Our Family Tree

As my term as student representative has come to an end, I would like to reflect on something that brings us together, our nurse anesthesia heritage. Change is a constant in our profession, and the words of nurse anesthesia pioneer Sandra Ouellette, ScD (Hon), MEd, CRNA, FAAN, couldn’t be more important: “How do we know where we are going, if we don’t know where we’ve been?” Now lace up your boots and let’s climb our family tree…

Roots

Roots serve many purposes: They anchor the tree into the soil and provide a method for nutrient uptake. The “roots” that have grounded our profession include Sister Mary Bernard, Alice Magaw, Agatha Hodgins, and Anne Penland, to only name a few.

Sister Mary Bernard, a Catholic nun, was the first recorded nurse anesthetist. In the late 1800s, there was an increased need for an anesthesia specialist, as interns training to become surgeons were utilized to deliver anesthesia. An anesthesia specialist would decrease morbidity and mortality, so surgeons looked to Catholic nuns and nurses to fill this need. Nuns did not receive financial reimbursement and dedicated their lives to patient care.

Alice Magaw, known as “The Mother of Nurse Anesthesia,” was hand-picked by Charles and William Mayo, founders of the Mayo Clinic. Magaw’s report, “Observations in Anesthesia,” which documented over 3,000 cases for which she provided anesthesia, was published in the medical journal *Northwestern Lancet*.

The founder and first president of the AANA (1931-33), Agatha Hodgins served as chief nurse anesthetist for Dr. George Crile, was a pioneer of nitrous oxide anesthesia, and opened Lakeside Hospital School of Anesthesia. Hodgins also served in WWI at the American Ambulance Hospital in Paris, France.

Anne Penland became the first nurse anesthetist to serve on the front lines in the Great War. She also educated many UK nurses to deliver anesthesia and kept a diary that describes her anesthetic techniques and events of war. These are the roots that anchored our profession, absorbed knowledge through their practice, and stored this knowledge as nutrients to feed the education of the future.

Trunks

The trunk of a tree is a support system, giving the tree its shape and strength. The trunk of our family tree consists of nurse anesthesia leaders such as Helen Lamb, Ira P. Gunn, Elizabeth Lank, Goldie Brangman, and Sandra Ouellette.

Helen Lamb was known as the “Mother of Anesthesia Education” and was the founder of the Barnes Hospital Nurse Anesthesia Program. Helen Lamb also was an AANA president (1940-42), worked to develop the anesthesia machine, and chaired the AANA Education Committee (1931-39).

Ira P. Gunn, MLN, CRNA, FAAN, who is also known as “the architect of the AANA Council structure” was essential in the creation of the petition to the U.S. Department of Health, Education and Welfare regarding changes to its accreditation criteria in 1974. These actions led to a change in the AANA Bylaws, and members voted in 1975 to create the Council on Accreditation of Nurse Anesthesia Educational Programs and the Council on Certification of Nurse Anesthetists. They voted to create the Council for Public Interest in Anesthesia in 1988.

Elizabeth Lank, CRNA, led the way in the administration of anesthesia for patients with Tetrology of Fallot (TOF) and administered anesthesia for the first ligation of a patent ductus arteriosus. She also demonstrated the use of cyclopropane in TOF cases, was the head of pediatric anesthesia at Boston’s Children’s Hospital, and organized the first Massachusetts Association of Nurse Anesthetists meeting in the Ether Dome.

Goldie Brangman, MEd, MBA, CRNA, AANA president (1973-74), founded the Harlem Hospital Center School of Anesthesia for Nurses in 1949, where she was director for over 38 years. This was the first nurse anesthesia program to welcome diversity into its student body. Brangman recalled that her first class consisted of people who found it difficult to get into schools of anesthesia because of their race or ethnicity.

Sandra Ouellette, AANA president (1988-89) signed the International Federation of Nurse Anesthetist (IFNA) Charter in 1989 in Tüfen, Switzerland, and also served as IFNA president (2004-...
The IFNA is the authoritative voice for nurse anesthetists and nurse anesthesia, supporting and enhancing quality anesthesia care worldwide. Congratulations to Dr. Sandra Maree Ouellette for receiving her honorary Doctorate of Science degree from Wake Forest University for her lifetime contribution to the nurse anesthesia profession.

Branches
The branches of our family tree consist of the entire CRNA body. The CRNAs who safely administer more than 45 million anesthetics to patients each year, who are the primary providers in rural access areas, and who serve our country on the front lines, navy ships, and airway evacuation teams around the globe.

Our CRNA branches have grown from the trunk of the tree, reach toward the sky, and grow our profession higher and higher. CRNAs practice in all settings, as noted by the AANA, “Patients who require anesthesia for surgery, labor and delivery, emergency care, or pain management know they can count on a CRNA to stay with them throughout their procedure, advocate on their behalf, and provide high-quality, patient-centered care.”

CRNAs are the branches that lead to the education of the future, whether serving as mentors, educating in didactic and clinical arenas, or through sponsorship. CRNAs are the force that primes and molds the future of the profession.

Leaves
SRNAs are the leaves that grow from the branches, learning from CRNAs, supported by the trunks, and grounded by the roots. As leaves, we absorb sunlight as the branches push us closer and closer to the sun. Sunlight is knowledge. Like chlorophyll converting the sunlight into energy, our brains soak up and convert knowledge into autonomous nurse anesthesia practice.

Collectively, we form the crown of the tree, as we are the future of the profession. Just as in photosynthesis, we serve as gas exchangers of our profession, bringing new ideas, projects and perspectives.

Forest
“Family, like branches on a tree, we all grow in different directions, but our roots keep us all together.” We may work in different care models, different states, different specialties, from obstetrics to pediatrics, but our roots remain the same. Roots that have provided our ability to practice, to be reimbursed, to have a profession, to have our national association, to have an international federation, and to love and support one another.

May we not forget where we came from, the roots that nourished us, the trunks that supported us, the branches that supplied us, and the leaves we will help grow, the forest that we make, the storms we stand through, and the prosperity our future holds.

References

Acacia Tree, Maasai Mara – Kenya
Visit KenyaRelief.org for more information on how you can rekindle hope for a new generation in Kenya. Thank you Steve James, CRNA. You are a gift to this world.