



Difficult Airway Society

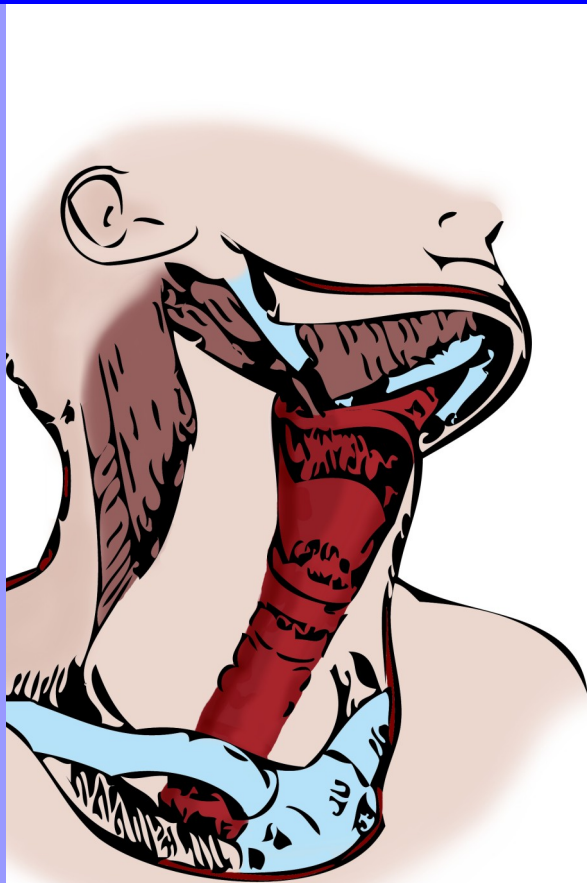
NEWSLETTER

Philadelphia Story

DAS Ascot report

DAS-ASM 2014

Book review section



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SPRING 2014

EDITORIAL

Welcome to the first Newsletter of 2014. Looking out of the window it appears that spring has sprung, early but not a moment too soon after a torrential winter.

Although it feels a long time ago, all those involved in DAS Ascot 2014 must be credited with an impressive Annual Scientific Meeting (ASM). One major enjoyment for me was that I did not have to ponder any organisational responsibility, having chaired the previous meeting in Cardiff. Since there's a full report in this issue, I will only make two comments. What a great band the local organising committee had found for the Gala Dinner! Maybe a position is available for a DAS house band, touring with the ASM? I've also noticed over the last two years that the ASM coincides with 'Movember'. Depending on where the ASM is situated in November relates to the extravagance of facial hair seen from the stage. May be all the male members of Committee will sport one for next year!

In this issue our President will outline new DAS projects and our relations with other airway societies around the globe. This includes the hard work being put into a new website at the same old address. Hopefully this will aim to be an educational resource, forum and a point of contact for DAS Airway Leads. We continue to elaborate on this important role. With the kind permission of Nigel Penfold, Editor of the College Bulletin, we reproduce two recent articles on the very successful Airway Leads Day at the College.

This time of year hopefully many of you, especially trainees, are working towards an abstract for DAS Stratford-Upon-Avon, 2014. In this issue we announce a new multicentre project prize to encourage you to work with your colleagues in other Trusts for a study with greater numbers and impact. In time we anticipate this coordination will be done via the revamped website.

A further addition is a short book review in which we aim to bring to your notice books with a wider relevance to our practice beyond airway management or anaesthesia. If you have any suggestions or relevant books you would like to review yourself please contact us. On a final note, as the weather brightens, it may not have escaped your notice that many anaesthetic departments harbour large numbers of cyclists (The new golf!) Having seen that the AAGBI now produces an imprinted cycling jersey I would be keen to canvas interest for a DAS cycling jersey design at a reasonable price?

Enjoy the Spring!

Mark Price

Editors



M. Price
Cardiff



A. Sajayan
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PRESIDENT'S PAGE

I am glad to welcome you back after the outstanding 18th DAS Annual Scientific Meeting (ASM) held last November in Ascot. I am sure most of you who attended and those that could not will be enthused to attend our future ASM's.

DAS 2013, at Ascot, was a fantastic meeting, well attended despite these recessionary times. We had a record number of abstract submissions. Industry participation reached an all time high, restricted only by the space we could offer!

