



CORE TOPICS York

Friday 7 February 2020

Organisers: Drs Joseph Carter and James Walkington, York

Location: The Principal York, Station Road, York, YO24 1AA

Programme

08:45 Registration/Tea and coffee

09:30 Welcome and introduction
Dr Joseph Carter, York

Session 1

09:35 Top tips on obesity and anaesthesia Domain 1, 1A01-02
Dr Jonathan Redman, York

10:00 Pre-habilitation for major surgery Domain 3, 2A03, 2A07 & 3A03
Dr Thomas Collyer, Harrogate

10:25 Discussion

10:35 Tea and coffee

Session 2

11:00 Perioperative hypotension Domain 1, 1A01, 2A05
Dr Simon Davies, York

11:25 Innovation in anaesthesia and intensive care Domain 2, 1A03 & 1I05
Dr Peter Young, King's Lynn

11:50 Peri-operative medicine: a new paradigm... Domain 1, 2A03 & 3A03
Dr David Yates, York

12:15 Discussion

12:30 Lunch

Session 3

13:30 Colorectal surgery update Domain 1, 2A03 & 3A03
Mr Jesper Roos, Colorectal Surgeon, York

13:55 Role of the peri-operative nurse Domain 3, 1I05, 2A03, 2A05 & 3A03
Ms Zoe Murphy, Nurse, York

14:20 What's new in regional anaesthesia Domain 1, 2G01-04
Dr Harry Murgatroyd, York

14:45 Discussion

15:00 Tea and coffee

Session 4

15:25 Cardiological management of the surgical patient Domain 1, 1A02 & 2A03
Dr Simon Megharry, Consultant Cardiologist, York

15:50 Death on the operating table Domain 3, 1I01-02 & 3I00
Dr Jane Sturgess, West Suffolk

16:15 Discussion

16:30 Close of meeting

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Learning objectives

Session 1

Top tips on obesity and anaesthesia Domain 1, 1A01-02

Dr Jonathan Redman, York

1. Identify the perioperative risk factors in obesity
2. Discuss the safe induction and maintenance of anaesthesia in the obese patient
3. Highlight the anaesthesia based problems associated with obesity

Pre-habilitation for major surgery Domain 3, 2A03, 2A07 & 3A03

Dr Thomas Collyer, Harrogate

1. Prehabilitation is an emerging area of clinical interest.
2. Limited clinical research currently exists although a number of large clinical trials are currently under way.
3. Prehabilitation enables an opportunity for patients to take control of their modifiable risk factors
4. The potential benefits of prehabilitation extend well beyond the post surgical period

Session 2

Perioperative hypotension Domain 1, 1A01, 2A05

Dr Simon Davies, York

1. Impact of perioperative hypotension on outcomes
2. Burden of hypotension
3. New technology to avoid perioperative hypotension

Innovation in anaesthesia and intensive care Domain 2, 1A03 & 1I05

Dr Peter Young, King's Lynn

1. Understand the landscape of support in the NHS for innovation
2. Understand the process and pathways of innovation
3. Understand the barriers to innovation and adoption

Peri-operative medicine: a new paradigm... Domain 1, 2A03 & 3A03

Dr David Yates, York

1. To understand the current trajectory of, and challenges facing, Perioperative Medicine as a new specialty and to discuss its place within the larger parent specialty of Anaesthesia.
2. To learn about new pathways of care in the perioperative setting.
3. To consider current anaesthetic practice in the context of evidenced based medicine.

Session 3

Colorectal surgery update Domain 1, 2A03 & 3A03

Mr Jesper Roos, Colorectal Surgeon, York

No learning objectives have been provided.

Role of the peri-operative nurse Domain 3, 1I05, 2A03, 2A05 & 3A03

Ms Zoe Murphy, Nurse, York

1. To understand the role of a specialist nurse in the perioperative medicine setting

What's new in regional anaesthesia Domain 1, 2G01-04

Dr Harry Murgatroyd, York

1. To discuss the recent trends and literature in regional anaesthesia; specifically -
 - a. RAUK Plan A Blocks – 'a few blocks for the many'
 - b. Erector Spinae Plane blocks
 - c. Blocks for the hip
 - d. POCUS – you've got an ultrasound machine, you may as well use it

Session 4

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**Association
of Anaesthetists**

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Cardiological management of the surgical patient Domain 1, 1A02 & 2A03

Dr Simon Megharry, Consultant Cardiologist, York

1. Decision making in surgical patients on dual antiplatelet therapy with coronary stents
2. Planning / Optimisation / Cardiology input for Patients with heart failure
3. When will the cardiologist help with valve disease?
4. Who else will your cardiologist want to see pre-op?

Death on the operating table Domain 3, 1101-02 & 3100

Dr Jane Sturgess, West Suffolk

1. List the professional expectations of the clinician after a death on the table
2. Describe difficulties an individual may have dealing with the immediate and longer term psychological response to a death on the table
1. Feel able to start to put in place mechanisms at work to ensure professional expectations are met, that also support clinicians

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