

LKS Current Awareness Bulletin

Anaesthetics – Aug/Sept 2019

Visit our [Anaesthetics Care Knowledge Centre](#)

A current awareness update service from Library and Knowledge Services. If you know anyone who could benefit from receiving this please ask them to sign up by emailing

clare.morton@elht.nhs.uk or library.blackburn@elht.nhs.uk

[SIGN UP TO OTHER
BULLETINS](#)

I hope this bulletin is useful. We are keen to promote our services at your team meetings/huddles. If you feel that this would be useful, then please contact me to arrange a brief induction to how we can support you in education and training, researching for information, literature support, critical appraisal skills, free article requests, social media training (learn to Tweet!) and much much more. Kind regards

Abbas

Abbas Bismillah, Head of Library and Knowledge Services

Email abbas.bismillah@elht.nhs.uk 01254 784308 (Ext: 84308)

In the News

Survey reveals extent and impact of fatigue on hospital consultants as politicians and healthcare bodies back national campaign

Politicians, healthcare bodies and Medical Royal Colleges from across the UK are backing the national Fight Fatigue Campaign to help raise awareness of the impact of fatigue and shift work on our NHS workforce.

Despite growing support for the campaign there is still much to be done, [as demonstrated by survey results](#) which reveals the scale and impact of out-of-hours working on consultant anaesthetists and intensivists.

The vast majority of respondents reported work-related fatigue impacting on all areas of life and more than 1 in 10 admitted to having had a car accident or near miss when commuting whilst fatigued in their consultant career, and many more as an anaesthetist in training.

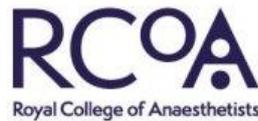
Source: Royal College of Anaesthetists

Women in labour given virtual reality to ease pain of childbirth

Women in labour are [being given virtual reality headsets](#) to see if they can help manage the pain of childbirth.

Source: BBC News

News from the Royal College



Latest RCoA Bulletin



Please click [here](#) to download this issue, which includes:

The Centre for Perioperative Care (CPOC)

Cannabinoids: where are we?

'Plan-D' kits: an innovative emergency solution

An insider's view: being an Advisory Appointments Committee assessor

[Joint guidance on the impact of a no-deal Brexit - 27 Sep 2019](#)

The Academy of Medical Royal Colleges has issued a statement warning of the dangers of a no-deal Brexit to patient safety and the healthcare sector in the UK. Together, the Royal College of Anaesthetists and the Association of Anaesthetists would like to make their members...

[Patient Safety Update published -16 Sep 2019](#)

The Safe Anaesthesia Liaison Group (SALG) has issued their Patient Safety Update, which contains important learning regarding reported anaesthesia-related untoward incidents. This update contains anonymous case studies from January to March 2019, and includes items relating to:...

[RCoA responds to the government agreeing to place anaesthesia on... 07 Aug 2019](#)

In response to the government agreeing to place anaesthesia on the Shortage Occupation List, Professor Ravi Mahajan, President of the Royal College of Anaesthetists said: "The Royal College of Anaesthetists is pleased the government has agreed to implement the Migration Advisory...



If you are accessing any link outside of the ELHT network please use your NHS Athens username & password to access <https://openathens.nice.org.uk/>

Effects of inspired oxygen concentration during emergence from general anaesthesia on postoperative lung impedance changes evaluated by electrical impedance tomography: a randomised controlled trial.

Author(s): Park, Jiyeon; Lee, Eun-Kyung; Lee, Jong-Hwan; Oh, Eun Jung; Min, Jeong Jin

Source: Journal of clinical monitoring and computing; Sep 2019

Abstract: We evaluated the effects of three different inspired oxygen concentrations (40%, 80%, and 100%) at anaesthesia emergence on postoperative lung volumes as measured by global impedance of electrical impedance tomography (EIT).

Database: Medline

[Request this article from the library](#)

Addition of dexamethasone to local infiltration analgesia in elective total hip arthroplasty: a double-blind, randomized control trial.

Author(s): El-Boghdadly, Kariem; Short, Anthony James; Gandhi, Rajiv; Chan, Vincent W S

Source: Regional anesthesia and pain medicine; Sep 2019

Abstract: Pain following total hip arthroplasty is significant, and effective analgesia is associated with an improvement in functional outcomes. Dexamethasone may facilitate the action of local anesthesia, but its role as an additive to a local infiltration analgesia (LIA) mixture in hip arthroplasty settings has not been investigated.

