

Editorial

“I am an Anesthesiologist”

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Citation: Loskota WJ (2017) Curing the Incurable –“I am an Anesthesiologist” 8-20-16. Anesth Med Pract J 2017:AMPJ-109. DOI:10.29011/AMPJ-109/100009

Received Date: 28 March 2017; **Accepted Date:** 31 March, 2017; **Published Date:** 06 April 2017

I am an anesthesiologist. I am a physician (an MD, medical doctor), who has completed a four year course of medical school, a year of internship, and a 3 year postgraduate residency specialty training program in anesthesiology. My education is 12 years post high school, including 4 years college BA, and 4 years medical school MD, plus 4 years internship and residency in anesthesiology.

I am an anesthesiologist. My job is to keep you alive during surgery. Every time you have an anesthetic, there is a chance that you might die during the procedure. Patients can be unpredictable; they can have unusual responses to anesthetics and the drugs used during surgery. Things go wrong during surgery. My job is to anticipate these problems, avoid them if I can and treat them quickly and effectively when they do occur.

I have a very short time to recognize the problem and to correct it. You can die or become brain dead within 4 minutes, if something serious happens. I have to be always on guard and attentive to multiple systems and factors that may contribute to or cause a serious reaction during anesthesia and surgery. This requires constant awareness and attention to detail; the motto of the American Society of Anesthesiology is “Vigilance”.

If I am fatigued, tired, sick, worried or distracted, I can make errors in judgment or miss a telltale warning sign of impending problems. I may forget to do something important (error of omission) or do the incorrect thing at the wrong time (error of commission). Even in the best of situations, when things appear to be going smoothly, an anesthesiologist has to be on constant guard, as random and unexpected events can occur at any time. When something bad does happen, the anesthesiologist is usually the first person to know, the most likely person to be able to correct the problem and, during a crisis, the person who must be the “calm at the center of the storm”. It is a very stressful, mentally and physically challenging profession. The anesthesiologist is the “last bastion on the abyss of death”.

Anesthesiologists are human and subject to human error and frailty. When I do make a mistake, bad things can happen to patients. Some things can be life threatening or result in death (for-

getting to turn on the oxygen, placing the endotracheal breathing tube in the esophageous instead of the trachea, giving the “wrong” drug, or miscalculating the correct dose, etc.). Anesthesiologists can kill patients quickly and when they don’t kill them, they can leave a patient in a vegetative state or brain dead (not treating low blood pressure, inadequate resuscitation, missing signs of cerebral hypoperfusion or myocardial dysfunction, for example).

Anesthesia is the most important and the most dangerous of medical professions. All anesthetics are poisons: give enough and these drugs can kill a patient (or worse). Give too little drug or too slowly and the patient may not respond in time. Knowing what drug to give, when to give it and how to give it, is all part of the anesthesiologist’s skill set and knowledge base, necessary for the decision making process and patient care.

We have drugs to treat, regulate, adjust or control every organ system in your body. Anesthesiologists use muscle relaxants that stop your breathing and paralyze you so you can’t move. We have drugs that can lower or raise your blood pressure to dangerous levels: so low that your brain doesn’t get blood flow (perfusion) or your heart fails, so high that you literally explode blood vessels and rupture aneurysms in your brain or body (aorta). I can change your body temperature (cooling or heating), blood pressure, heart rate, oxygen supply and demand balance, metabolism, electrolyte and glucose supply. I can adjust your blood volume (blood transfusion or dilution), pH of your blood (and electrolyte composition), clotting (platelets) and healing ability of your blood (cofactors and plasma). I can affect your hydration (fluid resuscitation), kidney function, liver function, lung function, stomach and intestinal activity, breathing ability (resistance to air flow in your lungs, lung volumes, etc.), muscle strength or weakness, and prevent you from shivering uncontrollably or having nausea and vomiting or other complications of surgery that can be life threatening. I can take away your pain and give you relief from the stress and anxiety of surgery. I can affect your memory and your level of consciousness as well as your other brain functions in more subtle and serious ways. There is not one organ system or body function of yours that I cannot control, affect or manipulate during anes-

thetia. While you are under anesthesia and in my care, your life is literally in my hands. It is an awesome responsibility that is not to be performed casually or without respect for the importance of professionalism at all times during patient care.

I am like a Harbor Pilot, who meets larger ocean going ships on arrival and guides them safely to dock in a harbor. There are similar characteristics that make a good pilot and a good anesthesiologist: attention to detail, planning and constant awareness. I have to scan instruments and obtain a sense of what is developing in my patients. I rely upon the information that is shown to me on a number of monitors in the operating room to help me understand and anticipate patient responses to surgery and anesthetic drugs. I must develop a smooth and uneventful course of action to provide the optimum individual patient care needed to successfully complete the surgery. I have to adapt this plan to the ongoing changes and events of surgery as they occur and make my responses promptly and efficiently so that “events” do not become

catastrophes. My role is more than just caring for patients, I also treat them. My goal is to bring every patient out of surgery in better condition than when I first received them. I want to provide a smooth course for the surgeon and an uneventful course for the patient, with happy landings for everyone involved.

I am a physician. I took an oath to “do no harm” and to always put the care and wellbeing of my patients foremost. To be faithful to this oath and the professional responsibility of a physician requires that I perform at my best in every clinical situation. Anything less would put my patients’ very lives at risk. “Fit for duty” is a term that has implicit application to the medical profession. One must be “fit” both physically and mentally, prepared and ready to perform at an optimum level, every day for every case. Anything less is ethically and morally unacceptable. Anything less is unprofessional. I am an anesthesiologist, a physician and a professional. I cannot be anything less.