

CAS

ANESTHESIA NEWS

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CANADIAN ANESTHESIOLOGISTS' SOCIETY

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MESSAGE FROM THE PRESIDENT

“Colleagues, these are indeed very difficult and trying times in this country and around the world. We are now facing a global pandemic, COVID-19, and with this comes much uncertainty, fear, and frustration.



We all are fearful for our safety, our relatives and our friends, and the Canadian community in general. We all fear the unknown, how significantly this disease will impact our lives, how safe will I be performing my work, will I infect my family. Unfortunately, we have no concrete answers, but what CAS is trying to do, and indeed what anesthesiologists across the country and throughout the world are striving to do, is provide the best information, as quickly as it becomes available, to make your work as safe and successful as it can possibly be.

I think it is important that we also recognize that all this fear and uncertainty leads to stress in ourselves - the health care providers, and we can have short- and long-term repercussions on our own health. I would encourage communication among colleagues to lend support when asked and to ask for support when needed. I would encourage all Chairs and Chiefs to acknowledge the stress many anesthesiologists are working under and to be proactive to address concerns and offer support.

CAS has been working to provide information on airway management, which we will update regularly. We have also developed a COVID-19 page with links to airway resources, general information, and links to some health and wellness resources. I would encourage you to look at the resources, be mindful of your own health and wellness and the health and wellness of those around you.

There have been many questions about our upcoming Annual Meeting, and we are currently looking at alternatives including converting the in-person meeting to a virtual meeting using a webinar format. We would encourage members to hold off on booking hotels and flights. **Please stay safe.**

Daniel Bainbridge
President

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www.cas.ca

CAS and COVID-19

The CAS Board of Directors assures Society members that their health and safety are paramount to the organization. We are extremely mindful of our duty of care and are therefore watching the evolution of the COVID-19 virus carefully. Currently, the Public Health Agency of Canada (PHAC) has assessed the public health risk associated with COVID-19 as low for Canada. The public health risk is continually reassessed as new information becomes available and we monitor the WHO and Canadian Public Health websites daily. Shortly, we will be releasing a CAS information sheet authored by Dr Daniel Bainbridge, President, providing guidance and recommendations during COVID-19 airway manipulations.

With the CAS Annual Meeting scheduled for June 19 - 22, the national staff and planning team continue to prepare, while keeping a vigilant watch on the COVID-19 developments. We will advise our members as soon as any decisions are made regarding the meeting being delivered in person or virtually.

We are in continual contact with the Halifax Convention Centre in Halifax and we are in regular communication with the Halifax health advisory bodies. We are also reviewing recommendations by Health Canada and the Centre for Disease Control.

In our discussion with the Halifax Convention Centre, they assured us that:

- They have implemented enhanced standard cleaning protocols, including increased frequency of cleaning, and are following the recommendations of health authorities.
- There are currently no cancellations at the Halifax Convention Centre due to COVID-19. They have several events taking place over the coming months and look forward to welcoming CAS to their venue.

CAS has developed a list of informative COVID-19 links and information for members available at

www.cas.ca/covid

If you have any questions or require further information, please do not hesitate to contact CAS at

anesthesia@cas.ca or call **416-480-0602**.

