1976
## 1976 SOAP MEETING

### Schedule of Events:

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thursday, April 8</td>
<td>4:00 p.m. - 8:00 p.m.</td>
<td>Registration</td>
</tr>
<tr>
<td></td>
<td>7:00 p.m. - 8:30 p.m.</td>
<td>Cocktails</td>
</tr>
<tr>
<td>Friday, April 9</td>
<td>8:00 a.m. - 10:00 a.m.</td>
<td>Scientific Sessions</td>
</tr>
<tr>
<td></td>
<td>10:00 a.m. - 10:20 a.m.</td>
<td>Regionalization of Obstetrics (Alper)</td>
</tr>
<tr>
<td></td>
<td>10:20 a.m. - 10:50 a.m.</td>
<td>Coffee Break</td>
</tr>
<tr>
<td></td>
<td>10:50 a.m. - 12:15 p.m.</td>
<td>Panel of Experts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(See below)</td>
</tr>
<tr>
<td></td>
<td>Afternoon</td>
<td>Free</td>
</tr>
<tr>
<td></td>
<td>Evening</td>
<td>Free</td>
</tr>
<tr>
<td>Saturday, April 10</td>
<td>8:00 a.m. - 10:00 a.m.</td>
<td>Scientific Sessions</td>
</tr>
<tr>
<td></td>
<td>10:00 a.m. - 10:30 a.m.</td>
<td>Coffee Break</td>
</tr>
<tr>
<td></td>
<td>10:30 a.m. - 12:00 noon</td>
<td>Scientific Sessions</td>
</tr>
<tr>
<td></td>
<td>12:00 noon - 1:30 p.m.</td>
<td>Luncheon</td>
</tr>
<tr>
<td></td>
<td>1:30 p.m. - 3:45 p.m.</td>
<td>Orlando Hyatt House</td>
</tr>
<tr>
<td></td>
<td>3:45 p.m. - 4:00 p.m.</td>
<td>What's New?</td>
</tr>
<tr>
<td></td>
<td>4:00 p.m. - 5:00 p.m.</td>
<td>(See below)</td>
</tr>
<tr>
<td></td>
<td>7:00 p.m.</td>
<td>Break</td>
</tr>
<tr>
<td>Sunday, April 11</td>
<td>8:00 a.m. - 10:00 a.m.</td>
<td>Scientific Sessions</td>
</tr>
<tr>
<td></td>
<td>10:00 a.m. - 10:30 a.m.</td>
<td>Coffee Break</td>
</tr>
<tr>
<td></td>
<td>10:30 a.m. - 12:00 noon</td>
<td>Scientific Sessions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Adjournment</td>
</tr>
</tbody>
</table>

The "Panel of Experts" will include: Mike Finster, Milt Alper, Sol Shnider, and Gertie Marx (Anesthesia); Bill Spellacy and Preston Dilts (Obstetrics); Don Eitzman and Jack Scanlon (Perinatology).

Regarding "What's New," Cal Hobel will do Obstetrics, Tom Joyce will do Anesthesia, and George Cassady will do Perinatology.

### Registration:

If you have not pre-registered, contact Charles P. Gibbs, M.D., Secretary-Treasurer, SOAP, University of Florida – College of Medicine, Department of Anesthesiology, Box J-254, J. Hillis Miller Health Center, Gainesville, Florida 32610, IMMEDIATELY.

Contact the Orlando Hyatt House, 6375 Space Coast Parkway, Kissimmee, Florida 32741, (305) 846-4100, IMMEDIATELY for room reservations. However, it may be too late and you may have to make reservations elsewhere.
Presentations:

Dr. Gibbs will notify those individuals whose papers have been chosen by a panel of experts for presentation during early March, 1976.

SOAP has received an overwhelming response to the call for abstracts and the starting times of the Scientific Sessions have been moved up to allow more papers to be presented.

The following abstracts were submitted:


5. EVALUATION OF MYOCARDIAL FUNCTION MEASURING THE SYSTOLIC TIME INTERVALS IN PATIENTS SUBMITTED TO CESAREAN SECTION. COMPARISON BETWEEN NORMAL PATIENTS AND WITH TOXEMIA OF PREGNANCY. F. Rodriguez, C. Fernandez-del Castillo.


8. PROLONGED PAIN AND WEAKNESS FOLLOWING LUMBAR EPIDURAL BLOOD PATCH. R.W. Paige, G.C. Bell.


13. THE EFFECTS OF DOPAMINE ON UTERINE BLOOD FLOW AND FETAL ACID-BASE STATUS IN THE PREGNANT EWE. K. Callender, N. Feduska, S.M. Shnider,

15. HUMAN UTERINE ARTERY RESPONSE TO LIDOCAINE. C.P. Gibbs, S.C. Noel.

16. PULMONARY VASCULAR CHANGES FOLLOWING INDOMETHACIN IN NORMOXIC AND HYPOXIC PREMATURE NEWBORN GOATS. T.L. Tyler, C.W. Leffler, S. Cassin.

17. FETAL FIBEROPTIC PLETHYSMOGRAHY. G.C. Bell.


20. REGIONALIZATION, AN EFFECTIVE METHOD OF REDUCING NEONATAL MORTALITY. H.H. Shuman.

21. MATERNAL AND FETAL EFFECTS OF LUMBAR EPIDURAL ANALGESIA FOR LABOR AND DELIVERY IN PATIENTS WITH GESTATIONAL HYPERTENSION. F.M. James, III, P. Davies.

22. ACID-BASE BALANCE IN DIABETICS AFTER GENERAL OR SPINAL ANESTHESIA FOR CESAREAN SECTION. S. Datta, W.U. Brown, Jr., M.H. Alper.


30. DEFICIENCY OF PULMONARY ALPHA-1-ANTITRYPSIN IN FETAL BRONCHO-PULMONARY DYSPLASIA. J.G. Adams, R. Chandra.


34. UTERINE BLOOD FLOW AND CYANIDE INTOXICATION IN NORMOTENSIVE PREGNANT EWES RECEIVING SODIUM NITROPRUSSIDE. J.S. Naulty, R. Cefalo.

35. FIBEROPTIC MONITORING OF THE BRACHIAL BLOOD PRESSURE VIA THE DIGITAL PULSE. G.C. Bell.

36. WATER BED FOR PARTURIENT'S HEAD. G.C. Bell.

37. PROSTAGLANDIN INDUCED PULMONARY MATURATION IN RABBITS. P.J. Goldstein, M. Salomy.

38. RESPIRATORY DISTRESS FOLLOWING ELECTIVE CESAREAN SECTION - A PREVENTABLE MORBIDITY. R.M. Cowett, W. Oh.


40. INTRAVENOUS INDUCTION AGENTS FOR CESAREAN SECTION. L. Perez-Tamayo, C.R. Camacho, L.F. Butron.

41. URINARY TRACT INFECTIONS AFTER VAGINAL DELIVERY IN PARTURIENTS RECEIVING REGIONAL ANESTHESIA. J.R. Golub, J.M. Federschneider, G.W. Ostheimer.

42. ELECTROPHRENIC STIMULATION IN CONGENITAL RESPIRATORY FAILURE. S. Yasunaga.

43. KETAMINE ANESTHESIA IN OBSTETRICS AND GYNECOLOGY. A. Aziz.

44. CORRELATION OF NEONATAL HEART RATE AND BLOOD GASES WITH VARIABLE AND LATE DECELERATION DURING LABOR. K.J. Staish, S. Yeh, A. Forsyth, E. Hon.

45. A COMPARISON OF GENERAL ANESTHESIA AND LUMBAR EPIDURAL ANALGESIA FOR ELECTIVE CESAREAN SECTION. F.M. James, III, J.S. Crawford, P. Davies.

