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Summer 2009

SNACC NEWS

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Why Should Anesthesiologists Be More Involved With Neurophysiologic Monitoring?

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Anesthesiologists should re-evaluate and re-ignite their interest in neurophysiologic monitoring. Their active involvement could lead to improved neuromonitoring today and allow for possible supervision in the future.

Currently, neurophysiologic monitoring is conducted by trained technologists capable of operating the neuromonitoring machine, connecting wires, obtaining reproducible signals, and identifying signal changes; and they should be able to troubleshoot technical issues contributing to signal changes. However, diagnosis of the etiology of signal changes may be difficult and outside the realm of their expertise.

In order to elucidate signal change etiology, it is necessary to examine all potential causative factors, including rapidly checking monitoring circuit integrity, evaluating patient position, optimizing physiologic status, eliminating pharmacologic contributions, and correlating surgical maneuvers with signal changes. An immediately available physician or neurophysiologist with more advanced knowledge in anatomy, physiology and surgery often is needed to interpret signal changes. Anesthesiologists are uniquely qualified to perform this role – they are immediately available during surgery and are already attuned to the patient's physiologic and pharmacodynamic status as well as surgical maneuvers. If needed, they can easily manipulate physiologic parameters to optimize oxygen delivering capacity to help alleviate or even reverse neurological insult. They can also modify the anesthetic regimen if it is found to be contributing to signal degradation and even to enhance small baseline signals.

The anesthesiologist trained in neurophysiologic monitoring can design and execute a safe anesthetic regimen, which provides anesthesia depth adequate for a motionless patient while simultaneously providing optimal conditions for obtaining reliable monitoring signals. This knowledge is a powerful tool in communicating with other members of the monitoring team, which will lead to improved results and potentially better surgical outcome.

Anesthesiologists' contribution to neuromonitoring may be solicited even more in the future. If the trend of cost-cutting in health care continues, many present-day neuromonitoring teams may withdraw from the field, and there is already a shortage of neurophysiologists. Perhaps government and insurance agencies will decide it is only necessary to pay for the technical aspect of neuromonitoring plus a fee for the expert interpreting the signals. Anesthesiologists' services in this manner could be more cost-effective, since they are already in the operating room.

A cooperative partnership between anesthesiologists, neurophysiologists and other physicians may be the answer. Such teamwork will achieve higher standards in neuromonitoring and facilitate much needed research in this field.

Continued on page 2

Strategy to Achieve Neurophysiologic Monitoring for Neuroanesthesiologists

Creating a stepwise program, consisting of educational and logistical branches, can revive anesthesiologists' interest and foster knowledge in neurophysiologic monitoring. By following the below suggestions, it seems possible to generate enough trained anesthesiologists well-versed in neurophysiologic monitoring to reach a sizable number of hospitals within seven years.

A. Educational arm

1. Identify members able to lead education efforts.
2. Start education aimed for neuroanesthesiologists who oversee neurosurgical anesthesia education within residency programs.
   a. Contact anesthesia chairs to brief them on the program and enlist help in identifying their members who may be able to participate.
   b. Sponsor SNACC special courses (i.e., neurophysiologic monitoring for the anesthesiologist), repeated three times in one year at different locations around the country.
   c. Utilize the SNACC Web site for educational materials and to introduce case-of-the-month discussions.
   d. Encourage ASA refresher courses.
3. Start neurophysiologic monitoring education for residents on neurosurgical anesthesia rotations.
4. Develop intensive neurophysiologic monitoring teaching programs aimed toward neurosurgical anesthesia fellows.

B. Logistical arm (ASA/SNACC)

1. Activate ASA/SNACC committee to study the following issues:
   a. Certifying members who complete certain requirements.
   b. Development of a quality assurance and oversight program.
   c. Research reimbursement issues.
2. Initiate SNACC/ASA cooperation with other monitoring associations.
3. Facilitate teamwork between anesthesiologists, neurophysiologists and other physicians for research.

37th Annual SNACC Meeting 2009

New Orleans Marriott October 16, 2009

Dinner Symposium

CONTROVERSIES IN THE PERI-OPERATIVE MANAGEMENT OF SUBARCHNOID HAEMORRHAGE

Moderator

Pekka Talke, M.D.
UCSF

EKG Changes: Stunned Myocardium or Acute Coronary Syndrome?
Martin Smith, M.B.
London

HHH Therapy: Are We Evidence-based?
W Andrew Kofke, M.D.
University of Pennsylvania

Neuroprotection in Subarachnoid Hemorrhage
Ansgar Brambrink, M.D.
University of Washington

Be There!