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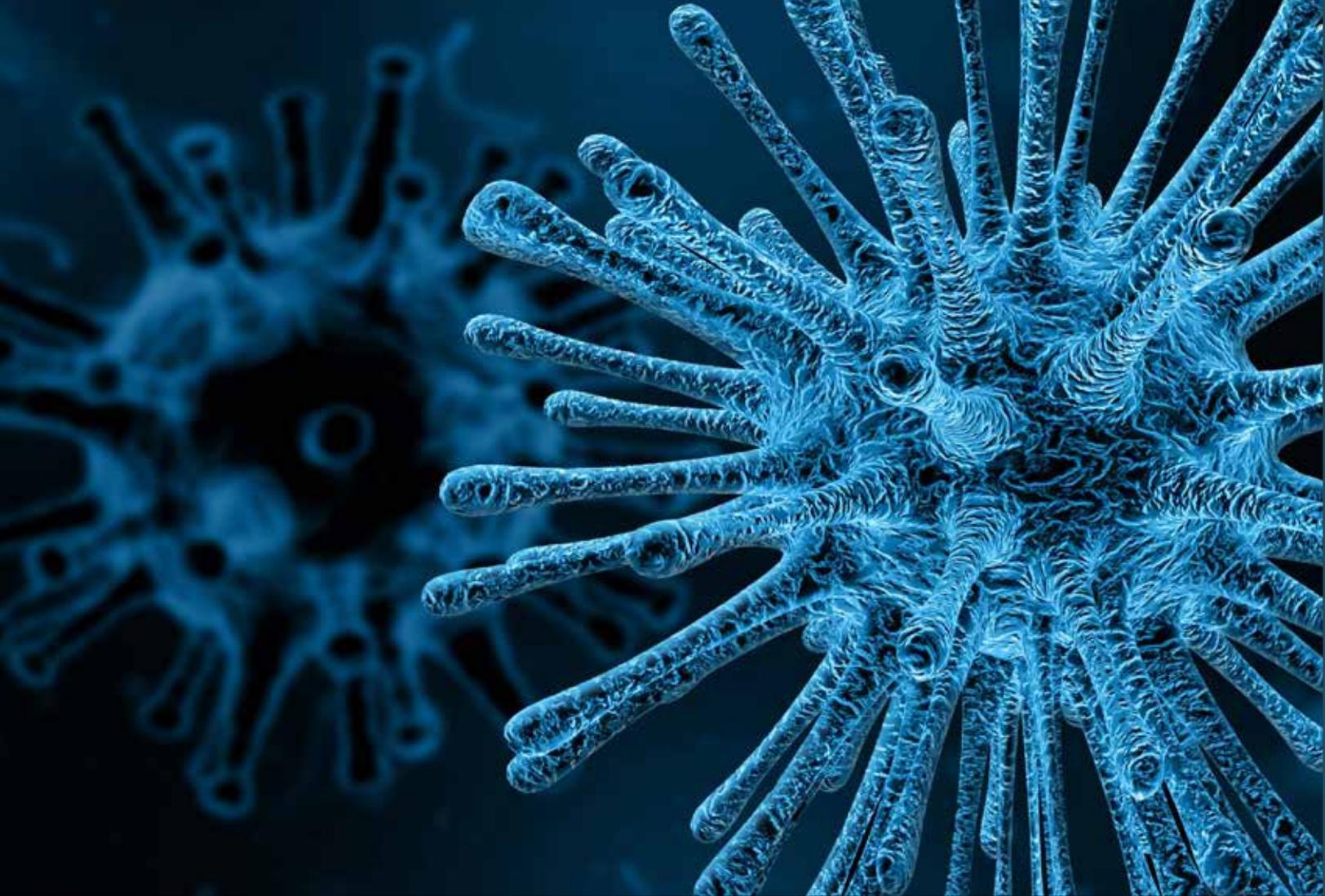
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2019-nCoV **OUTBREAK ACROSS THE WORLD**

A global health emergency has been declared by the World Health Organization as the 2019-nCoV outbreak spreads across the world, with confirmed patients in Canada.

While providing optimal treatment for these patients, careful execution of infection control measures is necessary to prevent transmission to other patients and to healthcare workers providing care. *The Canadian Journal of Anesthesia* has introduced a paper which summarizes important considerations regarding patient screening, environmental controls, personal protective equipment, resuscitation measures (including intubation), and critical care unit operations planning. This is essential as Canadian physicians prepare for the possibility of new imported cases or local outbreaks of 2019-nCoV.

Although understanding of the 2019-nCoV virus is evolving, lessons learned from prior infectious disease challenges such as Severe Acute Respiratory Syndrome (SARS) will hopefully improve our state of readiness regardless of the number of cases we eventually manage in Canada.

[CLICK HERE to read the full article](#)

CAS is posting new COVID-19 articles regularly. They are added to the CAS COVID page - check in regularly at www.cas.ca/covid

Practical recommendations for critical care and anesthesiology teams caring for COVID-19 coronavirus patients



COVID-19 has emerged as the cause of viral pneumonia cases in Wuhan, China



Suspicion for infection requires two elements:

- 1. Clinical features - fever & symptoms of respiratory illness**
- 2. Epidemiological link to the virus**



Predominant mechanism of transmission is contact/droplet spread related to respiratory secretions



Personal protective equipment for contact with critically ill patients with confirmed or suspected COVID-19 includes fluid-resistant gown, gloves, eye protection, full face shield and fit-tested N95 respirators