46. LUMBAR EPIDURAL ANALGESIA FOR LABOR AND DELIVERY OF TWINS. F.M. James, III, J.S. Crawford, P. Davies.

47. THE OBSTETRICAL AUDIT, OR WILL THE DOG CATCH ITS TAIL. Quimby.


49. EFFECT OF MORPHINE-DIAZEPAM ON AWARENESS AND DREAMS OF PATIENTS.
UNDER NITROUS OXIDE ANESTHESIA FOR CESAREAN SECTION. E. Abouleish, F.H. Taylor.

50. THE INCIDENCE OF GESTATIONAL DIABETES. K.S. Amankwah.

51. OBSTETRIC BIRTH MEDICATION AND VISUAL PROCESSING IN 4- AND 5-MONTH OLD INFANTS. S. Friedman, Y. Brackbill, A.J. Caron, R.F. Caron.

52. SOAP CAESAREAN SECTION WITH LEFT UTERINE DISPLACEMENT SURVEY. R.B. Clark.

53. A NEW DISPOSABLE SINGLE-SHOT EPIDURAL NEEDLE AND ANESTHETIC FILTERING STRAW SET FOR OBSTETRICAL ANESTHESIA. J.F. Lutz.


60. PRENATAL ANESTHESIA VISITS: UPGRADING OBSTETRICAL ANESTHESIA CARE. J.S. DeVore, A. Bart, E. Ricciarelli.

61. NEONATAL BLOOD PRESSURES AS INFLUENCED BY OBSTETRIC AND ANESTHETIC CONDITIONS. V.K. Bond.


63. EPIDURAL ANESTHESIA DURING LABOR AND ITS RELATIONSHIP TO NEONATAL NEUROBEHAVIOR. L. Graziani, B. Korberly, R. Schnaare.

64. THE VALUE OF SCREENING PULMONARY FUNCTION STUDIES IN SELECTING WHO HAS POST CAESAREAN SECTION RESPIRATORY PROBLEMS. E.R. Roaf, D. Freiberg, M.H. Alper.

65. TREATMENT OF A PERSISTENT ATYPICAL POST-PUNCTURE HEADACHE: A CAVEAT. R.S. Schwettmann.


POSITIONS AVAILABLE

1. University affiliated hospital, 6,000 deliveries. University appointment available. Person would become Head, Division of OB Anesthesia, reporting to the Chief, Department of Anesthesiology. Will join a fee-for-service physician corporation. Package includes salary plus fringes and malpractice insurance. Package and salary are negotiable. Can start any time. Michigan license required. Metropolitan Detroit area. Clinical research opportunities are available. Contact: Gerhard C. Endler, M.D., 1413 Blairmoor Court, Grosse Pointe Woods, Michigan 48236.

2. Director of Obstetrical Anesthesia. Boston University Medical Center. 1,800 deliveries per year. Resident and medical student teaching. Research opportunities as desired. Salary plus corporation. Contact: Frederick W. Hehre, M.D., Director of Anesthesiology, 75 East Newton Street, Boston, Massachusetts 02118.

3. Obstetric anesthesiologists needed for community based hospital in Upstate New York. 2,700 deliveries yearly in an active obstetric service which is well-equipped with fetal monitors, etc. Neonatologist available for perinatal care. Contact: Richard W. Roberts, M.D., Chairman, Department of Anesthesiology, Community General Hospital, Syracuse, New York 13215.

QUESTION

Toshio Akamatsu would like to know who makes good, sturdy APGAR timers.

Your replies should be sent to the Editor, SOAP Newsletter, at the return address listed on the back of your Newsletter so I can share this information with our membership.

Many thanks for your help.

MEETINGS OF INTEREST

March 24-25, 1976: 4th Annual Conference on Perinatal Medicine sponsored by the Perinatology Department, The Medical Center, Columbus, Georgia 31901, at Callaway Gardens, Pine Mountain, Georgia. Contact: Micki L. Souma, M.D. and Louis Levy, M.D., The Medical Center, Columbus, Georgia 31901.
April 2-4, 1976: Second Annual Obstetric and Pediatric Anesthesia Seminar in Memory of Virginia Apgar, M.D. at Miami Beach, Florida.

April 20-21, 1976: Major Dilemmas in Neonatal Pediatrics – Symposium IV sponsored by The Department of Medical Education, Methodist Hospital, Indianapolis, Indiana. Includes a special session on "The Adoptive Newborn." Faculty includes: Brazelton, Feingold, Odell, Seidel, Sunshine and Baum. For more information, write: Richard S. Baum, M.D., Director, Neonatal Pediatrics, Methodist Hospital, 1604 North Capitol, Indianapolis, Indiana 46202. (317) 924-8174.


May 14-15, 1976: Obstetric Analgesia and Anesthesia: Review and Update on Obstetric Anesthetic Management sponsored by the Harvard Medical School Department of Continuing Education and the Boston Hospital for Women. To be held at The Colonnade Hotel, Boston, Massachusetts. For more information, write: Associate Dean, Department of Continuing Education, Harvard Medical School, 25 Shattuck Street, Boston, Massachusetts 02115.

May 21-23, 1976: Fourth Annual Postgraduate Seminar in Pediatric Anesthesia: Anesthesia Problems in the Perinatal Period sponsored by the Department of Anaesthesia, University of Cincinnati, College of Medicine. To be held at the Quality Inn Riverview, Covington, Kentucky. Speakers include: Paul, Shnider, Yaffe, Joyce and Striker. For more information, write: Mrs. Cherie Frankenberg, Department of Anesthesia, Room 3506, University of Cincinnati, College of Medicine, 231 Bethesda Avenue, Cincinnati, Ohio 45267.

June 9-12, 1976: The Fifth European Congress of Perinatal Medicine, Uppsala, Sweden. For more information, write: Secretary, Fifth European Congress of Perinatal Medicine, Perinatal Research Unit, University Hospital, S-750, 14 Uppsala, Sweden.
ANNUAL MEETING

What can be said except that Charlie's meeting and Shamu were magnificent - and not necessarily in that order - who wants to antagonize a killer whale?? The eighth Annual Meeting of the Society for Obstetric Anesthesia and Perinatology was held at the Orlando Hyatt House near Disney World, Florida.

Program Review

1. Thirty-seven works-in-progress were presented.

2. A panel of experts - Shnider, Marx, Alper, and Finster (Anesthesia); Spellacy and Dilts (Obstetrics); and Eitzman and Scanlon (Perinatology) - were quizzed about difficult problems by their colleagues.

3. "What's New" reports were given by Tom Joyce (Anesthesia), Cal Hobel (Obstetrics), and George Cassady (Perinatology).

4. The Annual Banquet was held at Sea World where we were awed by Shamu and Company. (If anyone took a picture of Shamu kissing our Newsletter secretary, Karen Gould, we would appreciate it very much if you would send the negative to the Editor. Thanks!)

5. Minutes of the meeting of the Board of Directors and the general business meeting of SOAP are enclosed.

6. The 1977 SOAP Meeting will be held at the Edgewater Inn, Seattle, Washington, April 14-17. Abstracts will be requested in the December Newsletter and a follow-up mailing will come from Dave Ralston directly in early 1977. (Dave is negotiating at the present time for either a special salmon run through the hotel or for a school of porpoises to pull the hotel around the harbor. The site of the 1977 meeting, the Edgewater Inn, is built on a pier in the harbor. Good luck, Dave!)

7. The 1978 SOAP Meeting will be held in Memphis, Tennessee, hosted by John Morrison and the University of Tennessee.

8. The members of SOAP extend their deepest thanks and warmest praise to Charlie Gibbs for hosting an unforgettable meeting. Our plaudits must also be extended to Judy Rippetoe, George Saviello, Dick Perschau, Sharon Birk, and Amelia Cruz for their invaluable assistance, and Karen Gould for her usual superb job of keeping the mailing list in tiptop shape.

