UNDER GRADUATE ANESTHESIA COURSE (ORIENTATION AND OUTLINE)

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course aim

To graduate medical students having the basic knowledge & clinical skills to deal with the peri-anaesthetic measures for simple surgical procedures.

Welcome

- Welcome to this two week introduction to Clinical Anesthesiology.
- ► You will learn the use technical and analytical skills to look after patients in many situations.

Goals and LEARNING objectives

• Academic and Clinical skills:

- Preoperative evaluation and clinical skills
- Patient safety
- Airway and ventilation
- Fluid and volume resuscitation, blood transfusion
- Pharmacology of anesthetic drugs
- Principles of general anesthesia
- Principles of regional anesthesia
- Pain management
- Monitoring in anesthesia
- Anesthesia emergencies (intraoperative, Post operative period)



Specific Objectives:

- ► Know the role of anesthetist in preoperative assessment and the implications of pre-existing disease for the patient who is to undergo anaesthesia.
- ▶ Describe the basic airway and circulatory management in patients under anaesthesia including resuscitative measures as well as post-operative care.
- Recognize the clinical application of physiology and pharmacology in anaesthesia.
- Manipulate some anaesthesia-related problems and their management.
- Acquire some clinical skills in patient assessments and to demonstrate competence in the performance of basic technical procedures related to anesthesia practice

Preoperative evaluation and Clinical skills

- Students should be able to:
 - Obtain a relevant medical, surgical and anesthetic history and examination on the patient. (Airway assessment, and factors predisposing to difficult intubation)
 - Provide a summary and formulate a relevant problem list.
 - Understanding of the indications for both routine and special pre-operative investigations.
 - Understand the basics of an anesthetic plan and how it relates to the clinical work-up, ASA classification of preoperative physical status.



Clinical Objectives for Medical Students in (045) Anesthesia

At the end of the course the student will be able to understand

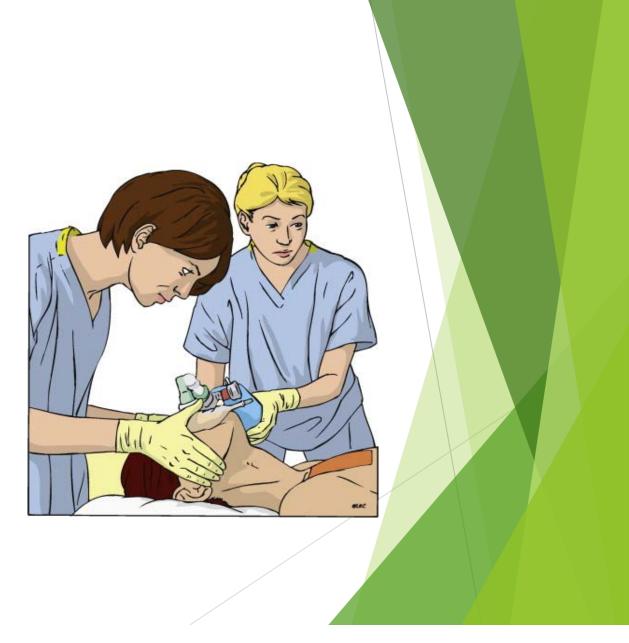
- Pre-anesthesia assessment and evaluation
 - 1. History from patient
 - 2. Open iSHi System to get information and investigation.
 - 3. Interpretation of preoperative data relevant to anaethetic plan.
 - 4. Consultations
- Orientation with anesthesia equipment in O.R
 - 1. Anesthesia machine
 - 2. Anesthesia circuits
 - 3. Laryngoscopes tubes LMA Airways
 - 4. Epidural set and Spinal set
 - 5. Monitors- Anesthesia Record
 - 6. Anesthetics Drugs- I.V. Inhalational and Muscle Relaxants
 - 7. Resuscitation Drugs During Anesthesia
 - 8. fluids (Crystalloids & Colloids Fluids)





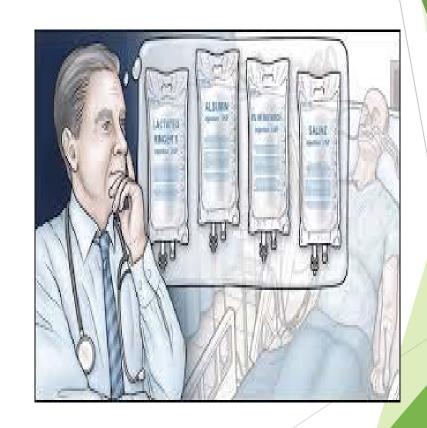
Airway and ventilation

- Know the anatomy of the airway and basic airway assessment.
- Be familiar with the various techniques of airway management and equipment involved in routine and difficult intubation.
- Review basic respiratory physiology in the context of anesthesia.
- Be familiar with the principles of manual and mechanical ventilation.