High flow nasal cannula (HFNC) delivery systems may cause an increase in the risk of viral spread through aerosol generation



CPAP/BiPAP should be avoided in patients with COVID-19 and should never be used outside of appropriate airborne/droplet isolation

#COVID19



#VisualAbstract

Wax RS, et al. Can J Anesth 2020
<https://doi.org/10.1007/s12630-020-01591-x>



CONGRATULATIONS TO OUR 2020 HONOUR AWARD WINNERS

The CAS Honour Awards program celebrates the diverse representation of anesthesiologists across Canada and their achievements. It is with great pleasure that CAS announces the winners of the 2020 Honour Awards and thanks them for their major contributions to the field of anesthesiology.



In recognition of excellence in a career in service to anesthesiology, the CAS is pleased to present **Dr Patricia Houston** with the **Gold Medal**. The Gold Medal is the highest award of the Canadian Anesthesiologists' Society.



Dr Anne Lui is the recipient of the 2020 **Clinical Practitioner Award**, thanks in large part to her ability to effect positive change in patient care



The **Clinical Teacher Award** goes to **Dr Stéphane Moffett**, widely reknown for being an inspired leader for residents, staff and other teachers across the country



The **CAS Humanitarian Award** goes to **Dr Achal Dhir**, who been exemplary in promoting human welfare by advancing anesthesia education across Canada and abroad



Together with her counterparts in Rwanda, **Dr Patricia Livingston** has had a huge impact on the development of resident training program and CPD activities. She has been awarded the **CAS Humanitarian Award**



Dr Jason Taam is recognized for his hard work with residents and the greater anesthesia community with the **John Bradley Young Educator Award**



John Bradley Young Educator Award recipient **Dr Gianni Lorello** has been a pioneer in changing culture to be welcoming to all resident trainees.

*Remember to nominate your worthy colleagues in next year's competition.
The call for nominations will come in Fall 2020.*

17th World Congress of Anaesthesiologists

September 5-9, 2020, Prague, Czech Republic



Preparations for the 17th World Congress of Anaesthesiologists in 2020 are well underway and going ahead as planned. That time of the year is sunny and warm in this part of Europe and we anticipate an outstanding congress in one of the world's most beautiful cities.

Prague is the seat of Charles University, the oldest university in Central and Eastern Europe. Founded in 1348 the university has become the centre of education and science for the whole region, where the discipline of anaesthesiology also has a long tradition. It should be noted that the first general anaesthesia in Prague was administered as early as February 7, 1847 and the First Department of Anaesthesia was set up in the Central Military Hospital in 1948.

The organizers of the World Congress of Anaesthesiologists 2020 are closely monitoring the current situation regarding the outbreak of Coronavirus (COVID-19). All measures and regulations recommended or imposed by the World Health Organisation (WHO) as well as by the Czech Ministry of Health are being implemented.

For registration and other information, go to: www.wcaprague2020.com/contact





Canadian Anesthesiologists' Society
International Education Foundation
Fondation d'éducation internationale de la
Société canadienne des anesthésiologistes

ANESTHESIA FOR GLOBAL OUTREACH COURSE

For CAS members who are interested in preparing themselves for global health work, the Canadian Anesthesiologists' Society International Education Foundation (CASIEF) endorses the 2020 11th *Annual Anesthesia for Global Outreach Course*.

As many will remember, this is the same course that used to be run at Dalhousie on an annual basis, with many of the same faculty, but this year's course will be hosted at Boston Children's Hospital, Boston, Massachusetts from October 9-11, 2020. The current Anesthesia for Global Outreach Course is an annual three-day course that focuses on novel techniques and equipment for delivering anesthesia care in under-serviced environments – the conditions under which 80% of the world's anesthesia care is delivered. The course boasts many world-renowned experts in global health and anesthesia as faculty, and is the only course of its kind in North America.

By the end of the course, *Anesthesia for Global Outreach* participants can expect to:

- Describe the preparations needed to safely work in austere conditions specific to the practice of anesthesia including intellectual, technical, ethical, and attitudinal factors.
- Compare various means of delivering educational programs in resource-poor environments including the use of simulation to practise clinical and technical skills and care delivery.
- Discuss the psychological and ethical adaptations that occur when working in an austere practice environment.
- Discuss the variety of cultural, social, and healthcare conditions that could affect anesthetic delivery and teaching in low-resource settings.

