

The Newsletter of the APA

T-Piece

No. 5 January 2013



APA

Association of Paediatric
Anaesthetists of Great Britain
& Ireland



Contents;
Presidents report
Research Grants
New Society
Election Results
Trainees report

PRESIDENTS REPORT

Dr Kathy Wilkinson President APA

Happy New Year!

Some headlines....

ICU for children

We were approached by PICS and ICS colleagues to contribute to a revised statement on care of sick children in general ICUs the need for which had arisen because of the surge of severe RSV infections this winter meaning that PICU beds were often blocked. We last looked at this in 2009 when 'flu was thought likely to provide similar challenges. We have always agreed on the importance of our contribution to the team approach in such situations and will be assisting PICS in their ongoing discussions with DH to try and address the long term problem of shortages in PICU provision (See APAGBI website news items December 2012 "Managing Critically ill children in pandemics and infections surges").

RCPCH engagement

We continue to have a very productive relationship with the RCPCH. Paediatrician colleagues are keen to have it recognised that they are not alone in being the specialists who provide care for babies and children, and to strengthen the representation of paediatric matters at all levels within organisations and nationally. With this in mind the new RCPCH President (Hilary Cass) has plans to create a more diverse grouping which will include the third sector and can present a strong and unified voice to both address and be consulted on child health issues.

Commissioning surgical and anaesthetic services for children

In December we circulated members with details of the (DH England) consultation around commissioning specialist paediatric services in England and to which several APA Council members have contributed. The service specifications will go live in April 2013 and it would be worth being aware that whilst interdependency with anaesthesia and acute pain is mentioned in most of the surgical documents, it does not appear in all. Alongside this (but initiated by RCS England) I have been asked to be part of a small working group which in the first instance will look at the pathway for (all) elective surgery and anaesthesia for children and create a "quality dashboard". This work will draw on the forthcoming revised standards

for surgery and anaesthesia soon to be published by the Children's surgical forum. I hope that the group will go on to address the more difficult but potentially very fruitful area of the child with acute abdominal pain. Hopefully this might also bring into focus our continuing concerns about the lack of general surgical training in paediatrics which we have raised at various forums in the last 6 months and with RCS England!

Council changes

As I write this we are about to announce the successful nomination of a new Council member for the UK. We are also delighted that Simon Courtman will remain on Council as the first Non Specialist centre Advisor (NSA), and that he will be joined by Karen Bartholomew (Halifax) as new Linkmen lead. Karen will contact the existing linkman leads soon to take this process forwards. There was considerable interest from some very able candidates for the NSA role. This is good news, and we believe that the input of Simon and Karen along with many others to the various internal and external groups and committees, is invaluable.

NICE to take on Intravenous Fluids in Children

We were very pleased to hear in late November that, after representations by ourselves and the RCPCH (and in particular the British Society of Paediatric Nephrology), NICE will begin a scoping exercise to provide better evidence based guidance on this important subject in the spring, with a projected completion date of 2015. We are registered stakeholders for the new guidance and will keep you posted on relevant developments.

ESPA (international) Pain audits

In late November we were circulated with a request which has been passed on to the Paediatric Pain Travelling Group for us to provide data for international paediatric pain audits. This work is being led by Professor PA Longqvist (Stockholm) and I am grateful to the PPTG for offering to be the UK contacts for data and projects.

APA&ESPA
Cambridge 2013



19th - 21st
June 2013



APA Annual Scientific Meeting and AGM

West Road Concert Hall, University of Cambridge



Celebrate the APA
40th Anniversary

History of Paediatric Anaesthesia
meeting - Cambridge

June 19th 2013

WORKSHOPS | SCIENTIFIC PROGRAMME | SOCIAL EVENTS | CORE TOPICS

Joint meeting with the European Society for Paediatric Anaesthesiology

- APA 40th Anniversary History Session 19th June
- Specialist neuroscience
- Parallel specialist & general streams
- Workshops including arrhythmias, communicating with children, trainee interview
- Core Topics



Annual Dinner
at Cripps Hall, Queen's College

Book online at: www.apagbi2013.co.uk

Society for Radiology in Anaesthesia

<http://www.societyofanaesthetistsinradiology.org/>

"The Society of Anaesthetists in Radiology (SAR) aims to promote safety and optimize the quality of anaesthesia provided to both adults and children undergoing procedures involving radiological imaging.