9. Our heartfelt and sincere thanks to Brett Gutsche, our outgoing President, for his able leadership over the past year. (Brad Smith, Lida Dahm, and Brett are responsible for the outstanding teaching exhibit on Newborn Resuscitation at the ACOG Meeting in Dallas in May, 1976. Brad had the exhibit refurbished and Brad, Lida, and Brett arranged teaching coverage. Our thanks to all the members of SOAP who participated in this endeavor.) I have taken the liberty of printing Brett's closing remarks as our outgoing President:
"This is the eighth Annual Meeting of SOAP and I have had the pleasure
of attending all eight meetings. At the first meeting in 1969 in Kansas City,
Missouri, there were 35 in attendance. At this meeting, the registration is 249
with an active membership over 300. I have heard some oldtimers say we have be-
come too large and lost our informality. It's true that many changes have oc-
curred and that we may even have to incorporate in the future. Growth does have
some disadvantages; however, it does reflect progress. Despite the marked de-
crease in deliveries in the United States over the past eight years, the interest
in obstetric anesthesia and perinatology continues to grow as reflected by our
ever-increasing membership. The public and the medical profession have come to
the realization that the parturient and the fetus in transition to the newborn
deserve the best medical care we can offer as well as our understanding and com-
passion. We can be proud of the many accomplishments our Society has made. We
have official recognition with ASA and ACOG. We have been asked to actively par-
ticipate in various functions of both these organizations. It appears that the
AAP may wish to formalize relations with us. Our members and our organization
have greatly influenced and upgraded maternal and perinatal care. Yet this has
not been done by threats and proclamations that cause ill will, but rather through
education and advice given when asked. Politics and in-fighting have not occurred
in our organization. We can look to the past with a sense of pride and accom-
plishment. Yet, we can't rest on laurels if SOAP is to remain a viable and worth-
while organization. Changes will be necessary, but let us hope they will be made
to enrich and solidify our principles, which were so wisely incorporated into our
Constitution. Let me conclude my term in office with my own personal feelings
as to what these principles are and why they should be maintained. (1) Our most
important aim is to improve the care in the perinatal period, to make birth for
the parents a safe, yet fulfilling and wonderful experience. We also want to give
all new parents the most healthy baby possible. In this, our major goal, we also
must recognize the need to consider the emotional needs of patients entrusted to
our care, realizing each is an individual. We must emphasize not only the science
of medicine but the art of medicine so often neglected today. (2) I would hope
that we are to remain an informal forum, exchanging information among ourselves
to increase our knowledge as well as that of the medical profession. We present
this information not for personal gain, but to enrich each other and to gain the
wisdom available from our many diverse skills. By this informal exchange, not
only do we enrich ourselves, but we also avoid duplication of our work and act
not in competition, but in cooperation among ourselves. This cooperation is
uncommon in other branches of medicine. (3) While we strive for informality,
closeness, and a sense of comradeship, SOAP must always remain an open forum to
all those who truly have a genuine interest in the perinatal period. I am proud
that we open our meetings to other scientists, nurses, nurse practitioners, CRNAs,
and midwives. It concerns me that many subspecialty groups in anesthesia limit
the number of members, possibly to increase their power and prestige often at
the expense of greater input to their own society. I sincerely hope SOAP never
becomes a clique of the "privileged." By the same token, I would hope we would
attract only those with a genuine interest in the perinatal period. I have
opposed this Society becoming a place for physicians and others who need credits
for licensure, who have little interest in our goals, from getting such credits.
There are already enough refresher courses and luxury cruises for this. (4) Fi-
ally, I would hope we would continue to offer to the medical profession leader-
ship in this important and often neglected area of medicine. Yet leadership is
often equated with power and telling others what they must do if they are to
avoid our wrath. Somehow, to my way of thinking, the greatest leaders have been
servants - or as stated by a very wise man, 'The measure of a man is not the num-
ber of servants he has, but the number of people he serves.' Let us exert our
leadership through our service. It has been an honor to be your President."

MINUTES OF THE SOAP EXECUTIVE COMMITTEE MEETING, FRIDAY, APRIL 9, 1976

The Executive Committee of SOAP met at a luncheon meeting on Friday, April 9, 1976. Those present included: Brett Gutsche, Dave Ralston, Charlie Gibbs, Milt Alper, Preston Dilts, Jack Scanlon, Gertie Marx, Gerry Ostheimer, Sol Shnider, Cal Hobel, and Bill Spellacy.

The American College of Obstetricians and Gynecologists had requested SOAP to redo the highly successful exhibit on neonatal resuscitation for the 1976 ACOG Meeting. The exhibit, the result of efforts by Brad Smith and Lida Dahm, will again be shown.

Gerry Ostheimer agreed to carry on as Editor of the SOAP Newsletter for the next two years.

Brett Gutsche will continue for another year as representative on ACOG's Special Interest Committee on Maternal and Fetal Welfare.

Milt Alper reported that the ASA Committee on Subspecialties is encouraging the subspecialty groups to formally offer breakfast meetings in conjunction with the 1976 ASA Meeting in San Francisco. They will take place from 7:00 a.m. to 8:15 a.m. on October 11 or 12. Our program will center on obstetric anesthesia. Approximate cost is $5.00. The breakfast session is open to all interested persons at the San Francisco ASA Meeting. Charlie Gibbs will organize the SOAP breakfast program.

Jack Scanlon reported that the American Academy of Pediatrics and the American Board of Pediatrics may be seeking input from SOAP members sometime in the future.

The meeting adjourned at 1:30 p.m. (Disney World awaited.)

MINUTES OF THE SOAP BUSINESS MEETING, SATURDAY, APRIL 10, 1976

The minutes of the SOAP Executive Committee Meeting were presented. Brett Gutsche urged discretion in the use of tape recordings at the Annual SOAP Meeting to avoid hindering future publication of the material presented.

Old Business: Preston Dilts reported results on his survey of fetal monitoring in 279 institutions. The most widely used methods included electronic fetal monitoring; oxytocin challenge testing; ultrasound; amniotic fluid analysis for the L/S ratio, creatinine, bilirubin, and urinary estriol determinations.

Dick Clark presented results of a survey on left uterine displacement. Seventy-six replies from 67 hospitals were received. Sixty-four of the 67 hospitals reported use of some means of left uterine displacement.

New Business: Milt Alper reported on the planned SOAP Breakfast Meeting in conjunction with the 1976 Annual ASA Meeting in San Francisco.

Election of New Officers: Mike Finster was elected as the new Director-at-Large and John Morrison became Vice-President by virtue of the fact that SOAP members voted to have the 1978 meeting in Memphis, Tennessee. John will be our
host and promises us a blend of science and old-fashioned Southern charm and hospitality. (Can't you just smell those magnolias and taste those mint juleps?)

Brett Gutsche presented his closing remarks and turned the gavel over to Charlie Gibbs.

LIST OF OFFICERS OF SOAP FOR 1976-1977

President ......................... Charles P. Gibbs, M.D.
Vice-President ..................... John C. Morrison, M.D.
Secretary-Treasurer ................. David H. Ralston, M.D.
ASA Representative ................ Milton H. Alper, M.D.
Obstetrician-at-Large ............. Preston V. Dilts, M.D.
Pediatrician-at-Large ............ John W. Scanlon, M.D.
Director-at-Large ................. Mieczyslaw Finster, M.D.
Editor of the Newsletter ......... Gerard W. Ostheimer, M.D.

