

Face to Face with Sapna Kudchadkar, MD

We're pleased to have the opportunity to ask Sapna Kudchadkar some questions not only as the new Associate Editor of the PCCM Journal but also as an attending physician in both the PICU and operating room at Johns Hopkins Hospital, Baltimore, USA.

Can you tell us about your first interaction with WFPICCS?

WFPICCS played a critical role in the earliest stages of my career! Early on I decided I wanted to study sleep disturbances in the PICU. I realized that it would be important to characterize the current state of practice surrounding sedation, sleep promotion and delirium prevention in order to design a prospective study. I reached out to WFPICCS leadership to find out options survey dissemination to reach an international sample. WFPICCS sponsored the survey on their website and sent it to all of their member societies for distribution- garnering 341 respondents from 5 continents, providing key information to guide PICU research in these areas.

As an Associate Editor for Social Media, what are some of your goals for the journal?

My primary goal is to ensure that PICU research is being disseminated effectively and efficiently, capitalizing on the incredible power of social media to create an engaging online community in our field. PCCM is a journal for the entire multidisciplinary team. Therefore, social media creates a unique opportunity to engage all team members in addition to patients/families on one platform. I am working with the PCCM Editorial Board to enhance the peer-review process to incorporate social media, including submission of tweets with the manuscript for peer review. Creating a tweet that succinctly states the "take-home" point of a study will also introduce non-users of social media to the potential benefits for their practice/research. It's cool to see a tweet about your research out in the Twittersphere!

Finally, as PCCM is the official journal of WFPICCS, I'd like to foster increased enthusiasm, and advocacy for the WFPICCS mission, including dissemination of info about WFPICCS congress and other important initiatives.

Is social media changing the way PICU professionals are being engaged?

Yes, for sure! Thanks to social media and the creation of a hashtag dedicated specifically to pediatric critical care (#PedsICU), we are not only

increasing engagement and conversation among PICU professionals but also seeing more crosstalk between specialties, such as adult critical care, emergency medicine, surgery, cardiology...the list goes on! Much of PICU research is relevant to many specialties and vice versa, so this has been a great thing to see.

With the constant chatter on social media, how is it possible to create a space for people to tune into meaningful exchange?

If you're new to using social media professionally, I think it's important to start simple. Open an account on Twitter, for example, with a professional username (Mine is @SapnaKmd) and just...watch. Follow as few or as many accounts as you like. You can get a feel for what's out there, what's trending, and retweet things of interest to you. Once you've feel a bit more comfortable, you can start sending original tweets. There are tools you can use to keep an eye on the feed from a specific hashtag, such as #PedsICU. For example, in addition to #PedsICU I follow #PedsAnes, #PedsPain, #ICURehab, #ICUDelirium & #sleep given my personal research interests.

You have started a new initiative on twitter with the #PedsICU hashtag, what do you hope to achieve and what has the response been like so far?

#PedsICU originated within the AAP Section on Critical Care in an interest to increase member engagement and cohort all tweets relevant to pediatric critical care in one place for easy dissemination and reference. We registered the hashtag on Symplur.com to follow the analytics. Over the last year, the response has grown exponentially as we promoted engagement at conferences and now through PCCM. We are currently doing a detailed analysis, but there have been over 17 million impressions and 10,000 tweets with #PedsICU since March 2016!

What is your message to young PICU professionals just starting out and looking for publishing venues for their work?

Mentors are outstanding resources for suggestions on publishing venues. I always advise mentees to search for similar articles and keywords on Medline, Embase, etc. to see which journals have accepted work in a similar area as a start. You may find journals that you hadn't considered or reach a specific audience of interest. Obviously if the work is relevant to pediatric critical care we are happy to review the submission at PCCM!

What is the number one thing an author can do to increase their chances of being accepted for publication?

The first step is to make sure that the topic and content of your manuscript are relevant to pediatric critical care, timely, and has sound methodology and strong scientific reasoning and argumentation. These are the primary criteria reviewers consider. But not to be underemphasized—read the author instructions thoroughly! Also, have several people including those not on the study team review your manuscript. It's often helpful to have a “fresh” set of eyes to critique your work and ensure that the overall message of the manuscript is relayed efficiently and effectively.

Can you give us an idea of what changes and challenges will affect PICU research in the next few years?

In my opinion, one of the major challenges of pediatric critical care research is the extraordinary heterogeneity in our patient population. This in itself is a challenge for study design and recruitment. Funding for research is an ongoing challenge that impacts us all, with a critical need to continue to train clinician-scientists in pediatric critical care to move the field forward. There are outstanding programs across the globe making this happen, and we need to maintain momentum and grow as our patient population becomes more complex.

The primary focus of your research is sleep in critically ill children and you hope to make sleep promotion a priority in critical illness. Is there support from the PedsICU community for this effort?

I've been thrilled with the response from the PICU community—sleep promotion and the importance of sleep hygiene is receiving more attention each day, and is a natural component of pediatric ICU liberations efforts globally. Sleep promotion is key to optimizing sedation, preventing and treating delirium, and increasing early mobilization, which make up the 'ABCDEF Bundle'. In fact, SCCM currently has 9 US centers engaged in a Pediatric ICU Liberation Collaborative (www.iculiberation.org) and are collecting data to inform future multicenter studies given the pediatric data in this area is just emerging.

Why did you choose to work in Pediatric Critical Care Medicine and Pediatric Anesthesiology?

Simply put—I love being in the OR and I love being in the PICU! So much of what I do in each translates to my practice in the other. Pediatric anesthesia gives me the opportunity to care for healthy children in addition to PICU patients. There's also a lot of continuity—I get to take care of a child in the OR admitted to the PICU after major surgery, and then take care of them in the PICU when I'm on service or on call.

What is life like for a pediatric anesthesiologist both in a PICU and operating room? What are the challenges for this specialty? What part of your job gives you the most satisfaction?

It's challenging and fun! I did a '20 questions' on this topic a few years ago and every single bit is still true. <https://www.studentdoctor.net/2013/01/20-questions-sapna-kudchadkar-md/>

Will you be attending WFPICCS 2018 in Singapore, June 9-13? What do you gain from attending a WFPICCS congress both on a professional and personal level?

Yes! First, WFPICCS 2018 is an awesome opportunity to get up-to-date on all of the amazing work that is happening internationally in pediatric critical care and my own areas of research interest. I hope to continue to increase social media engagement at the meeting and educate attendees about the power of social media for their own practice. Finally, and often the best part, I hope to meet many new PICU colleagues and catch up with friends!

When I'm not on social media, in the operating room, or conducting research, I like to...

Spend time with my family! My kids are 8 and 11, so it's a very fun age and we have discovered a new love for skiing. Both kids are basketball fanatics, so there's a lot of exciting games to watch! Always working to optimize work-life balance, which is challenging, but so worth it!

Thanks Sapna for taking the time out of your busy schedule to speak with us!