The invited speakers, both national and international, were extraordinary and the use of ultrasound in airway management was a 'first' for a DAS airway workshop.

Another first for DAS, we are very grateful to all our speakers for permitting us to upload their talks to the DAS website. Please browse, review and enjoy the experience: http://www.das.uk.com/content/das_2013_presentations

At Ascot we were honoured to present the DAS Macewen Medal to Dr Ronald Sidney Cormack and Dr John Robert Lehane for their contribution to the Society and airway management. We were truly honoured to see these two giants in their field at our ASM to receive their long over-due recognition.

Many of us have organised, taught on or attended airway workshops nationally or internationally. These have become increasingly popular and one of the main contributing factors has been the outstanding industry support from companies, like Storz. So much so, that Storz has become a household name for us airway trainers. We were proud to pay tribute to Dr Sybill Storz, CEO of Karl Storz at Ascot. A special presentation of the DAS Macewen Medal was awarded to her for services to teaching and training in airway management globally.



Dr Rangasami presenting Macewen Medal to Dr Sybill Storz

I must take this opportunity to thank my Co-Chair Dr Mridula Rai and all the other local organising committee members for their commitment and immense hard work towards the success of DAS 2013 ASM at Ascot.

As most of you may be aware, the abstracts submitted to the ASMs are no longer being accepted by our national specialty journals for publication. This has been a big blow to those intending to submit, most of whom are trainees, who valued and looked forward to this 'extra recognition'. DAS is vigorously taking up this issue with all concerned parties. We will endeavour to inform our members via newsletter and website of any progress.

In line with our policy to forge strong links with our fellow airway societies internationally, we had Dr Ashutosh Wali (President-elect, SAM) deliver an excellent SAM Lecture on obstetric anaesthesia at the DAS 2013 ASM. Our own Dr Peter Groom, DAS Treasurer, has recently been to the SAM meeting, in Philadelphia, and delivered a much appreciated talk on difficult airway management.

The European Airway Management Society (EAMS) had a very successful 2nd European Airway Congress held in the fabulous Turkish capital, Istanbul. At their kind invitation I represented DAS at their three day congress. A very valuable exchange of ideas and experiences highlighted our long-standing association. I was delighted to see in action, a very vibrant and progressive society with a high regard for DAS.

Prof. Kamil Toker, President of EAMS, has accepted our invitation to be present at our forthcoming DAS ASM in 2014 at Stratford upon Avon.

We hope to develop further closer ties with Australia through their Airway Special Interest Group. We have had a lot of interest from countries in Asia, the Middle East and Africa wanting accreditation from DAS for their courses and workshops. Plans are afoot to address these issues and help them achieve their aspirations and maintain quality and standards at the same time. Similar plans are being made for locally held courses and workshops as well.

Following on from the success and recommendations of NAP4 and the DAS / RCoA Airway Leads Day, the DAS website has opened a new web page for registered Airway Leads to communicate and disseminate ideas.

On the same topic, Karthik Ponnusamy, our new webmaster, is planning an entirely new face to our website with smart phone apps included. Being the largest specialist anaesthetic society in the UK and largest airway society in the world, the website developments were long overdue. Please continue browsing and watch the space!

We have a lot of exciting new projects being worked out. The new intubation guidelines led by Dr Chris Frerk, the ADEPT project led by Dr Mridula Rai are some of the many which will interest our members and the airway world at large.

It is a matter of great pride to add Dr Tim Cook to our illustrious group of DAS Professors. DAS Faculty Professors have been recently set up to assist members with their research projects, offer advice, and cement multicentre studies across the disciplines relating to the field of airway management. Further details can be obtained from: <http://www.das.uk.com/content/das-faculty-professors>

Spring has arrived and I hope the experiences of the floods and bad weather have faded away to bad memories. Looking forward to early bird bookings for DAS 2014 at Stratford-Upon-Avon for the 19th DAS ASM.

The various initiatives and fantastic progress would not be possible without the efforts of our Committee to whom I am ever impressed and thankful. It is a real pleasure to work with such a dynamic and wonderful team.



Jairaj Rangasami

President , DAS

SECRETARY WRITES...