Fluid and electrolyte balance

- Know the main principles of:
 - Fluid replacement and volume resuscitation (crystalloid, colloid, blood transfusion)
 - Electrolyte and acid-base balance



Pharmacology of anesthetic drugs

- AQUIRE a basic knowledge of COMMONLY
 USED DRUGS IN ANESTHESIA
 - Intravenous agents (sedative/ hypnotics, narcotics, muscle relaxants)
 - Volatile agents.
 - Local anesthetics



Principles of general Anesthesia

- Understand the principles of general anesthesia and the delivery of volatile anesthetics.
- Have a basic understanding of the structure, function and safety features of the anesthesia machine.



Regional anesthesia and Pain management

- Be familiar with the concept of local and regional anesthesia and commonly used local anesthetic agents.
- Be familiar with perioperative pain management techniques and drugs.
- Ultra-sound guided peripheral nerve block
- Local anesthesia toxicity



Monitoring In anesthesia

Be familiar with the BASIC international monitoring standards and be able to interpret basic information gained from the monitoring of:

- Blood pressure
 - Pulse oximetry
 - ❖ ECG
 - Capnography
 - Ventilation (parameters, spirometry)
 - Temperature
 - Invasive pressure monitoring (CVP, arterial line, pulmonary artery catheter)
 - Neuromuscular functioning monitoring
 - Bispectral index
 - Non invasive advance monitoring cerebral oximetry , pressure variation index , non invasive hemoglobin monitoring



Intra and post operative management

- Learn basic management of common intra-operative problems such as:
 - Hypoxia, hypercarbia,
 - Hyper/hypotension, cardiac arrhythmias,
 - High and low airway pressure alarm.
- Understanding of the requirements for safe emergence from general anesthesia and common problems and complications in the PACU
 - Pain
 - Post -op nausea and vomiting, pain etc

Hypoxemia

 $PaO_2 < 80 \text{ mmHg (room air)}$ $PaO_2 = 100-(age/4)$

แบ่งตามระดับความรุนแรง

- ➤ Mild hypoxemia: PaO₂ 65-79 mmHg
- ➤ Mod hypoxemia: PaO₂ 50-64 mmHg
- ➤ Severe hypoxemia: PaO₂ < 50 mmHg

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Vascular access

- Indication
- Types and size of intravenous Cather
- Intravenous compartments
- ▶ Steps for IV Cather insertion complications and complication related
- Central venous access, technique anatomical and Ultra sound giuded centra- line insertion
- Indication , contraindications
- Complication related
- Arterial line catheterization indication , contraindication complication

The anesthetic plan

Code of conduct

1. Professionalism and Respectful Workplace

- 1. All students are expected to demonstrate respect for the patients and staff encountered during the rotation.
- We also expect all students to be treated with respect during their rotation.
- 3. Health has clear policies regarding:
- Maintenance of patient confidentiality.
- 2. Mutual respect in the workplace.



The anesthetic plan

Type of anesthesia

General

Induction

Airway management

Maintenance and analgesia

Muscle relaxation

Sedation

Supplemental oxygen

Agents

Local or regional anesthesia

Technique

Agents



The anesthetic plan

Intraoperative management

Monitoring

Positioning

Fluid management

Special techniques

Postoperative

Oxygen therapy

Pain control

Complication management

Intensive care

Postoperative ventilation

Hemodynamic monitoring



Stages of the Peri-Operative Period

Pre-Operative

From time of decision to have surgery until admitted into the OR theatre.



