

- A-302** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Effects of Propofol on Coagulation after Cardiopulmonary Bypass: In-Vitro Study with Thromboelastograph and Platelet Aggregometer** Jun Kawasaki, MD; Kenichi A. Tanaka, MD; Ichiro Ishizuka, MD; Mitsuharu Kodaka, MD; Taro Kawazoe, MD, *Anesthesiology, Saitama Medical School, Kawagoe, Saitama, Japan*. Propofol induces inhibition of platelet aggregation, but does not affect TEG-maximum amplitude.
- A-303** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Local Warming Facilitates Intravenous Catheter Insertion** Rainer Lenhardt, MD; Tanja Seybold; Gabi Schreiber; Daniel I. Sessler, MD, *Anesthesia, University of Vienna, Vienna, Austria*. Active local warming facilitates the insertion of peripheral venous catheters, reducing both the time and number of attempts required.
- A-304** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Clinical Utility of the Bispectral Index during S-(+)Ketamine/Propofol Anesthesia** Werner F. Madei, MD PhD; Hans P. Klierer, MD PhD, *Anesthesiology and Intensive Care, German Army Hospital, Amberg, Oberpfalz, Germany*. This study demonstrates that appropriate use of BIS during S-(+)ketamine and propofol anesthesia can significantly reduce the time to extubation following the end of surgery.
- A-305** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Titration of Hypnotic Agents Using a BIS-Guided Open-Loop Feedback Algorithm For TIVA** Donald Matthews, MD; Sanjeev Kumar, MD; Alexander Matveevskii, MD; Monica Klewicka; George Neuman, MD, *Department of Anesthesiology, St. Vincent's Hospital, New York, NY, United States*. An algorithm for titration of the hypnotic component of TIVA provides rapid awakening and no recall.
- A-306** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Core Temperature Monitoring with the LMA and COPA** Takashi Matsukawa, M.D.; Makoto Ozaki, M.D.; Takabisa Goto, M.D.; Daniel I. Sessler, M.D.; Teruo Kumazawa, M.D., *Department of Anesthesia, Yamanasbi Medical University, Tamabo, Yamanasbi, Japan*. LMA and COPA temperatures correlated well with NT, but up to a quarter of the values differed by amounts exceeding acceptable limits.
- A-307** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**The Accuracy and Precision of Tympanic Temperature with a New Optical Fiber Thermometer during Cardiac Surgery** Takashi Matsukawa, M.D.; Atsuo Kawamura, M.D.; Makoto Ozaki, M.D.; Teruo Kumazawa, M.D., *Department of Anesthesia, Yamanasbi Medical University, Tamabo, Yamanasbi, Japan*. The precision of the new optical fiber thermometer was sufficient for clinical use.
- A-308** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Utilization of a Unique Thermoregulation System Improves Hemodynamic Function Perioperatively in Patients Undergoing CABG Surgery** N. Nesher, MD; R. Pizov, MD; I. Kushnir, MD; E. Zisman, MD; G. Uretzky, MD, *Cardiothoracic Surgery and Anesthesia, Carmel Medical Center, Haifa, Israel*. New system maintains normothermia and improves perioperative hemodynamic status of CABG surgery patients.
- A-309** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Use of the BIS Monitor Does Not Decrease Wake Up or Recovery Room Times** Diane L. Perine, B.S.N.; John L. Fontana, M.D., *Anesthesiology, University of Tennessee Medical Center, Knoxville, TN, United States*. There is no difference in time to wake up, post operative alertness, or discharge time with or without the BIS. Therefore, the BIS is not cost effective with respect to time savings.
- A-310** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Blood Volume and Blood Transfusion for Female and Male Patients Undergoing Coronary Artery Bypass Graft Surgery** Mamatha Punjala, M.D.; Chiedozie Udeh, M.D.; Murali Pagala, Ph.D.; Changa Tyagaraj, M.S.; Ketan Shevde, M.D., *Anesthesiology, Maimonides Medical Center, Brooklyn, NY, United States*. Females have lower ( $P < 0.001$ ) blood volume and receive transfusion more often than males during CABG surgery.
- A-311** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Residual Free Hemoglobin in Washed Salvaged Blood. A Comparison of a Bedside and a Laboratory Method** Henning Schou, M.D., Ph.D.; Goran Claesson, CRNA; Marie Grande, CRNA; Johan Lundberg, M.D., Ph.D., *Department of Anesthesiology and Intensive Care, Lund University Hospital, Lund, Sweden*. Bedside free hemoglobin estimation in salvaged and washed blood may increase the quality of reinfused erythrocytes.
- A-312** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Burst Suppression Ratio May be a Reliable Parameter in Assessment of the Depth of Anesthesia with Propofol Using Processed-EEG Monitor** Chieko Shibue, M.D.; Koki Shimoji, M.D., Ph.D., *Anesthesiology, Niigata University, Niigata, Japan*. It may be necessary to evaluate the depth of propofol anesthesia not only by SEF90, but also by BSR using pEEG monitor especially in elderly patients.
- A-313** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Evaluation of the Ultegra®, Point-of-Care Platelet Function Instrument during Cardiac Surgery** Linda Shore-Lesserson, MD; Rao Saleem, MD; Marc Stone, MD; Robert Hillman, MD; George Despotis, MD, *Anesthesiology, Mt. Sinai, New York, NY, United States*. Since PAU values identify patients with excessive bleeding and increase after platelets, the RPFA may be useful in managing post-CPB bleeding.
- A-314** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Accuracy of Closed-Loop Administration of Propofol Using BIS and a Patient-Individualized, Model-Based Algorithm** Michel M.R.F. Struys, MD, PhD; Tom De Smet, M. Sc; Stijn Van de Velde, B.Sc; Linda F.M. Versichelen, MD; Eric P. Mortier, MD D Sc, *Dep. of Anesthesia, Ghent University Hospital, Gent, Belgium*. We found good initial control without severe overshoots or oscillations.
- A-315** Room C, 10/16/2000 9:00 AM - 11:00 AM (PS)  
**Debris Elimination from Partially-Filled Cell Salvage Bowls** Dale F. Szpisjak, MD, *Anesthesiology, National Naval Medical Center, Bethesda, MD, United States*. The wash quality of partially-filled cell salvage bowls has been questioned. This experiment shows that platelet and wbc counts are higher in partially-filled bowls, though the levels of C3a and free Hb are less.