

CAROLINAS/VIRGINIAS CHAPTER OF THE SOCIETY OF CRITICAL CARE MEDICINE

MEMBERSHIP NEWSLETTER- FALL 2019 VOL. 3 ISSUE 3

MENTORSHIP COMMITTEE

NEW COMMITTEE SPOTLIGHT

The Society of Critical Care Medicine's mission is to secure the highest quality care for all critically ill and injured patients. Central to meeting this mission is to provide professional development support to critical care professionals. The purpose of the Carolinas/Virginias Chapter of SCCM's Mentorship Committee is just that: to support and facilitate the professional development of CVCSCCM membership seeking guidance from experienced critical care professionals from a variety of multidisciplinary specialties. As a new and emerging committee, in 2019 the committee assisted three CVCSCCM chapter members in a successful journey to induction into the American College of Critical Care Medicine (ACCM) in 2020! In addition to FCCM application to the ACCM, a CVCSCCM mentor can provide guidance in SCCM award and recognition applications; SCCM/CVCSCCM leadership and committee applications, Curriculum Vitae development, presentation and publication development and other goals as determined through mentee/mentor collaboration. In 2020, a structured on-line process will be implemented for CVCSCCM members to request and collaborate with a mentor to establish and successfully achieve professional objectives. In the

Cindy L. Zerfoss, DNP, RN, ACNP-BC's experience:

"I found multiple reviewers to proof my documents at different stages of development most helpful. Some were experts in editing and others in content development. Once I had my documents together and edited (thank you Ellen Harvey!) I sent them to Sophia Rogers of the FCCM committee.

Two pearls to pass along: 1) keep the original FCCM CV format as it is! Any changes to the word document format and it will not be reviewed and 2) keep the personal statement to under 3 pages. Paring down my 10-page personal statement to just under 3 pages was quite an accomplishment! Rather than giving multiple examples on how you meet a section criterion, write about the underlying concept of the examples. Once I did that, simplifying my personal statement was much easier. Take the time to read your personal statement out loud to make sure what you wrote reads as intended."



Kwame Akuamoah-Boateng RN, BSN, MSN, ACNP-BC, DNP-c's experience:

"The Mentorship Committee and its vision and support system are truly keys to great success. As a practitioner, I can't describe how much I appreciate having this committee around during my time of applying for my fellowship. The wealth of knowledge and counseling from the committee members made tremendous impact in my success as a first-time applicant. It is vital everyone submit their application for review to this committee; it will save you the time and stress associated with applying for the fellowship. I will advise you take the feedback of the committee members wholeheartedly."



interim, those who would like to be involved in the CVCSCCM Mentorship committee, whether seeking a mentor or serving as a mentor, please email the CVCSCCM Mentorship Committee Chair, Ellen M. Harvey at ellenmarieharvey@gmail.com or emharvey@carilionclinic.com.

CVCSCCM members considering FCCM application submission in 2020 are encouraged to contact the CVCSCCM committee prior to the new year. Included are two of the committee's success stories. Kristie Hertel, RN, MSN, ACNP also utilized the committee and will be inducted as a Fellow in 2020! Congratulations to all CVCSCCM members who will be inducted as Fellows in 2020!

WAKE FOREST ICU RECOVERY CLINIC

Rita Bakhru, MD, MS

Nearly 6 million people are admitted annually to Intensive Care Units. In January of 2014, Mary Kay Berger was one of them. Mary Kay was an otherwise healthy nurse practitioner in Virginia. However, one day in mid-January 2014, she started to feel unwell and was diagnosed with influenza. She quickly deteriorated and was brought to her local hospital. She required intubation and mechanical ventilation for severe ARDS related to influenza. Due to her rapid decline, she was transferred to Wake Forest where she required ECMO. She underwent tracheostomy placement and was eventually transferred to an LTACH. She was weaned off the ventilator, decannulated, and finally discharged home on March 31st, 2014. She was weak, anxious about her health, and struggled with understanding what had happened to her. In short, she had classic symptoms of post-intensive care syndrome (PICS). She tried to arrange the post-hospital care she needed, but ultimately ended up in the newly formed ICU Recovery Clinic at Wake Forest.