Both radiological imaging and interventional radiology is the fastest growing speciality in paediatrics with more and more children receiving general anaesthesia in the radiology suite.

As well as paediatric anaesthesia requirements for radiological imaging, new interventional procedures are being continually developed to treat children where previously high risk surgery was the only option; often in an isolated site outside of the operating theatre suite. These highly complex therapeutic procedures being performed by a variety

of specialists utilizing radiological imaging are often performed in clinically unstable patients with significant co-morbidity.

The Society's mission is to provide an education and training resource for anaesthetists, radiologists, radiographers, radiology nurses and others working within this specialist area.

Radiological imaging, both inside and outside of the operating theatre, has become integral to the diagnosis and management of many medical conditions in the 21st century.

Anaesthetists, as a vital member of the clinical team, are uniquely placed to deliver high quality care to these patients.

At our inaugural meeting in 2011 in the specialised paediatric section we discussed the rapid rise in the requirement for anaesthesia in children undergoing radiological imaging and therapeutic procedures as well as anaesthesia for paediatric neuro-radiological procedures: cerebral angiography, embolization including for vein of Galen as well as intra-ophthalmic artery embolization with melphalan for relapsed retinoblastoma.

At our next meeting on 07/03/2013 in the paediatric section will discuss new procedures in paediatric radiology as well as their procedural requirements. These talks were very well received at the 2012 APA meeting in Birmingham and provide another opportunity to hear them for those who were unable to attend".

Jane Herod
GOSH



Annual Meeting 2013

Save the Date

From Cell to Critical care

27th Paediatric Intensive Care Society Congress (PICS) Annual UK Paediatric Intensive Care Society meeting

25-27 September 2013
Royal College of Surgeons, London, UK



Congress Organiser



www.picsmeeting.com



Great Ormond Street 
Hospital for Children
NHS Foundation Trust

APA Research Grant.

(in collaboration with the BJA)

DEADLINE: Noon, Friday 19th April 2013

We are pleased to announce that the APAGBI are collaborating with the BJA/RCoA to provide up to £40,000 for a Research Grant in 2013.

Applications must be submitted via the National Institute of Academic Anaesthesia (NIAA). Further details and Applications Forms are available at <http://www.niaa.org.uk/article.php?newsid=758>

Conditions and Information

The BJA is delighted to co-fund this APAGBI grant in order to provide research funding with the improved chance of achieving larger grants in the future.

The grant is intended to support specific research projects that serve scientific development in basic or clinical research in the field of Paediatric Anaesthesia, Critical Care or Pain Management and may be for salaries or for the purchase of items of equipment (as described below) and consumable items.

The work may be done within the NHS, in an academic clinical department or a university science department. If you are unsure about eligibility please enquire.

Applicants should indicate whether they have sought support for their project from locally available research funds, or from other bodies, prior to or at the same time as this application.

Salaries may be payable in the form of part-time Fellowships for doctors and salaries for technicians or other assistants. Superannuation and National Insurance contributions should be included.

Applicants cannot expect the funding partners to purchase basic equipment e.g. word processors except under very exceptional circumstances. Request for specialised equipment may be supported, but evidence must be given that the expertise to use the equipment is available. Running costs and maintenance of equipment must be considered and the funding partner must be reassured that they are reasonable and sufficient to allow the equipment to be used for the duration of the grant. A competitive quotation and reasons for choice should be provided. VAT should be included where appropriate.

All equipment remains the property of the funding partner and must be labelled as such. At the end of the project the equipment will be donated to the Department but should continue to be labelled with the source of provision. It is the express wish of the funding partners that any equipment will continue to be used for research purposes.

