A-15 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Continuous Interscalene Brachial Plexus Block at Home after Major Shoulder Surgery Karen C. Nielsen, M.D.; Susan M. Steele, M.D.; Stephen M. Klein, M.D.; Ricardo S. Pietrobon, M.D.; Roy A. Greengrass, M.D., Anesthesiology, Duke University Medical Center, Durbam, NC, United States. Home discharge after shoulder surgery with a continuous interscalene block was done with good efficacy and few side effects.

A-16 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Pre-Operative Hemoglobin Results in Same Day Surgical Candidates Ronald P. Olson, MD, Anesthesiology, Duke University, Durbam, NC, United States. This study would suggest that there is no indication for preoperative hemoglobin testing in patients who appear healthy on clinical exam and are undergoing procedures with low risk for hemorrhage.

A-17 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Low-Dose Ketamine Prevents Movements during Propofol Anesthesia in Spontaneously Breathing Outpatients *C. Ori, MD; F. Innocente, MD; S. Veronese, MD; R. Poli, MD, Anesthesiology Dpt, University of Padova, Italy.* Addition of low-dose ketamine to propofol anesthesia decreased total dose of propofol and incidence of involuntary movements while allowing spontaneous ventilation.

A-18 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Statistical Process Control as Applied to the Preoperative Evaluation Process Brian M. Parker, M.D.; Dorothy Conrad, B.A.; Walter G. Maurer, M.D., Department of General Anesthesiology, The Cleveland Clinic Foundation, Cleveland, OH, United States. Control chart theory was used to analyze patients not cleared for surgery in our preoperative anesthesia clinic before and after a process intervention.

A-19 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Comparison of Bisulfite-Containing Propofol Vs Diprivan<sup>TM</sup> for Induction of Anesthesia X. Shao, MD; H. Li, MD; P.F. White, PhD, MD; K.W. Klein, MD, Dept. Anesthesiol. & Pain Mgmt, UT Southwestern Med. Ctr., Dallas, TX, United States. The generic formulation of propofol is a cost-effective alternative to Diprivan.

A-20 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Anesthesia for Cardioversion Using Sevoflurane: Comparison with Propofol Francois Simonnet, MD; Mustapha Doghmi; Valerie Cluytens; Remi Coves; Jean E. Bazin, MD, PhD, Dept of Anesthesiology, CHU, Clermont-Ferrand, France. Inhalational Anesthesia with Sevoflurane is suitable for cardioversion, with less hemodynamic repercussions and more rapid recovery than propofol.

A-21 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Morphine Vs. Fentanyl Analgesia Following Outpatient Laparoscopy Karen C. Spaccarelli, M.D.; Yohannes B. Getachew, M.D.; Ninos J. Joseph, B.S.; M. Ramez Salem, M.D., Dept Anesth, Illinois Masonic Med Ctr, Chicago, IL, United States. Fentanyl and morphine analgesia were equally effective following outpatient laparoscopy in terms of pain score, sedation grade, incidence of nausea/vomiting or time to discharge.

A-22 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Recovery after Neuromuscular Block with Rapacuronium: Spontaneous Vs Edrophonium-Assisted Jun Tang, MD; TianJ Zhou, MD; Paul F. White, PbD, MD; Julian Gold, MD; Ronald H. Wender, MD, Anesthesia, Cedars-Sinai Medical Center, Los Angeles, CA, United States. Rapacuronium can be readily antagonized with edrophonium during propofol or sevoflurane anesthesia, and its spontaneous recovery was more rapid with propofol.

A-23 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) A Survey of Preoperative Testing Requirements E. Michael Tarazi, MD, MS; Rene Ramirez, BS; Kiarash Davoodian, BS, Department of Anesthesiology, Albany Medical College, Albany, NY, United States. Anesthesiologists are ordering pre-operative tests based on specific patient indications. The H & P findings were found to be a universal indicator of all tests ordered.

A-24 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Is Spinal Anesthesia Preferable to General Anesthesia for Oocyte Retrieval? H. Toon, MD; P. Kane, RN; B. Sweitzer, MD, Anesthesiology, MGH, Boston, MA, United States. SA is cost-saving without compromising patient satisfaction. Our study found no difference in complications, OR or RR times between SA and GA for oocyte retrieval and suggests an increased pregnancy rate in patients having SA.

A-25 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Ketamine/Midazolam Is Not an Appropriate Preinduction Combination in Pediatric Ambulatory Surgery Susan T. Verghese, MD; Ramesh I. Patel, MD; Raafat S. Hannallah, MD; Urs E. Ruttimann, PbD; Kantilal M. Patel, MD, Anesthesiology, Children's National Medical Center, Washington, DC, United States. IM Ketamine/Midazolam combination is inappropriate for preinduction in pediatric ambulatory surgery.

A-26 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Renal Dysfunction Following Peripheral Vascular Surgery Elamana Vijayakumar, MD, FRCA; Jae-Woo Lee, MD; Ben Kaon, MD; Senthilkumar Sadbasivam, MD; Kyung W. Park, MD, Anesthesiology, Beth Israel Deaconess Med Ctr, Boston, MA, United States. Hypertension, diabetes, a combination and congestive heart failure seem to predispose to renal dysfunction following peripheral vascular surgery.

A-27 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Pain on Injection of Thiopental and Propofol: Too Frequent to be Ignored K. Visser, MD; E. Hassink, PhD; G. Bonsel, MD PhD; C. Kalkman, MD PhD, Anesthesiology, Academic Medical Center, Amsterdam, Netherlands. Pain on injection of propofol, but also after thiopental, is remembered by a considerable proportion of patients 24 hours postoperatively. Benzodiazepine premedication appears to suppress memory of mild but not of severe pain.

A-28 Room F, 10/16/2000 2:00 PM - 4:00 PM (PS) Auricular Acupuncture is a Potential Treatment for Preoperative Anxiety Shu-Ming Wang, M.D.; Lina Kulkarni, M.D.; Zeev N. Kain, M.D., Department of Anesthesiology, Pediatrics, and Child Psychiatry, Yale University School of Medicine, New Haven, CT, United States. This study demonstrates that auricular acupuncture is a potential treatment for anxiety.