

# Louisiana society of anesthesiologists The LSA Quarterly

## LSAPAC: Join Now and Bring a Few Friends

My articles so far in our newsletter this year have centered around being educated on issues and staying engaged. This month, I will make a call to action. In addition to the American Society of Anesthesiologists Political Action Committee (ASAPAC), I am asking you to make a contribution to our Louisiana Society of Anesthesiologists Political Action Committee (LSAPAC) and I am asking you to make that contribution soon.

So what is a PAC? Simply put a PAC is a political committee organized for the purpose of raising money and spending money in order to elect or defeat candidates. These organizations have been around since 1944. Non-profit and for-profit corporations and incorporated membership organizations cannot contribute directly to elections. However, these organizations can establish PACs, which can solicit contributions from members or the corporation or organization. In short, ASA and LSA cannot contribute to political candidates, but the ASAPAC and LSAPAC can.

State and Federal PACs have very specific rules to follow, which in Louisiana is spelled out in Revised Statute Title 18. Your LSAPAC complies with all regulations. Our LSAPAC focuses on elections within the State such as the Governor's race and the Louisiana Legislature. This is an election year in Louisiana and all 144 seats are up for election. Thirty-five of those seats will have new occupants due to term limitations or parties not running for re-election. Thus, you see the importance of contributing to your LSAPAC, especially now.

You may have seen or heard of the recent ASAPAC Day of Contribution which raised a significant amount of money for ASAPAC. Next month during the week of September 21 – 25 we will have our inaugural LSAPAC WEEK of Contribution. In the weeks leading up to this event, we will give you more information on how to contribute, how much we suggest you contribute and why you should contribute. As an organization we are working on a process to divide your future contributions to LSAPAC into monthly automatic debits off of your credit card, as the ASAPAC currently operates, if chosen.

The reality of politics is that it takes a lot of money to win an election. Another reality is that it takes involvement in campaigns, especially financial involvement, to gain access to lawmakers. It is that access that we need as physician anesthesiologists to advocate on behalf of the safety of our patients. I do not have to tell you about the involvement of legislative bodies on healthcare and especially anesthesia care. What I need you to do is contribute to the LSAPAC to open the door for physician anesthesiologists like ourselves to educate policy makers on the vital role we play in the care of our patients.

Please, participate in a meaningful way in our LSAPAC Week of Contribution next month. Unfortunately, this is a part of the reality of being a physician today.



**Kraig de Lanzac, MD**  
is President, Louisiana Society of Anesthesiologists & Alternate Director, ASA Board of Directors

## Upcoming Events

### September 15, 2015

LSA Meeting Abstract Submission Deadline. To submit an abstract [click here](#)

### October 24-28, 2015

ASA Annual Meeting (San Diego)  
For more information [click here](#)

### November 20, 2015

LSA Wine-Tasting Social (New Orleans)  
• For more information [click here](#)  
• To pay online [click here](#)

### November 21, 2015

LSA Annual Meeting (New Orleans)  
• For more information [click here](#)  
• Register for the Annual Meeting [click here](#)

## Save the Date!

Louisiana society  
of anesthesiologists

2015

# Annual Meeting November 20-21

Renaissance New Orleans Pere Marquette Hotel  
New Orleans, LA

## Stay Connected!

We're on the Web! [LSAHQ.org](http://LSAHQ.org)  
Follow us on Twitter [@LSA\\_HQ](https://twitter.com/LSA_HQ)!  
Like us on Facebook [LSAHQ!](https://www.facebook.com/LSAHQ/)

## Put in your 2 cents!

Have any events to add? Interested in submitting an article for this newsletter? Want to get more involved with the LSA? Contact Janna at [janna@lsa-online.org](mailto:janna@lsa-online.org).

## LSA Board Members

Kraig de Lanzac, MD  
President/ ASA Alternate  
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# The LSA Quarterly

## Member Highlight – Khaled Dajani, MD

**G**reetings to my colleagues all over Louisiana! It's a privilege to live and work in New Orleans, surrounded by the warmth of weather and people in the South.

I was born and raised in frigid Minneapolis, MN, where I attended the University of Minnesota as an undergrad. After college, I moved to the east coast for medical school (Drexel) and residency (Cornell).

Although living in Philadelphia, Pittsburgh, and New York City were amazing experiences, I knew that the lifestyle and weather long-term out East was just not for me. My pediatric fellowship at Texas Children's in Houston cemented a suspicion, that the South might just be a great place to hang up a shingle, and here am I now...

After some cajoling, my wife has also moved to and fallen in love with NOLA, no small statement considering she spent most of her life in Queens, NY! We look forward to buying a house, raising children, and continuing to grow and explore this region .