OAA NEWSLETTER

If you wish to receive the Newsletter of the Obstetric Anaesthetists Association, please send £1 ($2.50 would be a nice amount due to exchange fluctuations) on October 1 each year to: Dr. J.D. Holdsworth, Department of Anaesthesia, Staincliffe General Hospital, Dewsbury WF 13, 4HS, West Yorkshire, England.

OAA FUTURE MEETINGS

24 September 1976, University of South Manchester (Withington Hospital). Hostess, Valerie Hey, 60, Thorne House, Fallowfield, Manchester M14 6HW.

22 April 1977, Newcastle-upon-Tyne. Host, John Storrs, Department of Anaesthesia, Royal Victoria Infirmary, Newcastle-upon-Tyne.

Autumn 1977 not determined.


For details of the above meetings or if you wish to present a paper, please contact the appropriate hostess or host.

QUESTIONNAIRES X2

Enclosed in this Newsletter are two questionnaires.

#1 - from Marcelle Willock concerning regional anesthesia administered by CRNAs. Please send the completed questionnaire directly to her at the address listed.

#2 - from Tom Joyce and Bryan Roberts on the use of antacids with all forms of anesthesia. Please send the completed questionnaire to Tom Joyce at the address listed.
POSITIONS AVAILABLE

1. University-affiliated hospital, 6,000 deliveries, university appointment available. Person would become Head, Division of OB Anesthesia, reporting to the Chief, Department of Anesthesiology. Will join a fee-for-service physician corporation. Package includes salary plus fringes and malpractice insurance. Package and salary are negotiable. Can start any time. Michigan license required. Metropolitan Detroit area. Clinical research opportunities are available. Contact: Gerhard C. Endler, M.D., 1413 Blairmoor Court, Grosse Pointe Woods, Michigan 48236.

2. Director of Obstetrical Anesthesia, Boston University Medical Center. 1,800 deliveries per year. Resident and medical student teaching. Research opportunities as desired. Salary plus corporation. Contact: Frederick W. Hehre, M.D., Director of Anesthesiology, 75 East Newton Street, Boston, Massachusetts 02118.

3. Obstetric anesthesiologists needed for community-based hospital in Upstate New York. 2,700 deliveries yearly in an active obstetric service which is well equipped with fetal monitors, etc. Neonatologist available for perinatal care. Contact: Richard W. Roberts, M.D., Chairman, Department of Anesthesiology, Community General Hospital, Syracuse, New York 13215.

4. Director of Obstetrical Anaesthesia, Maricopa County General Hospital, Phoenix. Full-time Ob/Gyn staff and full-time neonatologist with over 4,000 deliveries per year. 90% of patients have fetal monitoring. 16 house officers in Ob/Gyn (4 year program). Medical students, nurse midwives. Contact: John V. Kelly, M.D., Chairman, Department of Ob/Gyn, Maricopa County General Hospital, 2601 East Roosevelt Street, Phoenix, Arizona 85008. (602) 267-5444.

5. Needed: 2 obstetrical anesthesiologists. Contact: C.M. Ballinger, M.D., Department of Anesthesiology, College of Medicine and Dentistry of New Jersey, Newark, New Jersey 07107. (201) 643-8800, ext. 2644. Positions available in an affiliated hospital and in the College hospital.

6. Mount Sinai School of Medicine, New York City: Director of Obstetrical Anesthesia required September 1, 1976. Should possess A.B.A. Diploma or equivalent. Responsible for organization of under- and post-graduate teaching, research and clinical care of OB patients, of which over 50% are managed by epidural anesthesia. The Department of Obstetrics has 71 beds with over 3,500 deliveries per year. Submit C.V. and names of 3 referees to Dr. L. Rendell-Baker, Mt. Sinai School of Medicine, 100th St. & 5th Ave., New York, NY 10029.

SOAP TIPS

Apgar Timers: Tosh Akamatsu inquired about good, sturdy Apgar timers. Dick Clark says they made three timers eight years ago and "they are still going strong." Reference: Clark, R.B., et al.: Anesthesiology 29:1231, 1968.

Bacterial/Particle Filters: Frank James has sent us the address where the bacterial/particle filters for use with continuous epidural or spinal analgesia can be obtained. Ask for Millipore filters, Catalog #SLG S02505. (They are 0.22 microneter mesh size; 45 filters per pack; $0.90 per filter.) Write: Millipore Corporation, Ashby Road, Bedford, Massachusetts 01730.

SLUDER Device: Roland Kennedy tells us that the SLUDER uterine displacement de-
vice may be obtained from H.E. Richards Company, P.O. Box 2903, Toledo, Ohio 43606. (419) 385-5231.

Questionnaires X2: Remember - the Willock and Joyce/Roberts questionnaires should be returned directly to the authors(s).

MEETINGS OF INTEREST

June 30-July 2, 1976: Maternal-Fetal Medicine Postgraduate Course. Boston Hospital for Women, c/o Harvard Medical School, Department of Continuing Education, 25 Shattuck Street, Boston, Massachusetts 02115.


October 23, 1976: Third Ob/Gyn Anesthesia Symposium. Department of Continuing Education, University of Pittsburgh School of Medicine, Auditorium of the Graduate School of Public Health, Pittsburgh, Pennsylvania.

December 12-15, 1976: First Caribbean Symposium in Anesthesiology and Related Fields, featuring a mini-symposium on "Aspiration in Obstetrics." Participants include Colon-Morales, Marx, Roberts, and Gregory. For further information, contact Miguel A. Colon-Morales, M.D., G.P.O. Box 4547, San Juan, Puerto Rico 00936.

EDITOR'S NOTE

I have agreed to continue as Editor of the SOAP Newsletter for two more years as stated in the minutes of the Executive Committee. A new Editor will be appointed at the Memphis meeting in 1978. I firmly believe that all organizations should foster the utilization of as many members as possible in their activities. One of the great benefits of SOAP is that it allows younger members to participate fully instead of demanding an apprenticeship as is often required by national medical organizations.

Beginning with the June 1977 Newsletter, only active members of SOAP or those interested in our activities will receive the Newsletter. Those individuals who are interested in SOAP but have not or cannot attend a meeting can continue to receive the Newsletter by sending a note to Karen Gould, Department of Anesthesia, Boston Hospital for Women, 221 Longwood Avenue, Boston, Massachusetts 02115, stating their desire. Our mailing list is over 800 and, for economics reasons, we must cull out those people who are not interested in the Society. The registration fee ("annual dues") paid by the members attending the Annual Meeting helps defray the cost of the Newsletter.

I would welcome any notes, job openings, information concerning meetings, etc., that you think might be of interest to our membership for future Newsletters.

-GWO.
ASA MEETING

The Annual Meeting of the American Society of Anesthesiologists will be held at the San Francisco Hilton and Civic Auditorium-Brooks Hall Complex, October 9-13, 1976.

SOAP will conduct a breakfast panel discussion entitled "Questions and Answers about Obstetric Anesthesia and Perinatology" on Tuesday, October 12 at 7:00 a.m. in the San Francisco Hilton. Charlie Gibbs will be the moderator and panel members include Milt Alper, Mike Finster, Sol Shnider, Gertie Marx, and Preston Dilts.

A panel discussion, "Perinatal Medicine and Anesthesiology," will be held on Tuesday, October 12, 1976 from 2:00-4:00 p.m. at the Civic Auditorium. Milt Alper will be moderator and will discuss "Anesthesia for the Complicated Pregnancy." Other SOAP members that will participate and their subjects are:

Lou Gluck ............ "The Fetus as a Patient"
Chester Martin ...... "Assessment of the Feto-Maternal Unit Before and During Labor"
Gerry Ostheimer .... "Care of the Depressed Newborn in the Delivery Room"
George Gregory ..... "Neonatal Anesthesia and Intensive Care"

SOAP members will present the following Refresher Course Lectures on Saturday and Sunday, October 9 and 10.

