ISSUE
02
FEB/MAR
2021

BI-ANNUAL
STUDENT
NEWSLETTER

AmSECTOMORROW

PUMP UP THE VOLUME.

Redefining the Mentorship Model in Perfusion

By Mellissa S. Duarte CCP

Albert Einstein defined the highest value of education as the training of the mind to think in a way that couldn't be learned in a book. The term Mentor dates back 3000 years ago, finding its origin in Homer's The Odyssey. The term was later adopted in Latin and defined as somebody who imparts wisdom and shares knowledge. During the reign of the Greek and Roman Empires, this method of a teacher engaging a student through questions rather than answers and discourse probing various topics to develop their critical thinking skills became known as the Socratic Method, after its founder Socrates. This is heralded as the strongest method of teaching to this day. Socrates' most notable student was Plato. Plato went on to teach Aristotle, who then tutored Alexander the Great through this method.

Today, we have moved away from the Socratic Method. Today corporate America has mass-produced a formula of matchmaking mentorship to attempt to outline a pathway up the corporate ladder. Their belief lies in a more accomplished employees ability to teach a mentee their reproducible strategy. And that strategy should yield the same level of success for the mentee if followed. The teacher today is expected to have answers, rather than questions. This fundamentally refutes one of the most successful methods of critical thinking and problem-solving strategy development of individuals.

Advancement of perfusion science and development of future generations may lie in implementing the original Socratic method in the workplace. The ability to influence this kind of workplace culture is a characteristic that most contemporary researchers identify with true leadership and consider rare.

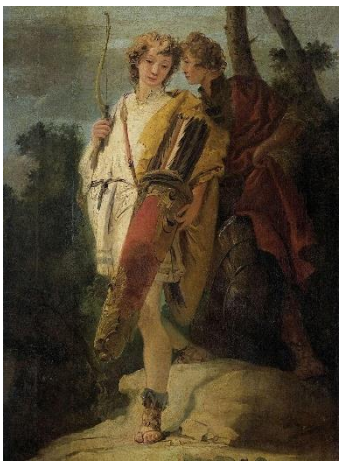
Mentors in perfusion can take a variety of approaches to prepare new graduates for their transition from student to a colleague and licensed healthcare professional. They prepare younger counterparts to act on their toes independently and confidently. Due to the unique nature of the profession, a model of open discussion and sharing near misses may be a key in developing newcomers. The harrowing aspect of this profession is the critical moments where life is either lost or saved through creative, quick problem-solving. More experienced perfusionists can be an invaluable safety net for patients and a resource for their colleagues by creating education opportunities simulating and discussing these events to develop management and critical thinking skills.

With the rising gap between the number of graduating, board-eligible candidates each year and the vacancies being established, human capital will become even more important as well as cost burdensome to healthcare organizations. Especially with the healthcare employee shortages in light of COVID-19. Many leaders are in tune with how turnover can affect morale and reputation, as well as the increased cost of training for hospitals. In a field with compensation still commensurate with debt incurred for education, total yearly income will not be the most important factor to most graduates.

Workplace culture, natural mentors, and strong collegial relationships will be the difference in retaining new hires in a field with little vertical mobility. Experienced perfusionists will be the situational leaders that exemplify the standard of professionalism. Complacency and lethargy can easily become commonplace as a comfort level increases and a routine is established in the workplace. Team dynamics can play a vital balancing power against this through a culture of excellence that demands attention to detail.

Without widespread vertical movement capability in perfusion, team culture and organization can become the most influential factor in professional involvement. The values and ethics communicated by the leader are executed as the daily habits and perspectives of the team members, which may be handed down as a legacy to the newcomers when understanding the subculture of their department. Support, encouragement, and positive feedback for professional involvement can help set a higher standard of performance in the workplace and can be successfully continued through the daily dedication of each of the team members.

Embedding these pillars into a department's culture will set a higher standard, and help attract the kind of talent that pushes science further, but how they feel each day going home will determine how long they stay and how hard they work for that department.



Telemachus and Mentor, Giovanni Battista Tiepolo 1730-1750

THE NEWSROOM.