Interested in Learning More?

Implementation of an ICU Recovery Clinic at a Tertiary Academic Center. *Critical Care Explorations*. 2019

https://journals.lww.com/ccejournal/Fulltext/2019/08000/Implementation_of_an_ICU_Recovery_Clinic_at_a.8.aspx

Enablers and Barriers to Implementing ICU Follow-Up Clinics and Peer Support Groups Following Critical Illness: The Thrive Collaborators. *Critical Care Medicine*. 2019.

https://journals.lww.com/ccmjournal/Citation/2019/09000/Enablers_and_Barriers_to_Implementing_ICU.4.aspx

Since 2014, the Wake Forest ICU Recovery Clinic has been seeing patients who have survived critical illness in an attempt to improve their care post-hospital discharge. We know that survivors of critical illness often have physical impairments, cognitive dysfunction, and neuropsychiatric issues including anxiety, depression, and PTSD (key components of PICS). Other problems include weight loss, malnutrition, dysphagia, hoarseness, chronic pain, sexual dysfunction, rashes, hair loss, sleep disturbance, and more. However, this is not well-recognized in the primary care community. Given this, we started our ICU Recovery Clinic in 2014. We have a multidisciplinary team in clinic including an ICU-based clinical pharmacist, a pulmonary/critical care physician, and a nurse. We often have pharmacist and/or physician trainees, as well. Our goals are to assess for these common problems following critical illness including PICS, try to ensure resolution or ongoing management of organ failures from their ICU stay, and to try better coordinate care after discharge between patients and their primary care providers.

Wake Forest is not alone in its efforts. In fact, the Society of Critical Care Medicine (SCCM) THRIVE Post-ICU Clinic Collaborative is an international collaborative of post-ICU clinics, including the Wake Forest ICU Recovery Clinic. The THRIVE Collaborative seeks to advance the care of patients recovering from critical illness and has published several articles about their work. For more information, see <https://www.sccm.org/MyICUCare/THRIVE>.



Mary Kay Berger held the audience engaged in her talk on June 7th at the CVCSCCM Annual Symposium. Rita Bakhru, MD, MS, the clinic's director also spoke about the Wake Forest Recovery Clinic at the meeting. If you would like more information, please contact rbakhru@wakehealth.edu or ICURecovery@wakehealth.edu.

ATRIUM HEALTH CRITICAL CARE SUMMIT 2019

Reducing Sepsis Mortality

Mitchell Levy, MD, MCCM, FCCP, presented “Reducing Mortality in Sepsis: Where are We in 2019?” at the Atrium Health Critical Care Summit 2019: Emergency Conditions on September 17th. He emphasized the importance of bundles as tools for the bedside to implement guidelines and standardize care to improve mortality. Dr. Levy also highlighted the importance of early fluid resuscitation and antibiotic administration to improve patient outcomes, acknowledging that controversies that exist in fluid management and that early aggressive antibiotics must be married with antimicrobial stewardship efforts.



What strategies or innovations are you using at your facilities to improve sepsis care? Tweet us @CVCSCCM or email us at cvcscm@gmail.com to start a discussion!

SOCIAL MEDIA STATS

Our Twitter account @CVCSCCM has 191 followers, while our Facebook group, SCCM Carolinas/Virginias Chapter (CVCSCCM) has 118 members. July was the busiest month on Twitter, due to our Journal Club, with a total of 98 tweets, 358 profile visits, and 28,200 impressions! Follow us and invite your colleagues to join!

TWITTER JOURNAL CLUB

How are you using ECMO? Tweet us @CVCSCCM!

