Campaign Monitor Newsletter 9/5/14, 7:22 PM



STARTprep JULY 2014 UPDATE



Hey there, !

Welcome to STARTprep 2014 | Online Anesthesia Basic Science Curriculum

A 50-year-old male suffered a vespa accident after eating a heavy meal-do you have any concerns about inducing general anesthesia?

A 50-year-old male investment banker suffered a vespa accident while returning to his hotel following a seafood and pasta dinner at Le Tre Sorelle, a small beachfront restaurant on the Amalfi coast in Southern Italy. His physical status is an ASA II. He is moderately obese (BMI 30) and hypertensive for which he takes Verapamil. He also suffers from chronic low back pain and is prescribed Amitriptyline by his family doctor. Imaging studies showed a grade II pelvic fracture and multiple comminuted exposed fractures of his metatarsi with loss of skin, muscle and bone on his right side. At the Pronto Soccorso in the local hospital his pain is managed with IV morphine.

The following morning, 16 hours after the accident, you are asked to induce general anesthesia for repair of this patient's injuries. The patient has remained NPO since the time of the accident.

Do you have any concerns in inducing general anesthesia in this patient? Is this patient considered a "full stomach"? What, if any, measures are required in order to safely induce anesthesia and secure the airway in this patient?

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Click on today's module about airway evaluation for the answer!

Introduction to the Lesson

Saturday, July 19, 2014

Evaluation of the Patient and Preoperative: NPO and full stomach status, implications for airway management, choice of anesthesia technique and induction of anesthesia; Gastric Emptying Time, Alteration of gastric fluid volume and pH, sphincter tone



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After completing this lesson the learner will be able to:

- 1. Explain esophageal and gastric physiology.
- 2. Identify the differences in airway management and anesthetic technique between fasting and full stomach patients.

CLICK HERE TO COMPLETE TODAY'S LESSON

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