Milt Alper ............ "Drugs: From Mother to Newborn"
Phil Bromage ......... "Epidural Anaesthesia: Indications and Contraindications"
Ben Covino ........... "Pharmacology and Physiology of Local Anesthetics"
Jay DeVore ............ "For Vaginal Delivery: Anesthesia, Hypnosis or Acupuncture?"
Fred Berry, Jack Downes,
George Gregory ...... "Pediatric Anesthesia for the Practitioner"
Brett Gutsche ...... "Epidural Block in OB: Techniques, Results, Complications"
Sol Shnider ........... "Physiologic Changes in Pregnancy: Clinical Implications"

A film, "Resuscitation of the Newborn," produced by ACOG, ASA, and AAP utilizing the talents of several SOAP members, will be shown on Monday, October 11 at 9:00 a.m., 1:00 p.m., and 3:00 p.m. The theme of this presentation is that resuscitation of the newborn is not an isolated event but involves mother, baby, and physician literally from the moment of conception.

The following scientific papers will be presented during the meeting by members of SOAP:
Tuesday, October 12
9:00 a.m. to 10:45 a.m.
Polk Hall 106

Enflurane Analgesia for Vaginal Delivery.
George C. Bell, et al., Department of Anesthesiology, University of Miami School of Medicine, Miami, Florida.

Renal Function in Newborns and Mothers Exposed to Methoxyflurane Analgesia for Labor and Delivery.
Richard B. Clark, et al., Department of Anesthesiology, University of Arkansas for Medical Sciences, Little Rock, Arkansas.

Evaluation of Methoxyflurane, Nitrous Oxide and Lumbar Epidural Anesthesia for Elective Cesarean Section.
Richard J. Palahniuk, et al., Departments of Anesthesiology, Obstetrics and Gynecology, and Pediatrics, University of Manitoba and Health Sciences Centre, Winnipeg, Manitoba, Canada.

Acid-Base Balance in Diabetics After General or Spinal Anesthesia for Cesarean Section.
Sanjay Datta, et al., Department of Anesthesia, Boston Hospital for Women, Harvard Medical School, Boston, Massachusetts.

The Effect of Thiopental-Nitrous Oxide Anesthesia on the Sheep Fetus in Utero.
Richard J. Palahniuk, Departments of Anesthesiology and Obstetrics and Gynecology, University of Manitoba, Winnipeg, Manitoba, Canada.

Double Blind Comparison of the Neurobehavior of 920 Neonates Following the Administration of Different Doses of Meperidine to the Mother.
Robert Hodgkinson, et al., Department of Anesthesiology, Albert Einstein College of Medicine, Bronx, New York.

Mepivacaine in Amniotic Fluid Following Maternal Epidural Anesthesia.
Walter U. Brown, Jr., et al., Department of Anesthesia, Harvard Medical School and Boston Hospital for Women, Boston, Massachusetts.

Tuesday, October 12
2:00 p.m. to 2:30 p.m.
Polk Hall 104

Enflurane, Isoflurane and Halothane and Isolated Human Uterine Muscle.
Edwin S. Munson, et al., Department of Anesthesiology, University of Florida College of Medicine, J. Hillis Miller Health Center, Gainesville, Florida.

Sensory Profile of Lumbar Epidural Anesthesia in Obstetric Patients.
Teruel DeCampo, et al., Department of Anesthesiology, University of Miami School of Medicine, Miami, Florida.
Wednesday, October 13  
2:00 p.m. to 4:30 p.m.  
Civic Auditorium, Larkin Hall 105

The Effect of Maternal and Fetal pH Changes on Placental Transfer of Lidocaine.  
F.A. Radosevich, et al., Departments of Anesthesia, Obstetrics and Gynecology, and Pediatrics, University of Iowa Hospitals and Clinics, Iowa City, Iowa.

The Effect of Fetal Acidosis on Lidocaine Blood Levels.  
D. Biehl, et al., Departments of Anesthesia and Obstetrics and Gynecology, University of California Medical Center, San Francisco, California.

Human Uterine Artery Response to Lidocaine.  
Charles P. Gibbs and Stephen C. Noel, Departments of Anesthesiology and Obstetrics and Gynecology, University of Florida College of Medicine, J. Hillis Miller Health Center, Gainesville, Florida.

The Effect of Local Anesthetics on Gravid Human Uterine Artery Strips in Vitro.  
Thomas H. Joyce, III, et al., Departments of Anesthesia and Obstetrics and Gynecology, University of Cincinnati College of Medicine, Cincinnati, Ohio.

Changes in Uterine Blood Flow, Uterine Activity and Fetal Heart Rate Following Intravenous Administration of Lidocaine.  

Placental Transfer and Fetal Toxicity of Sodium Nitroprusside.  
John S. Naulty, et al., Departments of Experimental Anesthesia, Surgery and Biochemistry, Naval Medical Research Institute, Bethesda, Maryland.

The Effects of Dopamine on Uterine Blood Flow and Fetal Acid-Base Status in the Pregnant Ewe.  
K. Callender, et al., Departments of Anesthesia, Surgery, and Obstetrics and Gynecology, University of California Medical Center, San Francisco, California.

Gastrin: Placental, Maternal and Plasma Cord Levels: Its Possible Role in Maternal Residual Gastric Acidity.  
Rafik R. Attia, et al., Anesthesia Laboratories, Harvard Medical School, Massachusetts General Hospital and Department of Surgery, Massachusetts General Hospital, Boston, Massachusetts and Department of Anesthesia, Lynn Hospital, Lynn, Massachusetts.

Transplacental Transfer of Atropine and Glycopyrrolate.  
H.J. Heyman, et al., Department of Anesthesiology, Illinois Masonic Medical Center, Chicago, Illinois.

Are Bacterial Filters Required in Continuous Epidural Analgesia for Obstetrics?  
Ezzat Abouleish, et al., Departments of Anesthesiology, Pathology and Community Medicine, University of Pittsburgh and Magee-Womens Hospital, Pittsburgh, Pennsylvania.
POSITIONS AVAILABLE:

University-affiliated hospital, 6,000 deliveries, university appointment available. Person would become Head, Division of OB Anesthesia, reporting to the Chief, Department of Anesthesiology. Will join a fee-for-service physician corporation. Package includes salary plus fringes and malpractice insurance. Package and salary are negotiable. Can start any time. Michigan license required. Metropolitan Detroit area. Clinical research opportunities are available. Contact: Gerhard C. Endler, M.D., 1413 Blairmoor Court, Grosse Pointe Woods, Michigan 48236.

Obstetric anesthesiologists needed for community-based hospital in Upstate New York. 2,700 deliveries yearly in an active obstetric service which is well equipped with fetal monitors, etc. Neonatologist available for perinatal care. Contact: Richard W. Roberts, M.D., Chairman, Department of Anesthesiology, Community General Hospital, Syracuse, New York 13215.

Director of Obstetrical Anesthesia, Maricopa County General Hospital, Phoenix. Full-time ob/gyn staff and full-time neonatologist with over 4,000 deliveries per year. 90% of patients have fetal monitoring. 16 house officers in ob/gyn (4 year program). Medical students, nurse midwives. Contact: John V. Kelly, M.D., Chairman, Department of Ob/Gyn, Maricopa County General Hospital, 2601 East Roosevelt Street, Phoenix, Arizona 85008. (602) 267-5444.

Needed: 2 obstetrical anesthesiologists. Contact: C.M. Ballinger, M.D., Department of Anesthesiology, College of Medicine and Dentistry of New Jersey, Newark, New Jersey 07107. (201) 643-8800, ext. 2644. Positions available in an affiliated hospital and in the College hospital.