Edward Rojas, MD, a Pulmonary/Critical Care Medicine Fellow at West Virginia University Medicine’s J.W. Ruby Memorial Hospital in Morgantown, West Virginia, will be hosting the third journal club for our Chapter via Twitter on **Wednesday, October 23rd, from 8 PM to 9 PM EST**. Interact with our account @CVCSCCM using the hashtag #CVCSCCMjc. This journal club will discuss **Extracorporeal Membrane Oxygenation in Septic Shock** with the full text of the article available at https://journals.lww.com/ccmjjournal/Abstract/2019/08000/Extracorporeal_Membrane_Oxygenation_for_Septic.12.aspx. Please read the article and come prepared with questions, comments, and critiques. A document for how to get started with Twitter and Twitter Journal Clubs is posted on SCCM Connect.



Carolinias-Virginias Chapter of SCCM

38th Annual Scientific Symposium
and Pharmacology Pre-Conference

June 4th-5th, 2020

Asheville, North Carolina
Mountain Area Health Education Center

Learn about the latest critical care topics in the magnificent Blue Ridge Mountains of Western NC. A vibrant arts scene, great food, and historic architecture complement the breathtaking views!

Prepare your research abstracts!

Deadline April 1st, 2020

SHARE YOUR STORY

CELEBRATE OUR MEMBERS

Doing something great? We want to hear about it! Future newsletters will highlight accomplishments of chapter members and chapter institutions. This includes new board certifications, publications, awards and accolades, or institution accreditations, to name a few. Send all "Kudos" submissions to cvcscm@gmail.com. We can also highlight local or regional educational events.

GIVING BACK

FCCS COURSE PLANNED IN KIGALI, RWANDA

In Rwanda, there is little or no critical care education for physicians and nurses. Less than 1 to 5% of nurses or anesthesiologists who manage patients in the critical care settings are critical care trained. The mortality rate in critical care areas is as high as 60%.

Last year, CVCSCCM provided a Fundamentals of Critical Care Support/Pediatrics (FCCS and PFCCS) to clinicians in Kigali, Rwanda. Our efforts have shown an improvement in patient care, provider comfort, and provider knowledge base. Chapter members plan on returning to Kigali for another session this November to not only provide FCCS/PFCCS training but to educate local instructors to perpetuate the cycle of education.

Your donations will go towards covering the cost of books, preparations, and covering the cost of the students who may not have the funds available to attend the course. Any extra funds will help to support individual's airfare and lodging. Your financial contribution will make a significant impact as we improve and promote excellence and consistency in the practice of critical care through education. If you are interested in getting involved with future outreach efforts, email cvcscm@gmail.com.

Donate at:

<https://www.gofundme.com/f/outreach-in-kigali>

All gifts are charitable contributions deductible to the extent permitted by §70 of the Internal Revenue Code. You will receive a receipt reflecting your donation.

CARRIE'S CORNER

WELCOME AND QUARTERLY UPDATES FROM THE PRESIDENT OF CVCSCCM



What a great start to the fall! The Chapter Challenge was very successful thanks to you all for your participation and contributions! While the dates for the chapter competition are over, if you or someone you know would still like to contribute, donations will be accepted until December 31st. The chapter will receive 20% of our total donations. Let's be the chapter to be recognized at Congress!

Many great things are happening within our chapter. How do you want to be involved? Our Education Committee is planning an awesome 2020 Symposium in Asheville, NC, the Outreach Committee is preparing for their FCCS Course in Rwanda in November, and the Communications Committee had their second Twitter journal club. Are you applying for FCCM for 2021? Our mentorship committee provides feedback on applications and personal statements. They can also speak with you regarding who to write your letters of recommendation.

We are also in the process of developing a chapter website! If you are IT savvy and would like to help with this project, please let us know by emailing cvcscm@gmail.com.

Wishing everyone the best as we enter the holiday season!

Carrie

Carrie Griffiths, PharmD, BCCCP, FCCM



Pictured right: Chapter members and participants in the FCCS course in 2018