Database: Medline

[Request this article from the library](#)

Prospective cohort study examining the use of regional anesthesia for early pain management after combat-related extremity injury.

Author(s): Gallagher, Rollin M; Polomano, Rosemary C; Giordano, Nicholas A; Farrar, John T; Guo, Wensheng; Taylor, Lynn; Oslin, David; Goff, Brandon J; Buckenmaier, Chester C

Source: Regional anesthesia and pain medicine; Sep 2019

Available at [Regional anesthesia and pain medicine](#)

Abstract: No studies have examined the long-term benefits of regional anesthesia (RA) for pain management after combat-related injury. The objective of this prospective cohort study was to examine the relationship between RA administration and patient-reported pain-related outcomes among Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) service members sustaining a combat-related extremity injury.

Database: Medline

Risk of Major Complications After Perioperative Norepinephrine Infusion Through Peripheral Intravenous Lines in a Multicenter Study.

Author(s): Pancaro, Carlo; Shah, Nirav; Pasma, Wietze; Saager, Leif; Cassidy, Ruth; van Klei, Wilton; Kooij, Fabian; Vittali, Dave; Hollmann, Markus W; Kheterpal, Sachin; Lirk, Philipp

Source: Anesthesia and analgesia; Sep 2019

Database: Medline

[Request this article from the library](#)

Complications Associated With the Anesthesia Transport of Pediatric Patients: An Analysis of the Wake Up Safe Database.

Author(s): Haydar, Bishr; Baetzel, Anne; Stewart, Margaret; Voepel-Lewis, Terri; Malviya, Shobha; Christensen, Robert

Source: Anesthesia and analgesia; Sep 2019

Abstract: Transporting patients under anesthesia care incurs numerous potential risks, especially for those with critical illness. The purpose of this study is to identify and report all pediatric anesthesia transport-associated adverse events from a pre-existing database of perioperative adverse events.

Database: Medline

[Request this article from the library](#)

Perioperative beta-blockers for preventing surgery-related mortality and morbidity in adults undergoing non-cardiac surgery.

Author(s): Blessberger, Hermann; Lewis, Sharon R; Pritchard, Michael W; Fawcett, Lizzy J; Domanovits, Hans; Schlager, Oliver; Wildner, Brigitte; Kammler, Juergen; Steinwender, Clemens

Source: The Cochrane database of systematic reviews; Sep 2019; vol. 9 ; p. CD013438

Available at [The Cochrane database of systematic reviews](#) - from Cochrane Collaboration (Wiley)

Database: Medline

Bispectral index for improving intraoperative awareness and early postoperative recovery in adults.

Author(s): Lewis, Sharon R; Pritchard, Michael W; Fawcett, Lizzy J; Punjasawadwong, Yodying

Source: The Cochrane database of systematic reviews; Sep 2019; vol. 9 ; p. CD003843

Available at [The Cochrane database of systematic reviews](#) - from Cochrane Collaboration (Wiley)

General Anesthesia Versus Conscious Sedation in Endovascular Thrombectomy for Stroke: A Meta-Analysis of 4 Randomized Controlled Trials.

Author(s): Campbell, Doug; Diprose, William K; Deng, Carolyn; Barber, P Alan

Source: Journal of neurosurgical anesthesiology; Sep 2019

Abstract: In ischemic stroke patients, studies have suggested that clinical outcomes following endovascular thrombectomy are worse after general anesthesia (GA) compared with conscious sedation (CS). Most data are from observational trials, which are prone to measure and unmeasure confounding. We performed a systematic review and meta-analysis of thrombectomy trials where patients were randomized to GA or CS, and compared efficacy and safety outcomes.

Database: Medline

[Request this article from the library](#)

Awake sedation with propofol attenuates intraoperative stress of carotid endarterectomy in regional anesthesia.

Author(s): Szabó, Péter; Mayer, Mátyás; Horváth-Szalai, Zoltán; Tóth, Krisztina; Márton, Sándor; Menyhei, Gábor; Sínay, László; Molnár, Tihamér

Source: Annals of vascular surgery; Sep 2019

Available at [Annals of vascular surgery](#) - from ClinicalKey

Database: Medline

Efficacy of buffered local anaesthetics in head and neck infections.

