

Practice Management & Patient Safety

A-1109 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Hemodynamic and Respiratory Changes in Morbidly Obese Patients Undergoing Laparoscopic Gastric Banding *Katrin Bangert, MD; Thomas Standl, MD; Stephan H. Bobm, MD; Marc Burmeister, MD; Jochen Schulte am Esch, MD, Anesthesiology, University Hospital, Hamburg, Germany.* A hyperdynamic cardiocirculatory state and an impairment of pulmonary function was found in 20 patients during and after CP.

A-1110 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Determination of PONV Risk Factors before and after an Antiemetic Prophylactic Policy *Francoise M. Bardiau, RN, MS; Jean G. Braeckman, MD, PhD, Anesthesiology, CHU, Charleroi, Belgium.* In a clinical audit setting we compared risk factors of PONV before and after prophylaxis with the aim to implement a further antiemetic protocol for very high risk patients.

A-1111 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Post-Operative Questions about Nausea Increase Incidence *Bryan L. Black, MD; Thomas P. Hutchinson, MD; Lila L. Kerschen, RN; Joe A. Carrithers, PhD, Kansas University School of Medicine-Wichita, Wichita, KS.* 522 subjects heard scripts that included or avoided the words nausea, throw-up, sick and vomit. Nausea, not vomiting, at dismissal was increased in those hearing the words(20% /13.5%).

A-1112 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Successful Use of LMA Fastrach™ (FT) in Patients with Obstructive Sleep Apnea Syndrome and Predictive Signs of Difficult Airway *Rocchiccioli Catherine, MD; Blumen Marc, MD; Chabolle Frederic, MD; Fischler Marc, MD, Anesthesiology, Hopital Foch, Suresnes, France.* Use of Fastrach in obstructive sleep apnea patients.

A-1113 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Predictive Factors of Intraoperative Transfusion: A Retrospective Analysis of 166 Orthotopic Liver Transplantation *Anne Didier; Philippe Revel; Jean-Marc Dassonville; Philippe Erny, DARI, Hopital Pellegrin, Bordeaux, France.* 5 qualitative and 6 quantitative preoperative factors were studied to foresee blood loss during orthotopic liver transplantation.

A-1114 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Intubating Laryngeal Mask Airway, Laryngeal Tube, 1100ml-Bag: Beneficial during Ventilatory Life Support? *Volker Doerges, MD; Hartmut Ocker, MD; Peter Schmucker, MD, Department of Anesthesiology, University Hospital, Lubeck, Germany.* The intubating laryngeal mask airway, laryngeal tube, and 1100ml-bag proved to be valid alternatives for emergent airway management in our bench model.

A-1115 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
The Incidence of Airway (Pharyngoscopic) Class Zero and Correlation between the Airway Classes, Body Mass Index and Laryngoscopic Grades *Tiberiu Ezri, M.D.; David Warters, M.D.; Carin Hagberg, M.D.; Peter Szmuk, M.D.; Jeffrey Katz, M.D., Anesthesiology, University of Texas Medical School, Houston, TX, United States.* Class zero airway was found in 1.2% of cases

A-1116 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Patient's Understanding of Investigator Conflict of Interest *Robert S. Greenberg, M.D.; Curt I. Civin, M.D., Anesthesiology and Critical Care Medicine, Johns Hopkins University, Baltimore, MD, United States.* Abstract : Discrepancy of opinion regarding the impact of potential conflict was shown among patients reviewing a standard conflict of interest disclosure statement.

A-1117 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Absence of Bronchodilation during Desflurane Anesthesia: A Comparison with Sevoflurane and Thiopental *Judith E. Hall, FRCA, MA; Shabbaz R. Arain, MD; Mitchell J. Goff, MD; Thomas J. Ebert, MD, PhD, Anesthesiology, Medical College of Wisconsin, Milwaukee, WI, United States.* Sevoflurane produced bronchodilation but desflurane increased respiratory system resistance, especially in patients who smoke.

A-1118 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Demographic Comparisons between Patients with Post Surgical Neuropathy and the General Surgical Population at the UCHSC from 1991-99 *Leslie C. Jameson, MD; Janis Ferrell, MD; Thomas J. Kaufman, RN, Anesth., UCHSC, Denver, CO, United States.* Upper extremity neuropathy risk was thoracic surgery, general anesthesia(GA), males and OR time >6 hr. Lower extremity risk was abdominal surgery and GA.

A-1119 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Brain Damage after Anesthesia-Related Adverse Events (AE): Analysis Based on Event Mechanisms *Philippe Juvin, MD; Bernard Gueguen, MD; Jean Marie Desmonts, MD, Anesth. Dept., Bicbat Hospital, Paris, France.* Closed anesthesia claims with brain damage were reviewed. Brain damage was more incapacitating after circulatory than after ventilatory anesthesia-related adverse events.

A-1120 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Ethics in Cost Containment Research *W. Andrew Kofke, MD; David Waisel, MD; Michael Rie, MD; Steven Small, MD; Elizabeth Sinz, MD, Anesthesiology, West Virginia University, Morgantown, WV, United States.* A review of cost containment articles indicates that 46 percent have no mention of IRB or patient consent. Ethical violations may be occurring in cost containment research.

A-1121 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
N-acetylcysteine (NAC) Protects Kidneys in Knee Arthroplasty *M. Laisalmi, M.D.; L. Lindgren, M.D., Dept of Anesthesia, Helsinki University Hospital, Helsinki, Finland.* Tourniquet causes reperfusion and renal injury (decrease in urine oxygen tension (P_UO₂)). With antioxidant NAC P_UO₂ was higher (p<0.05) showing renal protection.

A-1122 Room G, 10/16/2000 9:00 AM - 11:00 AM (PS)
Difficult Intubation Data Acquisition. Database Query on Difficult Intubation Vs. Careprovider Self-Reporting *Steven Lussos, M.D.; James Koch, M.D.; Jay Iaconetti, M.D.; Jim Edmiston, Anesthesiology, Inova Fairfax Hospital, Falls Church, VA.* Our DI Query more reliably found inability to intubate patients than voluntary reporting by care-providers.