



Information on SOAP internet lectures

Research project
Diploma criteria

Kim Ekelund





Checklist...

1. Completion of the two-year clinical training program.
2. Completion of four weeks exchange program.
3. 24 SOAP video lectures seen and reviewed, on current topics in obstetric anesthesia.
4. Attendance of four residential courses and passing whatever test included in those.
5. Approval of portfolio including logbook.
6. Peer-reviewed approval of Research Project manuscript.
7. An abstract presented at the SSAI congress.





Information on SOAP internet lectures





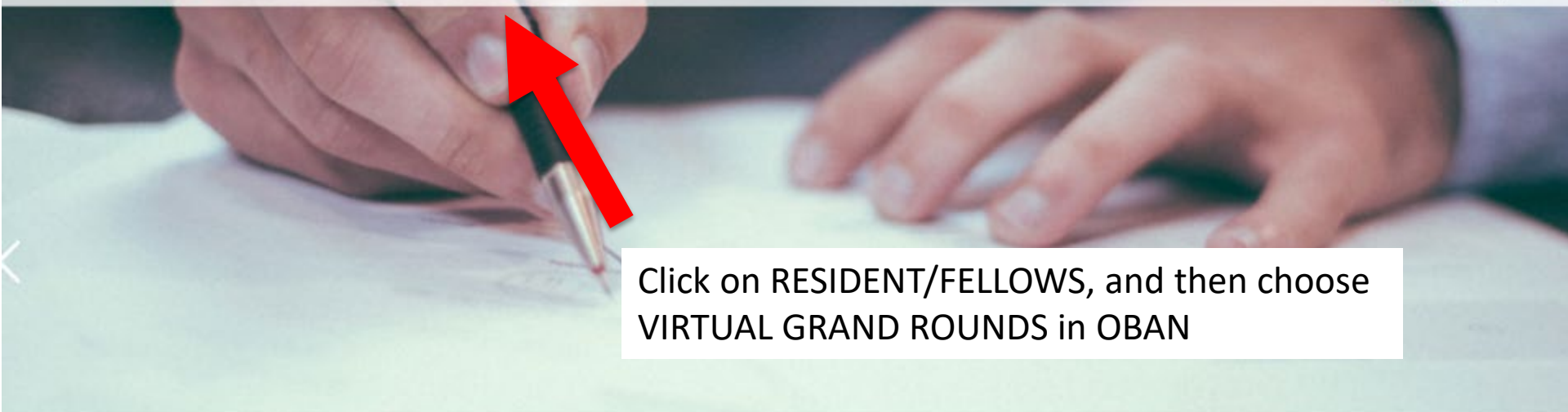
	One of the Consultant Anaesthetists / Intensivists and the Trainee will be expected to participate.
E-learning lectures	"Open Anesthesia Lecture Series for Fellows" to be found on www.soap.org 24 of the lectures available should be seen and reviewed.
Exchange Program	The training period includes an exchange programme



Information on SOAP internet lectures



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Click on RESIDENT/FELLOWS, and then choose VIRTUAL GRAND ROUNDS in OBAN

SOAP Labor Epidural Billing Statement Now Available

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Information on SOAP internet lectures



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Virtual Grand Rounds in Obstetric Anesthesia

Each month, we will feature a lecture from an internationally recognized expert in Obstetric Anesthesia. The goal of this section is to provide fellows in Obstetric Anesthesia monthly access to expert content. You can also subscribe to our podcast on [iTunes](#) or see our [Vimeo](#) channel.

Beyond the Binary:
Caring for Sexual and Gender
Minority Patients on the Birth Unit

Hilary MacCormick, MD, FRCPC
Obstetric Anesthesiologist
Dalhousie University
Twitter: @hmacormick
Email: hmacorm@dal.ca

July 2019: Beyond the Binary: Caring for Sexual and Gender Minority Patients on the Birth Unit with Hilary MacCormick

Neuraxial Techniques to Optimize Labor Analgesia

Brendan Carvalho MBBS, FRCA, MDCH

Professor, Chief Obstetric Anesthesia Division
Stanford University School of Medicine
Immediate Past President, Society for Obstetric Anesthesia and Perinatology



June 2019: Neuraxial Techniques to Optimize Labor Analgesia with Brendan Carvalho



May 2019: None Born Positive: Elimination of Maternal to Child Transmission of HIV

Shared Decision-Making on Labor and Delivery

May Plan-Smith, MD, MS
Associate Professor of Anesthesia
Harvard Medical School
Director of Quality & Safety
Director of Simulation
Dept. Anesthesia, Critical Care & Pain Medicine
Massachusetts General Hospital
April 10, 2019