For more information on the 2020 *Anesthesia for Global Outreach Course* and to register, please visit:

www.AnesthesiaGlobalOutreach.com

REPORTS

ETHIOPIAN ANESTHESIA DEVELOPMENT PROGRAM

Dr Dylan Bould, Chair, CASIEF

The Canadian Anesthesiologists' Society International Education Foundation (CASIEF) is launching a fundraising campaign to support the development of anesthesia in Ethiopia.

Our goal: to raise at least \$150,000 by March 2021, in addition to our usual operating costs, and specifically to support expansion of anesthesia training in Ethiopia.

Why Ethiopia?

Ethiopia is a country of around 105 million people, with a huge burden of surgical disease, especially caesarean sections to reduce maternal mortality and trauma care. The biggest bottleneck to providing safe surgical care is anesthesia – the whole country has less than 50 anesthesiologists. Our partners in Ethiopia are working hard to increase the numbers of anesthesiologists, and there are around 60 residents in the Addis Ababa University (AAU) program. With very few faculty and a huge clinical load, training these residents is a huge challenge, but CASIEF has been working with AAU to support their program. We are also partnering with Haramaya University near Harar, outside of the capital, to support the development of a new department of anesthesia there, as well as a new anesthesia residency program. We have volunteers on the ground year-round to work with local staff and teach. We have been developing leaders who can implement new programs. We have been creating novel educational programs and training teachers. We want to keep doing this – and to do much more – but we can't keep doing this without significantly increasing funding.

In addition to our usual operating costs, we need to raise an additional \$150,000 over the next 12 months. This will support in-country volunteers, often staying in Addis for six-month posts. This will support a novel

longitudinal simulation program (VAST). As well, additional funding will support leadership training and teacher training. Our continued goals are to develop leaders in education, quality improvement and research within Ethiopian anesthesia.

We can only do this with your help. We realize that many of you have already contributed to CASIEF, perhaps already this year but we need more. If we can support Ethiopian anesthesia for the next two to three years, the graduates of these programs will be able to make this training sustainable.

How you can help:

1. You can donate through our website, casief.ca (even if you're already donated to us this year!).
2. You may wish to donate through investments such as stocks, securities, bonds, etc. Please contact us at info@casief.ca to discuss.
3. Look out for the CASIEF fundraising event at the CAS Annual Meeting in Halifax on June 21, 2020 – a Maritime Kitchen Party at the Wooden Monkey! Check out the advertisement on [page 8](#) for more information. Here you can also meet our partners from and working in Ethiopia to hear more about our work together.
4. We are keen to work with you at local fundraising activities in your universities, hospitals, and communities. Please contact us to discuss how we can support you in this.
5. Discuss this with your friends and colleagues, follow us on [Twitter \(@CAS_IEF\)](#) and [Facebook \(facebook.com/anesthesiaoverseas/\)](#) and retweet/ share this message to help get the word out.

Thanks!



REPORT FROM THE ETHICS COMMITTEE

The CAS Ethics Committee is responsible for advising the CAS Board of Directors on matters pertaining to the protection of human rights and values considering ethical, scientific, and technological progress in anesthesia, medicine, and society in general. The current Chair of the committee is Dr Cheryl Mack, a pediatric and adult cardiothoracic anesthesiologist who also works with the Environmental Sustainability Section of CAS.

In November 2019, the Ethics Committee created an influential document titled "Peri-Operative Status of 'Do Not Resuscitate' (DNR) Orders and Other Directives that Limit Intervention."

The Committee reviewed situations where patients with pre-existing DNR orders or other advance directives receive care from anesthesiologists. Such directives could potentially create professional and ethical challenges and cause additional responsibilities for the anesthesiologist.

The document outlines case scenarios and what to do in these situations, how to approach DNR orders, and guidelines to exceptions and conflict resolution. The document is a "must read" for all practising anesthesiologists in Canada.

You can read the full article on the [CAS website](#).



REPORT FROM THE CANADIAN ANESTHETIC INCIDENT REPORTING SYSTEM (CAIRS) COMMITTEE

At the recent LUCAS meeting (January 31 – February 2, 2020), we were advised of two cases of inadvertent intrathecal injection of tranexamic acid in Canada. These unfortunate events were associated with catastrophic patient outcomes.

