

Hosted by



8th ASNACC CONGRESS 2025

Program Book

The 8th Congress of Asian Society for
Neuroanesthesia and Critical Care (ASNACC 2025)

In conjunction with

The 101st Annual Scientific Meeting of the Royal College
of Anesthesiologists of Thailand (RCAT 2025)

**EXCELLENT PRACTICE TOWARDS
BETTER OUTCOME IN NEUROANESTHESIA**

28th February - 2nd March 2025
InterContinental Bangkok Hotel, Thailand



MEDITOP บริษัท เมดิทอป จำกัด
MEDITOP CO.,LTD.
 โทรสาร 02-933-1133
 ISO 9001:2015
 ISO 13485:2015

บริษัท เมดิทอป จำกัด
Dräger

Fabius Plus Anesthesia Machine

Fabius Plus XL Anesthesia Workstation

Fabius MRI Anesthesia Machine

Fabius Tiro Anesthesia Machine

Atlas A300/A300XL Anesthesia Workstation

Atlas A350/A350XL Anesthesia Workstation

Perseus A500 Anesthesia Workstation

Zeus Infinity Empowered Anesthesia Machine

Vamos/Vamos Plus Anesthetic Gas Monitor

Vista 120 Patient Monitor

IACS Monitoring Infinity Acute Care System

ICS Infinity CentralStation

โฆษณาโดยตรงต่อผู้ประกอบวิชาชีพทางการแพทย์และสาธารณสุขที่ได้รับการยกเว้นโดยไม่ต้องขออนุญาต

Dräger

Movita Ceiling Supply Units

Agita Ceiling Supply Units

Polaris OR Lights

334 ซ.ลาดพร้าว 71 (สี่แยกสมเด็จราชมรรคา) 1, Lat Phrao Rd., Khlong Chaokhun Sing, Wang Thonglang, Bangkok 10310 Thailand
 Tel. 0 2933 1133, 0 2933 1226 Operation Room Equipment Division (ORE) Ext. 201, 202 Fax. 0 2196 1164
 info@meditophailand.com | www.meditophailand.com | จล.เลขที่ขึ้นที่ AN601118

TOP TOP 5520 / 5530 Syringe Pumps

icumedical CAADD[®]-SOLIS 2110 Ambulatory Infusion Pumps

Testa M3 MRI Patient Monitor

Testa DUO MRI Patient Monitor

EKE Anesthesia cart / Emergency Cart

idmed TOFscan[®] NeuroMuscular Transmission Monitor

ANIMEC Animec AM-301 Blood/Infusion Warmer

334 ซ.ลาดพร้าว 71 (สี่แยกสมเด็จราชมรรคา) 1, Lat Phrao Rd., Khlong Chaokhun Sing, Wang Thonglang, Bangkok 10310 Thailand
 Tel. 0 2933 1133, 0 2933 1226 Operation Room Equipment Division (ORE) Ext. 201, 202 Fax. 0 2196 1164
 info@meditophailand.com | www.meditophailand.com | จล.เลขที่ขึ้นที่ AN601118

MEDITOP บริษัท เมดิทอป จำกัด
MEDITOP CO.,LTD.
 โทรสาร 02-933-1133
 ISO 9001:2015
 ISO 13485:2015

Insighters Trust in sight

i-Workstation

Insight iS6 Video Laryngoscope

Insight iS3 Video Laryngoscope

Insight iS3-C/F Video Flexible Laryngoscope

Insight iS3-R Video Rigid Laryngoscope

Video Processor

PENTAX MEDICAL

IMAGINA EPK-15500C

EPK-3000

90K Series

EG3490K

EC-3490LK

Electrosurgical generator

Advanced Bipolar RF and Super High Frequency Microwave (5.8 GHz) energy

Ultrasound Scanner Arietta 65/750

EG34-110U

EG35-110UR

EG38-110UT

โฆษณาโดยตรงต่อผู้ประกอบวิชาชีพทางการแพทย์และสาธารณสุขที่ได้รับการยกเว้นโดยไม่ต้องขออนุญาต

VADI MEDICAL TECHNOLOGY CO., LTD.

Breathing Circuit Bacterial Filter

Anesthetic Gas Mask

Resuscitator

Anesthetic Breathing Circuit

Connector

PARKER PARKER LABORATORY, INC.

