

Abstract B160 Figure 2

**Results** The pre-intervention survey revealed; only 30% of respondents thought the manual calculations were easy to perform, 70% of respondents calculations took up to 5 minutes to complete with 50% using pen and paper and 100% using a phone calculator. Following the app pilot; 100% of users reported that it made calculations easier and were confident that it would reduce errors. Increased efficiency was observed with 75% of users reporting using the app took <1 minute. All users reported high levels of trust in results obtained from the app.

**Conclusions** Using a plan-do-study-act approach we built an app that local clinician-testers report makes dose calculation easier and quicker compared to their usual practice for our local HVLIA protocols. To complete the act phase we will need to conduct a formal local trial, and seek approval of the app's medical device status.

### B161 REGIONAL ANESTHESIA USE IN GREECE: CAN EDUCATION MAKE A DIFFERENCE IN KNOWLEDGE AND PRACTICE?

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**Background and Aims** The aim of the current survey was two-fold: first to provide an overview about the current practice of regional anesthesia (RA) in Greece and secondly to evaluate the effect a structured hands-on training Course has on participants' knowledge and attitude towards RA.

**Methods** An electronic questionnaire was uploaded on Survey-Monkey and a link giving access to the questionnaire was forwarded via email to a mailing list of 825 practicing Greek anesthesiologists held in the electronic database of ESRA Hellas. It contained questions relating to the anesthesiologists' demographic characteristics, their RA practice and information pertaining to the RA training Course.

**Results** Attendants of the Course are more familiar with the performance of peripheral nerve blocks with neurostimulation and/or ultrasound guidance as compared to non-attendants ( $p < 0.001$ ). Attendants are also less likely to practice exclusively general anesthesia, more likely to use peripheral blocks for lower limb surgery and more likely to consider taking the European Diploma of RA in comparison to non-attendants ( $p < 0.001$ ,  $p = 0.018$  and  $p = 0.002$ , respectively). Both cohorts consider the Course of value and agree that the main reason to use regional techniques is to ensure optimal postoperative analgesia while the main hindrance to RA practice is the lack of relevant education in the techniques, especially those under ultrasound guidance.

**Conclusions** Greek anesthesiologists seek educational activities in the field of RA and the Course seems to fulfil the majority of attendants' expectations. There will be further effort by the organizers to improve the current Course and undertake additional educational initiatives in the field of RA.

### B162 BRIDGING THE GAP IN REGIONAL ANAESTHESIA: AN EDUCATIONAL INITIATIVE

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**Background and Aims** Regional anaesthesia has proven its role in providing superior perioperative analgesia compared to systemic opioids. The advent of ultrasound-guided regional anaesthesia has heralded rapid growth in new block techniques, which could widen the gap between regional anaesthesia enthusiasts and generalists, who may perceive regional anaesthesia as becoming increasingly complex [1]. We organised a Block-of-the-week (BOTW) teaching programme to allow greater accessibility to regional anaesthesia.

**Methods** BOTW is an educational initiative by a group of trainees with an interest in regional anaesthesia. Each session, held fortnightly, focuses on a pre-determined technique with the aim of encouraging confidence in performing blocks,

especially the plan A nerve blocks recommended in the training curriculum. We incorporated various teaching methods and materials including a pre-session two-page information sheet, relevant video links and live scanning practice.

**Results** We collected feedback using 5-point Likert scales. 77.2% found the pre-session materials helpful and 95.4% found the practical session useful, scoring >3 out of 5. Prior to the sessions, 90.6% did not feel confident in performing regional anaesthesia. After the sessions, 81.8% of the participants felt more confident, scoring 3 out of 5, and will consider performing regional anaesthesia in their clinical practice.

**Conclusions** Regular exposure at local departmental teachings using various teaching methods allows anaesthetists at all levels of training to become more confident in integrating these techniques into clinical practice. We hope to cultivate interest in this area among anaesthetists in our department, moving away from a niche subspecialty to a core component of anaesthetic care, available to all [1].