37th Annual Meeting Program - Friday, October 16

7-7:45 a.m.	Breakfast and Registration
8-8:05 a.m.	Welcome Basil Matta, M.B., F.R.C.A., President
8:05-9 a.m.	Basic Science Lecture Moderator: Monica S. Vavilala, M.D. 8-8:40 a.m. Gender Neurobiology: Shaping Brain Injury and Protection Patricia D. Hurn, Ph.D. 8:40-9 a.m. Discussion
9-10:15 a.m.	Minisymposium 1: Clinical Implications of Emerging Technologies in Neuroanesthesia/Critical Care Medicine Moderator: Richard Moberg, M.B., B.S. 9:05-9:25 a.m. CNS Tissue Oxygen Monitoring Martin Smith, M.B.B.S., F.R.C.A. 9:25-9:45 a.m. Transcranial Laser Therapy W. Andrew Kofke, M.D., M.B.A., FCCM 9:45-10:15 a.m. Discussion
10:15-10:45 a.m.	Poster Session Announcement and Coffee Break
10:45 a.m.-12:15 p.m.	Poster Session 1 Walkaround with Moderators
12:15-1:30 p.m.	Lunch and Award Presentation
1:30-1:45 p.m.	2009 John D. Michenfelder New Investigator Oral Presentation
1:45-2:45 p.m.	Minisymposium 2: Year's Best Articles in Neuroanesthesia and Neurocritical Care Medicine Moderator: James E. Cottrell, M.D. 1:50-2 p.m. *Anesthesiology* Eberhard F. Kochs, M.D. 2-2:10 p.m. *Anesthesia & Analgesia* Adrian W. Gelb, M.B., Ch.B., F.R.C.P.C. 2:10-2:20 p.m. *Journal of Neurosurgical Anesthesiology* John Hartung, Ph.D. 2:20-2:30 p.m. *Neurocritical Care* Eelco M.F. Wijdicks, M.D., Ph.D. 2:30-2:45 p.m. Discussion
2:45-3:05 p.m.	Poster Session Announcement and Coffee Break
3:05-4:30 p.m.	Poster Session 2 Walkaround with Moderators

Concurrent Sessions

4:30-5:50 p.m.	Clinical Forum: Perspectives on Subspecialty Accreditation Moderator: George A. Mashour, M.D. 4:35-4:50 p.m. Experience with Pediatric Anesthesia Mark A. Rockoff, M.D. 4:55-5:10 p.m. Chair's Perspective Debra A. Schwinn, M.D. 5:10-5:30 p.m. Neuroanesthesiologist's Perspective Ansgar Brambrink, M.D., Ph.D. 5:30-5:50 p.m. Discussion
4:30-5:50 p.m.	Neuromonitoring Workshop* Co-moderator: Antoun Koht, M.D.; Tod B. Sloan, M.D., M.B.A., Ph.D. **This workshop requires a separate fee; please make your selection on the registration form.*

5:50-6 p.m.	Closing Remarks Basil Matta, M.B., F.R.C.A.
6-7:30 p.m.	Wine and Cheese Reception

International Neuroanesthesia Meetings

Asian Society for Neuroanesthesia and Neurocritical Care

- The first congress of the Asian Society for Neuroanesthesia and Critical Care (ASNACC) was held from November 28 to December 1, 2008 in Beijing, China. Twenty international speakers presented lectures and science with representation from China, Japan, Singapore, Indonesia, Korea, India and the United States.

Annual Italian Neuroanesthesia Meeting 2009

- The 2009 Meeting took place on May 20-23 at the splendid Certosi di Pontignano, property of the University of Siena **www.unisi.it/servizi/certosa**. The panel featured topics and speakers with strong multidisciplinary backgrounds.