The frequency of these particular catastrophic patient safety incident appears to be growing. This is likely associated with the increased use of TXA to reduce blood loss and utilization of blood products. In May of last year, the Institute of Safe Medical Practice (ISMP) issued an associated warning for all providers of regional anesthesia. [LINK](#)

In addition to this warning, a review article on inadvertent intrathecal TXA injection has recently been published:

Catastrophic drug errors involving tranexamic acid administered during spinal anaesthesia.

This systematic review details the factors involved in errors. They found 21 cases of spinal tranexamic acid administration. Life-threatening complications, requiring resuscitation and/or intensive care, occurred in 20 patients; 10 patients died. In 20 cases, ampoule error was the cause; in the last case, a spinal catheter was mistaken for an intravenous catheter. In the ISMP warning, label colors may be different; however, when

the vials are stored upright, in close proximity to one another, and in a bin, drawer, or below eye level, only the caps may be visible, which unfortunately are the same color. In addition, the ISMP bulletin reported that while a drug barcode scanning safety system was available, it was NOT USED.

The review by Patel et al makes four recommendations:

1. Storing TXA vials where labels are easily visible.
2. Cross-check medication with two care providers by carefully reading the label on all ampules or vials when drawing up any intrathecal medications.
3. Proper labelling of neuraxial catheter connectors as per 2020 CAS Guidelines to Anesthesia.
4. Consider implementing non-Luer lock NRFit for regional/neuraxial catheters connectors to reduce the risk of accidental epidural administration of medications.

The CAIRS Committee urges all members to review this literature and share the information with all colleagues. To quote Patel et al: "no other drug has caused such a level of iatrogenic harm in regional anaesthesia practice."





Dr Thomas Kim, Dr Alana Flexman and Dr Alexandra Kisilevsky at the SNACC abstract session

THE GROWING RECOGNITION OF THE CAS NEUROANESTHESIA SECTION IN THE INTERNATIONAL COMMUNITY

Dr Tumul Chowdhury, Secretary and Treasurer, Neuroanesthesia Section

At the recent Society for Neuroscience in Anesthesiology and Critical Care (SNACC) conference in Phoenix, Arizona, the CAS Neuroanesthesia Section members and fellows participated in various events including abstract/poster presentations, moderating sessions, and workshops as well as delivering excellent lectures.

I am very proud to share that **Dr Thomas Kim** (Vancouver) received the CAS-SNACC Joint Travel Abstract Award on his research "Appearance of gamma wave EEG from Cranial nerve V and XI EMG activity during retrosigmoid vestibular schwannoma resection." Additionally, Dr Sanket Agarwal (St Michael's, Toronto) won the SNACC-ISNACC (Indian Society of Neuroanesthesiology and Critical Care) Joint Travel Award on his research "O-C1-C2 Dynamics During Flexible Fiberoptic Bronchoscopy and Video Laryngoscopy in Patients With Craniovertebral Junction Pathology (Atlanto-axial Dislocation/Basilar Invagination): A Cinefluoroscopic Comparison". Congratulations Thomas and Sanket!

My enjoyment was doubled when **Dr Jason Chui** (Vice Chair, CAS Neuroanesthesia Section), was also selected and awarded the Top Clinical Abstract on the topic "Goal-directed therapy in endovascular coiling of aneurysmal subarachnoid haemorrhage patients - A pilot, prospective, blinded, parallel design, randomized controlled study". Bravo Jason, well deserved!

Other Section members participated in the conference program. **Dr Tumul Chowdhury** (Secretary-Treasurer, CAS Neuroanesthesia Section) co-hosted the Trainees' Welcome Reception, as well as the Neuroanesthesia Quiz Session. Both sessions were highly appreciated

and enjoyed by both trainees and faculty. In addition, Dr Sandy Kisilevsky (Vancouver General Hospital) and Dr Chui acted as moderators for the scientific poster sessions.

Additionally, **Dr Alana Flexman** (Chair, CAS Neuroanesthesia Section) was elected Secretary and Treasurer of SNACC, and presented the CAS-SNACC joint travel award to Dr Thomas Kim. Finally, Dr Joseph Fisher (Toronto) presented an excellent lecture on "Going Off the Rails: What Happens to CBF During GA and Why" and Dr Ian Herrick, former Chair of the CAS Ethics Committee, participated in an editorial board member meeting entitled "Journal of Neurosurgical Anesthesiology: an official journal of SNACC".