Mount Sinai School of Medicine, New York City: Director of Obstetrical Anesthesia required September 1, 1976. Should possess A.B.A. Diploma or equivalent. Responsible for organization of under- and post-graduate teaching, research and clinical care of OB patients, of which over 50% are managed by epidural anesthesia. The Department of Obstetrics has 71 beds with over 3,500 deliveries per year. Submit C.V. and names of 3 referees to Dr. L. Rendell-Baker, Mt. Sinai School of Medicine, 100th St. & 5th Ave., New York, NY 10029.

West Memphis, Arkansas: Bob Ford would like an anesthesiologist (preferably interested in obstetric anesthesia) to run a Department of Anesthesia and supervise CRNAs. The financial arrangements appear excellent. Contact: Robert C. Ford, Jr., M.D., 200 South Rhodes Street, West Memphis, Arkansas 72301.

Staff anesthesiologist with university appointment in ob/gyn teaching hospital. 15,000 anesthesias including 6,500 deliveries per year. First class fringe benefits and malpractice insurance. Research interests encouraged. Salary competitive. Ability to teach in anesthesia residency program essential. Pennsylvania license necessary. Submit curriculum vitae and names of two referees to: R. McKenzie, M.D., Director, Department of Anesthesiology, Magee-Womens Hospital, Pittsburgh, Pennsylvania 15213.
SOAPTIPS

Apgar Timers. Abner Levkoff and Tom Hargest (Medical University of South Carolina) tells us that an Apgar timer designed by their Division of Clinical Engineering is now available from Franklin Instrument Co., Box 735, Richboro, PA 18954, (215) 355-6510. This device is an electric timer with a large face which hangs on the wall. There is a pneumatic bulb on a length of rubber tubing which is used to start the timer. A signal is given at 1 minute and at 5 minutes. The unit then resets itself for the next cycle. The clock is explosion-proof and was designed for use in the presence of explosive gases. Dr. Levkoff has had one in his high-risk unit for more than 6 months and has found it completely satisfactory.

Dr. Colon-Morales tells us about the "APGAR Score Timing Unit" that was developed by the Department of Anesthesiology of Teachers Hospital in Puerto Rico to provide a simple technique for more accurate recording of the Apgar score. The "APGAR Score Timing Unit" consists of an anodized clipboard, 17 x 91/2" with a specialized timer to accurately ring at 1 minute and again at 5 minutes. The timer covers a 5 minute cycle, graduated at 1 minute intervals. Hospitals desiring a 2 or 3 minute score may read the time on the face. The timer is started at the instant of complete delivery. A bell sounds to signal the two time intervals when the signs should be recorded. A specially designed APGAR score pad is furnished to tabulate the findings. The clip holds a sintered carbide ball point pen to facilitate recordings of the score. This system is available from Resuscitation Laboratories, P.O. Box 3051, Bridgeport, Connecticut 06605.

Left Uterine Displacement. Dr. Colon-Morales's "Uterine Displacer" is available from Resuscitation Laboratories, P.O. Box 3051, Bridgeport, CT 06605.

EDITOR'S NOTE

Remember that beginning with the June 1977 Newsletter, only active members of SOAP or those interested in our activities will receive the Newsletter. Those individuals who are interested in SOAP but have not or cannot attend a meeting can continue to receive the Newsletter by sending a note to Ms. Karen Gould, Department of Anesthesia, Boston Hospital for Women, 221 Longwood Ave., Boston, MA 02115, stating their desire. Our mailing list is over 800 and, for economic reasons, we must cull out those people who are not interested in the Society.

MEETINGS OF INTEREST

October 23, 1976: 3rd Ob/Gyn Anesthesia Symposium. Department of Continuing Education, University of Pittsburgh School of Medicine, Auditorium of the Graduate School of Public Health, Pittsburgh, Pennsylvania.

December 10, 1976: Legislative Issues in Maternal/Child Health. The Children's Hospital Tammen Auditorium, Denver, Colorado. For information and registration, contact MaryAnn Gorp, Department of Continuing Education, The Children's Hospital, 1056 East Nineteenth Ave., Denver, CO 80218. (303) 861-8888, ext. 2280. (Thanks - Joe Butterfield!)

Obstetrics." Participants include Colon-Morales, Marx, Roberts, and Gregory. For further information, contact Miguel A. Colon-Morales, M.D., G.P.O. Box 4547, San Juan, Puerto Rico 00936.

February 12-19, 1977: 3rd Annual Intermountain Conference on Critical Care: Maternal and Perinatal. Sun Valley, Idaho. For more information, contact the Division of Continuing Medical Education SC-50, University of Washington School of Medicine, Seattle, Washington 98195.


PERINATAL NEWS

Ohio. The Ohio Perinatal Association is composed of physicians, nurses, social workers, educators, and consumers who have an active concern and interest in perinatal health care in Ohio. At the annual state meeting of the Maternal and Child Health Association, Ohio Division, held in May, 1976, the members voted to change the name to the Ohio Perinatal Association, elected a new executive council, and appointed a committee to draw up a new constitution. Dr. Jack Walters of the Medical College of Ohio is President, Nick Schneider (a SOAP member) is the representative from Dayton and Respiratory Therapy, and Dr. William Keenan (also a SOAP member) is the representative from Cincinnati and Pediatrics. Mrs. Joan Fox, RN is Secretary and may be contacted for more information at the Children's Medical Center, 1735 Chapel Street, Dayton, Ohio 45404.

New Hampshire/Vermont. The New Hampshire/Vermont Regional Perinatal Program will present Perinatal Conference III on Friday, October 22 and Saturday, October 23, 1976 at Dartmouth College, Hanover, New Hampshire. Guest speakers include Lucey, James, Little, and Taeusch. For more information, contact Barbara Chapeau, RN, Nurse Coordinator, NH/VT Regional Perinatal Program, Department of Pediatrics, Given Building, C413, University of Vermont, Burlington, Vermont 05401.

New England Perinatology Society. Following the above meeting, the New England Perinatology Society will meet for the first time on Saturday, October 23 and Sunday, October 24, 1976 at The Woodstock Inn, Woodstock, Vermont. This Society is the successor to the New England Neonatology Society. For further information, contact the New England Perinatology Society, Box 913, Framingham, Massachusetts 01701 or call (617) 879-0477.

QUESTIONNAIRES X2

The response to the enclosed questionnaires has not been overwhelming. If you did not complete them in June, please take a few minutes now and send them on to Marcelle and Tom. Thanks.
USE OF ANTACIDS WITH ALL FORMS OF ANESTHESIA

Name: ___________________________ Hospital: _________________________
(Requested, but not required) (Name requested)

Specialty: OB: ___ Anesthesia: ___ Other: _________________________________

Hospital is: Canadian ___ Military ___ University ___
University-affiliated ___ University-non-affiliated ___

# Vaginal deliveries per annum: ___ # Caesarean sections per annum: ___

What percentage is covered by: MD Staff? ___ MD Resident? ___ CRNA? ___
Other? (Specify) ____________________________

1. Should all obstetrical patients have antacid therapy? Yes: ___ No: ___
   If no, why? _______________________________________________________

2. Do all of your patients get antacids? Yes: ___ No: ___

3. If no, do you exclude from antacid therapy:

   Regional (spinal) ........................................... Yes No
   Regional (epidural/caudal) .................................. Yes No
   Pudendal block .................................................. Yes No
   Lamaze or prepared childbirth ............................. Yes No
   Inhalational analgesia ........................................ Yes No
   General anesthesia ............................................ Yes No
   D + C ............................................................. Yes No
   Tubal ligation ................................................... Yes No
   Caesarean section elective - general ..................... Yes No
   Caesarean section elective - regional .................. Yes No
   Caesarean section emergency - general ............... Yes No
   Caesarean section emergency - regional ............. Yes No

4. Which antacid do you use? ___________________________________________

5. Dosage or amount? __________________________________________________

6. What is the time between doses? ______________________________________

7. Do you intubate the unconscious patient under general anesthesia for vaginal
delivery? Yes: ___ No: ___

8. If you do not intubate all unconscious patients under general anesthesia for
vaginal deliveries, what criteria do you use for endotracheal intubation?

