

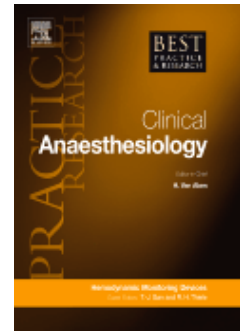


BEST PRACTICE & RESEARCH: CLINICAL ANAESTHESIOLOGY

AUTHOR INFORMATION PACK

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DESCRIPTION

In practical paperback format, each 200 page topic-based issue of *Best Practice & Research: Clinical Anaesthesiology* will provide a comprehensive review of current clinical practice and thinking within the specialty **anaesthesiology**.

All chapters are commissioned and written by an international team of practicing clinicians with the Guest Editors for each issue drawn from a pool of renowned experts and opinion leaders. Reference is made to: The latest original research Cochrane Reviews Audits and confidential enquiries National and international conferences National and international guidelines Personal communications All chapters take the form of practical, evidence-based reviews that seek to address key clinical issues of diagnosis, treatment and patient management.

Each issue follows a problem-orientated approach that focuses on the key questions to be addressed, clearly defining what is known and not known. Management will be described in practical terms so that it can be applied to the individual patient.

Boxed and bulleted Learning Objectives and Practice Points are features within each chapter and will highlight the core and essential knowledge that will help the physician to provide the best care to their patients.

The series' objective is to provide a continuous update for the busy clinician and researcher.

2015 topics, Volume 29, Issues 1-4

29:1 March - Simulation in Anaesthesia and Surgery

Georg Breuer & Klaus Hahnenkamp

29:2 June - Developments in Extracorporeal Circulation

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29:3 September - Protective mechanical ventilation in the operating room

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29:4 December - Cardiac arrest: Post-cardiac arrest management

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INTRODUCTION

KEY POINTS

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Further research is warranted to evaluate human lower oesophageal sphincter pressure physiology during cardiac arrest The value of alternative airway devices needs to be determined to study possible alternatives for endotracheal intubation Bag-valve-mask ventilation techniques and manoeuvres need to be assessed to ensure that they provide sufficient oxygenation and ventilation while avoiding stomach inflation

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