A successful ASM at Ascot was a happy end to 2013.

2014 began well, but the terrible weather has been the cause of concern for many across the country. Hopefully we can all now look forward to a good summer and the much promised recovery of the UK economy.

Congratulations to the local organising committee of the Ascot DAS meeting for an excellent event with very positive feedback from the delegates. We will take forward these important lessons to make the DAS 2014 meeting at Stratford-Upon-Avon another rewarding experience.



Dr Radhakrishna with Dr Ellen O'Sullivan (President, College of Anaesthetists, Ireland) and Dr William Harrop-Griffiths (President, AAGBI) at the Ascot Conference Dinner

The DAS web page is about to change to accommodate the many progressive steps the new DAS committee has taken since last April. The 'Airway Leads' will have a place for two way communication with DAS and RCoA experts for improving the airway set up across the country. Plus a 'members only' area and an 'ask the experts' forum for answering airway related questions are amongst the plans for the new website.

DAS, through the National Institute of Academic Anaesthesia, has supported important research projects in 2013 by contributing over £25,000.

We are also looking to support many educational ventures, both at national and international level, by giving them due recognition and also at the same time wish to introduce DAS accredited courses.

Let's work together to bring about these progressive changes.

Wishing you all a very pleasant summer,



Dr.S.Radhakrishna
Hon Secretary DAS

CONFERENCE REPORT



DIFFICULT AIRWAY SOCIETY

Ascot 13th - 15th November 2013



ANNUAL SCIENTIFIC MEETING

The 18th DAS Annual Scientific Meeting was held in beautiful Ascot and it did not disappoint. We spent three fantastic days in this gorgeous Berkshire village. Moreover, the meeting was based at the historical Ascot Racecourse. It was founded in 1711 by Queen Ann and saw the first race the same year. Since then there had been races every year until 2004 when it closed for twenty months to allow a multi-million pound redevelopment.



The first day consisted of airway workshops in the racecourse Pavilion. The traditional workshops were as popular as ever covering a wide range of procedures and equipment with expert national and international faculty. There were stations on the paediatric difficult airway, awake fibre optic intubation, intubation through supraglottic devices, videolaryngoscopy and emergency airways. Undoubtedly the talking point this year was the station on ultrasound in airway management. We were very honoured to have two international experts in the field,

Drs Michael Seltz-Kristensen (pictured) and Wendy Teoh. With their enthusiasm and skills they showed us that it is possible to ultrasound the airway. Convincing the delegates to get their ultrasound machines out on return to their own hospitals. There was excellent feedback on the caliber and diversity of the workshops .

Later that evening there was the traditional welcome drinks reception, with music from the lovely Delmege Quartet. The meeting and trade show were declared open by the Deputy Mayor of Ascot, Councillor John Lenton, who told us his story of being anaesthetised back in 1946. Hopefully our specialty has moved on since then!

The next two days were a mix of lectures, oral presentations, posters and keynote speakers. After the traditional welcome by the Co-Chairs of the DAS 2013 organising committee, Drs Rangasami and Rai, the first session started and we returned to basics. We had a lecture on airway anatomy followed by a riveting lecture on airway physiology and apnoeic preoxygenation. This was capped off by two excellent talks on airway stenosis and inhalational induction in adults. The next session encompassed the inaugural lectures of the first two DAS professors. Professor Mansukh Popat from Oxford delivered a truly fascinating lecture on the long journey of the development of airway guidelines, a truly unique body of work. Next speaker was Professor Peter Charters from Liverpool who talked about his experience in dealing with difficult airways and the lessons he has learned through cases that hadn't gone as well as he had hoped.

Following on from this was a session that had us all on the edge of our seats. It was an interactive session where trainees and consultants presented their cases of airway emergencies and disasters. The interactive voting system worked flawlessly giving the audience a chance to compare their choices with each other and the experts.

To close off the day Dr Rangasami presented the first of the three DAS medals to Dr Sybill Storz, owner of Karl Storz, for her outstanding personal contribution and continued support to training and research in the field of anaesthesia and airway management.

Dr Rachel Craven, of Medecins Sans Frontieres, gave the inaugural Karl Storz Lecture. She described the difficulties presented to anaesthetists working in conflict zones. She drew on her extensive experience and at times had the audience speechless with her stories and images.