Author(s): Arora, G; Degala, S; Dasukil, S

Source: The British journal of oral & maxillofacial surgery; Sep 2019

Available at [The British journal of oral & maxillofacial surgery](#) - from ClinicalKey

Database: Medline

Comparison of propofol-ketamine versus propofol-remifentanyl in children anaesthetized for gastroscopy.

Author(s): Damps, Maria; Stołtny, Ludwik; Siemek-Mitela, Jadwiga; Lekstan, Andrzej; Krzych, Łukasz; Kucewicz-Czech, Ewa

Source: Anaesthesiology intensive therapy; Sep 2019

Available at [Anaesthesiology intensive therapy](#) - from EBSCO (MEDLINE Complete)

Database: Medline

Transversus abdominis plane block and quadratus lumborum block did not reduce the incidence or severity of chronic postsurgical pain following cesarean section: a prospective, observational study.

Author(s): Borys, Michał; Potręć-Studzińska, Beata; Wiech, Marcin; Piwowarczyk, Paweł; Sysiak-Sławecka, Justyna; Rypulak, Elżbieta; Gęca, Tomasz; Kwaśniewska, Anna; Czuczwar, Mirosław

Source: Anaesthesiology intensive therapy; Sep 2019

Available at [Anaesthesiology intensive therapy](#) - from EBSCO (MEDLINE Complete)

Database: Medline

Anaesthesia provider volume and perioperative outcomes in total joint arthroplasty surgery.

Author(s): Memtsoudis, Stavros G; Wilson, Lauren A; Bekeris, Janis; Liu, Jiabin; Poultsides, Lazaros; Fiasconaro, Megan; Poeran, Jashvant

Source: British journal of anaesthesia; Sep 2019

Abstract: While increased surgical-provider volume has been associated with improved outcomes, research regarding volume-outcome relationships within high-volume institutions and the role of anaesthesiologists is limited. Further, the effect of anaesthesia-care-team composition remains understudied. This analysis aimed to identify the impact of anaesthesiologist and surgeon volume on adverse events after total joint arthroplasties.

Database: Medline

[Request this article from the library](#)

Obesity and spinal anesthesia outcomes.

Author(s): Park, Sun-Kyung; Yoon, Hyun-Kyu; Kim, Won Ho

Source: Journal of anesthesia; Sep 2019

Available at [Journal of anesthesia](#)

Database: Medline

Anesthesia for thoracic ambulatory surgery.

Author(s): Raft, Julien; Richebé, Philippe

Source: Current opinion in anaesthesiology; Sep 2019

Abstract: Ambulatory surgery plays a major role in cost-effective patient care without compromising patient safety and satisfaction. This concept improves the patient support and decreases the length of stay sometimes until ambulatory surgery. The aim of this review is to examine the current state of the art of anesthesia for thoracic ambulatory surgery.

Database: Medline

[Request this article from the library](#)

Agreement between frontal and occipital regional cerebral oxygen saturation in infants during surgery and general anesthesia an observational study.

Author(s): Jildenstål, Pether; Sandin, Johan; WarrènStomberg, Margareta; Pålsson, Jan; Ricksten, Sven-Erik; Snygg, Johan

Source: Paediatric anaesthesia; Sep 2019

Available at [Paediatric anaesthesia](#) - from Wiley Online Library Medicine and Nursing Collection 2019 - NHS

Database: Medline

Development and Pilot Study of an iOS Smartphone Application for Perioperative Functional Capacity Assessment.

Author(s): Rubin, Daniel S; Dalton, Allison; Tank, Allyson; Berkowitz, Mark; Arnolds, David E; Liao, Chuanhong; Gerlach, Rebecca M

Source: Anesthesia and analgesia; Sep 2019

Abstract: Functional capacity assessment plays a core role in the preoperative evaluation. The Duke Activity Status Index (DASI) and the 6-minute walk test (6MWT) are 2 methods that have demonstrated the ability to evaluate functional capacity and predict perioperative outcomes. Smartphones offer a novel method to facilitate functional capacity assessment as they can easily administer a survey and accelerometers can track patient activity during a 6MWT. We developed a smartphone application to administer a 6MWT and DASI survey and performed a pilot study to evaluate the accuracy of a smartphone-based functional capacity tool in our Anesthesia and Perioperative Medicine Clinic. **METHODS** Using the Apple ResearchKit software platform, we developed an application that administers a DASI survey and 6MWT on an iOS smartphone.