As our participation in international neuroanesthesia and neurosciences platforms continues to grow, we will expand our network and establish productive collaborations across the world. I am also pleased to share that, for the first time, SNACC will be held in Montreal this year. **The SNACC Annual Meeting 2020** will include a "Neuroanesthesia Bootcamp" for both trainees and fellows, as well as an excellent conference program. We hope to see many CAS members there and stay tuned for more information about our Section! And lastly, I am excited to share that also this year the CAS-SNACC Joint Abstract Award is open for all CAS trainee members. So hurry up, and prepare and submit your research abstract for the SNACC conference in Montreal.

Looking forward to see you all at Halifax in June for the CAS Annual Meeting and Montreal in September for SNACC.



Dr Jason Chui presenting top clinical abstract



Dr Tumul Chowdhury co-hosting Trainees' reception and quiz



Dr Alana Flexman (right) presents the CAS-SNACC joint award to Dr Thomas Kim



As we prepare for the 2020 Annual Meeting in Halifax, we're proud to be working with a new on-site team – **The Bayley Group**. Based out of London, Ontario, the team works from a heritage log home surrounded by a beautiful garden, making it an inviting place to work and inspire new ideas.

The Bayley Group will be integral in directing a lot of our Annual Meeting operations (in coordination with CAS staff), including exhibitor sales, event logistics, launching our new mobile app, developing marketing strategies to suit our attendees, registering speakers, and post-event reporting.

Be sure to check out their website for more information and to introduce yourselves to our newest member of the CAS Annual Meeting team!

bayleygroup.com

REFLECTIONS FROM A NEW BOARD MEMBER



DR MARIA SALMAN



Some of the most renowned international organizations are dependent on dedicated volunteers who put time outside of work to produce work they are passionate about, and CAS is no different. I volunteered to be a part of CAS's Board of Directors because my role gives residents across

Canada a voice that is truly heard by CAS. Volunteering gives me a sense of empowerment because, as a group, we are able to create the Residents Section and events at the CAS Annual Meeting in alignment with our interests and needs. I encourage anyone who would like to see a change in anesthesiology, research, or a related aspect of our specialty to use CAS as a platform and volunteer with us!

CAS has a tremendous role in my career—it's ultimately what began it and I am very passionate about contributing to this esteemed organization. I was a third-year medical student when I first came to CAS to present my summer's research—I had presented at a national and international level, and

was pleasantly surprised at how welcoming everyone was to me so early in my career. I was able to explore a specialty that I was passionate about by networking with anesthesiologists from all over Canada and returned as a fourth-year medical student to present research.

To this day, I cannot forget the sense of encouragement I felt in that moment. CAS gave me the tools and confidence I needed as a young learner and I hope to contribute to CAS by inspiring others. Last year, I ran the Fellowship and Careers Fair and, in 2020, I am the Resident member on the Board of Directors.

Anesthesia is a specialty where we do not work alongside each other daily and, to feel a sense of community, we must make active efforts to do so. Everyone in the field of anesthesia should be involved with CAS to not only gain that sense of community but also inspiration, knowledge, and a cultivation of curiosity and innovation. With my three-year involvement, I have already gained tremendous mentorship, leadership experience, and connections at the national level. Anyone considering membership should make the choice to support and be a part of Canada's largest society of anesthesiologists.



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For all enquiries please contact

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THE SELF ASSESSMENT PROGRAM FROM THE *CANADIAN JOURNAL OF ANESTHESIA* - CPD ONLINE

CPD Module:

Synopsis of the point-of-care ultrasound assessment for perioperative emergencies - April 2019

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- Updated guide for the management of malignant hyperthermia - June 2018
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- Massive hemorrhage and transfusion in the operating room - September 2017
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How to Access the Modules:

Instructions can be found on the Canadian Anesthesiologists' Society website at:

www.cas.ca/cpd-online

Successful completion of each module of the self-assessment program will entitle readers to claim four hours of continuing professional development (CPD) under section 3 of CPD options, for a total of 12 maintenance of certification credits. Section 3 hours are not limited to a maximum number of credits per five-year period.

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1 Eglinton Avenue East, Suite 208
Toronto, ON, Canada M4P 3A1

Editor-in-Chief:

Dr Andrew Nice

Managing Editor:

Andrea Szametz

Email: anesthesia@cas.ca

Fax: 416-480-0320

Phone: 416-480-0602

www.cas.ca