April 2019: Shared Decision Making on Labor and Delivery with May Plan-Smith

The NPMS Hemorrhage Bundle:
Enhancing the Management of
Maternal Hemorrhage

Vasopressor Use in
Obstetrics: Past,

Marijuana in
Pregnancy:
Sorting through

Trial of Labor after Cesarean
Delivery: Which Patients? Which



Information on SOAP internet lectures



**”Open Anesthesia Lecture Series for Fellows” to be found on www.soap.org
24 of the lectures available should be seen and reviewed.**

<http://www.openanesthesia.org/virtual-grand-rounds-in-obstetric-anesthesia/>

Each participant can choose lectures according to a personal interest

No	date	Title of lecture	Three keypoints of interest
1			
2			
3			
4			



Information on SOAP internet lectures



Post Dural Puncture Headache and Epidural Blood Patch

Barbara M Scavone

- 1) UDP in obstetrics 1.5%. Frequency of PDPH in those with UDP with large bore epidural needle is 50-60%. Percentage of those who need EBP is 58%. PDPH without dural puncture 0.2-0.3%.
- 2) Interpatient variability in occurrence of headache. Some patients with big CSF leak, have no headache while some with minimal leak do have. Low ICP causes traction of pain sensitive meningeal structures. Third mechanism is when ICP is low, there is the reflex intravascular venous dilatation and pain sensitive structures around the vessels affected (vascular headache like migrene). Migrene risk of headache.
- 3) Risk factor: young age, female gender, obstetric patients (young, women...? Body habitus- high BMI, more likely to have UDP, but less likely to get PDPH. EDP more effective (need for 1 BP, not more). Patients with vaginal delivery more likely to have headache compared to CS, probably related to pushing time. The longer the pushing time the more likely to get the headache (< 30 min especially).
- 4) Risk factors related to headache. The smaller the needle, the smaller the risk. The cutting needle higher risk.
- 5) Air vs. saline: no difference in the occurrence of the headache. However, when UDP occurs, the patients in the air group are more likely to get a headache (67%) compared to 10% in the saline group. Air related headaches faster onset and shorter duration. Many probably related to pneumocephalus. Anesthesiology; 1998, 88:76-81. However, Scott Segal and Katherine W Arendt in their retrospective effectiveness study showed no difference in PDPH if anaesthesiologist used the medium they were used to using. Limit amount of air if you are using air. With air maybe missed segments, but increased volumes of local anaesthetic seem to mitigate this.

Research project



Research Project	<p>The programme will end with presentation of a formal research project. In the preparation of the research project, group work is accepted and encouraged. The structure for a publication in Acta Anaesthesiologica Scandinavica is encouraged, but publication of the research project in a peer reviewed journal is not a requirement.</p>
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Research project



Research Project

Investigation, audit, case report or literature review

1	Title of Project:	
2	Source of any funding:	
4	Project supervisor:	
5	Date begun:	

Research project



7	What question are you seeking to answer?	
8	What is the importance of this project?	
9	Describe your methodology:	
10	Describe your results:	

Research project



11	Presentation of this project	
12	Will you be making any personal presentation of these results?	
13	Evaluate the importance of your results:	
14	How much time have you personally spent on this project?	



Research project



- Publication
- Poster
- Presentation



Research project



- Publication
 - Fuhrmann, Telnes, Ekelund....

ORIGINAL ARTICLE

Multidisciplinary team training reduces the decision-to-delivery interval for emergency Caesarean section

L. Fuhrmann¹, T. H. Pedersen¹, A. Atke², A. M. Møller¹ and D. Østergaard³

¹Department of Anaesthesiology and Intensive Care, Herlev Hospital, Copenhagen, Denmark

²Department for Gynaecology and Obstetrics, Herlev Hospital, Copenhagen, Denmark

³Danish Institute for Medical Simulation, Herlev Hospital, Copenhagen, Denmark

Transversus abdominis plane block vs. wound infiltration in Caesarean section: a randomised controlled trial

