

Application for Hosting EACTA Vascular Anaesthesia Exchange Training Programme

<b>1. Institution Name</b>	Department of Anesthesiology and Intensive Care Medicine at Campus Benjamin Franklin				
Address	Hindenburgdamm 30, 12203 Berlin, Germany				
Website	https://anaesthesie.charite.de				
Country	Germany	City	Berlin		
<b>2. Chair Name</b>	First name	Sascha	Last name	Treskatsch	
	Email	sascha.treskatsch@charite.de		Phone	0049 30 450 551522
<b>3. Programme Director</b>	First name	Sascha	Last name	Treskatsch	
	Board Certification(s)	specialized in anesthesiologie and intensive care 02/2012			
	Title/Affiliation	Prof. Dr. med.			
	Number of original publications	> 50			
	EACTA membership	Yes	If yes, membership's number	2546	
	ESA membership	Yes	If yes, membership's number	171565	
	Societies membership	Yes / No	If yes, membership's number		
	Email	sascha.treskatsch@charite.de		Phone	0049 30 450 551522
	Mailing Address	see above	Fax	0049 30 450 551939	
	Street	Hindenburgdamm 30			
	Country	Germany	Region	Berlin	
	Zip code	12203			

Published Researches in PubMed

in parts:

Perioperative echocardiography-guided hemodynamic therapy in high-risk patients: a practical expert approach of hemodynamically focused echocardiography.  
Trauzeddel RF, Ertmer M, Nordine M, Groesdonk HV, Michels G, Pfister R, Reuter D, Scheeren TWL, Berger C, Treskatsch S, Trauzeddel RF, et al. J Clin Monit Comput. 2020 May 26. doi: 10.1007/s10877-020-00534-7. Online ahead of print. J Clin Monit Comput. 2020. PMID: 32458170

Routine frailty assessment predicts postoperative complications in elderly patients across surgical disciplines - a retrospective observational study.  
Birkelbach O, Mörgeli R, Spies C, Olbert M, Weiss B, Brauner M, Neuner B, Francis RCE, Treskatsch S, Balzer F. BMC Anesthesiol. 2019 Nov 7;19(1):204. doi: 10.1186/s12871-019-0880-x. Select item 30771315 2.

Identification of mineralocorticoid and glucocorticoid receptors on peripheral nociceptors: Translation of experimental findings from animal to human biology.  
Tafelski S, Mohamed D, Shaqura M, Assaf C, Beyer A, Treskatsch S, Schäfer M, Mousa SA. Brain Res. 2019 Jun 1;1712:180-187. doi: 10.1016/j.brainres.2019.02.015. Epub 2019 Feb 13. Select item 30717805 3.

Liberal transfusion strategy to prevent mortality and anaemia-associated, ischaemic events in elderly non-cardiac surgical patients - the study design of the LIBERAL-Trial.  
Meybohm P, Lindau S, Treskatsch S, Francis R, Spies C, Velten M, Wittmann M, Gueresir E, Stoppe C, Kowark A, Coburn M, Selleng S, Baschin M, Jenichen G, Meersch M, Ermert T, Zarbock A, Kranke P, Kredel M, Helf A, Laufenberg-Feldmann R, Ferner M, Wittenmeier E, Gürtler KH, Kienbaum P, de Abreu MG, Sander M, Bauer M, Seyfried T, Gruenewald M, Choroapokayil S, Mueller MM, Seifried E, Brosteanu O, Bogatsch H, Hasenclever D, Zacharowski K; LIBERAL Collaboration Group. Trials. 2019 Feb 4;20(1):101. doi: 10.1186/s13063-019-3200-3. Select item 30678657 4.

