

Topic Proposals
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1. Total Intravenous Anesthesia- What is it? How do I do it?

Learning Objectives: To review concepts and demonstrate the value of total intravenous anesthesia (TIVA) in emergency and critical care settings. Specific points covered in this presentation include 1) general theory of TIVA in sedation or anesthesia, 2) equipment and supplies required for TIVA administration, 3) drugs and drug strategy for TIVA delivery, 4) how TIVA compares to traditional anesthesia techniques, 5) review principles of safe TIVA administration to the emergent or critical patient and 6) Review case studies in which TIVA was successfully used.

Course Summary: The goal of this presentation is to understand the role and value of TIVA and become conversant in its clinical application. TIVA has emerged as a viable option for short duration, mild to moderately painful medical, surgical and diagnostic procedures. As such, it is a logical fit with emergency critical care (ECC) practice. ECC practitioners and specialists already have the background and theoretical skills necessary to successfully administer TIVA. Core training in IV sedation, CRI drug delivery and basic understanding of the PK-PD dynamics of in vivo drugs are TIVA concepts that are familiar to the ECC practitioner. Adapting this knowledge base and experience foundation to TIVA is relatively straight forward.

The goals of this presentation will be to facilitate transitional thinking and position the ECC practitioner to successfully use TIVA in the appropriate setting. Background information will be supplemented by case studies documenting the role and value of TIVA in specific clinical scenarios.

2. Airway support for the emergent/critical care patient

Learning Objectives: To review options for management of emergent patients presenting with upper airway disease/dysfunction. Specific points covered in this lecture include 1) practical techniques to facilitate successful implementation of airway support 2) minimally invasive options available to establish airway support when standard strategies are unsuccessful 3) options for invasive airway support for patients in which less invasive techniques are unsuccessful. Case based studies will reinforce the concepts presented.

Summary: The ECC clinician is challenged with patients who present in acute respiratory distress. A significant number of respiratory distress patients are presented due to injury, disease, or dysfunction of upper airway structures. Advanced strategies for the establishing airway patency may be necessary in a subcohort of these patients. Regardless of the underlying etiology, there is a unified concept of support strategies to manage these cases.

This presentation will review strategies, techniques and procedures that can be deployed in these cases. The presentation will review non- invasive, minimally invasive, and surgically based strategies for airway support and management. Topics reviewed will include the effect of head and neck position on upper airway visualization, use of Sellick maneuver to facilitate laryngeal visualization, use of supplemental devices such as stylettes, obturators and light sources to enhance visualization and airway capture, use of fiber optic or rigid scopes to identify laryngeal anatomy and location, retrograde placement of flexible guidewires to facilitate airway identification, emergency oxygen insufflation via cricothyroid catheter placement, use of percutaneous cricothyroid dilators to facilitate artificial airway placement and emergency tracheostomy.

For each technique, a review of indications, required equipment and supplies to perform the procedure, step by step guidance on how to do the procedure, required management and care once the procedure is completed, a review of potential risks/concerns and interspecies differences will be presented.

3. Vasopressors in emergency and critical care

Will follow shortly.