties.

Peter Safar, MD, (Principal Investigator) and Samuel Tisherman, MD, (Co-investigator) are beginning their second year of funding on a grant entitled "Increasing Survival of Uncontrolled Hemorrhagic Shock in Rats." This work investigates the application of mild hypothermia and oxygen breathing in the treatment of hemorrhagic shock.

Patrick Kochanek, MD (Principal Investigator) and Peter Safar, MD (Co-investigator) were recently awarded a three-year \$700,000 grant from the US Army for a project entitled "Emergency Interventions after Severe Traumatic Brain Injury in Rats: Effect on Neuro-pathology and Functional Outcome." The application of traditional and novel resuscitation strategies will be exam-



PICTURED FROM LEFT TO RIGHT:

Dr. Michael Pinsky,  
Dr. Lakshmipathi Chelluri,  
Dr. Armando Rotondi,  
Dr. Peter Safar,  
Samuel Tisberman,  
Patrick Kochanek,  
Dr. Robert Clark

ined in a contemporary model of traumatic brain injury in rats. Determining the effects of these treatments on functional outcome and both necrosis and apoptosis is the overall goal.

At the invitation of the US Navy, the Safar Center recently hosted an international symposium on the research potentials of "suspended animation" for far forward combat casualties. Twenty scientists participated in the January 1997 symposium.

### Pediatric CCM Faculty Member Receives Development Award

Robert Clark, MD, Assistant Professor in the Division of Pediatric Critical Care Medicine, recently received a five-year \$400,000 Mentored Clinical Scientist Development Award from the National Institutes of Health, National Institute of Neurological Disorders and Stroke for "The Role of Neuroprotective Genes After Traumatic Brain Injury." Dr. Clark, a second-year faculty member, was sponsored by Roger Simon, MD, from the Department of Neurology. The work represents a collaborative effort between investigators at the Safar Center for Resuscitation Research and the Department of Neurology.

### International Symposia Well-Received

Michael Pinsky, MD, recently organized and directed two international symposia. Both gatherings were underwritten by the European Society of Intensive Care Medicine and were part of international meetings.

Applied cardiovascular physiology was the theme of a symposium held in Trieste, Italy, November 11-13, 1996. As Course Director, Dr. Pinsky brought together academic faculty from the University of Pittsburgh and around the world. Representing the Department of Anesthesiology and Critical Care Medicine were Charles Buffington, MD, Arthur Boujoukas, MD, John Kellum, MD, Paul Rogers, MD, Kenneth Rothfield, MD, and John Gorcsan, MD. Timothy Billiar, MD, from the Department of Surgery lectured on trauma and hypovolemic shock.

The following publication resulted from the symposium: Pinsky MR, Dhainaut JF, Artigas A, eds. The Pulmonary Circulation: Moving From Passive to Active Control. London: W.B. Saunders Co. Ltd.; 1996.

Dr. Pinsky also directed a symposium entitled "The Lung in the Critically Ill Patient: Applied Respiratory Physiology" in Vienna, Austria, December 11-14, 1996. The Vienna meeting was also sponsored by the American Thoracic Society and included some of the best known clinical investigators in pulmonary critical care medicine. Topics included the basics in ventilator mechanics, chronic airflow obstruction, acute lung injury, and experimental lung therapies. A book based on the symposium is in preparation.

Congratulations to **Barbara DeRiso, MD**, on her election as President of the Association of Anesthesia Clinical Directors.

Congratulations also to **Carol Rose, MD**, the new President of the Pennsylvania Society of Anesthesiologists. Dr. Rose is a District 13 Trustee on the Board of the Pennsylvania Medical Society, serves on the Board of the Pennsylvania Medical Society Liability Insurance Company, and is an Alternate Delegate from Pennsylvania to the American Medical Association.

### Calendar

#### Cloning Subject of Upcoming Safar Lecture

The Eighteenth Annual Peter and Eva Safar Lecture will be given September 4, 1997 at 4:00 PM in Scaife Hall. Dr. Donald Wolf, Senior Scientist from the Oregon Regional Primate Research Center, will speak on the scientific aspects of cloning and the potential ramifications of this type of work for experimental investigation. Dr. Wolf recently produced sibling rhesus monkeys from cloned embryos.





Dr. David Powner

## Multidisciplinary Critical Care Training Program Update

The 1996-1997 academic year has been one of growth and change for the Multidisciplinary Critical Care Training Program (MCCTP) with the establishment of new educational goals and a shift in focus.

**A**ke Grenvik, MD, PhD, Distinguished Service Professor for Critical Care Medicine and Director of the MCCTP for 25 years, was appointed Director Emeritus of the MCCTP by the Dean of the Medical School. David Powner, MD, Professor of Anesthesiology and Critical Care Medicine and Medicine, is the new Director of the MCCTP. Other changes include the appointments of Samuel Fisherman, MD, as Director of the Surgical Critical Care Fellowship and Paul Rogers, MD, as Director of the Internal Medicine Critical Care Fellowship.

