Case Studies of Near Misses in Clinical Anesthesia
For the next generation:

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Foreword

The anesthetic care of most of our patients often seems routine. For the majority, a preoperative evaluation management plan is made and followed, and the anesthesia and surgery proceeds as planned. Anesthesiologists do not like surprises! But, sometimes (and thankfully not often) the case does not follow the script, and unanticipated events occur. Patients have idiosyncratic responses to medications, or experience surgical or anesthetic misadventures that lead to changes in vital signs or worse. These events are few and far between, and if you have not witnessed them previously, you might not consider some of the more unusual causes for these presentations. John Brock-Utne has once again collected a series of such “rare” events. Each case discussion considers the presentation, his diagnosis, and then his approach to management. In each instance, catastrophe was avoided. Every case in this book is real, and similar events could occur tomorrow to patients under the care of the reader. It is the early recognition of these “near miss” episodes and the “lessons learned” in managing them that make this book so important. Dr. Brock-Utne’s many years of experience, his interesting way of presenting the case scenarios, and his practical no-frills approach to management make this book a must-read. My own anesthetic practice, that of my colleagues at Stanford University, and the hundreds of anesthesia residents who have come through our program over the past three decades have all benefitted from knowing and working with Dr. Brock-Utne. This book allows others to learn from his experiences.

Stanford, CA

Jay B. Brodsky, MD
Preface

As anesthesiologists we are confronted, from time to time, with difficult decisions in “near miss” situations. Fortunately, “near misses” occur rarely, but it is important to be aware that they can occur. This book is a companion to my previous book *Clinical Anesthesia: Near Misses and Lessons Learned*, published by Springer in 2008. That book also described “near misses.” The cases in this book are all new. Together these books relate to my 41 years of clinical anesthesia experience in Scandinavia, South Africa, and the United States.

Each of the 80 cases gives the reader, on the first page, all the information necessary to diagnose/treat a potential disaster. The next page provides solution(s) and a discussion of the problem(s), makes recommendations, and provides references, where appropriate, for further reading.

The suggested management of these cases may be controversial. If so, they may form the basis for a teaching discussion between faculty members and residents/fellows-in-training in anesthesiology. But most of all, this book is designed to alert the reader to various precarious situations that can arise in anesthesia practice in both sophisticated and rural anesthetic environments and how to best prevent or deal with them. To paraphrase Goethe:

The art is long,
Life is short;
Experiment perilous,
Decisions difficult.

After all these years in anesthesia, I can honestly say Goethe was right.

Stanford, CA, USA  John G. Brock-Utne, MD, PhD, FFA(SA)
I would like to acknowledge my many colleagues around the world who have contributed to this book through case discussions and/or case reports:

I am also greatly indebted to the following people:

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Last but not least, my wife Sue, our boys, Jens, Arne, and Ivar, their wives Alice and Jennifer, and our five grandsons: Matthew, Tobias, Anders, Jasper, and Stefan.

Stanford, CA, USA

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