9. How many questionable or known cases of aspiration in your unit within the
past three years? ______

   How many under general anesthesia? ____ Antacid Received Yes No
   How many under regional anesthesia? ____ Yes No
   How many with no anesthesia? ____ Yes No
10. How do you judge morbidity?

Days stay in hospital _____  Average days in hospital _____
Days on ventilator _____  Average days on ventilator _____

11. Do you treat aspiration or questionable aspiration with steroids?

Yes ___  No ___
If yes, which steroids? ________________________________________
How much?  ________________________________________
How frequently? ________________________________________

12. Do you treat aspiration or questionable aspiration with antibiotics?

Yes ___  No ___
If yes, which antibiotics? ________________________________________
How much?  ________________________________________
How frequently? ________________________________________

13. What criteria do you use to institute steroids or antibiotic therapy for aspiration?

Suspicion  __________
Chest auscultation  __________
X-ray  __________
Blood gas  __________
Other  __________

14. Do you use antacid routinely for:

Yes  No
 Operating room elective cases  ___  ___
 Operating room emergency cases  ___  ___
 Outpatient elective surgery  ___  ___
 Outpatient emergency surgery  ___  ___

15. Do you feel antacid should be used routinely for:

Yes  No
 Operating room elective cases  ___  ___
 Operating room emergency cases  ___  ___
 Outpatient elective surgery  ___  ___
 Outpatient emergency surgery  ___  ___

Please return this questionnaire to:

Thomas H. Joyce, III, M.D.
Department of Anesthesia
University of Cincinnati
College of Medicine
231 Bethesda Avenue
Cincinnati, Ohio 45267
SURVEY OF REGIONAL ANESTHESIA BY NURSE ANESTHETISTS

1. Your specialty:  Anesthesia ___  Obstetrics ___
2. Your state:  ________________________________
3. Is your institution a federal __, municipal __, or voluntary __ hospital?
4. Are CRNAs permitted __, not mentioned __, or prohibited ___ to administer regional anesthesia by your state laws or health codes?
5. Have you ever worked with CRNAs?  Yes ___  No ___
6. Do you now work with CRNAs?  Yes ___  No ___
7. Have you ever taught regional anesthesia to CRNAs?  Yes ___  No ___
8. Were it allowed by state law, would you teach regional anesthesia to CRNAs?  Yes ___  No ___
9. Do you feel that CRNAs can safely manage regional anesthesia?  Yes ___  No ___
10. Anesthesia coverage in your OR is provided by:
    (a) CRNAs only ........................................... ___
    (b) Residents only ...................................... ___
    (c) CRNAs with attending anesthesiologists on call .... ___
    (d) Attending anesthesiologists ........................... ___
    (e) Other (please explain)

Please feel free to submit any comments or ideas. And thank you very much for completing this questionnaire.

Marcelle Willock, M.D.
Department of Anesthesiology
The Roosevelt Hospital
428 West 59th Street
New York, New York 10019
1977 SOAP MEETING

The 1977 Annual Meeting of the Society for Obstetric Anesthesia and Perinatology will be held April 14-17, 1977 at the Edgewater Inn, Seattle, Washington.

Abstracts:

Dave Ralston has requested abstracts of recently completed work or work in progress. All abstracts must be received by him no later than January 30, 1977. Accepted abstracts must be presented in ten minutes followed by a four minute discussion period. All abstracts submitted for possible presentation will be printed in the program. As in the past, presentation to the Society is for friendly criticism and discussion and should not prevent later presentation or publication. Therefore, works in progress and preliminary data are welcome at our Annual Meeting.

Abstracts will be reproduced exactly as submitted by the authors. The abstract should be titled and the institution in which the work was performed listed. If there is more than one author, the author presenting the paper should have his or her name underlined. It should be typed single spaced on one side of an 8½" x 11" sheet of white, high quality bond. There should be a 1½" margin on the left side and a ½" margin on the right side. All charts, graphs, and photographs must be included on this one page. Abstracts longer than one side of an 8½" x 11" page will not be printed. You will be notified by mail in early March of 1977 if your abstract has been accepted for presentation.

Please send your abstracts to: David Ralston, M.D., Department of Anesthesiology RN-10, School of Medicine, University of Washington, Seattle, Washington 98195.

Special Events:

Friday, April 15 - Luncheon in the Crown Terrace Room of the Edgewater Inn.

Saturday, April 16 - Tillicum Village Excursion - including Seattle Harbor tour, boat trip to Blake Island State Park and a salmon dinner.

The Edgewater Inn is strategically located near many of Seattle's famous man-made sights, including the Seattle Center, the waterfront, Pike Place Market and Pioneer Square. Seattle is surrounded by such scenic delights as Mt. Rainier, Mt. Baker, Puget Sound, the Olympic Mountains and the Cascades. The "manager" is making special arrangements for clear skies during our meeting! Further information will be forthcoming in a few weeks.

The "What's New" part of the program will be presented by Kent Ueland (Obstetrics), Gershon Levinson (Anesthesiology) and a mystery star in Perinatology!
Wearing apparel should include a raincoat and/or an umbrella, just in case ...!

EDITOR'S NOTE

Remember that beginning with the June 1977 Newsletter, only active members of SOAP or those interested in our activities will receive the Newsletter. Those individuals who are interested in SOAP but have not or cannot attend a meeting can continue to receive the Newsletter by sending a note to Ms. Karen Gould, Department of Anesthesia, Boston Hospital for Women, 221 Longwood Avenue, Boston, Massachusetts 02115, stating their desire. Our mailing list is over 800 and, for economic reasons, we must cull out those people who are not interested in the Society. If you have already contacted Karen, you need not do so again.

OTHER MEETINGS OF INTEREST

January 28–30, 1977: 15th Clinical Conference in Pediatric Anesthesiology. Los Angeles Marriott Hotel, 5855 West Century Boulevard, Los Angeles, California 90045. Sponsored by the Children's Hospital of Los Angeles. Guest faculty includes: Berry, Churchill-Davidson, Conn, Eger, Katz, Ryan, Smith, Stewart and Stiles. For more information, contact Wayne Herbert, M.D., Program Director, Pediatric Anesthesiology Conference, Division of Anesthesiology, Children's Hospital of Los Angeles, P.O. Box 54700, Los Angeles, CA 90054.


February 12–19, 1977: 3rd Annual Intermountain Conference on Critical Care: Maternal and Perinatal. Sun Valley, Idaho. For more information, contact the Division of Continuing Medical Education SC-50, University of Washington School of Medicine, Seattle, Washington 98195.


March 25–27, 1977: Virginia Apgar Seminars in Obstetric and Pediatric Anesthesia. Americana Hotel, Miami Beach, Florida. An outstanding faculty has been assembled by Frank Moya for this program in tribute to the memory of Virginia Apgar. For more information, contact Virginia Apgar Seminar, 1200 N.W. 10th Avenue, Miami, Florida 33136.

March 31 and April 1, 1977: 5th Annual Conference on Perinatal Medicine. Callaway Gardens, Pine Mountain, Georgia. Speakers include: Avery, Mahan and Ostheimer. For more information, contact Micki L. Souma, M.D. and Louis I. Levy, M.D., Perinatology Department, The Medical Center, 710 Center Street, Columbus, Georgia 31902.


