Family days help loved ones understand anesthesiology’s stressors

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There is a high prevalence of physician burnout, dissatisfaction and poor work-life balance among anesthesiologists. Understanding the role that communication and social support have in well-being, the University of North Carolina (UNC) developed an annual initiative to help family members improve their understanding of anesthesiology. The program fosters better communication and empathy with anesthesiologists’ loved ones outside of work.

“I have twins who are now 7 and it was clear that they didn’t understand what I did when I went to work,” said Susan Martinelli, MD, associate professor of anesthesiology at UNC. “Many adults don’t understand what anesthesiologists do either, and I thought it would be really neat if we could create a program to show our loved ones what it is that we do when we go to work.”

Dr. Martinelli, along with several of her colleagues—including Robert Isaak, DO, Brooke Chidgey, MD, and Fei Chen, PhD—put on the first event, “The Family Anesthesia Experience Day.” It involved all physicians in the anesthesiology department and included kids and adults. Because the event was so well received, the program was updated to become an annual event geared toward new anesthesiology residents and their family and close friends.

Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face. By focusing on factors causing burnout at the system-level, the AMA assesses an organization’s well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.

The AMA Ed Hub™—your center for personalized learning from sources you trust—offers education and CME on a broad range of topics, including professional well-being from the AMA’s STEPS Forward™ open-access modules offering innovative strategies that allow physicians and their staff to thrive in the new health care environment. These courses can help you prevent physician burnout, create the organizational foundation for joy in medicine, create a strong team culture and improve
practice efficiency.

“We’ve had a lot of people in the department ask when we’re going to run the departmental program again because they want to show their families what they do at work,” said Dr. Martinelli.

The departmental event began with all attendees gathered for a welcome and introduction, followed by two tracks that ran simultaneously. These are the different learning experiences provided for children and adults.

**Interactive tasks with kids**

Children between three and 11 years old participated in the kid’s track, which included multiple stations that introduced them to anesthesiology. Set up with a carnival-like atmosphere, children freely moved between stations to spend as much time as they wanted at each area.

Some of the stations included basic airway management, a syringe challenge, touring a procedural suite in the children’s hospital and a “teddy bear hospital” where children brought their stuffed animals needing “medical” attention.

“My husband is a primary care doctor. The kids go to his office for their medical care or even just to visit him. They associated that environment with being a doctor,” said Dr. Martinelli. “Prior to this event, my work was a black box that they couldn’t wrap their minds around.”

“It was so cool to see my kids trying to intubate. I feel like the experience solidified in their mind that I was a doctor too,” she said. “I could come home and tell them what I had done that day and they seemed to have a much better picture in their heads of where I was and what I had been doing.

**Hands-on simulation for adults**

Adults were divided into groups and rotated through three stations. The first station involved a high-fidelity perioperative simulation experience. The second and third stations involved hands-on learning of airway skills—performing bag mask ventilation—and procedural task trainers, such as spinals and epidurals.

The goal was to have the visitors “obtain hands-on experience and to understand the feeling that goes along with some of the stresses that we regularly face at work.”

For example, a nurse anesthetist had a hard day at work and her husband, who is in a nonmedical career, had attended the family day event. The nurse anesthetist went home and was able to have a
conversation with her husband about what had happened during her trying workday.

“Although he didn’t completely understand everything, he had a much better grip on what it was that
she was talking about,” said Dr. Martinelli. “The event really was able to improve their communication.”

**A peek at residents’ days**

UNC also launched an annual family anesthesia day for new residents and their loved ones. This four-
hour event was geared toward adults and began with a day-in-the-life video to show families where
residents spend their time at work. This was followed by didactic learning experiences about
physician burnout, well-being and substance abuse. The event concluded with the same adult
simulation experience that was used for the departmental family anesthesia experience.

The residents’ loved ones are given the names and contact information of leaders of the residency
program.

“After that event, one of my residents came up to me and said, ‘My husband told me that if I didn’t
come talk to you myself, he was going to email you,’” Dr. Martinelli said. “Those are the moments
when you know that we’re really making a difference for people.”