An Interview with Sejal Modi-Loberg

By Yocelin Bello

Yocelin: Good afternoon, Sejal, how are you today?

Sejal: I'm doing good, I am driving home from the hospital. I just got a phone call though, and we are putting another COVID-19 patient on ECMO, so I have to turn back since I'm on call. It happens all the time.

Yocelin: What is your position at Rush?

Sejal: I guess you could say "chief perfusionist," I say that in quotations because I simply call myself a perfusionist at Rush. Everyone at the hospital works equally as hard so to me, the title does not matter. I am also the president of Perfusion Technologists of Greater Chicago.

Yocelin: What is your favorite part about your job?

Sejal: Although the job is intense, busy, and the hours are long, I honestly believe that we help people. I see a lot of patients, such as those with LVADs come off ECMO and it's a nice experience.

Yocelin: How did you come upon perfusion?

Sejal: I was working as a pharmacy technician at Walgreen's and was pursuing pharmacy school. While I searched for pharmacy schools, perfusion schools appeared in the search because they both begin with the letter P. This is how I discovered perfusion. It appeared very interesting because I had never heard about this career. I then observed an open-heart procedure at Rush, applied the following day, and was accepted. I decided to attend perfusion school instead of pharmacy school. Here I am 13 years later.

Yocelin: What was your reaction when the first COVID19 patients reached the unit?

Sejal: As we saw the numbers rising in the news, I knew we were not near the end of the situation and realized we were going to have a ton of ECMO patients. I was confident that in taking in the first patient, we would treat 100. When I return to the hospital, we will place our 99th patient on ECMO.

Yocelin: How have you and your team overcome the challenges associated with COVID19? Has the pandemic influenced change in protocols?

Sejal: One challenge we currently face is a lack of personnel because many nurses and perfusionists are getting sick themselves. In response, the standard of one perfusionist treating five ECMO patients has gone out the window. Currently, one perfusionist cares for anywhere between 10-20 patients. Regular ECMO guidelines cannot be applied to these patients because they are so different from normal ECMO candidates. Previously, the majority of ECMO circuits were not anticoagulated.

We very quickly learned that COVID-19 patients had abnormal coagulopathies, leading us to aggressively anticoagulate them. We adapted as the situation approached and overcame the fear of facing this novel virus; while figuring out the right way to treat these patients.

Yocelin: What has been the hardest challenge during the pandemic?

Sejal: It's hard to ask people to expose themselves to infected patients. We were so comfortable living the lifestyle of our regular open-heart surgeries and not (as) frequent handwashing or exceptional PPE. Asking personnel to accept facing a global pandemic coupled with requesting of them to not get sick was a difficult responsibility.

Yocelin: Do you have some encouraging words for the perfusion community, perhaps for those who are finding themselves downhearted during these times?

Sejal: To those who are feeling weary from the pandemic and the many bad outcomes, I would say you are a better person for experiencing the feelings related to those patients and families. It is normal to be affected by these cases, and it's important to continue remembering the success stories.

Yocelin: What are some ways you enjoy relaxing during these difficult times? What are your interests outside of the hospital?

Sejal: I drink a lot of wine when I'm not on call. Before the pandemic, my family and I enjoyed traveling. Now, I am learning how to sail, running, and primarily focusing on my two kids.

Yocelin: How does it feel to be awarded the honor of Illinois Perfusionist of the Year for 2020?

Sejal: I was so surprised that the team was able to keep it from me. I am always in the loop because I constantly communicate with them and often uncover secrets. I was very surprised when everyone knew about the award except for me, it was awesome to receive it.

Congratulations, Sejal!

ILLINOIS STATE PERFUSION SOCIETY

"Perfusionist of the Year" Recipient

Suzanne H. DeWitt "Perfusionist of the Year" Award

The Suzanne H. DeWitt "Perfusionist of the Year" Award was established by the Illinois State Perfusion Society (ISPS) to honor the achievements of the first president of ISPS, Ms. Suzanne H. DeWitt, CCP, LP. This award is presented annually at the Illinois State Perfusion Society Meeting and honors a Clinical Perfusionist in Illinois who has consistently demonstrated strong leadership skills and has made significant contributions to the perfusion community both clinically and professionally.