Bi-Annual Autumn German Neuroanesthesia Meetings (information by K. Engelhard)

- The German Neuroanesthesia group met most recently in Leipzig on May 12 together with the German Society for Anesthesiology. The topics included perioperative use of steroids during neurosurgery (Engelhard), updates of the most interesting publications in 2008 (Rundshagen), and questioned what exactly is neurocritical care? (Kochs)

- On November 29, the second of the biannual meetings of the German Neuroanesthesia Society (WAKNA) took place at the Castle Reisenburg in Günzburg. The day before the meeting, on Friday evening, attendees had the opportunity to visit the new "brain suite" of the hospital in Günzburg, which now gives the possibility for an intraoperative MRI-scanning. The motto of the meeting was "Mission impossible? Optimizing patient safety in neuroanesthesia." On Saturday morning, the program started with "Lessons From Aviation: Possibilities and Strategies for Risk-Reduction and Avoidance of Errors," presenting a very interesting aspect to the topic of patient safety. Then "Possible Complications During Subtentorial Operations," "Errors and Mischief During the Treatment of Traumatic Spinal Cord Injuries," and aspects of "Awake Intubation in Patients With Unstable Spine" were presented by three distinguished speakers, followed by animated discussions. Then it was debated whether extended monitoring can improve patient safety during neurosurgical procedures. The last two contributions gave an insight into the management of a "brain suite" using the MRI during operations and highlighted special pitfalls. The meeting was well attended and, according to the robust discussion, the selected topics were up to date and very interesting for the attendees. The hospitality of the organizers was tremendous, and the meeting was a big success.

- The next meeting will take place on November 21, 2009 in Murnau, and the program of this future meeting is on the Web site of the German Neuroanesthesia Society **www.neuroanaesthesie-online.de/index1.html**. In addition, future German meetings focused on neuromonitoring, and a practice course in neuroanesthesia can also be located there.

Annual Meeting of the Neuroanaesthesia Society of Great Britain and Ireland

- This year's meeting was held May 7-8, 2009 in Liverpool.

- Next year's meeting is to be announced. Keep an eye on their Web site for more information **www.nasgbi.org.uk.**

SNACC Breakfast Panel ASA 2009

Perioperative Cognitive Dysfunction
Moderator: Pekka Talke, M.D.
UCSF

Cognitive Function
Lars Rasmussen
Copenhagen University Hospital

Postoperative Cognitive Dysfunction
Jacqueline Leung,
UCSF

Treatment/Prevention of Postoperative Cognitive Dysfunction
Mervyn Maze
Imperial College, London

Distinguished Service Award Nominations

SNACC members are annually asked to submit nominees for the Society's Distinguished Service Award. An award will presented at the SNACC 2009 Annual Meeting in New Orleans. The award is presented to an individual who has made outstanding contributions to the field of neuroanesthesia and his or her distinguished service to the Society.

John D. Michenfelder
New Investigator Award

Online abstract submission Deadline was June 1, 2009

SNACC, in its efforts to encourage anesthesiology residents, fellows and junior faculty to become more involved in the Society, is excited to offer the John D. Michenfelder New Investigator Award (NIA). The award is presented annually to the resident, fellow or starting junior faculty whose research exemplifies the Society's mission of improving the art and science of neurosurgical anesthesia and the care of the critically ill, neurologically impaired patient.

Eligibility:

Member of SNACC and Resident, Fellow, or Junior Faculty at the time of the award and within three years of the end of training.

Selection Process:

The recipient of the award is chosen by the SNACC Committee on New Investigator Award based on the submission of a full-length manuscript reporting the research. To be considered, the applicant must be a SNACC member and will need to submit an online abstract, checking the respective box to identify interest in the NIA. In addition, the applicant for the award needs to submit a full-length manuscript to **snaccmeetings@asahq.org.**

Over 20 abstract submissions indicated intent to submit manuscripts to compete for this award, and we look forward to many excellent scientific presentations by new and upcoming members of SNACC at the fall meeting.

2009 ASA Neurotrack

The preliminary lineup for Neurotrack 2009:

Refresher Lectures

- Anesthesia for Spine Surgery
- Anesthesia for Functional Neurosurgery
- Fragile Brains – The Young and Old
- Anesthesia for Craniotomy
- Brain Failure in Aging and the Perioperative Period
- Misunderstandings in Neuroanesthesia: How May I Hurt Thee. Let Me Count the Ways
- Neurovascular Disease: Anesthetic Concerns and Management
- Cervical Spine Motion, Cervical Spine Surgery and the Unstable Neck
- Intraoperative Awareness, Best Practice: It's Not Just Science

