

Annual Minutes of the Society for the Advancement of Geriatric Anesthesia (SAGA)

October 11, 2002, Orlando, FL

Submitted by Terri G. Monk, Secretary and G. Alec Rooke, President

On May 21, 2002, a meeting was held by email to vote on changes to the Articles of Incorporation for SAGA in the State of Washington. Identical changes to the Bylaws were proposed (see attached). These changes clarified the charitable, educational and non-profit purpose of SAGA as defined by the tax code, and clarified the dissolution clause and disposition of assets. The changes were unanimously approved.

In Attendance, October 11 meeting: Shamsuddin Akhtar, Sheila Barnett, Mary Burnett, Frances Chung, Dave Cook, Greg Crosby, Deborah Culley, Paul Heerdt, Chris Jankowski, Jackie Leung, Michael Lewis, Jonathan Mark, Terri Monk, Philippa Newfield and husband Gordon, Peter Pompei, Alec Rooke, John Sage, Chris Shoub, Fritz Sieber, George Silvay, Jeff Silverstein, Yung-Fong Sung

Sheila Barnett, Treasurer, reported that SAGA currently has 33 Active members, plus 6 expired memberships. Expenses to date for 2002 total \$530, mostly for government fees. The costs of this meeting have not yet been paid and are expected to be approximately \$830. The cost of the exhibit at the ASA meeting is \$225 and has not been paid. SAGA has collected \$2040 from memberships to date this year, and has \$2000 in corporate sponsorship pledged for this year (all from Abbott). The current balance in the account is \$10,623.57.

Terri Monk, Secretary, asked and received approval of the minutes from the meeting on October 12, 2001.

Brief reports were given on SAGA's association with other societies. Jeff Silverstein reported that the SAGA breakfast panel at the December, 2001 NYPGA meeting attracted over 30 people. Terri Monk reported that the SAGA panel at the May, 2002 SAMBA meeting was very well received. She anticipates that our panel proposal for the May, 2003 SAMBA meeting will be accepted. Alec Rooke reports that our panel proposal for the April, 2003 SCA meeting has been accepted. The proposals for all these meetings are posted on the SAGA website.

The IRS has approved the non-profit status of SAGA. Alec Rooke explained that it is a provisional ruling in that SAGA has not been around long enough for the IRS to make a final ruling. The ruling will be made in five years, but unless we do something overtly wrong, this decision should be a formality. The IRS letter of determination is posted on the website.

A discussion of the website ensued. A number of suggestions were made for additional items on the website including: a current bibliography of geriatric anesthesia articles; a "frequently asked questions" section for anesthesia professionals and one for patients; a section for reviews of scientific publications from anesthesia and geriatric journals with commentary and hopefully the original abstract (would need permission); a section on research opportunities in geriatric anesthesia, including current, funded research and a list of available grants; ask to have SAGA linked to other websites, such as the AVAA or GASNET. We would have to research the legal implications of our educational material (it was suggested we contact Lance Lichtor). It was also suggested that slide shows could be protected on the website by posting them only as

PDF files. That way someone who wanted duplicates would have to identify themselves to us and explain how the slides were to be used. Alec Rooke was appointed webmaster.

The future of SAGA was discussed. It was noted that our membership may be enthusiastic, but we are still small. One suggestion was to create a paper based membership brochure that could be distributed at meetings, or even mailed to prospective members. Another suggestion was to publicize SAGA with each of our state societies. Frances Chung suggested that we need a big meeting that should include speakers and topics outside of anesthesia. When the concern was voiced that SAGA might not command a great audience yet, Greg Crosby and Jonathan Mark suggested that SAGA align itself with an academic institution that can provide CME. The meeting would then be a joint venture between SAGA and the academic institution. One possibility might be the Duke Conference on Aging held every two years. Assuming the topic(s) of the meeting were sufficiently inclusive, it might well be possible to attract people to the meeting from fields other than anesthesiology. Such an approach would help promote SAGA's goal of being more than just an "anesthesia" society someday. Another thought to increase SAGA's visibility was to sponsor a resident essay or research competition, with the winner receiving some award, perhaps a free trip to a meeting. Lastly, the opinion was expressed that it would be helpful to work with AARP to promote health care for older patients. Some skepticism was expressed over the success of such an approach given the AARP's attitude toward physicians. Nevertheless, it would be interesting and useful to invite someone from AARP to speak to SAGA about their concerns with health care for elderly patients.

An amendment was passed to permit PhD's to join SAGA as Active members, subject to the same interest and expertise criteria used to admit physicians.

A vote was taken and it was determined that, for now, SAGA would not charge people to attend the annual SAGA meeting, especially if it primarily consisted of a business meeting and not much educational material. It was suggested that the educational part of the meeting should be first on the agenda. Doing so might attract interested individuals who might not want to attend the rest of the meeting.