The following criteria will be used to nominate and vote on future recipients:

- Active member of ISPS in good standing
- Currently practicing in Illinois
- Demonstrates significant and lasting contributions to ISPS, it's members and/or the perfusion profession
- Shows leadership skills and projects a positive attitude
- Is recognized by his or her peers as being dependable and innovative

A brief letter of recommendation in support of the nominee should accompany your ballot. The recipient should be available to attend the meeting, however it is not required if unable to do so. Final selection of the candidate will be determined by the ISPS Board of Directors.

https://www.illinoisperfusion.org/perfusionist-awards

THE VITALS.

You're About to Graduate…

Now What.

By Keith Bryant CCP

With the AmSECT 59th International Conference being pushed back to May 1-4, 2021, graduating perfusion students who would usually be interviewing and searching for their first job will not get the benefit of hearing the Preparing for Graduation lecture given at the conference. While this may also be a little late in coming for those graduating in May, I wanted to try to help anyone who is still refining their resume, practicing their interviewing skills, or wondering what kind of salary they should ask for as they choose their first employer. Here are several resources to help you in your job search education.

Resume/CV Writing

The difference between a resume and a CV (or Curriculum Vitae), is the length and what information is included. If you have a previous career in healthcare or a field closely related to perfusion you should think about writing a CV that will capture your relevant work experience in a way that will set you apart from other applicants.

Include special skills, such as IABP, Impella, VAD, or ECMO management as a nurse or RT. Include publications in professional journals or newsletters (AmSECT Today) and reference in the correct format. Include military service and leadership training. Do not include the four summers you as a nanny for your neighbor's kids.

If you are unable to fill up two pages of relevant information for a CV, then you should use a resume format and get everything onto one page. No employer wants to read through the information that does not pertain to the job you are applying for and it is painfully obvious when extra "fluff" is added. You want to make your resume stand out, but in a good way. Include your clinical rotation locations, the types of devices you worked with (S5, System 1, Heartmate 3, HVAD, etc.), the number of cases you pumped at that institution, and list the type of procedures (AVR, CABG, HILP, HIPEC, ECMO). Include your name and contact information in the header and format the document in a densely packed but readable way. Use other perfusionist's resumes as resources and model your resume or CV in a similar manner.

Interview Tips

The best tip I can give you for interviews is to practice beforehand.

There are many resources available on YouTube, job sites such as Indeed, or even your prospective employer's website.

Be ready for behavioral interview-style questions (ie: Tell me about a time where you experienced conflict in the workplace and how you handled it). Think about previous experiences in your personal or professional life and how you handled the situations, and how you may handle things differently now. Your employer asks you these questions to quickly get to know you and how you think. The goal of any interview is for the prospective employer to gather enough information to see if this candidate would be a good fit for the team. It's important to be yourself so be calm, practice answering questions, and tell them why you want to be a part of that team.

Salary

How much you should be paid is a tough question to answer and is something that you will have minimal negotiation room with. Many places will give you "credit" for holding contributing degrees, such as a BSN, which will help increase your base pay. I recommend asking your friends in the perfusion community for a general ballpark of a starting salary at their institution. You can use that as a benchmark for other places you are looking to apply to.

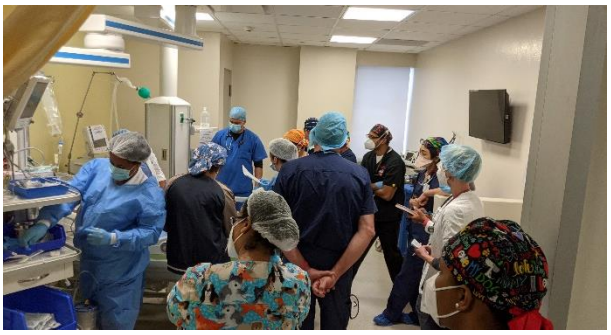
The Department of Defense researches the cost of temporary housing all around the country. This is used as a way to compensate service members and those using the GI Bill to help pay for school. Go to https://www.defensetravel.dod.mil/site/bahCalc.cfm and type in the zip code where you know the salary and select E4 under the pay grade.