SNACC Breakfast Panel

Perioperative Cognitive Dysfunction

Luncheon Panel

Perioperative Issues in the Neurosurgical Patient

Panels

Clinical Issues in Neurosurgery
Neuroprotection: Why Does Everything Fail?
Anesthesia: Sleep and Unconsciousness
Perioperative Cerebral Homeostasis in Neurosurgical Patients: Physiology and Application
Progress and Problems in Anesthetic-Induced Developmental Neurotoxicity: From Research to Regulation

Problem Based Learning Discussions

The Disappearing Waveforms: Cervical Spine Surgery With Evoked Potential Monitoring
The Debate Between Clipping and Coiling of an Intra Cranial Aneurysm: How Do We Manage?
Just a Quick Mac Case in Interventional Neuroradiology: Vertebroplasty, Kyphoplasty or Skyphoplasty
Blind After Back Surgery? How Could That Happen?
Emergency Surgical Fixation of Unstable Cervical Spine
Surgeon Requests a Total IV Anesthetic for Optimal Neuromonitoring During a Two-Level ACDF
Awake Craniotomy in a Patient With Obstructive Sleep Apnea
Patient With Rheumatoid Arthritis For Cervical Spine Surgery
Deep Brain Stimulation for Parkinson's Disease: Is There a Role for the Anesthesiologist?
Cardiac Arrest in a Patient With a Subarachnoid Hemorrhage During an Emergent Aneurysm Coiling
65 yr 1F for Cervical Spine Fusion - SSEP Monitoring, Difficult Airway and Postoperative Blindness
I Feel Spine – A Complicated Posterior Cervical Fusion
Child With Polytrauma: Emergent Laparotomy or Crash Craniotomy or ORIF Compound Fractures?
Anesthesia for Awake Craniotomy and Seizure Focus Excision In a Young Man

SNACC Travel Awards

Abstracts submitted to the SNACC meeting by residents judged to be of high quality can be awarded travel grants sponsored by Integra Foundation.

SNACC MEMBERSHIP COUNTS

Year ending December 2008

SNACC Active	313
SNACC Emeritus	6
SNACC International	90
SNACC JNS Journal	219
SNACC JNS Journal International	57
SNACC Resident	31
	441

PBLD's on the SNACC BLOG

--and other activities of the education committee

The SNACC Education Committee is fortunate to have new members this year. Last year, with the efforts of Dr. Alex Bekker, the committee started a Web-based problem based learning discussion (PBLD). The SNACC Web site has a link (SNACC Blog) that directs the readers to a page that includes a neuroanesthesia or neurocritical case with relevant learning objectives. The case is followed by some questions, and visitors to the blog can read the discussions from other participants and even enter their own discussion. The moderator who has submitted the case also participates in the discussion. If you visit the Web site currently, there is an interesting case about awake intubation and awake positioning for cervical fusion, which was submitted by Dr. Lauren Berkow. We have two major obstacles for this beneficial resource. First, we would like more participants in the discussion. I do encourage the residents in our residency program to visit the Web site and even make an assignment for them to participate in the discussion. I would like to ask all of our readers to spread the word and also use this as a learning tool in their programs. The second problem is the recruitment of moderators. I would like to invite those who are interested in submitting a case and questions for discussion. The submissions will be reviewed before posting on the Web site. We have not found a specific incentive to attract our members to submit cases; however, I believe our commitment to the best education should be an incentive by itself.

The SNACC Web site has other excellent resources for education under the heading "Educational Material." You can find a valuable source of information and references under this heading. Another link in the web site "Web Links" can also direct the reader to online educational resources. Our new committee members, Dr. Ehab Farag and Dr. Marco Maurtua, have agreed to review and update the educational resources of the Web site. We are also happy to have Dr. Antoun Koht as a member of the committee. Dr. Koht, who will be conducting a neuromonitoring workshop in the upcoming SNACC annual meeting, is also investigating the methods that can allow more members to have access to educational resources in this important and sometimes overlooked subject.

The committee has also announced its willingness to help Dr. George Mashour, who is the head of the neuroanesthesia fellowship task force, in his efforts. Dr. Kathryn Lauer has prepared a survey for the program directors to compile data on neuroanesthesia education in the residency programs. The data will give information about how neuroanesthesia is being taught currently and will also be helpful in designing a standardized and universal program for neuroanesthesia fellowship

Our committee is encouraging you to take advantage of the educational resources pertaining to neuroanesthesia and neurocritical care. We welcome all suggestions to improve our efforts within SNACC.