Later that evening the Pavilion was transformed into an exquisite venue for the Gala Dinner with champagne reception and dancing. The drinks and food were superb, the company even better. The 'Quantum Ties' band surpassed themselves and the dancing went on until the early hours of the morning.

The third day started with the AGM followed by the much anticipated session on airway ultrasound and imaging. Dr Seltz-Kristensen from Copenhagen shared his techniques, demonstrated the usefulness of these methods and explained how we can get ourselves out of trouble with an ultrasound machine.

In the free paper presentations congratulations go to Dr Lorenz Theiler (Bern, Switzerland) who won the Ralph Vaughan Cup for best oral presentation. Dr Mark Campbell (Dublin) and Dr Sabine Nabecker (Bern, Switzerland) were awarded the second and third prizes respectively.

We felt very privileged to be present when Dr Rangasami presented the DAS medal to Drs Cormack and Lehane for their contribution to anaesthesia. Dr John Lehane was presented with the medal at the DAS 2013 Gala Dinner and Dr Ronnie Cormack on the Friday. It was a great honour for all present to meet with two of the giants of our specialty.

The last session of the meeting was dedicated to the obstetric difficult airway and there was a very interesting debate on the diminishing role of general anaesthesia, rapid sequence induction and cricoid pressure in obstetric practice. Dr Teoh from Singapore shared her experience of this rapidly evolving anaesthetic subspecialty. Dr Mushambi from Leicester explained the challenges presented to the obstetric guideline steering group in forming new DAS Guidelines.

This year the SAM lecture was delivered by Dr Ashutosh Wali, Associate Professor at Baylor School of Medicine. He reiterated that in the USA the rates of general anaesthesia in obstetrics were also falling. Subsequently affecting the training of their residents, who can go through their entire programme only having given a single obstetric general anaesthetic.

Many thanks go to the industry sponsors without whom this meeting would not have taken place. The local organising committee had obviously worked tirelessly to bring us this very well run and educational meeting. I enjoyed the conference and look forward to the next year's one in 'Shakespeare's County'.

Dr Vassilis Athanassoglou

Airway Fellow

Oxford University Hospitals Trust

Winners of the oral and poster presentations at the DAS ASM-Ascot 2013



Oral 1st Prize: Dr Lorenz Theiler, Bern, Switzerland (Ralph Vaughan Cup winner)

2nd Prize: Dr Mark Campbell, Dublin

3rd Prize: Dr Sabine Nabecker, Bern, Switzerland

Poster 1st Prize: Dr Kudakwashe Nyangoni, Bridgend

Dr William Sellers, Market Harborough

2nd Prize: Dr Jakob Mathiszig-Lee, London

Dr Mei-Mei Westwood, Palmyra, Australia

3rd Prize: Dr Joanne Teare, Guildford



DAS Professor Mansukh Popat



*Cllr. John Lenton (Deputy Mayor) with
Dr Wendy Teoh & Prof Rakesh Kumar*



*Dr John Lehane,
Macewen Medal recipient*

To see more pictures from the Ascot Conference, please go to the link below
<http://www.breezephographic.co.uk/?Action=FL&id=142960002&from=10727>

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SAM Philadelphia PA 20-22/9/2013

It was with honour to accept the invitation to represent DAS at the 17th SAM meeting in Philadelphia, the capital of Pennsylvania. The conference was held at the Art Deco Loews Hotel, a stones throw from the iconic City Hall, topped by its statue of William Penn.



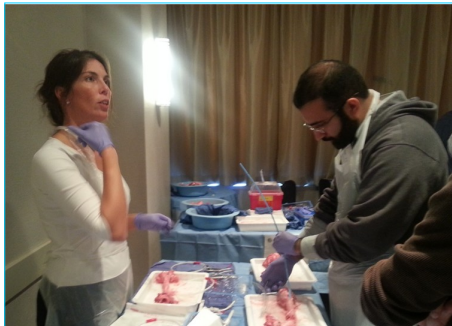
An evening drinks reception opened the meeting and was hosted by Richard Cooper, Irene Osborn and Valerie Armstead. It took place on the 33rd floor of the hotel, which enjoys stunning views across the city and its waterways. Irene told me the conference themes included, in collaboration with other medical specialties, gaining new skills in airway management in and outside of the operating room, a critical assessment of airway injuries resulting from battlefield casualties, management of difficult airways with limited resources and how to introduce new techniques into clinical practice.