VERMONT/NEW HAMPSHIRE REGIONAL PERINATAL CONFERENCE

The Vermont/New Hampshire Regional Perinatal Program held their third Annual Perinatal Conference on October 22 and 23, 1976 in Hanover, New Hampshire. A variety of perinatal topics were presented to update representatives in the area. Dr. Jerold Lucey (Vermont) reviewed the activities of the perinatal program for the past year. There were approximately 6,500 live births in Vermont and 11,500 in New Hampshire in 1975.

The film, "The Amazing Newborn", demonstrated the importance of early bonding between the family and neonate. Dr. L. Stanley James (Columbia - New York) discussed "The Advantages of Intensive Perinatal Monitoring" and pointed out that fetal monitoring is not a treatment. Eight to 15% of normal pregnancies will become high-risk during labor, while two-thirds of high-risk parturients will have normal infants. Dr. James reminded the audience that the transfer of a high-risk mother during labor increases the risk seven-fold. Brief reports were given on "Meconium Aspiration" by Dr. George Little (Dartmouth); the use of the computer in recovering data on patients by Dr. William Arney (a sociologist from Hanover, New Hampshire); and "Parents' View of Perinatal Referral" by Ms. Barbara Chapleau of Burlington, Vermont. Dr. Leon Mann, Professor of Obstetrics and Gynecology from the University of Vermont recommended that all high-risk patients who have fetal heart rate decelerations during labor should have fetal scalp blood sampling for pH determination. Short reports were presented by Dr. James Clapp (Vermont) on stillbirths, "Social Services and the Intensive Care Nursery" by Ms. Virginia Brush of Burlington and "Room for Improvement" by Dr. Alistair Philip of Burlington. Saturday's program began with a report on prenatal betamethasone administration by Dr. William Taeusch (Harvard). Dr. John Kattwilke from Charlottesville discussed the early use of CPAP in the prevention of RDS.

A highlight of the program was a panel discussion on "Alternatives to Routine Hospital Deliveries." Dr. Ralph Gause of Chester, Vermont, told about 41 planned home deliveries in 1975. Dr. John Franklin described the special family-oriented maternity services offered at the Booth Hospital, Philadelphia, Pennsylvania. Mid-wife Ruth Lubic showed a filmstrip about the Maternity Center Association facilities in New York City. A lively discussion ensued at the open forum in the afternoon. Many in the audience felt too little was being done to help the patient who wanted a home delivery. Dr. Mann pointed out that one out of ten patients and/or neonates would have some sort of complication despite careful screening. (Julie S. Crocker, M.D.)
EDITOR'S NOTE

This last paragraph suggests a new SOAP survey.

I would like two obstetricians and two pediatricians, one each for home deliveries and one each against home deliveries, to formulate five (5) questions to be sent to the membership so we can present a report at the SOAP Meeting in April in Seattle. If I get more than one volunteer for each post, I will arbitrarily decide who will be the representative for that specific point of view. So send your questions to me at the Boston Hospital for Women. Deadline: January 15, 1977.

NEW ENGLAND PERINATOLOGY SOCIETY

The first meeting of the New England Perinatology Society was held at the Woodstock Inn in Woodstock, Vermont, on October 23-24, 1976. (This group evolved from the New England Neonatology Society which was started in 1972 by Drs. H.H. Shuman and William Cochran.) "Following the Very Low Birth Weight Infant" was the topic presented by the special guest, Dr. Lula Lubchenco (University of Colorado-Denver). She made a convincing plea for a more aggressive approach to the 500-1500 gram infant particularly in the support of the cardiorespiratory system.

Dr. George Little, speaking for the Steering Committee, turned the meeting over to the incoming President, Curt Cetrulo of Boston. Dr. Cetrulo said that it was to be an informal society, chiefly interested in an easy exchange of ideas (sounds like SOAP!). The membership will be opened to all interested in perinatology including social workers and nurses. It is hoped to have two meetings a year, alternating between the seashore and the mountains. Hopefully, this would promote an easy interchange of ideas in a relaxed atmosphere. The next meeting of the Society will follow the Symposium on the High-Risk Pregnancy on May 17-19, 1977 at the Wychmere Harbor Club in Harwichport on Cape Cod. (Julie S. Crocker, M.D.)

POSITIONS AVAILABLE:

University-affiliated hospital, 6,000 deliveries, university appointment available. Person would become Head, Division of OB Anesthesia, reporting to the Chief, Department of Anesthesiology. Will join a fee-for-service physician corporation. Package includes salary plus fringe and malpractice insurance. Package and salary are negotiable. Can start any time. Michigan license required. Metropolitan Detroit area. Clinical research opportunities are available. Contact: Gerhard C. Endler, M.D., 1413 Blairmoor Court, Grosse Pointe Woods, Michigan 48236.

Obstetric anesthesiologists needed for community-based hospital in Upstate New York. 2,700 deliveries yearly in an active obstetric service which is well-equipped with fetal monitors, etc. Neonatologist available for perinatal care. Contact: Richard W. Roberts, M.D., Chairman, Department of Anesthesiology, Community General Hospital, Syracuse, New York 13215.

Director of Obstetrical Anesthesia, Maricopa County General Hospital, Phoenix. Full-time ob/gyn staff and full-time neonatologist with over 4,000
deliveries per year. 90% of patients have fetal monitoring. 16 house officers in ob/gyn (4 year program). Medical students, nurse midwives. Contact: John V. Kelly, M.D., Chairman, Department of Ob/Gyn, Maricopa County General Hospital, 2601 East Roosevelt Street, Phoenix, Arizona 85008. (602) 267-5444.

Needed: 2 obstetrical anesthesiologists. Contact: C.M. Ballinger, M.D., Department of Anesthesiology, College of Medicine and Dentistry of New Jersey, Newark, New Jersey 07107. (201) 643-8800, ext. 2644. Positions available in an affiliated hospital and in the College hospital.

Mount Sinai School of Medicine, New York City: Director of Obstetrical Anesthesia. Should possess A.B.A. Diploma or equivalent. Responsible for organization of under- and post-graduate teaching, research and clinical care of OB patients, of which over 50% are managed by epidural anesthesia. The Department of Obstetrics has 71 beds with over 3,500 deliveries per year. Submit C.V. and names of 3 referees to Dr. L. Rendell-Baker, Mt. Sinai School of Medicine, 100th St. & 5th Ave., New York, NY 10029.

West Memphis, Arkansas: Bob Ford would like an anesthesiologist (preferably interested in obstetric anesthesiology) to run a Department of Anesthesia and supervise CRNAs. The financial arrangements appear excellent. Contact: Robert C. Ford, Jr., M.D., 200 South Rhodes St., West Memphis, AR 72301.

Staff anesthesiologist with university appointment in ob/gyn teaching hospital. 15,000 anesthesias including 6,500 deliveries per year. First class fringe benefits and malpractice insurance. Research interests encouraged. Salary competitive. Ability to teach in anesthesia residency program essential. Pennsylvania license necessary. Submit curriculum vitae and names of two referees to: R. McKenzie, M.D., Director, Department of Anesthesiology, Magee-Womens Hospital, Pittsburgh, PA 15213.

Needed: Obstetric anesthesiologist for St. John's Mercy Medical Center, a 600+ bed hospital located in the west suburbs of St. Louis, Missouri. The Department of Obstetrics and Gynecology has an excellent residency program. 5,000 deliveries per year. The latest equipment in fetal monitoring is available. Excellent professional salary and benefits. For more information, contact: Mrs. Sandra B. Williams, Administrative Secretary, Department of Obstetrics and Gynecology, St. John's Mercy Medical Center, 615 South New Ballas Road, St. Louis, MO 63141.

Advertisers: When your position is filled, please let Karen Gould know so we can delete your advertisement.