Write down the Monthly Basic Allowance for Housing (BAH) for E4 with dependents. That is considered the average monthly cost of living for that area. Do the same for the zip code where you are looking for a job. Then you can brush off the cobwebs from the algebra section of your brain and cross-multiply and divide: (I will use a salary of $100,000 and a BAH of $1240 at a known location and a BAH of $2500 where you would like to move)

$100,000/$1240 X Unknown salary/$2500 = $201,613

So the $201,613 is the equivalent salary at the new location compared to the known location. What can make this difficult is when you are an hourly employee or at a job where a large part of your take-home pay is in call pay or overtime. Then you need to start having some hard discussions about what you want to prioritize in your job search. That is something only you can answer for yourself.

I hope this little bit was helpful to you. There are many factors involved in starting a new career and many of them are very personal to you and your family. I encourage you to apply to many places, practice interviewing, and stay open-minded on the type of institution you want to end up at. There are no perfect jobs out there. Each place will have its own sets of challenges and benefits. Focus on being a good team member and showcase your work ethic and personality to your prospective team and everything will work out in the end.



BACK TO THE STACKS.

Working During Perfusion School.

By Alexis “Lexi" Ripic

I am sure most students would think, “who would want to work during grad school?”

Living in Chicago is very expensive and unfortunately requires some students to work part-time or full-time jobs throughout perfusion school in order to live without taking out more student loans. I was one of those people. I lived and worked in Chicago for a year and a half prior to starting at Rush University’s Perfusion Program. I worked as an ICU nurse in the city. Fortunately for me, my boss was flexible with my schedule and moved me to a day shift position. This enabled me to work on days that we did not have classes, labs, or OR shadowing, which ended up being most weekends. To work throughout the program, you must have a job that is willing to move your shifts around at the last minute if your school schedule changes.

Remembering that school is the most important. You also need to be organized and use your downtime from both school and work to get ahead on all your classwork. Working ahead on assignments and readings was the only way I could get work done on time. Studying at work or whenever possible was how I passed exams. I was not able to set aside a block of time each day to study so I found myself making outlines and notecards at the end of each lesson and studying those when I could. I also found that speaking with my professors about my work schedule ahead of time prevented me from having to change my shifts or lab times more frequently. Classmates also play a role in balancing work and school. My classmates were willing to swap OR shadowing and lab times with me in order to make it on time to work.

This was extremely helpful when we had busy weeks where schedules were consistently changing.

Overall, working and attending perfusion school full-time can be accomplished but you must be the type of person that does not procrastinate.

If you procrastinate, schoolwork will not get done, work will be missed, or exams will be failed. Working ahead on schoolwork and prepping early for exams will help make you successful in your job and school. If you find yourself struggling to balance work and school, be open and honest with your boss and professors so that they can help you.

PERFUSION BLUNDERS.

While mentoring a student on a case with a very demanding surgeon, I had the student flush the cardioplegia up to the field when the surgeon asked. After a few seconds he turned around with a steely-eyed stare and said "This is still warm". I frantically looked around for the problem and quickly realized that the water lines were not hooked up to the cardioplegia myotherm. I sheepishly hooked them up and informed the surgeon that the problem had been solved. I used this as a learning opportunity for myself and my student: **Following the checklist is important!**

Have you ever found yourself in an embarrassing situation?

Help others learn from your hilarious mistake and share your story/advice at the following link…
https://forms.gle/FmrhT1WTYzWhHjiB7n

It’s likely to be shared in a future journal!
(And yes, it can be shared anonymously!)

THE RESERVOIR

▸ AmSECT Student Membership

Student members shall pay dues one time and remain student members while actively enrolled in the perfusion education program.
http://www.amsect.org/page/students

▸ Save The Date - AmSECT 59th International Conference

May 1-4, 2021
Virtual Conference

http://www.amsect.org/p/cm/ld/fid=1681

▸ American Board of Cardiovascular Perfusion

http://www.abcp.org/index.html

▸ AmSECT Student Forum FB page

https://www.facebook.com/groups/481846388509735