Funding partners decline to contribute to any other indirect costs

Funding partners decline to consider requests for conference travel

Funding partners also ask applicants to note that they will wish to share any intellectual property rights and income arising from this work with the host institution.

Applicants should indicate their qualifications and experience to carry out the project, and the amount of time devoted to work on the project (at least 10% of job plan expected). Those holding trainee appointments should have a consultant as a co-applicant or supervisor. Clinical and research experience relevant to the field of paediatric anaesthesia should be highlighted in the curriculum vitae.

Applicants should demonstrate the feasibility of the study by showing that any necessary resources are available and outline previous relevant scientific work performed at the Host Institution.

The Chair of the APAGBI Scientific Committee and the BJA Grants Officer must be sent a Progress Report 12 months after the award, and a Final Report within 6 months of completion of the project.

Results must be submitted for presentation at the APAGBI Annual Meeting within 12 months of completion of the project.

Presentations and publications resulting from the project must acknowledge the APAGBI and BJA/RCoA as a funding source.

The research must adhere to current guidelines for human and/or laboratory research and relevant details should be included in the application.

Dr Suellen Walker Chair APA Science Committee



The Royal College of Anaesthetists and
The Association of Paediatric Anaesthetists of Great
Britain and Ireland



CPD Study Day: Paediatric Anaesthesia

13th FEBRUARY 2013

RCoA, London

09.00-09.45	REGISTRATION AND REFRESHMENTS	
09.35-09.45	Welcome and Introduction <i>Dr Neil Morton, Stirling</i>	
09.45-10.30	Care of the Surgical Neonate: lessons from NCEPOD 2012 <i>Dr Kathy Wilkinson, Norwich</i>	2D01, 2D02 3D00
10.30-11.15	Useful Sedation Techniques outside the Operating Theatre <i>Dr Mike Sury, London</i>	2D06
11.15-11.35	REFRESHMENTS	
11.35-12.20	A Practical Guide to TIVA in Children <i>Dr Ollie Bagshaw, Birmingham</i>	2D02
12.20-13.05	Does Awareness Occur in Children and Should We Measure Depth Of Anaesthesia In Children? <i>Dr Alyson Calder, Glasgow</i>	2A04, 2D02
13.05-14.00	LUNCH	
14.00-14.45	A systematic approach to paediatric airway problems <i>Dr Rob Walker, Manchester</i>	2D02, 2A01 3A01
14.45-15.30	New devices for the normal and abnormal paediatric airway <i>Dr Chris Gildersleve, Cardiff</i>	2A01, 2D02
15.30-15.50	REFRESHMENTS	
15.50-16.35	Pain management in children: what is the latest evidence? <i>Dr Glyn Williams, London</i>	2D05
16.35-17.20	Improving pain at home after surgery in children <i>Dr Graham Bell, Glasgow</i>	2D05, 2D02
17.20	CLOSING REMARKS	

Safeguarding Children: Level 3 training for anaesthetists



Date: Tue, 30/04/2013

Location: The Royal College of Anaesthetists

Fee: £155

CPD: Approved for 5 CPD Credits.

Availability: Places available

This event is organised jointly by the Royal College of Anaesthetists and the Association of Paediatric Anaesthetists of Great Britain and Ireland. Due to the success and the extremely positive feedback following the 2012 *Safeguarding Children: Level 3 training for anaesthetists*, 2013 sees the return of this event.

Overview

Safeguarding children is the responsibility of everyone involved in healthcare. Level 2 Child Protection training is required by all anaesthetists but there is an expectation that lead paediatric anaesthetists (or those who aspire to this role) will obtain relevant Level 3 competencies.

This one-day event, facilitated by a multi-disciplinary faculty, will provide a bespoke overview of this important area for anaesthetists, using didactic lectures, workshop scenarios and opportunity to question the experts in the field.

