Welcome to Keesler Medical Center!

A typical day – main OR and OB

You should plan to arrive in the OR by 0600 and set up your room by 6:30am. Most providers will arrive by 0630.

Once you’ve set up the room go meet and chat with your patient. You can answer any last minute questions, ask some of your own (are they NPO, was an HCG done for premenopausal patients, have they taken their morning meds etc) and confirm/verify IV access and consents. The IVs are done by our techs in preop, however if you need practice or feel that gaining IV access in a certain patient may be challenging, you can ask our techs to let you attempt first.

The first case is in the OR by 0730 (M-Thu) or 0830 on Fri.

When you’re assigned to OB, once you’ve checked the epidural cart, the 2 ORs and set up your room, introduce yourself to the OB nurses and find out if there are any patients that need to be seen (in labor, scheduled c/s, epidurals running etc). You should meet your patients and assess them.

We will go into more details about setting up your room in main OR and OB when you arrive here to orient.

When your room is done ask the anesthesia float 228-348-7008 if there’s any more work for you. At this point, you will find out if there is, or if you’re going home. Don’t leave without being told you can. Once you’re told you can go, there’s one last thing to do: find out what you’re doing tomorrow and get the preops for those patients. We know you don’t have access to patient records, so all you have to do is ask any anesthesia provider that is not busy to kindly pull up those patients and print their preop evaluations for you. If your patients for tomorrow are inpatients, you should go see them and assess them. If you are off on a certain day of the week, please call the above float phone number around 1-2 pm to find out your assignment for the next day and to get more details about your cases. There is no excuse to come unprepared. You should be able to present an anesthetic plan A and also a plan B (backup plan) to the preceptor you work with for all your cases that day.

A few words of wisdom: a good anesthetic begins with a good, thorough preoperative evaluation of your patient. Always take time to know your patients’ preop evaluation and never take a patient to the OR or perform a procedure without knowing everything about your patient! Working with a preceptor is not an excuse for being negligent! Also, please follow up on your patients the next day (if you’re here) if they stayed inpatient: it’s a quick walk to ICU, 4D, or L&D!

Your rotation here highlights peripheral nerve blocks and neuraxial anesthesia among other more or less challenging cases. You will be encouraged to be as independent as you safely can, so please come prepared. Focus on everything OB and regional anesthesia from your preferred anesthesia book, and utilize online resources as well for additional visual help (google, youtube etc.).

In addition to your book resource of choice, I am also attaching a list of links to sites and a few articles that will give you additional knowledge in OB and regional anesthesia.

Feel free to ask anyone in our anesthesia group for guidance or to address any issues you may have. We are all here to help you succeed and to become a safe, and knowledgeable provider!

Capt Adina Westmark, CRNA

Anesthesia Flight

Keesler Medical Center

Keesler AFB

228-382-8333

OB reading

1. http://www.tulaneanesthesiology.com/web/data/documents/Resident%20Handbook%20Update%204.pdf
2. http://www.tulaneanesthesiology.com/web/data/documents/Jul2009%20TulOBAnesGuidelines.pdf
3. Subdural Block – see attached article
4. http://www.asahq.org/~/media/Sites/ASAHQ/Files/Public/Resources/standards-guidelines/guidelines-for-neuraxial-anesthesia-in-obstetrics.pdf
5. http://www.asahq.org/~/media/Sites/ASAHQ/Files/Public/Resources/standards-guidelines/practice-guidelines-for-obstetric-anesthesia.pdf
6. OB Difficult Airway – see attached article
7. Failed Spinal – see article

Peripheral Nerve Block/Regional reading

1. Needle visualization under US https://www.youtube.com/watch?v=RskrEsAGzec
2. Radial catheterization under US https://www.youtube.com/watch?v=YOxyssqqYNE