Genome-wide association study of myocardial infarction, atrial fibrillation, acute stroke, acute kidney injury and delirium after cardiac surgery - a sub-analysis of the RIPHeart-Study.  
Westphal S, Stoppe C, Gruenewald M, Bein B, Renner J, Cremer J, Coburn M, Schaelte G, Boening A, Niemann B, Kletzin F, Roesner J, Strouhal U, Reyher C, Laufenberg-Feldmann R, Ferner M, Brandes IF, Bauer M, Kortgen A, Stehr SN, Wittmann M, Baumgarten G, Struck R, Meyer-Treschan T, Kienbaum P, Heringlake M, Schoen J, Sander M, Treskatsch S, Smul T, Wolwender E, Schilling T, Degenhardt F, Franke A, Mucha S, Tittmann L, Kohlhaas M, Fuernau G, Brosteanu O, Hasenclever D, Zacharowski K, Meybohm P; RIPHeart-Study Collaborators. BMC Cardiovasc Disord. 2019 Jan 24;19(1):26. doi: 10.1186/s12872-019-1002-x. Select item 30562225 5.

Local infiltration anaesthesia versus sciatic nerve and adductor canal block for fast-track knee arthroplasty: A randomised controlled

Will the Programme director devote sufficient time to provide substantial leadership to the programme and supervision for the trainees?

Yes

Completion of the programme will be acknowledged by the Department of Anaesthesia and Intensive Care at the host centre in junction with European Association of Cardiothoracic Anaesthesia (EACTA) Candidate's requirements

Yes

**5. Candidate's requirements**

The candidates must be board certified or board eligible according to European residency programme standards

Yes

Language requirements

B2

Specific requirements towards the attending trainee

Comments

**4. General Programme Information**

Aims, goals and objectives of the Fellowship Programme

Our institution aims to offer a 2-4 weeks vascular observer training programme. With a focus on major vascular surgery as well as aortic open and endovascular surgery in our vascular center at Campus Benjamin Franklin (CBF), the department for Anesthesiology and Intensive Care at CBF provides the full range of perioperative care for these

patients. Among other things, this includes preoperative risk evaluation, intraoperative anesthesia with advanced hemodynamic monitoring as well as Neuromonitoring and postoperative Intensive Care.  
For trainees, this program has the aim to provide theoretical knowledge and practical skills in the evaluation and perioperative treatment of patients for complex vascular surgery.

Preferred Duration	weeks	Others, specify	2-4 weeks
Preferred Months		Preferred seniority level	
Number of Positions /Year	6		
Comments	Our institution would like to provide 6 positions per year with a maximum of 2 positions simultaneous		
Clinical interests	Our institution and the faculty members has particular clinical interests in - preoperative risc stratification - advanced hemodynamic monitoring (esp. echocardiography) - intraoperative neuromonitoring		
Lab interests	Our institution partake in multicenter studies focused on hemodynamic improvement (eg OPTIMIESE II) and conducts prospective and retrospective studies for risk assessment, hemodynamic focused echocardiography and intraoperative neuromonitoring.		

### 5. Financial Statement

An employment contract will be signed with the candidate	No	Transportation/travel options are provided	No
Accommodation options are provided	No	Source of financial support for candidate:	didate's own expenses

### 6. Faculty

Thoracic Anaesthesia Faculty - Research Interest and/or Clinical Expertise. \* Please, list at least three names.

Name	EACTA member	Certification in Cardiothoracic and Vascular Anaesthesia	Additional Qualifications	Email address	Contact address
Sascha Treskatsch	Yes	Yes, according to	TOE/TTE	sascha.treskatsch@charite.de	Hindenburgdamm 30, 12203 Berlin
Christian Berger	Yes	Yes, according to	TOE/TTE	christian.berger@charite.de	see above
Golschan Asgarpur	No	Yes, according to	TOE/TTE	golschan.aegarpur@charite.de	see above
Olaf Kniesel	No		Neuromonitoring	olaf.kniesel@charite.de	see above
Stefan Angermair	No			stefan.angermair@charite.de	see above
	Yes / No				
	Yes / No				
	Yes / No				
	Yes / No				
	Yes / No				
	Yes / No				
	Yes / No				
	Yes / No				
	Yes / No				
	Yes / No				

### Publications lists of the faculty's members in PubMed

SARS-CoV-2 specific T-cell responses and correlations with COVID-19 patient predisposition.  
Sattler A, Angermair S, Stockmann H, Heim KM, Khadzhyrov D, Treskatsch S, Halleck F, Kreis ME, Kotsch K. J Clin Invest. 2020 Aug 24;140965. doi: 10.1172/JCI140965. Online ahead of print. J Clin Invest. 2020. PMID: 32833687

