

SAMPLE NARRATIVES - LONGER SERVICE METRIC

SAMPLE (2) Narrative Report

In July 2000, when I completed residency and became Instructor in Anesthesia at Harvard Medical School and Assistant Anesthetist at the Massachusetts General Hospital (MGH), I decided to concentrate on my career as a teacher clinician in the operating rooms, in contrast to my previous laboratory research experience. In addition, I elected to dedicate my fifth clinical weekday to ECT (Electro Convulsive Therapy) anesthesia at McLean Hospital, where in 2002 I was appointed Director of the Anesthesia ECT Service. Thus, my effort is approximately 90% teaching while simultaneously providing clinical care; the remainder is performing administration.

My major clinical teaching activities have included orthopedic, obstetric and ECT anesthesia. Each case is performed as one-on-one or one-on-two with residents, teaching and supervising. As documented in my CV, I have also provided frequent lectures to the Department.

My emphasis in clinical teaching is about *execution* of the anesthesia procedure. I teach essential details such as hand positioning, direction and intensity of force vectors and maximum sensorial feedback to achieve expert performance. For example, consistently successful spinal anesthetics require optimal lighting as well as positioning the body, hands and arms to detect subtle resistance changes to spinal needle advancement. Many neuraxial anesthetics performed by MGH residents in their career are under my teaching, where they learn elements of advanced technique not described in most textbooks.

The great majority of McLean ECTs are performed with mask ventilation, the cornerstone of the American Society of Anesthesiologists Difficult Airway Algorithm. In 2002 I initiated the practice of teaching surgical residents airway management at Mclean in the diverse and challenging pool of ECT patients. As of November 2009, sixty surgical house officers have been trained in mask ventilation and basic airway management at McLean and in the operating rooms at the MGH. I am responsible for their assignments during their month-long anesthesia rotation at both at both institutions..

Under my leadership, the number of ECT treatments at McLean Hospital has increased more than 70% during the past six years without increased personnel. We currently perform about 5,500 ECT anesthetics each year, with as many as 47 patients per day in contrast to the 15-20 cases per day prior to 2002. This has been achieved through innumerable continuous improvements in the clinical management of this service, inspired by the Japanese philosophy of *Kaizen*, the never-ending effort continuous process improvement involving everyone in the team.

Immanuel Kant's maxim "*Treat Humanity never simply as a means but always [...] as an end in itself*" helped me decide to become a physician. Inspired by Kant, my emphasis has been on teaching residents essential details to enable them to achieve expert performance and deliver the safest patient care. I have also demonstrated that better allocation of existing resources can provide additional needy patients care.