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### **Special Article**

Thomas Dent Mütter, M.D. (1811 to 1859): Exemplar of Expertise 

Thomas Mütter, M.D., a pioneering surgeon in Philadelphia, Pennsylvania, championed anesthesia, asepsis, and education as essential pillars of clinical medicine. He remains a model clinician educator in his extraordinary advocacy for safe and compassionate patient care.

# **Perioperative Medicine**

# **CLINICAL SCIENCE**

 $\oplus igodoldsymbol{\diamond}$  Risk Stratification Index 3.0, a Broad Set of Models for Predicting Adverse Events during and after Hospital Admission

S. Greenwald, G. F. Chamoun, N. G. Chamoun, D. Clain, Z. Hong, 

From a dataset of more than 9 million patients, a risk score based on administrative claims history was developed to provide individualized risk profiles at hospital admission that may help guide patient management. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

# **BASIC SCIENCE**

- ⊕ △ Local Anesthetic Cardiac Toxicity Is Mediated by Cardiomyocyte Calcium Dynamics
  - J. Plakhotnik, L. Zhang, M. Estrada, J. G. Coles, P.-A. Lonnqvist,

This study used human induced pluripotent stem cell-derived cardiomyocytes and found significantly altered cardiomyocyte calcium dynamics with bupivacaine but not ropivacaine. Calcium supplementation restored normal cardiomyocyte rhythm to bupivacaine-treated tissue. Calcium channel blockade selectively worsened bupivacaine cardiotoxicity. This study used a rat model (female) of cardiac toxicity and found that pretreatment with calcium improved survival of bupivacaine-treated rats and reduced survival of ropivacaine-treated rats. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

# **Critical Care Medicine**

# **CLINICAL SCIENCE**



⊕ ♦ ◇ Validation of a Deep Learning–based Automatic Detection Algorithm for Measurement of Endotracheal Tube-to-Carina Distance on Chest Radiographs

> M.-H. Huang, C.-Y. Chen, M.-H. Horng, C.-I. Li, I.-L. Hsu, C.-M. Su,

A deep learning-based algorithm developed using portable chest radiographs from 1,842 adult intubated patients can identify the endotracheal tube tip, carina, and endotracheal tube tip-to-carina distance with a measurement error of 2.6 mm, 3.6 mm, and 4.0 mm, respectively. The algorithm performed as well as, if not better than, 11 critical care clinicians in identifying these portable chest radiograph landmarks. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

<ul> <li>Refers to This Month in ANESTHESIOLOGY</li> <li>Refers to Editorial</li> </ul>	<ul> <li>See Supplemental Digital Content</li> <li>CME Article</li> </ul>	Readers' Toolbox Othic article has a Visual Abstract	
র্ব্য্য) This article has an Audio Podcast	This article has a Video Abstract	<b>OPEN</b> This article is Open Access	



ON THE COVER: Risk stratification helps guide appropriate clinical care. In this issue of ANESTHESIOLOGY, Greenwald et al. developed and validated a broad suite of predictive tools based on administrative claims history to provide individualized risk profiles at hospital admission. In an accompanying editorial, Glance et al. discuss the role of prediction models in healthcare and how journals can disseminate valid prediction models to clinicians. Cover illustration: A. Johnson, Vivo Visuals Studio.

- Greenwald et al.: Risk Stratification Index 3.0, a Broad Set of Models for Predicting Adverse Events during and after Hospital Admission, p. 673
- Glance et al.: Prediction Algorithms: Is Peer Review Enough?, p. 661

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### **BASIC SCIENCE**

⊕ ◇ Post–cardiac arrest Sedation Promotes Electroencephalographic Slow-wave Activity and Improves Survival in a Mouse Model of **Cardiac Arrest** 

T. Ikeda, E. Amorim, Y. Miyazaki, R. Kato, E. Marutani, M. G. Silverman, 

Sedation with propofol or dexmedetomidine, started at the time of return of spontaneous circulation, results in better survival and neurologic outcomes than no sedation in an animal model of cardiac arrest. Sedation was associated with increased slow-wave electroencephalogram power and normalization of electroencephalogram patterns, which were positively correlated with neurologic outcome. These beneficial effects are not seen if the sedation is commenced an hour after recovery of spontaneous circulation. SUPPLEMENTAL DIGITAL CONTENT IS AVAILABLE IN THE TEXT

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 Radiographic Demonstration of Hypoxic Pulmonary Vasoconstriction
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R. L. Royster, S. D. Johnson, N. D. Krupp, T. P. Sullivan
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Review of Postoperative Respiratory Depression: From Recovery Room to General Care Unit T. N. Weingarten, J. Sprung ......735

Contemporary evidence suggests that episodes of respiratory depression

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