A. Telnes¹, E. Skogvoll^{1,2} and H. Lonnée¹

¹Department of Anaesthesia and Intensive Care, St Olav's U

²Department of Circulation and Medical Imaging, Norwegian

AOGS

A C T A Obstetrica et Gynecologica



Scandinavica

AOGS REVIEW ARTICLE

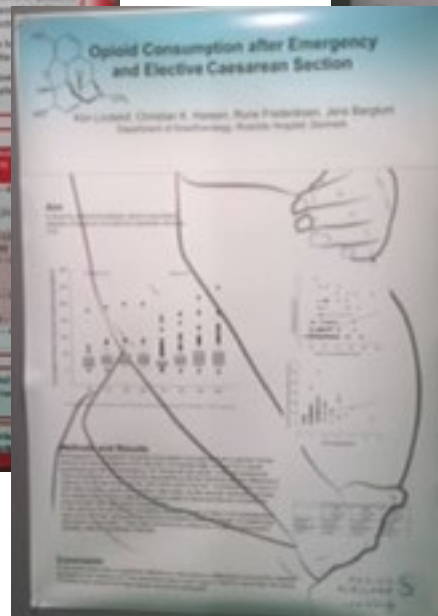
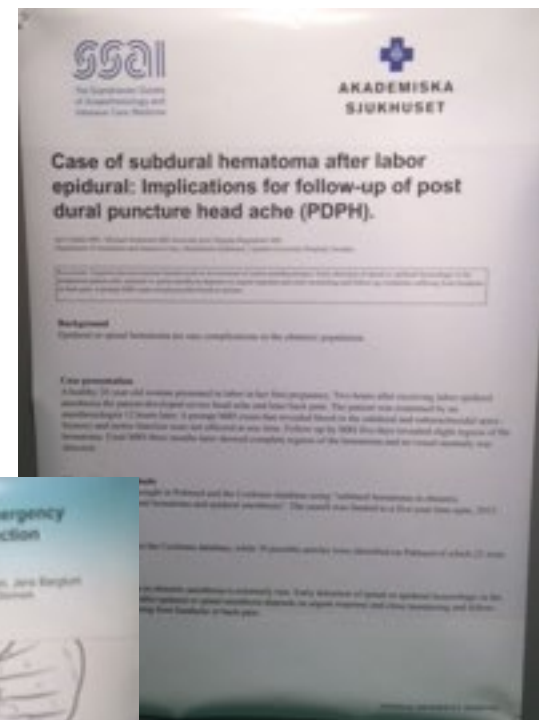
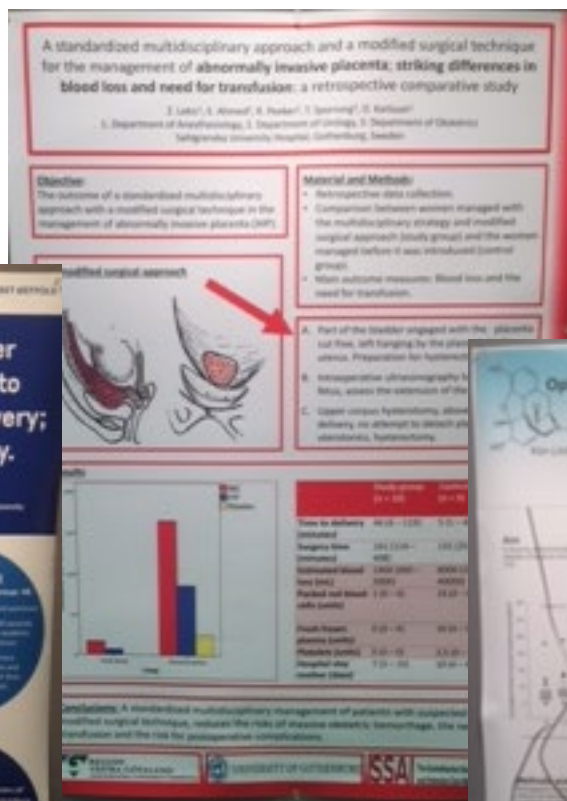
Hemostatic resuscitation in postpartum hemorrhage – a supplement to surgery

KIM EKELUND¹, GABRIELE HANKE¹, JAKOB STENSBAALLE^{2,3}, ANNE WIKKELSØE⁴, CHARLOTTE KRERS



Research project

Malmö 2017





Research project



- Presentation
 - Skei & Heitmann, Fuhrmann, Telnes
 - Matti (Antti): "Spinal and epidural sufentanyl and fentanyl in early labour"

Certification



Certification

The programme committee will grant participants a diploma on Advanced Obstetric Anaesthesia on the following conditions:

- Completion of the two year clinical training programme including one month exchange programme
- 24 SOAP video lectures seen and reviewed, on current topics in obstetric anaesthesia.
- Attendance of four residential courses and passing whatever test included in those
- Approval of portfolio including log book
- Approval of presentation and report of a Research Project,
- An abstract presented at the SSAI congress 2019



How to...

1. Mail the portfolio and everything from else from the checklist to elin.bjornestad@gmail.com
2. She will check if anything is missing
3. She will forward the manuscript to two reviewers (not from your country)
3. After the reviewing-proces, EB will send the approval to me, and
4. I will send you your diploma





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