**E**rin Britton recently joined the MCCTP as Fellowship Coordinator after Jill Belasco, who held the position for eight years, moved to a new position. Lois Bauer, the Media and Education Coordinator for over 15 years, recently retired. Both Jill and Lois made indelible contributions to the MCCTP and our fellows. Sheila Palmieri joined the MCCTP as Administrative Secretary last Fall.

The evolving focus of the MCCTP is evident in the development of an exciting new resource, the Grenvik Multidisciplinary Critical Care Training Center. The multimedia training center will be named in honor of Dr. Grenvik to acknowledge his past and continuing contributions to the training program. Building upon the teaching traditions established by Dr. Grenvik, the center will incorporate the power of the Internet, a new MCCTP website, and other multimedia technologies into the training of fellows. Training center resources will allow expansion of current CD-ROM based modules and use of the ICU patient simulator and local area network software. It will also permit the import and export of curriculum from the Internet, help build upon the computer literacy of all MCCTP fellows, and expand teaching beyond the University of Pittsburgh Medical Center through such sources as the Society of Critical Care Medicine's Fundamental Critical Care Support Programs.

**D**espite the changes inevitable in health care reform, the MCCTP and critical care faculty remain committed to the mission of preparing fellows to provide primary care to critically ill or injured patients.

For more information on the MCCTP, call (412) 647-3135.

## Welcome New 1997-1998 Trainees

### CA-1 Anesthesia Residents

Andrea Ference, MD  
Shashank Saxena, MD  
Daniel Zalach, MD

### Anesthesia Fellows

**Cardiac Anesthesiology**  
Theresa Gelzinis, MD

### Children's Hospital of Pittsburgh

Susan Drelich, MD  
Kenneth Goldschneider, MD  
William Jones, DO  
Lubna Khan, MD  
Jeremy Lee, MD  
Kevin Matrosic, MD  
Ann Ruscher, MD

### Pain Evaluation and Treatment Institute

James Diesfeld, MD  
Arun Lall, MD

### Critical Care Fellows

**Anesthesiology Critical Care**  
Jewel Alleyne, MD  
Todd Davis, MD  
Michael Dishart, MD (NIH Research Fellow)  
Stavroula Ikonomakou, MD  
Leonard Trapani, MD

**Emergency Medicine Critical Care**  
Edward Kimball, MD

**Internal Medicine Critical Care**  
Eyad Abu-Hamda, MD  
Jeneé Bowman, MD  
Anthony Carlese, DO  
Michael Dacey, Jr., MD  
Martin Hendrickson, DO  
Anton Nicolescu, MD  
Michael Power, MD  
Natesa Shanmugam, MD  
Bryan Veynovich, DO

**Pediatric Critical Care**  
Yong Yun Han, MD  
James McJunkin, MD  
Randy Ruppel, MD  
Neal Seldberg, MD

**Surgical Critical Care**  
Marilyn Borst, MD  
Paul Freeswick, MD  
Amitabh Goel, MD  
David Kam, MD



## Faculty Presence Strong at ASA Annual Meeting

The Department of Anesthesiology and Critical Care Medicine showed an impressive presence at the October meeting of the American Society of Anesthesiologists in New Orleans. Department faculty members conducted workshops on adult and advanced fiberoptic laryngoscopy, handling the difficult airway/computer simulations, and intraoperative electrophysiologic monitoring. Twenty faculty members were the first authors on papers and other presentations. Barbara Brandom, MD, and Charles Brindis, MD, MS, were moderators for the poster session. Faculty members also participated on multiple panels including "Molecular Biology for the Anesthesiologist" (Leonard Firestone, MD), "Pediatric Pain Management" (Peter Davis, MD, and Ira Landsman, MD), and "Culture of Anesthesiology Departments: Thriving in the 21st Century" (Barbara DeRiso, MD).

## CCM Division Plays Important Role at SCCM Meeting

As in previous years, the Division of Critical Care Medicine was a dominant force at the annual meeting of the Society of Critical Care

Medicine (SCCM) in San Diego. Faculty members and fellows contributed greatly to abstract presentations, awards received, and invited lectures at the February 1997 meeting.

### Adult CCM Participation

Invited lectures included "Right and Left Heart Interactions: New Insights into an Old Problem" (Michael Pinsky, MD), "Organ Preservation and Brain Death" (Ake Grenvik, MD, PhD, and David Powner, MD), "Workforce Reduction: Who is Minding the Store?" (James Snyder, MD), "Computer-Assisted Decision Making" (Michael Pinsky, MD), "An Apple for the Teacher" (Paul Rogers, MD), and "Incidence of Sepsis" (Derek Angus, MB, ChB, MPH). All lectures were well received and many were presented to a standing-room only audience.