Database: Medline

[Request this article from the library](#)

Dynamic predictive model for postoperative nausea and vomiting for intravenous fentanyl patient-controlled analgesia.

Author(s): Chae, D; Kim, S Y; Song, Y; Baek, W; Shin, H; Park, K; Han, D W

Source: Anaesthesia; Sep 2019

Available at [Anaesthesia](#) - from Wiley Online Library Medicine and Nursing Collection 2019 - NHS

Database: Medline

CLINICAL LIBRARIAN SERVICE



hello my name is...
Patrick Glaister

Patrick Glaister has joined the library team as Clinical Librarian.

He has been working within libraries for a number of years in a variety of sectors including public libraries, University libraries, Special collection libraries and archives. Most recently he has been working at Pennine Acute Trust supporting staff and students.

As part of his role, Patrick will help you find and appraise evidence. With so much information and evidence out there why not get him to help you?

Patrick can carry out literature searches and appraise articles for you and your team. He can also show you how to do both more effectively too. So contact him now to find out more.

patrick.glaister@elht.nhs.uk

We have staff who can help support you in finding the evidence for:

General Interest and Personal Development

Writing for Publication and Presentation

Research or Assignment

Education and Training

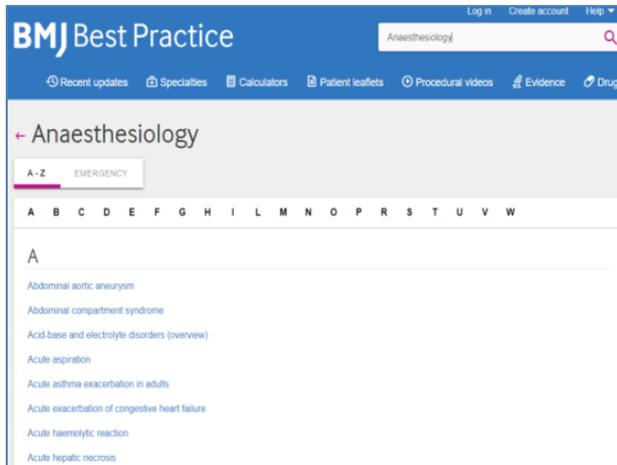
Evidence Based Practice for Patient Care

Service Management

Up-to-date Protocols and Guidelines

If you require a literature search, then please do ask us - we can save you the time!

Please share with your colleagues.



BMJ Best Practice is a decision-support tool published by the BMJ Group and is a single source of evidence based medicine, which combines the latest research evidence, guidelines and expert opinion – providing essential learning on prevention, diagnosis, treatment and prognosis. BMJ Best Practice is of use to all staff - Doctors, Nurses and Midwives, HCAs, Patients, Volunteers, Admin. The website also has a CME/CPD activity tracking tool which logs your searches and active hours and allows users to create activity certificates to support revalidation and CME/CPD

ELHT Library has subscribed to BMJ Learning for all staff and students @ ELHT. BMJ Learning provides continuing medical education that is high-quality, evidence-based and covers clinical topics, professional skills and career

- Support your CPD/Revalidation/Portfolio
- 100s online courses to choose from
- Course duration from 30 minutes to 1 hour
- Obtain valuable CME/CPD points

learning.bmj.com
Sign in with Open Athens

BMJ Learning FREE learning modules for ALL staff and students at ELHT

We can show you how you too can access these resources and more.

Have you heard of BMJ Learning? Do you know how to register? Do you need help finding courses? Free training sessions on BMJ Learning to all staff and students at East Lancashire Hospitals. We will show you how to register and find eLearning courses relevant to you. These courses can be counted towards your CPD and you will receive a certificate of completion.

Please contact [Abbas Bismillah](#), Head of Library and Knowledge Services (Ext. 84308) to arrange a training session.

Reflective Reading Club

This is how the Reflective Reading Club works:

Individual Learning – 1.5 hours CPD

1. You let us know you are interested.
2. We send you a short journal article and a small checklist of points to consider when reading it. Make notes as you read the paper in your own time and this earns you one and a half hours CPD time!

