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THE LEADING SOURCE FOR PERIOPERATIVE HEALTH CARE NEWS

COVID-19 a 'Game Changer' for Pediatric Anesthesia

Thomas J. Long, MD, FAAP

Sulpicio G. Soriano, MD, FAAP, FASA

The COVID-19 pandemic continues to impact society and our medical specialty in unpredictable and unprecedented ways (asamonitor.pub/3dIDlmf). Although infants and children are at highest risk of respiratory morbidity with viral pathogens, initial presentations of pediatric COVID-19 appears to be less prevalent and severe than in the elderly (*Pediatrics* 2020; *JAMA Pediatr* 2020).

However, the evolving nature of this pandemic has linked a severe manifestation of this disease that presents with persistent fevers and features of toxic shock syndrome or Kawasaki disease. Pediatric multisystem inflammatory syndrome was

initially characterized in a series from London, U.K. (*Lancet* 2020). Given the evolving challenges of the COVID-19 crisis on pediatric perioperative medicine, the pediatric anesthesia community has responded to this call to duty.

Response to the Crisis

The declaration of the National Emergency on COVID-19 outbreak prompted the American College of Surgeons (ACS) to issue guidance on a "plan to minimize, postpone, or cancel electively scheduled operations, endoscopies, or other invasive procedures" (American College of Surgeons 2020). The Children's Hospital

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NSAIDs in Pain Management: New Clinical Avenues to Explore

Catlin Nalley

The use of nonsteroidal anti-inflammatory drugs (NSAIDs) in pain management is not a new concept, and with a number of over-the-counter options, these agents are a common choice among patients. Given the ongoing opioid crisis and the prioritization of enhanced recovery, there has been a renewed interest in these medications.

"NSAIDs have been used for a long time in pain management," noted Tina



Doshi, MD, MHS, Assistant Professor of Anesthesiology and Critical Care Medicine, Johns Hopkins Medicine.

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Built to Last: ASA Monitor Redesigned to Meet New Challenges, Opportunities

Paul Pomerantz

ASA Chief Executive Officer

I had intended to greet the new ASA Monitor with a column to celebrate this transformed publication.

COVID-19 has changed everything.

Now I mostly want to express the immense appreciation for you and pride I have in your specialty. ASA's members were and are at the forefront of this crisis. You responded at tremendous risk to your own safety, but without hesitation, to the needs of your communities and hotspots throughout the nation. Our members were strongly engaged in leading our nation's response, from Jerome Adams as U.S. Surgeon General, to hospital and practice executives, to academic department chairs, to scientists and innovators, and the two-thirds of you who reported taking an active role in providing critical care.



ASA President Dr. Mary Dale Peterson and the ASA Executive Committee have provided dynamic leadership, helping to direct our attention and resources on the most critical matters. At the

outset, Dr. Peterson was invited to a call with the White House Coronavirus Task Force with other medical society leaders. During the call, she quickly established the specialty as a resource for critical care. Our efforts to meet the nation's needs were noticed at the March 26 task force briefing, where Vice President Mike Pence said:

"Thank you to the American Society of Anesthesiologists and Dr. Mary

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SPECIAL SECTION

Diversity: The Changing Face of Anesthesiology

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