Please direct all questions to me at **avitsir@ccf.org.**

Rafi Avitsian, M.D.

www.snacc.org/blog.php

Call for Nominations

The Nominating Committee is seeking nominations for Secretary-Treasurer and one Director-at-Large member for election at the October 2009 SNACC meeting. The bylaws read: "Additional nominations for officers may be made by the membership by petitions duly filed with the Secretary/Treasurer at least thirty (30) days prior to an election at the annual membership meeting. In order to qualify as nominating petitions, there shall be affixed thereto the signatures of twenty-five (25) members of the Society as a minimum." Individuals chosen for these positions are those who have demonstrated a commitment to SNACC and have served in a number of administrative positions. Their experience with these administrative responsibilities as well as their effectiveness in performing these tasks is crucial in their nomination. The following lists the responsibilities expected from each position.

Secretary-Treasurer: The Secretary-Treasurer shall serve to oversee the finances of the Society, keep records of the biannual Board of Directors meeting, aid the Vice-President for Communications in keeping open communications with the members and to perform such other duties as may be prescribed by the Board of Directors or President. The Secretary-Treasurer will serve a one (1) year term.

Directors-at-Large of the Board of Directors: These individuals should be members in good standing of SNACC and provide advice and promote the activities of the Society. They are required to attend the Board of Director's meeting on Thursday before the annual meeting in the fall. They will serve staggered 3-year terms.

Contact Gregory Crosby for more information or to suggest a nominee **gcrosby@zeus.bwh.harvard.edu**.

2009 IARS SNACC Panel

Controversies in the Peri-operative Management of Subarchnoid Haemorrhage

Moderator:

Gregory J. Crosby, M.D.
Harvard University

A panel on this topic was held at the spring IARS meeting. The following presentations were made:

EKG Changes: Stunned Myocardium or Acute Coronary Syndrome?
Martin Smith, M.D., F.R.C.A.
University College London Hospitals, U.K.

Triple H Therapy: Are We Evidence-Based?
W. Andrew Kofke, M.D., M.B.A., F.C.C.M.
University of Pennsylvania

Neuroprotection in Subarachnoid Haemorrhage
Ansgar Brambrink, M.D., Ph.D.
Oregon Health and Science University

Announcing....

Distinguished Teacher of the Year Award!

To Be Presented at the
SNACC 37th Annual Meeting

Friday, October 16, 2009
New Orleans

Call for Nominations

Deadline for Nominations:

August 1, 2009

Mission:

To improve perioperative and intensive care of patients, who are neurologically impaired or at risk of developing neurological complications, through advances in medicine and research.

Eligibility:

- Member of SNACC.
- Supporting letter of nomination from department chair and a seconding nomination from any other
- Health care professional who has benefited from the teaching skills of the nominated member.
- Teaching portfolio submitted to SNACC Selection Committee by August 1 deadline (see nomination
- information listed on the Web site).
- Statement of teaching background.
- Description of any formal teaching credentials.
- List of accepted and submitted review articles and book chapters relevant to neuroscience, neurosurgical
- anesthesiology or neuro-critical care.
- Evaluations of teaching skills (e.g., evaluations by students).
- Representative course syllabi.
- Appearance at meeting to receive award.

Award:

Recipients of the SNACC Distinguished Teacher of the Year Award will receive a plaque in honor of this prestigious occasion, a coupon for discounted Society membership for the next year, an opportunity to lecture either at the SNACC 2009 Annual Meeting or at the SNACC Breakfast Panel presented at the ASA 2009 Annual Meeting in New Orleans, recognition on the SNACC Web site and recognition in the SNACC 37th Annual Meeting report published in Anesthesiology.

Please submit your nominations and electronic supporting documentation to:

Sulpicio G. Soriano, M.D., F.A.A.P.
Associate Professor of Anaesthesia, Harvard Medical School
Children's Hospital Boston Endowed Chair in Pediatric Neuroanesthesia
300 Longwood Avenue
Boston, MA 02115
Office: (617) 355-6457
Email: **Sulpicio.Soriano@childrens.harvard.edu**

SNACC Committees
How to do work for the society!

Many members have approached us and enthusiastically offered to work more closely with SNACC activities going forward. We need to maintain this momentum in order to strengthen our Society. Given this outpouring of volunteerism, we have created a committee structure that will provide a venue for the talents of our membership. The committees, each with charge and chair, are listed below. Available reports of those presented at the spring board of directors meeting follow below.