Delegates' feedback from the 2012 event:

- "As a first run, I thought the course was very good and the effort and thought put into organising it, inviting relevant speakers etc, was evident and well appreciated."
- "The use of clinical scenarios and case discussions helped to give a sense of application to the information. A very good day!"
- "This course has been one of the best I have ever attended. Necessary and relevant, essential for paediatric anaesthetists."

<http://www.rcoa.ac.uk/education-and-events/safeguarding-children-level-3-training-anaesthetists>

TRAINEE MATTERS

Alyson Calder, APA Trainee Representative

alysoncalder@doctors.org.uk

How is your training in paediatric anaesthesia going? Are you satisfied with your experience? Are your logbook numbers high enough? Where do you see room for improvement?

What would your 'wish list' be for the ideal training in paediatric anaesthesia? These issues are discussed at the APA 'Education and Training' Committee meetings several times a year. The committee looks for trainee feedback on how it is all going. If you have any comments or requests on training issues, please email me your thoughts (good or bad) on your experiences of training in paediatric anaesthesia. My email is

alysoncalder@doctors.org.uk.

I will take these to the next Education and Training committee meeting and feedback the committee's comments and actions taken.



It's a new year and time for reflection. How could your training in Paediatric Anaesthesia be better?

I am happy to say that the AAGBI Group of Anaesthetists (GAT) conference in Oxford this April will feature three talks by members of the APA council. Dr. Karen Bartholomew will speak on 'Managing a sick child in a DGH' and Dr. Isabeau Walker will present a series of difficult paediatric airways and invite you to consider what you would do in those clinical situations. I will be speaking during the Final FRCA Exam Based Session on Key Topics in Paediatric Anaesthesia. If there are any particular topics that you would like me to cover, then please email me with them and I will do my best to include them!

Lastly, if any of you are looking for quick and painless ways to spruce up your CV, please consider writing content for the Trainee Section of the website, submitting a Best Bet (see www.apagbi.org.uk) or submitting an abstract for the APA Annual Scientific Meeting in Cambridge (deadline for abstract submissions is **March 22nd 2013**).

As ever, please contact me with thoughts, comments, requests or ways that I can help. Looking forward to seeing you in Cambridge in June!