Stages of the Peri-Operative Period

Intra-Operative

► Time from entering the OR theatre to entering the Recovering Room or Post Anesthetic Care Unit (PACU)



Stages of the Peri-Operative Period

Post-Operative

Time from leaving the PACU until time of follow-up evaluation (often as outpatient)



Code of conduct

Professionalism

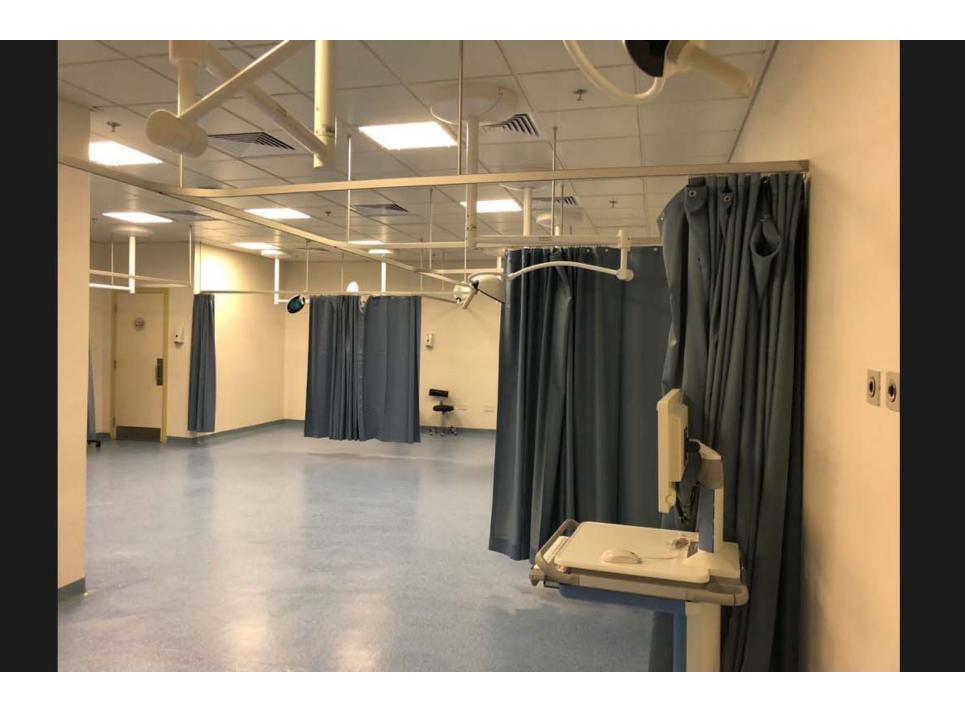
- Attendance and punctuality are mandatory.
- Students are expected to be aware of the limitations of their role in the operating room and to be diligent in the OR environment.

