ASA ABSTRACTS

A-1208 Room H, 10/17/2000 2:00 PM - 4:00 PM (PS)
Instruction and Learning of Airway Management Skills (Carin A. Hagberg, MD; Jacques E. Oebly, 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 anesthesia 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 (Kari F. Hampf, MD, Daniel Scheldegher, MD, Verena Waeterbrich, PhD, Beno Benniger, PhD, Dept. of Anesthesiology, 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 (Celine Johnson, MD, Stephen N. Steen, ScD, MD; Ronald Stepperson, MD, Anesthesiology, Charles R. Drew University of Medicine, Martin Luther King Jr. Medical Center, Los Angeles, CA, United States. Anesthesiology Programs allowing residents to start cases without attending presence must be careful to not 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 then 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; Hele O. 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 Blocks? (Maria E. Rutkowsk, M.D.; Ralf Gebhard, M.D.; Michael J. Wolf, M.D.; Monika C. Jahn, M.D.; Manfred Doebn, M.D. Prof., Anesthesiology, Klinikum 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 Experimental, Visual and Traditional Learning for Undergraduate Medical Students (Pamela J. Morgan, MD; Doreen Cleave-Hogg, PhD, Anesthesiology, 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. Bosseu 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. Bosseu 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 Failure Simulator for a Teaching Program Using a "Trade-In" Anesthesia Machine (A. William Paulson, 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 Affected by Resident Training Level (Karen L. Posner, Ph.D.; Peter R. Fremond, 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 Cohen, 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.

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.

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. Schneiger, 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.)