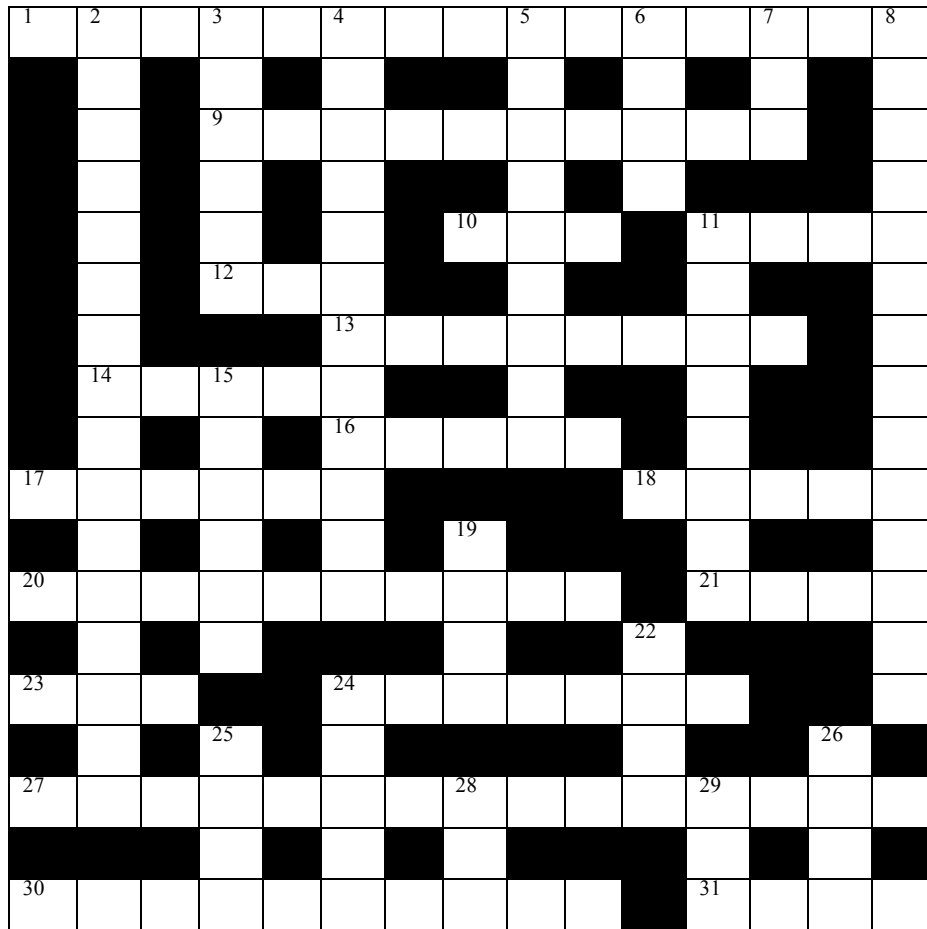
Alyson Calder

Results of the Election to Council January 2013

Dr Jon Smith (Newcastle) has been elected unopposed to council.
We wish him congratulations.

APA TRAINEE CROSSWORD

January 2013



Across

- 1** Electrical activity following stimulation. Can be used to monitor depth of anaesthesia. (6, 9)
9 Index derived from the EEG (10)
10 Malignant disease with peak incidence between 2-5y (1,1,1)
11 ____ of Galen (4)
12 When this rise, Cushing's reflex may be elicited (1,1,1)
13 Procedure originally for correction of Transposition of the Great Arteries (8)
14 Two of these emit wavelengths of 660nm and 980nm in pulse oximeters (5)
16 Cast used to maintain hip position following femoral osteotomy (5)
17 May be found nasally in children with cystic fibrosis (6)
18 Chest segment which doesn't move outwards with inspiration (5)
20 Means by which mitochondrial DNA is inherited (9)
21 The type of DC shock used in cardioversion (abbrev.) (4)
23 Risk of infection in this disease can be monitored using the CD4 count (1,1,1)
24 Lola's older brother (7)
27 One of the nerves blocked for hernia surgery (15)
30 Haemoglobinopathy (6, 4)
31 American high school drama starring New Directions (4)

Down

- 2** Syndrome associated with cleft palate, hypotonia, slender fingers, long face and micrognathia (16)
3 Syndrome associated with a particular facial appearance resembling make-up used in Japanese theatre (6)
4 Increases factor VIII and von Willebrand factor levels (12)
5 Drug which suppresses uterine contractions (9)
6 Monitoring technique gaining popularity, particularly in neonates (1,1,1,1)
7 Sick (3)
8 Commonest cause of stridor in infants (14)
11 Occurs in neonates secondary to malrotation (8)
15 Diatomic gas (6)
19 Forearm bone (4)
22 In research, observer blinding aims to reduce this (4)
24 Milky fatty fluid taken up by lacteals (5)
25 Big ____, Little ____ (4)
26 ____ the Knight (4)
28 ____ Direction (3)
29 When observed in the trachea, can signify respiratory distress (3)

**FOR THE ANSWERS, GO TO
 'PROCRASTINATION CORNER'
 ON THE TRAINEE SECTION AT
www.apagbi.org.uk**



JOINT MEETING ESPA-SPA

In collaboration with the
Swiss Society for Paediatric Anaesthesia
(SGKA-SSAP)



Geneva

ESPA ANNUAL CONGRESS
5TH - 7TH SEPTEMBER
2013 | SWITZERLAND

ESPA Congress Geneva, Switzerland 2013 5th - 7th september

Congress Information

Scientific Information

Exhibition

Welcome

Dear Colleague,

Geneva, the most international city in Europe, will be host to the 2013 Annual Congress of the European Society for Paediatric Anaesthesiology (ESPA) to be held jointly for the first time with the American Society for Pediatric Anesthesia (SPA). This is a great opportunity to meet, share and learn from internationally known keynote speakers and experts during a variety of sessions including plenary lectures, panel discussions, interactive sessions, workshops, case based discussions and also at formal and informal networking events.