Officer and Board elections were held by paper ballot. Terri Monk was elected President-Elect, Mike Lewis Treasurer and Sheila Barnett Secretary. However, after the meeting it was suggested that it would make more sense to permit the Secretary and the Treasurer to serve for a maximum of three consecutive terms. Ballot by email was then sent to the SAGA voting members. By a vote of 21 to 1, the bylaws were amended such that "Section 5.2 Term" now reads, "The term of office of each Officer shall be two years. Only Secretary and Treasurer may serve in the same post for consecutive terms, for a maximum of three consecutive terms. Time in office that is held in fulfillment of an un-expired term does not count toward these limitations. The President-Elect shall succeed the President in office at the conclusion of the latter's term." By a vote of 22 to 0, Mike Lewis was elected Secretary and Sheila Barnett Treasurer. Three new At-Large Board members were elected: Greg Crosby, George Silvey and Yung-Fong Sung. All new officers and Board members, plus the new President, Jeff Silverstein, assumed office at the conclusion of the meeting.

The scientific portion of the SAGA meeting included presentations from several speakers involved in funded projects devoted to increasing geriatrics expertise in the specialty of anesthesiology. Dave Cook spoke first and outlined the place and intent of the Research Agenda Setting Project (RASP) project in the funded initiative by the American Geriatrics Society, "Increasing Geriatric Expertise in Surgical Subspecialties". The process by which the research review occurred was described as was the editorial processes that were brought to bear in

generating the final document. Dr Cook outlined the primary conclusions in the Anesthesia component of the RASP project by highlighting the needs in the Preoperative Assessment, Intraoperative Management and Postoperative Care of the geriatric surgical patient. The section summaries and the executive summary of the project were supplied as a handout to meeting attendees.

Dr. Mary Burnett presented how she and her department of Anesthesiology at the University of Nebraska Medical Center have enhanced its geriatric training of medical students & residents with the help of a grant from the Hartford Foundation and also a Reynold's Foundation grant. 1) The Hartford grant addressed both third year medical students (M3s, during their surgery rotation) and fourth year students (M4s, during their anesthesia rotation). The M3s were required to complete two geriatric web-based modules (postop delirium & pain management) and were then tested. M4s received a "Physiology of Aging" lecture each month and were required to complete 2 of 6 web-based geriatric modules followed by testing. 2) One of the goals of the Reynold's grant was to improve resident education in geriatrics. After reviewing our curriculum, we surveyed our faculty to assess the current level of geriatric content, made improvements and added 6 lectures yearly. Many lectures were given by members of other departments (geriatrics, pharmacology, intensivists). The grant also provided for two guest experts in geriatrics per year to speak at a combined surgery and anesthesia grand rounds conference. A "geriatric journal club", attended by the guest speaker, has been added each year as well. Six web-based, geriatric modules were created and cover different perioperative scenarios with questions and answers related to the unique concerns of geriatric management. The resident assigned to the PACU rotation is required to complete this (each module takes 20-30 min). Testing is in development. These grants have allowed the lines of communication to open widely between geriatrics, surgery and anesthesia. It has even led to a joint effort among our surgeons, cardiologists, geriatricians and anesthesia in developing a perioperative beta-blocker protocol. The final result of all this seems to be our mutual goal of improving outcomes for our geriatric patients. The modules can be found at <http://www.unmc.edu/anesthesia/Resources%20and%20Links.htm>. Page down to "Educational Resources and click on: "Geriatric Computer Modules". Then click on "Anesthesia Modules". The modules can also be accessed from the department's website: <http://www.unmc.edu/anesthesia>

Dr. Fritz Sieber described the initiatives currently underway at Johns Hopkins to increase geriatric expertise in the field of Anesthesiology. His efforts comprise three initiatives. In the first initiative the Anesthesiology Department is integrating geriatrics into the residency program by designating three (3) grand rounds during the year devoted to geriatric issues. In the second initiative the Anesthesiology Department is integrating geriatrics into the residency program by establishing a monthly case conference and journal club focusing on perioperative management of the geriatric patient. In the third initiative the Anesthesiology Department is integrating geriatrics into the residency program by instituting patient simulation applications into geriatric anesthesia training utilizing the METI whole body computer simulator located in the Patient Simulation Laboratory at the Uniformed Services University of the Health Sciences (USUHS).

Inserted at the beginning of the Preface of the Bylaws:

This corporation is organized exclusively for charitable, scientific and educational purposes within the meaning of section 501(c)(3) of the Internal Revenue Code.

No part of the net earnings of the corporation shall inure to the benefit of, or be distributed to, any of its members, trustees, officers or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payment and distributions in furtherance of the organization's 501(c)(3) purposes.

No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office.

Notwithstanding any other provision of these Bylaws, the corporation shall not carry on any other activities not permitted to be carried on (a) by a corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code or the corresponding section of any future United States Internal Revenue law, or (b) by a corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code or the corresponding section of any future United States Internal Revenue law.

Inserted as a new Article to the Bylaws:

DISSOLUTION

The property of this corporation is irrevocably dedicated to charitable and educational purposes.

Upon the winding up and dissolution of the corporation, after paying or adequately providing for the debts and obligations of the corporation, the remaining assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code or the corresponding section of any future United States Internal Revenue law, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations as said court shall determine, which are organized and operated exclusively for such purposes.