AQUASONIC[®] 100 ULTRASOUND TRANSMISSION GEL

AQUASONIC[®] CLEAR ULTRASOUND GEL

POLYSONIC[®] ULTRASOUND LOTION

SIGNAGEL[®] ELECTRODE GEL

MERITMEDICAL

Merit Careflow[™] Central Venous Catheter Kit

Merit Secalon[™] T Central Venous Catheter Kit

Merit Meritrans DTXPlus[™] Transducer Set

Merit Meritrans DTXPlus[™] Gabarrith[™] Transducer Set

334 ซ.ลาดพร้าว 71 (สี่แยกสมเด็จราชมรรคา) 1, Lat Phrao Rd., Khlong Chaokhun Sing, Wang Thonglang, Bangkok 10310 Thailand
 Tel. 0 2933 1133, 0 2933 1226 Operation Room Equipment Division (ORE) Ext. 201, 202 Fax. 0 2196 1164
 info@meditophailand.com | www.meditophailand.com | จล.เลขที่ขึ้นที่ AN601118

A7

Anesthesia system Fusion for Safety



AnaeSight™

AnaeSight™ is an integrated solution for combined intravenous-inhalational anesthesia that connects anesthesia machines, patient monitors, and pumps. This brings greater convenience to operation and more confidential decision-making, significantly improving the safety and efficiency of anesthesia.

➤ Centralized control

Anesthesiologists can remotely control the pumps through the anesthesia machine, adjusting intravenous and inhalational anesthetics on the same interface.



High Flow Nasal Cannula

High flow nasal cannula (HFNC) plays an important role in maintaining safe oxygen saturation of patients as it extends the safe apnoeic oxygenation especially for patients with poor oxygen saturation such as bariatric, pediatric, critical ill or difficult airway.

Jet ventilation

Jet ventilation can be used in shared airway surgeries, difficult airway cases, and more. It can improve patient safety by maintaining oxygenation while creating a better surgical field.



Message From Chairman

Dear Esteemed colleagues, participants, and distinguished guests,

It is my pleasure to welcome all of you to the 8th Asian Society for Neuroanesthesia and Critical Care Congress 2025, the most meaningful event for neuroanesthesiologists beyond the boundary, in conjunction with the 101st Annual Scientific Meeting of the Royal College of Anesthesiologists of Thailand.

This unbeatable event will be held at the InterContinental Hotel in the heart of the central district area from February 28th to March 2nd, 2025, under the theme “Excellent Practice Towards Better Outcome in Neuroanesthesia”.

The program will start in the afternoon of the first day, which will be the essential workshop for neuroanesthesiologists, general anesthesiologists, nurse anesthetists, or even fellows and residents in anesthesiology. The session of neuromonitoring and tutorial session have been set up as two-way communication, remarkably with a fun and unforgettable experience. The remaining two full days will focus on the related issues of neuroanesthesia, neurocritical care, and its functional outcomes. We provide an area of interest in three parts: neuroanesthesia in depth, neuroanesthesia for the subspecialty practice, and neuroanesthesia perspective in daily practice. The scheme will cover the patient assessment and preparation, monitoring, intraoperative regimens, post-anesthetic care from the immediate recovery or an intensive care unit to the rehabilitation stage for a plenty variety of space-occupying brain lesions, neurovascular intervention and procedure, neuro-pediatric components, complex spine surgery, non-operating room anesthesia in neuro-modality and many more.

This coming back onsite meeting will be enjoyable and give us the opportunity to participate in person, to extend our friendship face to face, and to progress our stories together. All of this will happen in Bangkok, Thailand. Feast on delicious Thai cuisine, celebrate the festive festival, explore the authentic Thai historic landmark, and enjoy the fabulous fashion in the shopping cosmopolitan area ... The Thai touch destination is calling for you ...

Finally, I do hope that this gathering will be a celebration of our collective efforts to advance knowledge and embark on the dynamic field of neuroanesthesia innovation worldwide. On behalf of the entire organizing team, we extend our sincere gratitude for your presence at the 8th ASNACC Congress 2025 ... Thank you for strengthening our bonds!

Dr. Phuping Akavipat

Chair of Organizing Committee

The 8th Congress of Asian Society for Neuroanesthesia and Critical Care (ASNACC 2025)





Message From The President of Royal College of Anesthesiologists of Thailand

Dear Distinguished Scholars and Delegates:

It is with great honor that I extend a warm welcome to the 8th ASNACC 2025 on behalf of the Royal College of Anesthesiologists of Thailand.

The Asian Society of Neuroanesthesia and Critical Care, established in 2006, includes founding member countries such as South Korea, Japan, China, India, Indonesia, and Singapore. Despite Thailand joining the group later, we are proud to host the 8th ASNACC alongside the 101st Annual Scientific Meeting of the Royal College of Anesthesiologists of Thailand.

I cordially invite all of you to participate in this esteemed academic gathering. By coming together to exchange ideas, share research, and foster collaborations, we can collectively contribute to the advancement of our individual societies and the improvement of patient safety.