North American conferences have the reputation for starting early and this was no exception: registration commencing at 0700 hours with the trade stands open for business alongside a breakfast buffet. The conference opened at 07.45 with a welcome from SAM's President Richard Cooper, and Irene Osborn. The first two sessions addressed 'Airway Collaboration'. The stand out presentations concerned the revised ASA difficult airway guidelines, airway management in the emergency department and medical missions to disaster areas: who should go and what should they bring which brought the morning to a close with an interesting review of a mission to Haiti in the wake of the 2010 Earthquake.

A novel experience for this delegate was the concept of 'lunch on your own': in the absence of a conference lunch, delegates found their own lunch in the hotel or its immediate environs. The alternative was a \$50 round table meeting for a limited number of delegates with our own Chandy Verghese discussing the past, present and future of supraglottic airways.

The first session of the afternoon continued the collaboration theme looking at airway research and concluded with a session of workshops and simulation.

Day two of the conference began with the oral abstract presentations and it is fantastic to report that one of the trainee awards went to a trainee from Coventry, Dr. Vaidyanath, for a study looking at fibreoptic intubation training: comparing three different training models (ORSIM, Dexter and the Oxford box). The day's first plenary session comprised the three invited speakers. It included my own DAS lecture on the anticipated difficult airway that was followed by 'Lessons from the battlefield: Airway casualties and preparedness.' by Lieutenant Colonel Robert Mabry MD. This was an inspiring lecture not least because he showed how feedback from the battlefield directly influenced the equipment design and protocols for emergency front of neck access. South Africa's Eric Hodgson closed the session with a characteristically ebullient, informative and entertaining discourse on managing difficult airways with limited resources.



Dr Ankie Hamaekers leading a workshop

An hour long working lunch then took place where delegates could attend one of five different 'meet the expert' round table sessions: I thought these were very good and encouraged a lot of interesting debate. After an hour for poster viewing the afternoon plenary session took place with the theme of "How I do it": Some Real World Solutions. Talks looked at intubation via supraglottic airways and the attendant problems of re-intubating patients on the PICU. The day concluded with another hour of invigorating 'meet the expert' round table sessions with five different topics to choose from.

That evening's informal Gala Dinner took place in Philadelphia's WHYY Television Studios with awards, speeches, magic tricks and dancing, followed by canapés, cocktails and the famous "Phili Cheese" steak sandwich'.

The meeting concluded with pro-con debates and then a session looking at current and future trends in airway management. The stand out lecture being Michael Seltz-Kristensens presentation on drugs for airway management. The meeting then closed with an address (and videos advertising the 2014 meeting) from Irene Osborn and Valerie Armistead.

This delegate enjoyed this meeting a lot, especially the concept of the 'meet the expert' small delegate group round table sessions. I was impressed with the North American approach to 'front of neck' access. I would recommend this meeting to others.



Peter Groom

DAS Treasurer

The Philadelphia Success story....

An oral presentation at an international conference is a precious moment for any trainee in their career and can be a bit nerve wrecking. We had this opportunity when our abstract got short listed for an oral presentation. This was at the 17th Annual Society for Airway Management (SAM) Scientific Meeting, held in Philadelphia, USA and attended by delegates from 15 countries.



The thought of going to Rocky Balboa's hometown was yet another good reason to cross the Atlantic. We did not realise when we started from here that we would be sharing the podium with some of the best from across the globe. The mental pressure reached its pinnacle at the end of day one, in the evening, with the thought of standing on that very podium the next day for our presentation. We decided to seek some inspiration, so we went to the east entrance of the Philadelphia Museum of Art, aka "The Rocky Steps."

It was indeed a golden opportunity to be amongst the top abstracts shortlisted for oral presentation at such a prestigious conference. So we prepared and delivered. We felt on top of the world when our presentation won the trainee award for best scientific abstract. It was indeed a proud moment, because we were the first trainees from the Midlands to have ever won this prize. We would like to thank Dr.C.Mendonca for giving us this opportunity and his support with the project.