**Khaled A. Dajani, MD**  
is Pediatric Anesthesia Faculty  
at Ochsner Health System,  
And board member, newsletter editor,  
Louisiana Society of Anesthesiologists.

## Capitol View: from Haynie and Associates

**E**very four years in Louisiana, Labor Day weekend takes on additional significance as the unofficial kick-off for the Louisiana election season. With all 144 legislative seats and all state-wide offices up for grabs this year, expect your mail box, radio and TV to soon fill up with ads from candidates! Of the 39 Senators currently serving, only 29 are seeking re-election, the other 10 have either reached their legal term limit (12 years) or are leaving for other reasons.

The turnover in the House will also be significant, with at a minimum 22 House incumbents not seeking reelection. Since term limits came into place in Louisiana, the result has been more turn over in the legislature, a trend which will only continue (in 2019, half of the current 39 senators will term out). This heavy turnover brings new faces and ideas to the capitol, but also means that the education process of elected officials never ends for groups like the LSA. It will be imperative for the future success of LSA and your profession that we engage with new officials, and educate them on the importance of physician-led anesthesiology in Louisiana.

As the October 24th primary and Nov 21st runoff election dates come and go, please remember that the work of LSA's legislative outreach committee will be just beginning, as up to 40 new House and Senate members will be sworn in January 11th for four-year terms.

Please email me at [ryan@haynie.com](mailto:ryan@haynie.com) to sign up for the LSA legislative relations sub-committee, and become part of this integral education process with your local legislators.



**Ryan K. Haynie**  
is managing partner, and co-owner of  
the Baton Rouge-based lobbying firm,  
Haynie and Associates.

### Louisiana Society of Anesthesiologists Newsletter

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## When Seconds Count...William Ericson-Neilsen's Story

*Last month, Joseph Koveleskie introduced the Ochsner When Seconds Count story contest. This month, we feature one of two winning submissions. - Editor*

I was on call in the hospital one night when a neuro ICU nurse phoned, stating that she thought a patient needed to be intubated immediately. My training as always told me to first review the chart and see the patient before making such a move. It turns out that the patient had had a subarachnoid bleed into the brain and was scheduled for corrective surgery the next morning. One of my concerns as a physician anesthesiologist was the affect placing the breathing tube would have on her blood pressure. When I went to see the patient in the ICU sure enough her blood pressure was dangerously high despite a large amount of IV medication being administered by the neuro ICU nurse. If someone had placed a breathing tube without getting the blood pressure under better control it would very likely have caused the blood pressure to go even higher and caused

further bleeding into the brain, making this already critical patient worse, or even killed her. Rather than immediately placing the breathing tube as requested, I quickly placed an arterial catheter to closely monitor the blood pressure, and then administered a second medication infusion to bring the pressure under control. After that, when I placed the breathing tube, this patient was stable and had her surgery uneventfully the next morning. My training as a physician anesthesiologist allows me to know how to take care of these kinds of critically ill patients in the ER, the operating room, as well as in the ICU. When seconds count I believe that you want a physician anesthesiologist with this kind of knowledge and experience directing the care of critical patients.



*Left to right:  
Thomas TJ Myers,  
William Ericson-Neilsen,  
Joseph Koveleskie*

## The Importance of Political Advocacy, an Inside Perspective

Prior to entering medical school, I worked in Washington D.C. as a legislative aid for a US congressman. I spent countless hours meeting with groups and lobbyists who came to advocate for specific policy issues, many of which were healthcare-related. What I hope to convey here is the importance of political advocacy and political involvement for Physician Anesthesiologists.

One of the most pressing concerns of politicians is to remain in office. In order to do so, elected officials must continuously campaign, and contributions are the lifeblood of any political organization. This presents a very real opportunity for us to make an impact through contributions to the American Society of Anesthesiologists (ASA), and locally to the Louisiana Society of Anesthesiologists (LSA) political action committees. The second thing campaigns run on is volunteers. Volunteers make phone calls, knock on doors and turn out the vote for politicians. Without these resources, re-election is an uphill battle for any politician. Physician Anesthesiologists have the opportunity to support elected officials financially and through volunteer activities, so that they will support policy that is aligned with the unique needs of our profession.

Another reality of being an elected official is that your offices are inundated with phone calls, letters, and emails from constituents in support or opposition of various

issues. So what actually happens to these letters, emails and phone calls? Believe it or not, when the policy team and congressperson are determining which way to vote on particular issue, these communications can play an important role. Constituent communication may not completely shift the view of the elected official, but the views expressed are certainly taken into account. More importantly, if a piece of legislation is going to impact a specific group, and the elected official's office has not heard any communication from that constituency on the topic, then it indicates to them that this particular issue is not a priority.