Studying the pathophysiology of coronavirus disease 2019: a protocol for the Berlin prospective COVID-19 patient cohort (Pa-COVID-19).  
Kurth F, Roennefarth M, Thibeault C, Corman VM, Müller-Redetzky H, Mittermaier M, Ruwwe-Glösenkamp C, Heim KM, Krannich A, Zvorc S, Schmidt S, Kretzler L, Dang-Heine C, Rose M, Hummel M, Hocke A, Hübner RH, Opitz B, Mall MA, Röhmel J, Landmesser U, Pieske B, Knauss S, Endres M, Spranger J, Mockenhaupt FP, Tacke F, Treskatsch S, Angermair S, Siegmund B, Spies C, Weber-Carstens S, Eckardt KU, Schürmann D, Uhrig A, Stegemann MS, Zoller T, Drosten C, Suttrop N, Witzernath M, Hippenstiel S, von Kalle C, Sander LE. Infection. 2020 Aug;48(4):619-626. doi: 10.1007/s15010-020-01464-x. Epub 2020 Jun 13. Infection. 2020. PMID: 32535877

Therapeutic drug monitoring for colistin therapy in severe multi-resistant Acinetobacter intracerebral abscess: A single case study with high-dose colistin and review of literature.  
Tafelski S, Wagner L, Angermair S, Deja M; ABX Study Group. SAGE Open Med Case Rep. 2017 Jun 19;5:2050313X17711630. doi: 10.1177/2050313X17711630. eCollection 2017. SAGE Open Med Case Rep. 2017. PMID: 28680633

The MitraClip Procedure in Patients With Moderate Resting but Severe Exercise-Induced Mitral Regurgitation.  
Curio I, Tarar W, Al-Hindwan HSA, Neumann R, Berger C, Hoting MO, Kasner M, Lendlein A, Landmesser U, Reinthaler M, Curio I, et al. J Invasive Cardiol. 2020 Jan;32(1):E1-E8. doi: 10.1177/1520013119881111. Epub 2019 Dec 11. J Invasive Cardiol. 2020. PMID: 31811111

### 7. Resources

Check if each of the following is available at the host centre.

Resources	Yes / No	Number
Total vascular surgery/intervention ward beds	Yes	7
Number of ICU beds dedicated to vascular surgery patients	Yes	7
Post-anaesthesia care unit for vascular patients	Yes	7
Monitoring and advanced life support equipment	Yes	7
Assigned operating rooms for vascular surgery	Yes	7
Interventional vascular facility	Yes	7
Outpatient Clinic for perioperative evaluation of patients undergoing vascular procedures	Yes	7
24-hours acute pain service available for patients undergoing vascular procedures	Yes	7
Meeting Rooms	Yes	7
Classrooms with visual and other educational aids	Yes	7
Study areas for trainees	Yes	7

Office space for faculty members and trainees	Yes	7
Diagnostic facilities	Yes	7
Therapeutic facilities	Yes	7
24-hour laboratory services available in the hospital	Yes	7

### 8. Clinical Training

Caring for inpatients in	Duration	Number of performed produces/year
Supra-iliac aortic surgery		>120
Major vascular surgery		>200
Interventional vascular procedures (e.g. angioplasty, TEVAR, EVAR)		>60
Carotid artery stenting/endarterectomy		>100
Limb amputation surgery		>50
Acute and Chronic Pain Management for vascular patients		>200

List any other rotations (along with their duration, in months) offered in the Programme to augment trainee's learning.

beside OR rotation: participation/rotation in anesthesiological echo lab for preoperative risk evaluation participation/rotation in postoperative intensive care unit
Maximum Time in Non-Clinical Activities

### 9. Educational and Academic Programme

#### Didactic Sessions

Will faculty members' attendance be monitored?	Yes
Will trainees' attendance be monitored?	Yes
Will attendance be mandatory for faculty members?	Yes
Will attendance be mandatory for trainees?	Yes
Who of the following will provide content at conferences? Check all that apply.	No