Dr.C.Vaidyanath & Dr.M.Sharma

Warwickshire School of Anaesthesia

For details of how to advertise in the DAS Newsletter, which reaches thousands of anaesthetists in the UK and abroad, please contact us : newsletter@das.uk.com

Difficult Airway Society Annual Scientific Meeting 2014



12th - 14th November 2014 Stratford Upon Avon



See you at
Stratford Upon Avon

Workshops

- Traditional
- Cadaveric
- Simulation Based Workshops
- Adult
- Paediatric

Scientific Programme

- Airway in Special Circumstances
- Controversies in Airway Management
- Which Laryngoscope shall I use?
- Airway Training: Is it Perfect? Trainee's Perspective
- Man vs Beast
- Airway Challenge in Africa

Save The Date: 12th - 14th November 2014



Contact:

Dr. S. Radhakrishna, Chairman, LOC
dasevents@aagbi.org

BOOK REVIEW

If Disney Ran Your Hospital:

9^{1/2} Things You Would Do Differently

Fred Lee

Second River Healthcare Press, 30 May 2004

After returning from a trip to Eurodisney with my young family, the last thing I needed was yet more 'Disneyfication'. However, when I saw "If Disney Ran Your Hospital: 9^{1/2} Things You Would Do Differently" in the airport terminal, despite my initial mistrust, I was motivated to read it almost immediately.

Fred Lee, an American hospital manager who spent time working at Disney, encourages the reader to apply certain Disney strategies to the business of healthcare. His main message is that whilst most healthcare professionals strive towards delivering morbidity, mortality and safety gains, these are not the only issues that matter to patients.

In fact whilst safety is Disney's number one priority, this is not immediately evident when visiting one of their attractions. You shouldn't even need to consider whether your daughter would be hurt whilst riding Dumbo for example. Safety should in-fact almost be assumed. What you do concentrate on are the other aspects of the experience such as politeness of the staff and cleanliness of the surroundings. Lee argues that in healthcare, we shouldn't be complacent with delivering "good health". This is actually the very minimal that a patient expects when visiting a hospital and is the very reason for attendance in the first place. In fact, what we should also aim to deliver is an experience to that patient and their family to rival that offered in many other walks of life, namely politeness, respect, dignity and comfort.

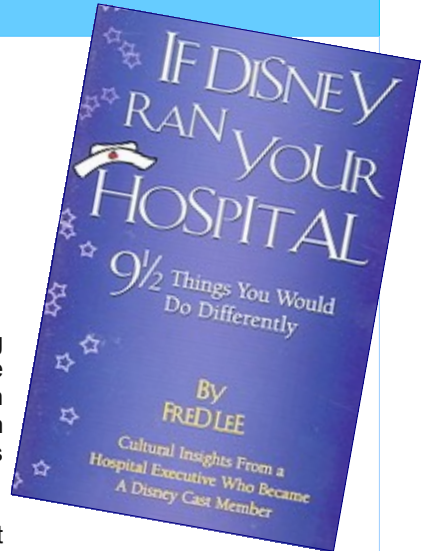
Whilst I am convinced that this is an important message and one worth investing your time to read about, I do worry that we already have some way to go in delivering on the initial safety priority. At least for now, we need to continue our efforts to deliver on safety whilst simultaneously considering the other aspects of a patient's journey.

Dr Matt Morgan

Clinical Lecturer, Anaesthetics, Intensive Care and Pain Medicine

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DAS is pleased to announce the creation of a new prize category for Best Multicentre Project at this year's Annual Scientific Meeting in Stratford-Upon-Avon.

The prize is reserved for human experimental studies (not surveys, questionnaires, meta-analyses etc) that involve three or more distinct hospital centres (i.e. those that are not part of the same NHS Trust).

At the last DAS meeting in Ascot, the organising committee noted that several studies were being repeated on a small scale in multiple centres. This prize is to encourage researchers to use DAS networks to make contact with each other, and so promote collaborations across hospitals and regions and increase the size and impact of valuable projects that are being conducted locally.