As a future Physician Anesthesiologist with a background in politics, I cannot overemphasize the importance of involvement in the political process, whether through financial donations to the ASA, LSA, and elected officials, or through volunteer involvement in a local/national campaign. Without a doubt the political system can be a frustrating process...however when these policy decisions related to health care providers are made by non-physicians, they can and will impact the care we will be able to provide!



**Morgan Smith**  
*is a 4th Year Medical Student  
at the University of Queensland-Ochsner  
Clinical School*

## The Long Gray Line That Turns Out To Vote

**G**ov. Bobby Jindal's first question in the first nationally televised Republican presidential primary debate was why he was so unpopular in Louisiana. Jindal gave his pat answer about his willingness to make tough decisions that some people don't like. Whatever, says Baton Rouge pollster Bernie Pinsonat. Statistics are succinct: Jindal lost the old folks. Pinsonat's semiannual polls charted the decline from 2009, when about two-thirds of the state's voters surveyed thought he was doing a fine job, to 2013, when those numbers first dropped 30 percentage points to 37.8 percent. Jindal lost about a third of his support among white voters older than 65, the polls showed. As Jindal had made little effort to reach out to African-Americans, moderates and other political demographics, his loss of this key Republican-leaning group made the collapse look cataclysmic, Pinsonat said.

Jindal's "tough decisions" included firing the head of the Office of Elderly Affairs for not toeing the administration's line during legislative testimony (the job has remained empty for three years) and freezing state funds for programs that help transport, feed and check the health of elderly people. He hacked away at health care and then traveled to other states to brag about how he reduced prolific spending at home. "His message was insulting. They (seniors) thought he showed insensitivity," said Pinsonat, who is 72.

Gallup polls last year showed that in America's bitter political atmosphere, party preferences are largely polarized along racial lines and that 85 percent of those over 65 are white (54 percent in ages 18 to 29 years old). Several studies — from the Pew Research Center to Harvard University to the Cook Political Report — show that this demographic solidly votes Republican.

And vote they do. CNN exit polls after last fall's U.S. Senate primary found that 55 percent of Louisiana voters casting ballots were older than 50 — including the 21 percent older than 65 — and 58 percent of those ballots went to Republican candidates Rob Maness and the eventual winner, Bill Cassidy. Incumbent Mary Landrieu racked up with the under-30 crowd, but they accounted for only 13 percent of the turnout.

Denise Bottcher, interim executive director at AARP Louisiana, says this state is experiencing a titanic demographic shift. "We're reaching a point where people 65 and older will outnumber children 15 and younger for the first time in history," she said, adding that within four years, about 1.1 million Louisiana residents will be seniors. This will create a new set of expectations and alter the rhythm of daily life.

Even as Q&A sessions at GOP events usually feature demands that candidates identify specific agencies they would shut down and specific ideas to reduce the size of government, at least three of the four gubernatorial candidates champion the idea of creating a new state government agency — one to coordinate programs to help the elderly the way one state agency does for the poor and another does for rich oil companies. It's one of the few issues for which the candidates articulate their ideas with specifics.

Lt. Gov. Jay Dardenne, R-Baton Rouge, noted that a proposal to create a 21st government department failed at the polls last fall. (Louisiana's Constitution limits the number of departments to 20). He would merge the Governor's Office of Elderly Affairs with the Department of Veterans Affairs, which immediately would begin addressing

elderly concerns. Otherwise, the new department will have to wait for another election cycle. Public Service Commissioner Scott Angelle, R-Breaux Bridge, agrees with creating a new agency but says merging it with another department would split the focus. Amite Democratic state Rep. John Bel Edwards says creating a department for the elderly is a key first step. But in the meantime, the governor has to personally take charge of coordinating the services now spread across several agencies and ensure seniors know about how to access those resources.

Republican U.S. Sen. David Vitter, of Metairie, said in a prepared statement: "My record of fighting for seniors is clear — including fighting to create a lock box to protect the Social Security Trust Fund from being raided; fighting cuts to Medicare and Medicare Advantage; pushing for cheaper, safe prescription drugs through reimportation and generics; and my work on individual cases that's resulted in thousands of Louisianians finally getting their improperly denied Social Security benefits."

London-based HelpAge International, a coalition of advocacy organizations, earlier this year ranked Louisiana as the second worst state in America to grow old in. HelpAge based its rankings on factors such as low median household income, high percentage of disabilities and poor health care.

"The reason," said Angelle, who had served as one of Jindal's closest advisers, "is that we do not have a champion."

### **Mark Ballard**

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