Others (specify): Click here to enter text.
participation in conference contend for 2-4 week trainees is not planed

#### Patient Care

Competency Area	Settings/ Activities	Assessment Method(s)
Following standards for patient care and established guidelines and procedures for patient safety, error reduction, and improved patient outcomes.	Standard operating procedures for regulating workflow and risk	checking for SOP knowledge and SOP adherence by daily assigned instructor
Pre-operative patient evaluation and optimization of clinical status before the complex and minor vascular procedures.	Participation in preoperative consulting hours specially for	supervised by daily assigned instructor and faculty member (Asgrapur/Berger)
Interpretation of cardiovascular and neuromonitoring data.	teaching of theoretical knowledge and practical utilization of intraoperative	supervised by daily assigned instructor and faculty member (Kniesel)
Objectives, indications, and targets of cerebrospinal fluid drainage.	teaching of theoretical knowledge and practical utilization of CSF drainage	participation in ICU rounds and intraoperative utilization supervised by daily assigned instructor and faculty member (Angermair/Berger)
Pharmacological and mechanical haemodynamic support.	teaching of theoretical knowledge and practical utilization of initiation ans	participation in ICU rounds and intraoperative utilization supervised by daily assigned instructor and faculty member (Angermair/Berger)
Peri-operative critical care, including ventilatory support and peri-operative pain management.	teaching of theoretical knowledge and practical	participation in ICU rounds and acute pain service rounds with supervision by daily assigned instructor and faculty member (Angermair)
Providing anaesthesia care for patients undergoing open and endovascular vascular surgery.	participation in OR	supervised by daily assigned instructor during OR time and theoretical oral examination as well as

#### Medical Knowledge

Area of Knowledge	Settings/ Activities	Assessment Method(s)
Indicate the activity(ies) (lectures, conferences, journal clubs, clinical teaching rounds, etc.) in which trainees will demonstrate knowledge in each of the following areas. Also indicate the method(s) used to assess competence.		
Embryological development of the thoracic aorta and major vessel structures.	see other comments	
Pathophysiology, pharmacology, and clinical management of patients undergoing vascular procedures.	see other comments	
Pre-anaesthetic evaluation and preparation of adult vascular patients.	see other comments	
Invasive and minimally-invasive haemodynamic and neurological monitoring.	see other comments	
Pharmacokinetics and pharmacodynamics of medications prescribed for clamping and de-clamping of thoracic and abdominal aorta.	see other comments	
Pain management for adult vascular surgical patients.	see other comments	
Pain management for phantom limb pain.	see other comments	
Post-anaesthetic critical care of vascular surgical patients.	see other comments	
Quality assurance/ improvement.	see other comments	

Ethical and legal issues, and practice management.	see other comments	
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**10. Evaluation of Trainees**

The Programme Director will give an appraisal for each trainee following the observership

The centre will be able to maintain a register of those fellows who have entered and successfully completed a training programmes.

Yes
Yes

**Other Comments**

Oure institution provides a journal club and theoretical lectures once a week. In a 4-week exchange, the trainee is obliged to give a lecture with special focus on anesthesia in high risc vascular procedures (E.g. focused on HD-monitoring, utilization of Catecholamine, postoperative Care, CSF indications). An experienced tutor or faculty member, according to the special field of knowledge/qualification, accompanies preparation of the lecture. With focus of the above mentioned areas of medical knowledge, there will be an one hour expert discussion with the trainees and two of the faculty members every week. Further exists case conferences in a 2-4 week routine, were trainees will participate.  
 For daily routine, the trainee will be assigned to vascular OR or ICU or special rounds according to our separate provided timetable (see attachments). Further, an experienced

**11. EACTA Site Visit (for 1-day)**

Dates proposed for the visit if required (at least 3)

or

or

I hereby accept the regulations of the Hospital Visiting especially to take in charge the travel costs and the hotel accommodation of the 2 reviewers on the most reasonable base

Other comments

no on site visitations planed for 2-4 week Vascular Observership

To be completed by the Head of department or the authorised deputy.

Please fill in all required fields and send to [ecta@aimgroup.eu](mailto:ecta@aimgroup.eu)