CORE TOPICS Birmingham

Friday 12 October 2018

Organisers: Drs Naginder Singh, Laura Tasker, Nick Murphy and Harsha Mistry; Birmingham

Location: Novotel Birmingham Centre, 70 Broad Street, Birmingham, B1 2HT

Programme

09:00  Registration

09:25  Welcome & introduction
       Drs Nick Murphy & Laura Tasker, Birmingham

09:30  Top 5 anaesthesia and ICU publications in the last year
       Dr Jaimin Patel, Birmingham

10:00  An update on anaphylaxis in anaesthesia 1B01, 2A06, 1I01, 2C04
       Dr Surendra Karanam, Consultant Immunology & Allergy, City Hospital, Birmingham

10:30  Discussion

10:45  Tea & coffee

11:15  Optimising checklist design to improve performance 1I02, 1I03, 1I05
       Dr Damian Keene, Birmingham

11:45  Major incidents: planning and management 2A02, 2A05, 2A11
       Dr Rob Moss, Birmingham

12:15  Discussion

12:30  Lunch

13:30  Blocks that every anaesthetist should know 2G01, 2G02, 2G03, 2G04, 2E01
       Dr Tom Bowden, Birmingham

14:00  Adoption and usage of videolaryngoscopy in a large district general hospital 1C01,1B02, 2A01
       Dr Aidan Norman, Worcester

14:30  Discussion

14:45  Tea & coffee

15:15  Practical considerations for transfer of the sick child 3A11, 2D07, 2D01
       Dr Andrea Cooper, Consultant Paediatrician, Birmingham Children’s Hospital

15:45  The pregnant patient undergoing non-obstetric surgery 1A01, 2A09, 3B00
       Dr Richard Pierson, Dudley

16:15  Discussion

16:30  Close of day
Learning Objectives

Top 5 anaesthesia and ICU publications in the last year Dr Jaimin Patel, Birmingham
1. Fluids in Anaesthesia.
2. Labor analgesia.
4. blood pressure measurement in major surgery.
5. Oxygen therapy in the peri-operative setting.

An update on anaphylaxis in anaesthesia Dr Surendra Karanam, Consultant Immunology & Allergy, City Hospital, Birmingham
1. Recognition of anaphylaxis.
2. Diagnostic tests for anaphylaxis.
4. Referral to allergy clinics.

Optimising checklist design to improve performance Dr Damian Keene, Birmingham
1. Team leadership and resource management.
2. Human factors in anaesthetic practice.
3. Quality improvement.
4. The effect that checklist design can have on the efficiency of use.
5. Importance of question construction.
6. The effect length of checklists can have on performance.

Major incidents: planning and management Dr Rob Moss, Birmingham
1. Principles of assessment and management of major trauma (including burns).
2. Team leadership and resource management.
3. Quality development.
4. Understanding likely demands associated with major incidents.
5. Understanding principles and processes required to cope with major incidents.

Blocks that every anaesthetist should know Dr Tom Bowden, Birmingham
1. Indications, benefits and risks of RA.
2. Principles of performing local, regional and neuraxial techniques.
3. Use of nerve/plexus location techniques.
4. Recognition and management of side effects and complications of regional anaesthesia.
5. Advanced management of perioperative pain.

Adoption and usage of videolaryngoscopy in a large district general hospital Dr Aidan Norman, Worcester
1. An appreciation of the variety of devices available.
2. An appreciation of the increasing use of the videolaryngoscope resulting in practice change.
3. An appreciation of some of the advantages of videolaryngoscopy.
4. An appreciation of some of the disadvantages of videolaryngoscopy.
5. An appreciation of some of the issues involved in introducing novel devices.

Practical considerations for transfer of the sick child Dr Andrea Cooper, Consultant Paediatrician, Birmingham Children’s Hospital
1. Assessment and initial management of the critically ill child: common neonatal collapse presentations; worrying Paediatric signs; induction of Anaesthesia for intubation of the child in cardiac failure.
2. Team working between DGHs and PIC retrieval Teams: what makes a good referral? Preparing for Retrieval team arrival,
3. Transfer medicine: how to organise and carry out a time critical transfer of a child.

The pregnant patient undergoing non-obstetric surgery Dr Richard Pierson, Dudley
1. To revise the anatomical and physiological changes which impact on the anaesthetic management of pregnant patients.
2. Consent and monitoring issues.
3. To understand the risks to mother and fetus when undergoing non-obstetric surgery, and how to mitigate these risks.
4. Review the management of common perioperative and anaesthetic drugs in pregnant patients.
5. To review the input of the multidisciplinary team.

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