The programme is focused on improving the quality and safety of anaesthetic services for children and for the first time, TIVA for Tots and congenital cardiac anaesthesia satellite meetings will be part of the three-day congress. Together with our host society, the Swiss Society for Paediatric Anaesthesia (SGKA/SSAP), we are organizing an outstanding congress that meets the needs and interests of both the specialist paediatric anaesthesiologist and the generalist.

Not to be missed will be the wide choice of amazing social events such as a wine-cycling tour and rewarding excursions to Mont-Blanc, or the 27-kilometre particle accelerator at CERN.

With its humanitarian traditions and cosmopolitan flair, the European seat of the United Nations and world headquarters of the Red Cross, Geneva, 'capital of peace' welcomes you in September 2013 for what promises to be a very special ESPA congress!

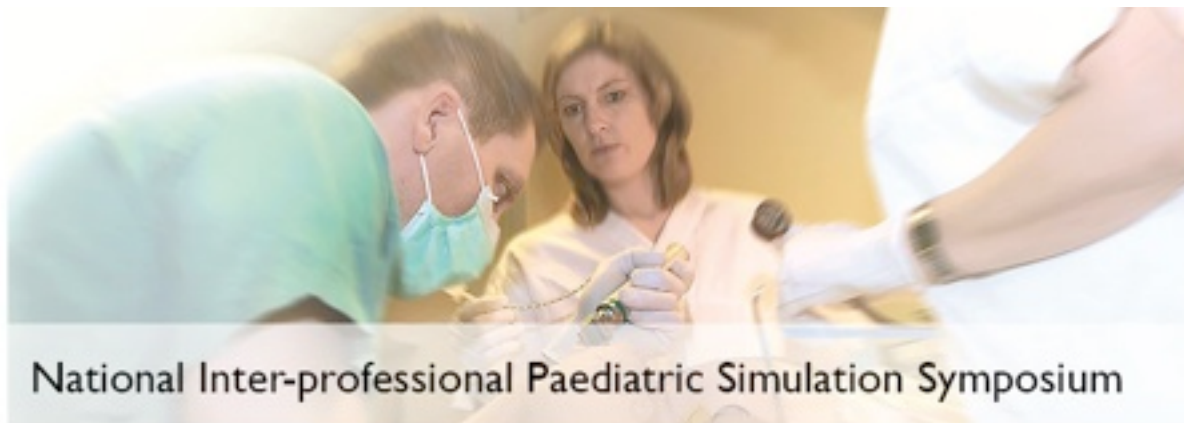
Nigel Turner
President ESPA

Walid Habre
SGKA/SSAP

Nancy Glass
President SPA

GOLD SPONSOR

MAQUET
GETINGE GROUP



National Inter-professional Paediatric Simulation Symposium

[Overview](#) [Summary](#)

ASPIH and Laerdal Medical are proud to present a National Inter-professional Paediatric Simulation Symposium.

This one day symposium continues to develop the close working relationship between both organisations and their joint commitment to further develop the effective use of simulation in paediatric healthcare education.

The programme places particular emphasis on inter-professional learning by bringing together experts in this educational approach to present experiences and deliver workshops to further develop best practice and create a national inter-professional community of practice.

WHEN

Friday, March 8, 2013
08:00 - 18:00

 [Add to Calendar](#)



Laerdal
helping save lives



CPD points will be awarded from the Royal College of Paediatrics and Child Health.

VENUE:



**Radisson Blu Hotel
Manchester Airport
Chicago Avenue
Manchester M90 3JA**

REGISTER:

Contact Christine Spencer by e-mail info@aspih.org.uk
Tel : 07415 065927