Code of conduct

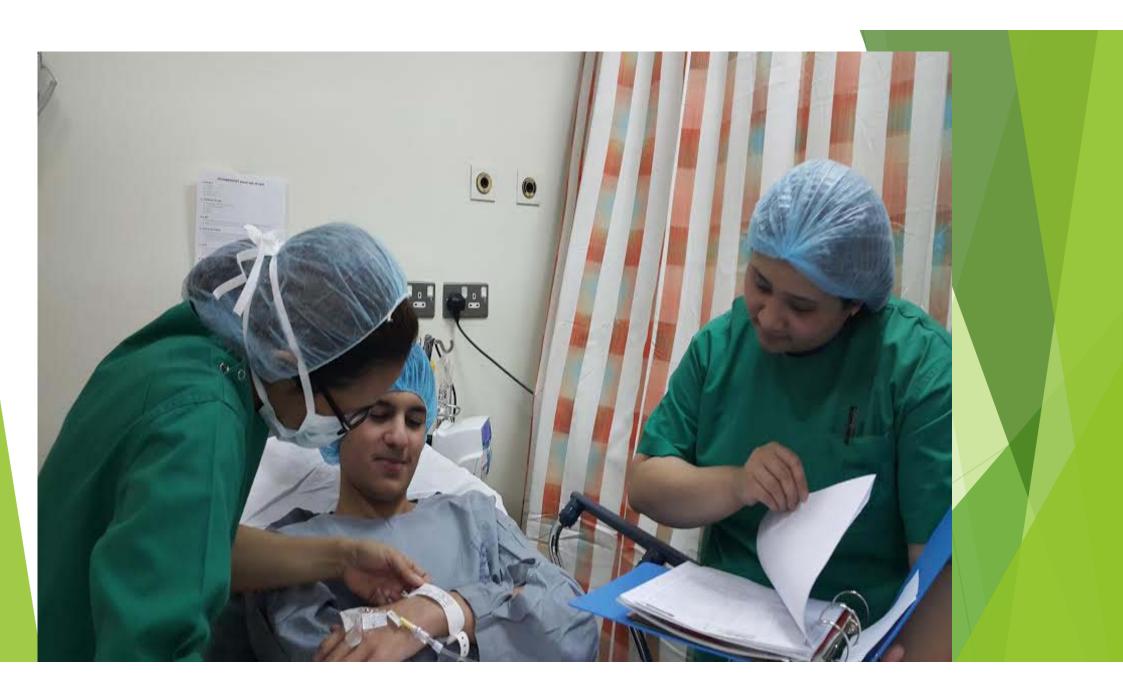
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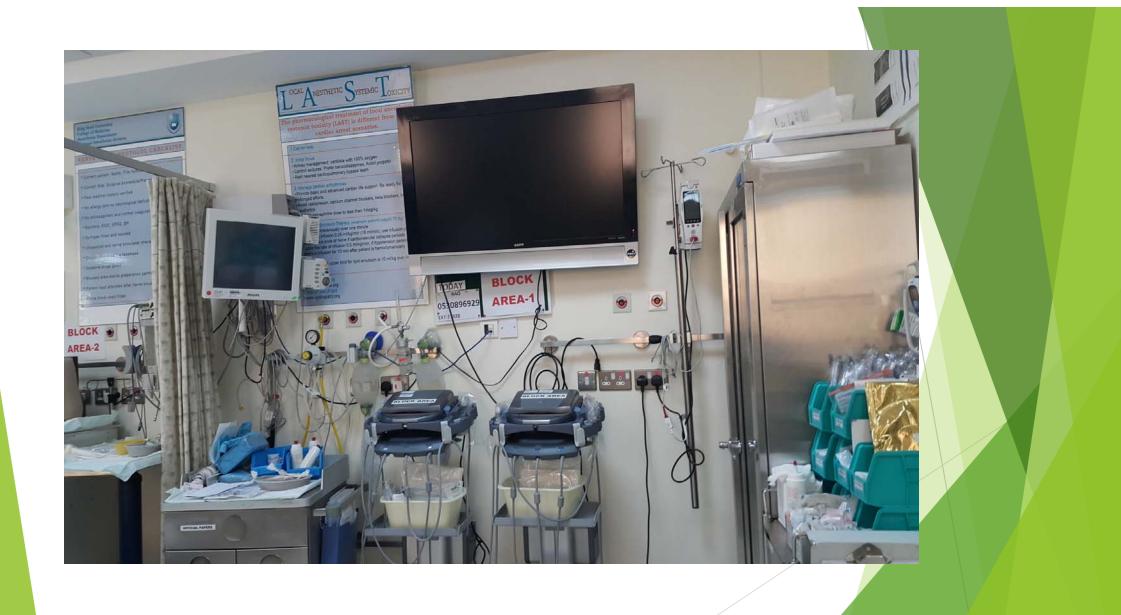
- When in the OR, students must respect the rules of the sterile environment and wear greens, mask, gloves and bootes.
- If you have not previously been in the OR, please notify us so we can make you aware of appropriate protocol.
- You are expected to bring your stethoscope to the OR. Other medical instruments are not mandatory.