If you have any questions, please contact

trainee@das.uk.com

AIRWAY LEADS: THE NEXT STEPS

As described by Atul Kapila in the accompanying article the Airway Leads day was a great success. Feedback after the event was extremely positive with delegates 'scoring' the entire event very highly. The next obvious question is how do we build on this successful start?

The answer needs to be in two parts

The first part is the further development of the network of Departmental Airway Leads (AWLs) and collaboration between the College and Difficult Airway Society (DAS) to construct the best platform of support for AWLs. Discussions are at an early stage but are progressing well. Early intentions are for the College to host an Airway Lead webpage that will contain resources for the AWLs. This resource will include links to existing educational material such as previous presentations and e-learning. In time it is hoped it will also contain resources that AWLs wish to share with each other. At DAS there will be a web forum for AWLs enabling direct exchange of ideas and information sharing on a more immediate scale. The building blocks for these initiatives are in place with more to be agreed and acted on.

The second part is delivering the core activity of the AWL at local level.

The strap line for the Airway Leads event was 'empowering the Airway Lead at a local level' so the easiest way to build on the success of the Airway Leads day is to go and do something in your own hospital – whether that's going and knocking on the door of procurement, establishing a group to look at the contents of your airway trolley or even just running a teaching session for some ODPs one afternoon, the success of the Airway Leads concept depends on activity in your hospital.

- Could you be your hospital's airway lead? -at the time of writing there are 177 airway leads, representing 230 hospitals- that's an airway lead in about 2/3 of the hospitals in the UK. That still leaves around 100 hospitals without an airway lead... Could it be you? [Airway Leads are a local appointment- see the November 2012 issue of the Bulletin (<http://www.rcoa.ac.uk/document-store/bulletin-76-november-2012>) for an outline description of the job. If you are an Airway Lead please let the College know- email Maddy Humphrey (mhumphrey@rcoa.ac.uk) so that you can be kept up-to-date.]
- Link up with the Airway Leads in your region to see what they are doing- the College are creating an online form that allows you to contact airway leads by hospital (you don't have to know their name). If the hospital you are trying to contact doesn't appear on the drop down list then they don't have an airway lead.

- Use the resources- the recordings of the Airway Leads Day are available on the College website. The other resources mentioned above are in the process of being added to the Airway Leads Webpage, do visit it.
- Register with the DAS Forum (www.das.uk.com). This should allow airway leads to chat about the issues you face around airway education, procurement, etc.

If you really don't know where to start then please contact the airway lead in a neighbouring hospital and see what they are up to or you are welcome to email the authors for some tips as to where you might start.

There will of course be hurdles to overcome- how do you find funding for equipment, who can you borrow it from- and the answers to these questions will be different for every hospital. But when you overcome them please do write and tell us about them, email and we very much hope that the next Bulletin article on Airway Leads will be full of news from across the UK detailing what you, the Airway Leads have been up to.

Most importantly, please do something- raising the standard of basic airway education across the UK will make a difference. The Airway Leads project offers a real opportunity to improve safety.

Another Airway Leads Day?: The success of the first day raises the obvious question of whether there should be another one? The balance on running another day though has to be that we want you to be out doing something rather than listening to what other people have done. One suggestion has been that there should be another event in March 2015 (18 months after the first event) but please do email us with your thoughts and comments. Airway Leads are a local initiative, not something that can be delivered by a central diktat. We hope that you enjoy being the Airway Lead for your hospital- please do email us and tell us what is good and what is bad about it- and how we can help you to do it better

Alistair McNarry, Organiser Airway Leads Day
althegasman@btinternet.com

Imran Ahmad, DAS Committee

Jairaj Rangassami DAS President

Chris Frerk, Editor NAP4, Co-organiser Airway Leads Day

Tim Cook, Editor NAP4, Co-organiser Airway Leads Day, College Advisor on Airways

Airway Leads Day – a delegate's view

Following the launch of the NAP4 report in March 2011 and several publications in BJA and Anaesthesia, the findings were widely hailed from all over the world.