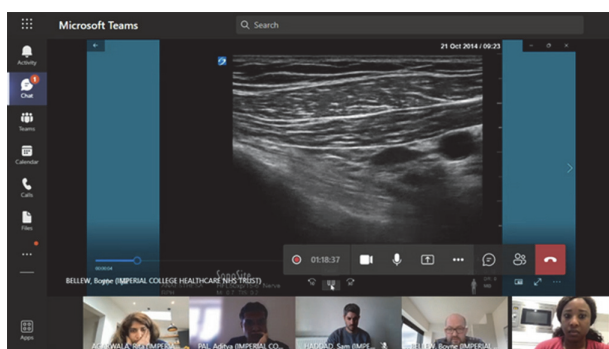
### B163 DELIVERING A HIGH-QUALITY REGIONAL ANAESTHESIA FELLOWSHIP DURING A GLOBAL PANDEMIC

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**Background and Aims** COVID-19 has affected the delivery of postgraduate medical education. Social-distancing measures, lost training time and limited resources have all presented unique challenges. Learning opportunities in Regional Anaesthesia (RA) have reduced since the start of the pandemic, yet less aerosol-generation and improved patient flow when compared to general anaesthesia, has increased RA demand.<sup>1,2</sup> We aimed to combat these challenges by adopting a novel approach to RA fellowship teaching to maintain high-quality training and service delivery.

**Methods** Fellows were given access to a repository of learning resources through Dropbox™ including research papers and block performance videos. Tutorials were conducted over Microsoft Teams (Figure 1), utilising sono-anatomy videos and immersive anatomy software (3D Organon™) using virtual reality (VR) headsets (Oculus™). Butterfly IQ™ handheld ultrasound devices were made available for practice at home. A Google Docs™ survey was then distributed to all fellows to rate their learning experience.



Abstract B163 Figure 1

**Results** All fellows (n=6) agreed/strongly agreed that the Dropbox™ folder improved knowledge of RA and aided preparation for online tutorials. All fellows strongly agreed online tutorials were useful. 5 fellows agreed/strongly agreed that VR software was useful for learning, with 3 agreeing/strongly agreeing that the Butterfly IQ™ benefitted their learning.

**Conclusions** A growing demand for RA, coupled with a greater emphasis on robust training and service delivery, means the provision of high-quality RA fellowships is more important than ever.<sup>3,4</sup> Despite limitations on medical education during the pandemic our centre has demonstrated it is still possible to maximise RA learning opportunities and keep fellows engaged.

### B164 PRE-EXISTING ANAEMIA AND BLOOD TRANSFUSION RATE IN GERIATRIC HIP FRACTURE PATIENTS

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**Background and Aims** Anaemia is common condition in geriatric patients. Tolerance and the symptoms of anaemia in those patients are very variable, depending on aging and comorbidities. Preoperative anaemia increases the risk of perioperative transfusion, which itself is associated with adverse effects. This study aimed to investigate risk of allogeneic blood transfusion (ABT) and length of hospital stay (LOS) in elderly hip fracture patients with pre-existing anaemia requiring surgery.

**Methods** Elderly patients (age ≥ 65 years) undergoing surgery for hip fracture between February 2020 and December 2021 were retrospectively evaluated. The World Health Organization (WHO) definition of anaemia was used. All patients received transfusion when their measured Hb was ≤ 80 g/l, or when any signs or symptoms indicative of anaemia were present. Patients' age, body mass index (BMI), presence of underlying diseases, fracture types and fixations, surgery time, anaesthesia methods were statistically analysed.

**Results** A total of 92 elderly hip fracture patients were included, average age 84±8 years, 80% female. According to the initial haemoglobin value, there were 46% patients anaemic. Total of 94% anemic females and 87% anemic males (p=0,52), and 38,5% nonanemic females and 9% nonanemic males, p<0,001 received ABT. The number of transfused packed red blood cells per patients were median 490 ml (IQR 250–730 ml) for females, and 500 ml (IQR 490–515 ml) for males, p=0,97. There was no statistically significant association between the presence of anaemia on admission and LOS.

**Conclusions** Pre-existing anemia presents significant factor affecting perioperative blood transfusion but not LOS in elderly hip fracture surgery patients.

### B165 COMPARISON OF MACHINE LEARNING ALGORITHMS IN PREDICTING EEG EPILEPTIC SEIZURE DURING ANAESTHESIA

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