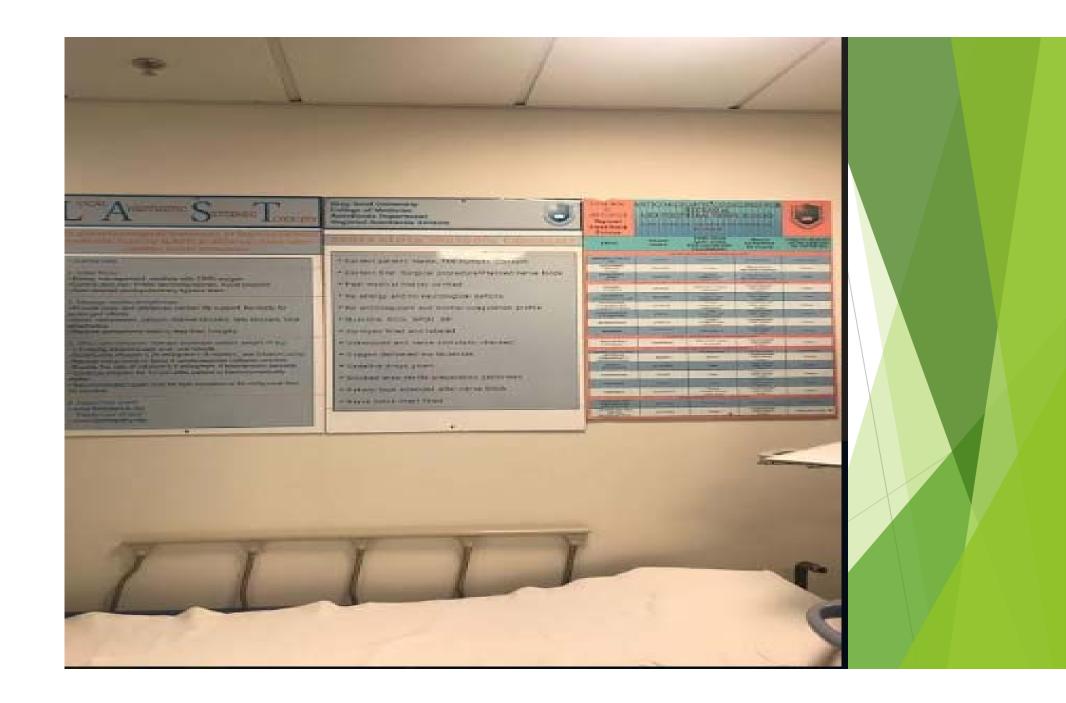












LEARNING RESOURCES Anesthesia course

- Exposure to anesthesia learning in the following areas:
 - Adult OR
 - Pediatric OR
- Teaching at the bedside in the OR:
 - Clinical teaching modules to cover basic anesthesia knowledge.
 - Enabling objectives for technical skills.
 - Case based clinical teaching
- Independent learning:
 - Reference material- texts and web-based
- Simulator based learning:
 - Low and high fidelity simulation to facilitate technical skills, crisis resource management, and critical anesthesia events.

Key Success Factors

- ► Attendance
- ► Realistic Expectations
- ► Maintains communication with the faculty member
- ► Good organizational skills
- ► Expect to work beyond the classroom
- ► Stay on track/understand commitment required
- ► Ask questions

Books recommended

Anaesthesiaat a Glance

Julian Stone

Consultant Anaesthetist

Great Western Hospital NHS Foundation Trust

Swindon, UK;

Senior Clinical Lecturer University of Bristol, Bristol UK

William Fawcett

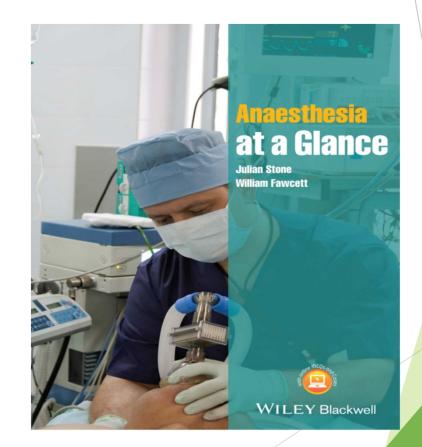
Consultant Anaesthetist

Royal Surrey County Hospital NHS Foundation Trust;

Senior Fellow

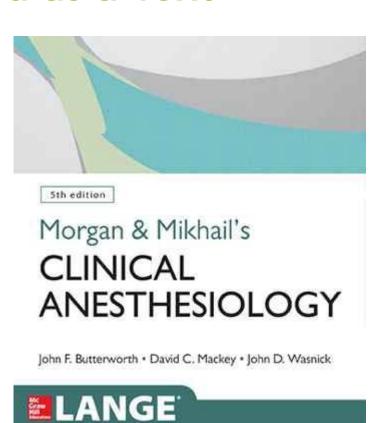
Postgraduate Medical School, University of Surrey

Guildford, UK



Books recommended as a Text

 Morgan and Mekhails clinical anesthesiology 5th Edition.
 John Butterworth,
 G. Morgan,
 John Wasnick,
 Mikhail Maged,
 David C. Mackey,
 Hans-Joachim Priebe



End of the course ASSESMENT

- **▶ LOG BOOK SUBMISSION**
- ► OSCE EXAMINATION
- **▶ WRITTEN EXAMINATION**