"well organised.....NAP4 undertook a challenging task.....the report impressively succeeds in its goal" - Anesthesiology, 2011

"the groundbreaking project..... a seminal project with enormous implicationshighly recommended reading' - ANZCA Bulletin, 2011

The report (http://www.nationalauditprojects.org.uk/NAP4_home) gave us unique insights into the events surrounding the management of airway complications leading to death, brain damage, an emergency surgical airway and admission or extended stay in ICU. In addition, because the NAP4 investigators also surveyed anaesthetic departments to identify the number of general anaesthetics performed in the UK we gained qualitative statistics to better inform our discussions around risk.

The challenge for us then was how to assimilate a report that ran to many sections and contained some 150 recommendations into our anaesthetic practice. Indeed some of the findings revealed complications and poor practice that had been described repeatedly over several decades. In September 2012 DAS and RCoA officially endorsed the recommendation that every department have an Airway Lead with the following main duties:

- Overseeing local airway training for anaesthetists and assisting in airway training more widely
- Ensuring local policies exist and are disseminated for predictable airway emergencies
- Ensuring that difficult airway equipment is appropriate to the local guidelines and standardised within the organisation
- Liaising specifically with the ED and ICU to ensure consistency.

On 26 September 2013 a day at the college was organised by Alistair McNarry and the NAP4 team for airway leads to share their experiences so far. The meeting was oversubscribed!

It was to turn out to be quite a lively day. Following introductions from Tim Cook and Chris Frerk on perspectives from the College and DAS, Fiona Kelly gave us an update on what had been going on in Bath. Quite a lot it seems.

Judging from the range of questions and requests for her email address, delegates liked her department's focus and what they had achieved so far. Extracting all the NAP4 recommendations into spreadsheet format and using a traffic light system to follow progress was one of their popular ideas. Mary Mushambi from Leicester has also been very busy and told us how much more challenging being an airway lead in a large teaching centre across different sites can be.

The following presentation was to prove the most revealing. How many anaesthetists have an open door to the head of procurement in their hospital? Chris Frerk had invited just such a colleague and his deputy and they gave us many, many reasons to go and find out who their namesakes were in our hospitals because they could make the procurement of airway equipment a less opaque and frustrating business. Unfortunately they didn't have any magic money wands but understanding how NHS procurement works is essential if we are to standardise equipment across our hospitals.

The afternoon was to continue providing food for thought. Al McNarry told us about how he got the same airway trolleys across all of Lothian, a very successful procurement exercise. We heard about airway education in the form of the DART model from Bristol, set up by Nick Wharton and still going strong, and what happens in Mersey from Seema Charters. Ravi Bhagrath then posed the question of whether the RCoA airway workshops were still needed if we are going to have airway education going on all over the country. The feeling was that a central, college sponsored workshop still has an important place.

In the final session Tony Turley gave us a provocative view on what intensivists wanted from the airway lead in ICU and the emergency department. Linked to that is the question of how many anaesthetists in the department should be competent at difficult airway management and Mark Stacey, also from Cardiff, asked whether airway teaching should be compulsory for all?

Hopefully I have conveyed how this first Airway Lead Day lived up to expectation and that it should become a regular feature in the college calendar.



Dr Atul Kapila
Consultant Anaesthetist
Royal Berkshire NHS Foundation Trust

13TH DIFFICULT AIRWAY DAY

The King Power Stadium, Leicester
(Formerly the Walkers Stadium)
Thursday 19th June 2014

Programme

08.15 Registration and Coffee

08:55 Introduction

Dr M Mushambi, Consultant Anaesthetist, Leicester Royal Infirmary

09.00 "Fibreoptic Intubation – Basic Skills and how to teach Fibreoptic Skills"

Dr. Mansukh Popat, Consultant Anaesthetist, Oxford.

10:00 Coffee

Workshops:

Participants will have the opportunity to attend each workshop during the day

Nasal Fibreoptic Intubation

Oral Fibreoptic Intubation and Oxford Box

Awake Fibreoptic Intubation

Clinical Scenarios and simulation

ILMA and Aintree Intubating Catheter

Double Lumen Tube

Cannula and Surgical Cricothyroidotomy

Video Laryngoscopes

Optimisation of Laryngoscopy

Extubation

12.10 Lunch

13.10 Workshops Continued

14.50 Tea

15.20 Workshops Continued

17.00 Close Please contact beckie.skirrow@uhl-tr.nhs.uk to apply

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