

- A-1208** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Instruction and Learning of Airway Management Skills *Carin A. Hagberg, M.D.; Jacques E. Cbelly, M.D.,Ph.D.,M.B.; Husam E. Saad Edin, M.D., Anesthesiology, University of Texas - Houston Medical School, Houston, TX, United States.* The educational process of airway management in American anesthesiology residency programs was assessed by questionnaire to all directors of these programs.
- A-1209** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Cognitive and Noncognitive Tests for Prediction of Clinical Performance in Anesthesiology *Karl F. Hampl, MD; Daniel Scheidegger, MD; Verena Wuetrich, PhD; Beno Benninger, PhD, Dept. of Anesthesia, University of Basel, Basel, Switzerland.* This study demonstrates a high predictive value of several cognitive and noncognitive tests for clinical performance in anesthesiology.
- A-1210** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
A Survey of United States Academic Chairs on Resident Supervision *Calvin Johnson, MD; Stephen N. Steen, ScD, MD; Ronald Sbepperson, MD, Anesthesiology, Charles R. Drew University of Medicine, Martin Luther King Jr. Medical Center, Los Angeles, CA, United States.* Anesthesia Programs allowing residents to start cases without attending presence must be careful to not to violate HCFA regulations.
- A-1211** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
A Comparison of Textbook and Computer Simulation in the Study of Advanced Cardiac Life Support *Jong Hoon Kim, MD; Won Oak Kim, MD; Yong Taek Nam, MD, Anesthesiology, Yonsei University College of Medicine, Seoul, Korea.* Students studied ACLS with textbook or computer simulation and took an exam for evaluation. Textbook was more effective than simulation for acquisition of information.
- A-1212** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
The Knowledge and Performance of the Cardiopulmonary Resuscitation Team *Anne Lippert, MD; Helle T. Ostergaard, MD; Jonathan White, MD; Knud Skagen, MD; Doris Ostergaard, MD, Department of Anesthesiology, Herlev University Hospital, Copenhagen, Denmark.* The theoretical knowledge and performance of all CPR-team members were improved following simulator based team training.
- A-1213** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Does Increased Supervision in the Use of Nerve Stimulation Techniques Improve the Success of Axillary Plexus Block? *Maria E. Matuszczak, M.D.; Ralf Gebhard, M.D.; Michael J. Wolf, M.D.; Monika C. Jabn, M.D.; Manfred Doebn, M.D. Prof., Anesthesiology, Kliniken der Stadt Koeln, Cologne, NRW, Germany.* Intensified teaching of nerve stimulation seems to be an important key to succeed in planned axillary block.
- A-1214** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Simulation Technology: A Comparison of Experiential, Visual and Traditional Learning for Undergraduate Medical Students *Pamela J. Morgan, MD; Doreen Cleave-Hogg, PhD, Anesthesia, University of Toronto, Toronto, ON, Canada.* Simulation technology appears to provide a superior learning experience for undergraduates compared to learning in the standard curriculum or videotape teaching.
- A-1215** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Crisis Resource Management for Remote Participants - Distance Education with a Full Human Simulator *W. Bosseau Murray, M.B.,Ch.B., M.D; Arthur J.L. Schneider, M.D.; Clark Venable, M.D.; Karin Underberg, R.N.; Jody Henry, B.S., Anesthesiology, Pennsylvania State University College of Medicine, Hershey, PA, United States.* Remote interactive video participation in CRM simulation is useful and effective.
- A-1216** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
A Proposed Novel Classification of Teaching Strategies using a Full Human Simulator *W. Bosseau Murray, M.B.Ch.B., M.D., Simulation Development and Cognitive Science Lab, Pennsylvania State University College of Medicine, Hershey, PA, United States.* We propose a novel classification of teaching strategies for use with a full human simulator.
- A-1217** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Constructing an Anesthesia Machine Fault Simulator for a Teaching Program Using a "Trade-In" Anesthesia Machine *A. William Paulsen, PhD; Richard Brouillard, ScD, Anesthesiology, Emory University, Atlanta, GA, United States.* An Ohmeda Modulus II anesthesia machine was modified to simulate a range of potential faults that could occur during checkout and operation of an anesthesia machine.
- A-1218** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Quality of Care Is Not Effected by Resident Training Level *Karen L. Posner, Ph.D.; Peter R. Freund, M.D., Anesthesiology, University of Washington, Seattle, WA, United States.* CQI report rates were similar in R2, R3 and R4 anesthesia teams and across training years in resident cohorts. Resident training level is effectively balanced in supervised teams to maintain quality of care.
- A-1219** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Virtual Reality Bronchoscopy Simulator *Richard W. Rowe, MD MPH; Ron Coben, MD, Anesthesiology, Children's Hospital Oakland, Oakland, CA, United States.* This simulator was very effective in teaching residents skills necessary for FOB. Significant improvement was seen in parameters important for successfully completing a FOB. 1. *Anes* 75:1087-1110, 1991. 2. *MMVR IOS Press* p.124-30, 1998.
- A-1220** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Time Evaluation of a Virtual Reality Bronchoscopy Simulator *Richard Rowe, MD MPH, Anesthesiology, Children's Hospital Oakland, Oakland, CA, United States.* Time residents spent learning skills from Sim was 40.5 minutes and they studied 17 cases. Within days, residents can get training with the Sim to be effective users of FOB. 1. *Br J Anaesth* 71:206 (1993) 2. *Ann Em Med* 17:919 (1988).
- A-1221** Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Authenticity of the METI® Anesthesia Patient Simulator: Medical Students' Perception *John W. Schweiger, MD; Chris Jackson, BS; Paige Preece, Anesthesiology, University of South Florida College of Medicine, Tampa, FL, United States.* The Anesthesia Patient Simulator sets an authentic occasion for pedagogical approaches that facilitate medical student learning by doing.