

**A-1194** Room I, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Comparison of Exposure to Anesthetic Waste Gases in Different Recovery Rooms** Michael Trick; Wolfgang A. Krueger; Norbert Deschner; Hans-Juergen Dieterich; Klaus Unertl, *Anesthesiology, Eberhard-Karls University, Tuebingen, Germany*. Influence of patient related factors and air conditioning systems on the exposure of recovery room personnel to anesthetic waste gases.

**A-1195** Room I, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Operating Room Utilization: Determination of Optimum Utilization** Donald C. Tyler, MD, MBA; Chun-Hung Chen, PhD; Caroline A. Pasquariello, MD, *Anesthesiology and Critical Care Medicine, Children's Hospital of Philadelphia, Philadelphia, PA, United States*. We used simulation to examine optimum OR utilization. Case duration and variability of duration have a significant impact on optimum utilization.

**A-1196** Room I, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Gastric Emptying in Chronic Renal Failure Evaluated by Ultrasound** P.T.G. Vianna, MD; A.S. Teixeira, MD; J.A.T. Barros, MD; E.M. Barin; L.R. Carvalho, *Dept of Anesth, UNESP, Botucatu, SP, Brazil*. Ultrasound was used to evaluate gastric emptying (GE). When patients received solid diet, GE median values were 150 min for CRF patients and 120 min for healthy patients ( $p < 0.05$ )

**A-1197** Room I, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Obstetric Anesthesiology Workload in a Major Academic Center - A Basis for Cost-Effective Staffing** M. Vidovich, MD; C. Wong, MD; T. Krejcie, MD, *Dept Anesth, Northwestern University, Chicago, IL, United States*. Workload is not equally distributed during weekdays owing to scheduled deliveries and inductions. Weekends are different. Staffing needs can be predicted based on our model.

**A-1198** Room I, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Effect of Position and Epidural Anesthesia on Hepatic Blood Flow during Laparoscopic Cholecystectomy** Yasubiko watanabe, MD; akio Takeda, ND; Hidetosbi kajibara, MD; Hiroshi Aono, MD; Hidekuni hidaka, MD, *Anesthesiology, Kochi Municipal Central Hospital, Kochi, Japan*. The combination of epidural block with general anesthesia did not prevent the decrease in HBF.

### Anesthesia Education

**A-1199** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Business Curriculum for Anesthesiology Residents** Amr E. Abouleish, MD, MBA, *Department of Anesthesiology, University of Texas Medical Branch, Galveston, TX, United States*. A business curriculum is a required part of Anesthesiology residency. We describe the business curriculum we developed. Resident's satisfaction was surveyed and found to be high with the program.

**A-1200** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Substance Abuse among Anesthesiologists: A Survey of Academic Institutions in the USA** John V. Booth, M.B., Ch.B.; Davida Grossman, M.D.; David Sheffield, Ph.D.; Catherine K. Lineberger, M.D.; J. Gerald Reves, M.D., *Anesthesiology, Duke University, Durham, NC, United States*. A survey of US anesthesiology programs demonstrated that despite increased accountability of narcotics, incidence of substance abuse remains at 1-2%.

**A-1201** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Concept Curriculum on Pain for Medical Undergraduates Developed by CATCHUM-A Consortium of Texas Medical Schools** Hui Ming Chang, M.D., M.P.H.; *Catchum Pain Education Task Force, Department of Internal Medicine, The University of Texas-Houston Medical School, Houston, TX, United States*. A comprehensive curriculum on pain developed by experts from a consortium of medical schools.

**A-1202** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Educating Medical Students on Pain Management, End of Life Care, and Palliative Care** Hui Ming Chang, M.D., M.P.H.; Richard Payne, M.D.; Patricia Butler, M.D.; James T. Willerson, M.D.; Maximilian Buja, M.D., *Dept. of Symptom Control and Palliative Care, Division of Anesthesiology, The U. of Texas, M. D. Anderson Cancer Center, Houston, TX, United States*. Innovative educational programs on Pain and End-of-Life Care.

**A-1203** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**The Residents' Perception of the Value and Efficacy of the Oral Practice Examination Course during Residency Training** Won Chee, M.D.; Meg A. Rosenblatt, M.D., *Anesthesiology, Mount Sinai School of Medicine, New York, NY, United States*. The residents perceived an oral practice examination course incorporated into residency curriculum reduced anxiety and enhanced educational experience.

**A-1204** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Teaching Peripheral Nerve Blocks to Anesthesiology Residents** Jacques E. Chelly, M.D.; Carin A. Hagberg, M.D.; Ralf Gebhard, M.D.; Jennifer Greger, M.D.; Ahmad Khan, M.D., *Anesthesiology, University of Texas Medical School, Houston, TX, United States*. A survey of American anesthesiology residency programs suggest that peripheral nerve block education is inequally distributed.

**A-1205** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Consequence of Aging on Medical Activity: Does Anesthesiology Differ from Other Specialties?** Catherine Chevalley, MD; Perneger Thomas, MD; Garnerin Philippe, PHD; Forster Alain, MD, *Anesthesiology, University Hospital, Geneva, Switzerland*. In a prospective study, our data suggest that Anesthesiology, when compared to other specialties, requires specific strategies to cope for aging.

**A-1206** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Does Spinal Needle Design Impact Procedural Success in Obstetric Anesthesia Residents?** Eric Etzel, DO; Jennifer Friedman, MD; Kelly McQueen, MD; Robert Chantigian, MD; Gary Vasdev, MD, *Anesthesiology, Mayo Clinic, Rochester, MN, United States*. Needle design (Sprotte vs. Gertie-Marx) does not alter the success rate of spinal anesthesia when performed by CA2 anesthesia residents in parturients.

**A-1207** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)  
**Acute Pain Management Programs in the U.S.: Survey of 225 Hospitals** T.J. Gan, M.D.; Jeffrey L. Apfelbaum, M.D.; Connie Chen, Pharm.D., *Anesthesia, Duke University Medical Center, Durham, NC, United States*. Gan TJ, et al. While 3 in 4 U.S. hospitals have a formal pain management programs, 1 in 5 do not have confidence that their hospitals are currently in compliance with the new JCAHO pain management standards.