International Relations:

Martin Smith, chair, and Kristin Engelhard, co-chair

- Contact international neuroanesthesia societies.
- Propose joint programs with sister societies.
- Establish an international network for clinical trials.

Scientific:

Pekka Talke, chair, Deborah Culley, incoming chair

- 2008 annual meeting abstract grading and presentations.
- Propose clinical studies for research network.

Education:

Rafi Avitsian, chair, and Antoun Koht, co-chair

- Case-studies for Web site.
- Trainee outline
- residents
- fellows

Neurointensive Care:

Ansgar Brambrink

- Liaison with Neuro Critical Care Society.
- Propose educational programs.

Neuroanesthesia Fellowship:

George Mashour

- Survey U.S. training programs offering neuro fellowships.
- Propose training guidelines.

Neuromonitoring Committee:

Marc Bloom, chair, and Antoun Koht, co-chair

- Establish educational programs for neuromonitoring (website and meeting).
- Propose clinical studies for research network.

Website/Newsletter: Andy Kofke
Nominations Committee: Gregory Crosby

If you are interested in serving on any of these committees, please send President Basil Matta **basil@bmatta.demon.co.uk** a note expressing your interest. Rosters for all of the committees can be found at **www.snacc.org/about/committees.htm**.

SNACC Sub-Committee Reports

2009 Program Committee: Monica Vavilala

2009 annual meeting program
See earlier articles announcing 2009 meeting plans for New Orleans

Scientific Affairs Commitee - Pekka Talke

Committee Name: ***Scientific Affairs Committee***

Proposed Objectives:

- Coordinate the scientific abstract process for the SNACC Annual Meeting
- Grade submitted scientific abstracts
- Determine which abstracts will be accepted for the SNACC Annual Meeting
- Determine which abstracts will be awarded the Resident Travel Award
- Group the abstracts by category for the SNACC Annual meeting
- Organize moderators for the SNACC Annual Meeting scientific session
- Promote submission of abstracts for future meetings
- Assign new members to the committee (2 yr terms)

Progress Summary (Please provide a bullet point summary of the activities of your committee/working group in the past year):

- Abstracts were graded for 2008 SNACC Annual Meeting
- 121 Abstracts were accepted for the 2008 SNACC Annual Meeting
- 10 Resident Travel Awards were proposed
- Moderators for the 2008 SNACC Annual Meeting scientific session were assigned
- Thank you letters were sent to moderators and to persons submitting abstracts
- Promotional material was written for the SNACC newsletter

Proposed Goals for the Upcoming Year (Please provide information on what your group expects to accomplish in the upcoming months. These should be related directly to the specific charges to your committee. Please differentiate items that are for information only from those that require action by the Board. Use additional space as required and feel free to include any relevant attachments.)

- Coordinate scientific abstract process for the 2009 SNACC Annual Meeting with Jill (timelines, advertisements, website)
- Grade abstracts for the 2009 SNACC Annual Meeting
- Determine which abstracts will be accepted for the 2009 SNACC Annual Meeting
- Determine which abstracts will receive the Resident Travel Award for the 2009 SNACC Annual Meeting
- Group the accepted abstracts for presentation
- Recruit and assign moderators for the 2009 SNACC Annual Meeting scientific session

Action Items (Please provide bullet point summary. Include background information, rationale and anticipated outcome.)

Start working with Deborah Culley MD who will be the next Committee Chair

Neuromonitoring Committee:

Marc Bloom, chair, and Tony Koht, co-chair

Progress Report to the Board of Directors

Please remember to save this document to your computer before completing.

Date: January 26, 2009 Chair/Reporter: A. Koht

This report is submitted ☐ For Action XX☐ For Information

Committee Name: Neurophysiologic Monitoring

Proposed Objectives:

1- Identify members with monitoring experience
2- Enhance teaching of neurophysiologic monitoring at departments and at SNACC WEB site
3-Meetings on neurophysiologic monitoring, independently and jointly with other organizations

Progress Summary (Please provide a bullet point summary of the activities of your committee/working group in the past year):

This is a startup project.

Proposed Goals for the Upcoming Year (Please provide information on what your group expects to accomplish in the upcoming months. These should be related directly to the specific charges to your committee. Please differentiate items that are for information only from those that require action by the Board. Use additional space as required and feel free to include any relevant attachments.)

Please see attachment

Action Items (Please provide bullet point summary. Include background information, rationale and anticipated outcome.)