### Pediatric CCM and Safar Center Participation

Seventeen abstracts were presented by faculty and fellows from pediatric CCM and the Safar Center for Resuscitation Research. Robert Clark, MD, won the 1997 SCCM Young Investigators Award for his abstract entitled "Apoptosis-suppressor Gene bcl-2 Induction after Traumatic Brain Injury in Rats." Pediatric CCM fellows, Michael Bell, MD, and Michael Whalen, MD,

**Lisa Cohn**, Administrative Director of the Clinical Trials Program and Publications Director for the Department of Anesthesiology/CCM, recently was awarded a Master of Public Health degree.

**Mary Beth Coleman, RN, MBA**, UPMC Administrative Director of Critical Care Medicine (CCM), received the 1996 Young Investigator Award of the American College of Chest Physicians (ACCP) at the October 1996 ACCP World Congress in San Francisco for an abstract entitled "Estimating ICU Cost Savings: Reducing Low Risk-Monitored Only (LRM) Patients Using Risk Adjusted Hospital Outcome Data." Ms. Coleman and colleagues in the Division of CCM, including Carl Sirio, MD, Derek Angus, MB, ChB, MPH, and Nancy Pristas, RN, reported on methods to assess LRM rates within UPMC. The authors concluded that there is wide intra-institutional variation in the use of ICUs for LRM patients. A reduction of the LRM rate to 20% in all units would result in estimated annual savings of \$2.6 million within UPMC.

**Peter Safar, MD**, received the 1996 *Pittsburgh Business Times*' Health Care Heroes Lifetime Achievement Award for 1996. Dr. Safar was selected from five finalists and is the first recipient of this new award, which honors individuals in the health care field who "epitomize the spirit embodied in the word 'hero'". Dr. Safar also received the 1997 Christer Grenvik Memorial Award in Critical Care Medicine Ethics at the annual SCCM meeting.

received Educational Awards for their abstracts. Patrick Kochanek, MD, gave the First Established Investigator Grant lecture on "The Role of Inflammation in Cerebrovascular Failure after Head Injury." Ann Thompson, MD, was a speaker on two panels entitled "Pediatric Critical Care in

Review" and "Career Development Issues for Women in Critical Care." Joseph Carcillo, MD, was a member of the Program Committee for the Symposium.



### Past Department Faculty Members Remembered

**Drs.** Clara Jean Ersoz and Namik Ersoz, past members of the Department of Anesthesiology and Critical Care Medicine (CCM), died in the crash of TWA Flight 800 on July 17, 1996 along with their nephew. Dr. Clara Jean Ersoz was the first woman in the University of Pittsburgh's CCM fellowship program in 1965 and was an Assistant Professor in the Department of Anesthesiology/CCM for several years before becoming a general anesthesiologist at St. Clair Hospital in Pittsburgh. She initiated and became chief of the ICU at St. Clair, as well as Director of Emergency Care. In 1976, Dr. Ersoz was named Medical Director of the hospital and



*Drs. Namik Ersoz and  
Clara Jean Ersoz*

later Vice President for Medical Affairs. After her retirement in 1993, Dr. Ersoz studied philosophy and was an advisor on quality control and health care reform issues.

**Namik Ersoz** immigrated to the United States from Turkey. In the late 1960s, he joined the Department of Anesthesiology/CCM at the University of Pittsburgh, later becoming an Associate Professor. Dr. Ersoz

worked as a clinical anesthesiologist and teacher until his retirement in 1993.

**Dr. Robert A. Hingson**, former University of Pittsburgh Professor and Chief of Anesthesiology at Magee-Womens Hospital (MWH), died October 9, 1996. Dr. Hingson is remembered as a humanitarian, scientist, inventor, pioneer of epidural anesthesia for childbirth, and developer of the "jet" injector ("peace gun") for mass immunization. Dr. Hingson was recruited to the University of Pittsburgh in 1968. His team at MWH changed obstetric coverage from partial supervision by anesthesiologists to 24-hour coverage by board eligible or certified anesthesiologists and increased the use of regional

anesthesia and continuous lumbar epidural anesthesia. In 1974, Dr. Hingson left academic anesthesiology to devote himself full-time to the worldwide missions of his Pittsburgh-based Brother's Brother Foundation. Since 1958, the foundation has distributed over \$560 million worth of medical supplies, textbooks, seeds, food, and other assistance to more than 40 million people in over 100 countries around the world.

**Dr. Kevan P. Essig** died in Philadelphia on April 22, 1996. Dr. Essig completed an anesthesiology residency at the University of Pittsburgh in 1993 and served on the faculty as an Assistant Professor until August 1995.

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