Participatory Learning – 1.5 hours CPD

- Our meetings takes just 1.5 hours
3. We meet for the club and discuss the article in a small group, reflecting on points whilst working our way through the checklist.
- Participate in both sessions will count for a total of 3 CPD hours!

<https://twitter.com/beckystanworth1/status/1178709749409419264?s=20>

Come and join our Reflective Reading Club which will provide attendees with 3 hours of valuable CPD! It will give healthcare staff the opportunity to read, discuss and to critically reflect upon a published paper using a set of guided questions. Participants are required to read a pre-set paper prior to attending the session.

Contact us at library.blackburn@elht.nhs.uk

01254 734312 or Ext. 8431

Learn to Tweet



Social Media Training at East Lancs Hospitals NHS Trust Library Services for staff and students

To Tweet or not to Tweet! Here are just some of the reasons why you may want to consider how to use Twitter. We can help. Book with the library staff Library.Blackburn@elht.nhs.uk

- Let us show you how to promote all the amazing things that you and your teams do for patient care.**
- Let us show you how you and your teams can keep up-to-date**
- Let us show you how you and your teams can network, regionally, nationally and internationally**
- Let us show you how you and your teams can learn from others too.**

Follow us on twitter

[@elhtlibrary](https://twitter.com/elhtlibrary)

[Abbas - @bazzie1967](https://twitter.com/bazzie1967)

Safe | Personal | Effective

Library and Knowledge Services Team

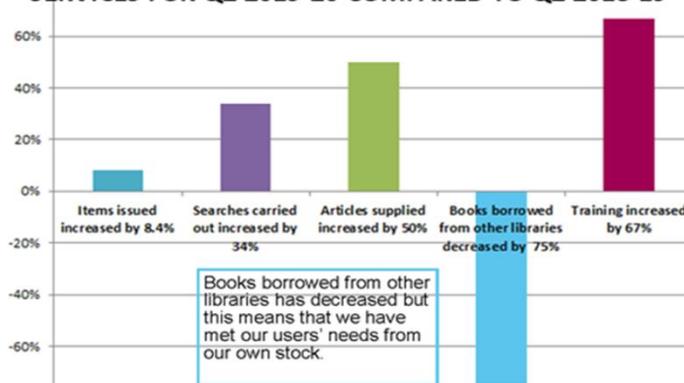
Abbas Bismillah	Head of Library and Knowledge Services
Clare Morton	Library Operational Services Manager
Patrick Glaister	Clinical Librarian
Judith Aquino	E-Resources Librarian
Sarah Glover	Library Services Officer
Charlotte Holden	Library Services Officer
Lauren Kay	Library Services Officer

This is a good library service. In 2018/19 our Library was accredited as 92% compliant in the Library Quality Assurance Framework (LQAF)

Please visit our website for more information



PERFORMANCE FOR ELHT LIBRARY AND KNOWLEDGE SERVICES FOR Q2 2019-20 COMPARED TO Q2 2018-19



Performance Indicators – In Q2, we have increased delivery on many of our training programmes. This includes literature searches and our social media training. To ensure that these programmes are of benefit to the learner, we have implemented a range of tools to measure the quality and the impact of what we do. For example, our learners tell us that *our library induction is the best induction that they have ever had at any Trust (FY2s)*. In

addition to this, our social media training questionnaire has received very favourable comments, including *“the training received has been brilliant and I can’t wait to use this to promote all the things that we do”*.

Education @ELHT is produced every two months and it highlights all the wonderful work that the department does. Our **Library Guide** highlights all the services that we offer. Click on the Bulletin or Guide and find out more about how we can support you, whether you are staff, student, or volunteers.

Education @ ELHT News
September 2019

IN THIS ISSUE

<p>Courses and Events LIFT2 Pilot Psychiatry Foundation Fellowships Prince's Trust New Staff Vascular Nursing Study Day Learning Hub FAQs Learners' Lounge at BGTH Becoming an NHS Apprentice Time Management Courses</p>	<p>Preceptorship @ ELHT Global Learners Project Policy Work Current Awareness Induction Health and Wellbeing Events Public Libraries Reflective Reading Club Library Training Programme Trainee ACPs</p>
--	---

Thank you to all our customers

Disclaimer: The Library cannot guarantee the correctness or completeness of the information in this bulletin. The information is subject to change and we cannot guarantee it will remain up-to-date. It is your responsibility to check the accuracy and validity of the information.