Please see attachment

Committee Name: **International Affairs Committee**

Date: 24 February 2009
Chair/Reporter: Dr Martin Smith
This report is submitted: For Information and action

Proposed Objectives

1. To develop a network of links with international societies of neuroanesthesia and neurocritical care.
2. Where national societies do not exist, to develop links with key neuroanesthesiology/neurocritical care opinion leaders in those countries.
3. To consider joint meetings, based around the annual SNACC meeting, with sister Societies.
4. To establish a network of international training opportunities in neuroanesthesia and neurocritical care.
5. To encourage international trainees in neuroanesthesia and critical care to attend the annual SNACC meeting..
6. In the future to consider the creation of an international research study group that can coordinate multicenter clinical studies.

Progress Summary

- Database of contacts has been established (to be circulated at meeting)
- Colleagues have agreed for their details to be published via the SNACC website
- Debate on how the International Affairs Committee might best deliver its aims

Proposed Goals for the Upcoming Year

- Continue recruiting contacts
- Identify international training opportunities for neuroanesthesia and neurocritical care (in liaison with SNACC neurocritical care and training committees)
- deliver actions for 2009 agreed by SNACC BoD (see below)

Action Items

- Clarify SNACC's aspirations for international relations
- Agree membership
- Agree publication of the database – public or members only section of website.
- Consider an initial joint meeting
- Liaise with SNACC neurocritical care subcommittee re international training opportunities

Date: 2/24/09 Chair/Reporter: Sol Soriano

This report is submitted ☐ For Action x For Information

Committee Name: ASA Subspecialties Committee

Proposed Objectives/Report:

1. **ASA management fee structure and support**
2. **Establishment of ASA Committee on Neuroanesthesia**

Communications : Andrew Kofke

Objectives: support Web page and newsletter

Progress Summary

- Web Page
  - PBL blog started by Alex Bekker
  - Various announcements and meeting photos
- Newsletter
  - Winter 2008 published and disseminated
  - Good feedback
  - Established schedule – see table

Goals for the Upcoming Years

- Web Page
  - Add Drummond Teacher of the Year announcement
  - Fellowships need work
  - More educational material needed…work with Education Committee
  - Discuss with board what should be on it
  - Add more relevant links
  - Modernize and make more dynamic
- Newsletter
  - Committee reports
  - Reports on related societies

SNACC Newsletter: Annual cycle

Publish	Deadline	Contents
Oct 1	Sept 1	Meeting plans Breakfast panel ASA Neurotrack Officer nominee bios Call for committee members Nominating Committee Report Neurotrauma Society Meeting Report
Feb 1	Jan 1	Call for Abstracts Call for nominations SNACC Meeting Report Breakfast Panel Report President Column NCS meeting report and news JNA report *Name Pro-Con* *Fellowship Accreditation Pro-Con*
June 1	May 1	Call for nominations Call for award nominations Meeting announcement and agenda plans Committee reports

* Italics-one time piece

Peter's Laws for the Navigation of Life*

1. **If anything can go wrong, fix it!**
2. **When given a choice, take both.**
3. **Multiple projects lead to multiple successes.**
4. **Start at the top and work your way up.**
5. **Do it by the book… but be the author.**
6. **When forced to compromise, ask for more.**
7. **If you can't beat them, join them, and then beat them.**
8. **If it's worth doing, it's got to be done now!**
9. **If you can't win, change the rules.**
10. **If you can't change the rules, then ignore them.**
11. **Perfection is not optional.**
12. **When faced without a challenge, make one.**
13. **"No" simply means begin again at one level higher.**
14. **Don't walk when you can run.**
15. **Bureaucracy is a challenge to be conquered with a righteous attitude, a tolerance for stupidity, and a bulldozer when necessary.**
16. **When in doubt, THINK!**
17. **Patience is a virtue, but persistence to the point of success is a blessing.**
18. **The squeaky wheel gets replaced.**
19. **The faster you move, the slower time passes, the longer you live!**
20. **Death is not the enemy but occasionally needs help with timing.**
21. **When on thin ice, dance.**
22. **It's up to us to save the world.**

**Imagine the laws spoken in Austrian-English, by an elegant and energetic elderly Peter Safar with a wide grin on his face*

Society of Neurosurgical Anesthesia and Critical Care
N. Northwest Highway Park Ridge, IL 60068-2573

2008-09 Officers

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