Best regards,

Assoc. Prof. Varinee Lekprasert

Royal College of Anesthesiologists of Thailand President

ORGANIZING COMMITTEE

Chairman

- ◆ **Dr. Phuping Akavipat**
Neurological Institute of Thailand

Vice Chair

- ◆ **Prof. Manee Raksakietisak**
Department of Anesthesiology, Faculty of Medicine
Siriraj Hospital, Mahidol University

Advisory Board

- ◆ **Prof. Somsri Pausawasdi**
The Medical Council of Thailand

Academic Affair

- ◆ **Assoc. Prof. Pichaya Waitayawinyu**
Faculty of Medicine Siriraj Hospital, Mahidol University
- ◆ **Assoc. Prof. Ananchanok Saringcarinkul**
Department of Anesthesiology, Faculty of Medicine,
Chiang Mai University
- ◆ **Dr. Kornkamon Yuwapattanawong**
Faculty of Medicine, Chulalongkorn University

Secretary

- ◆ **Asst. Prof. Surunchana Lerdsirisopon**
Faculty of Medicine, Chulalongkorn University

ORGANIZING COMMITTEE

Board Member

- ◆ **Dr. Pimwan Sookplung**
Neurological Institute of Thailand
- ◆ **Asst. Prof. Sunisa Sangtongjaraskul**
Department of Anesthesiology,
King Chulalongkorn Memorial Hospital
- ◆ **Assoc. Prof. Cattleya Kasemsiri**
Faculty of Medicine, Khon Kaen University
- ◆ **Asst. Prof. Poonyanuch Charoenkoop**
Faculty of Medicine Ramathibodi Hospital,
Mahidol University
- ◆ **Dr. Pannawit Benjhawaleemas**
Faculty of Medicine, Prince of Songkla University
- ◆ **Dr. Sittiporn Deetayart**
Department of Anesthesiology, Ratchaburi Hospital
- ◆ **Asst. Prof. Narut Ruananukun**
Bumrungrad International Hospital
- ◆ **Dr. Narin Plailaharn**
Faculty of Medicine, Khon Kaen University
- ◆ **Assoc. Prof. Chanathee Kitsiripant**
Faculty of Medicine, Prince of Songkla University
- ◆ **Dr. Chayada Wongwian**
Department of Anesthesiology, Rajavithi Hospital
- ◆ **Asst. Prof. Chompunoot Pathomsamit**
Department of Anesthesiology,
Navamindradhiraj University

Hosted by



The 8th Congress of Asian Society for
Neuroanesthesia and Critical Care (ASNACC 2025)

In conjunction with

The 101st Annual Scientific Meeting of the Royal College
of Anesthesiologists of Thailand (RCAT 2025)

**EXCELLENT PRACTICE TOWARDS
BETTER OUTCOME IN NEUROANESTHESIA**

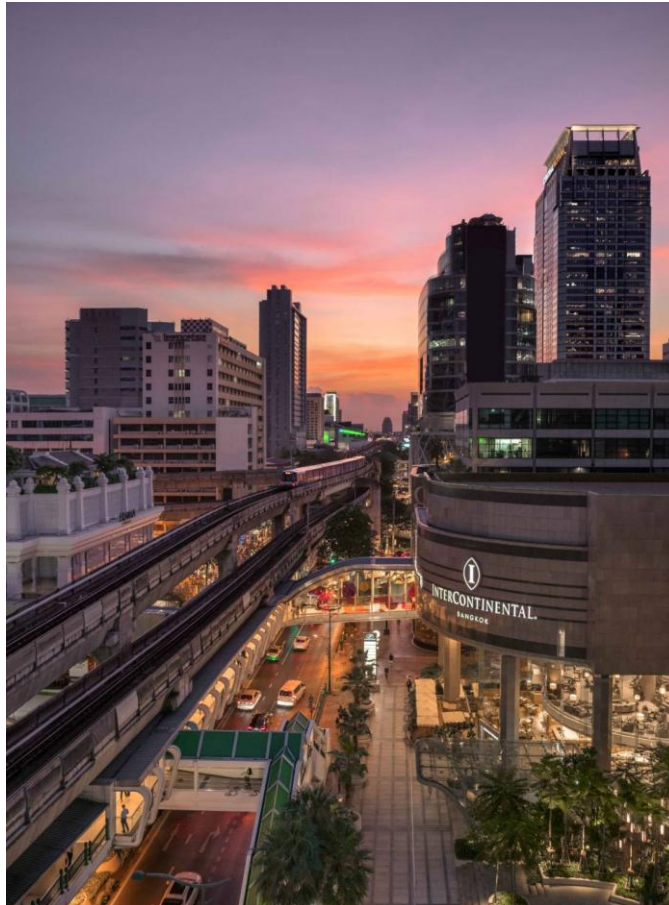
28th February - 2nd March 2025

InterContinental Bangkok Hotel, Thailand

Venue



InterContinental Bangkok, an IHG Hotel



A reimagined sanctuary in Bangkok

Experience the InterContinental life in the heart of Bangkok. Freshly renovated in 2023, InterContinental Bangkok gives you the keys to unlock an experience defined by style, sophistication and ultimate comfort. Set within Bangkok's central business district, InterContinental Bangkok offers modern travellers the freedom to fully enjoy all that the city has to offer, from exciting bars and restaurants to cultural attractions. When you return, enjoy luxurious accommodations and exceptional dining.

Contact :

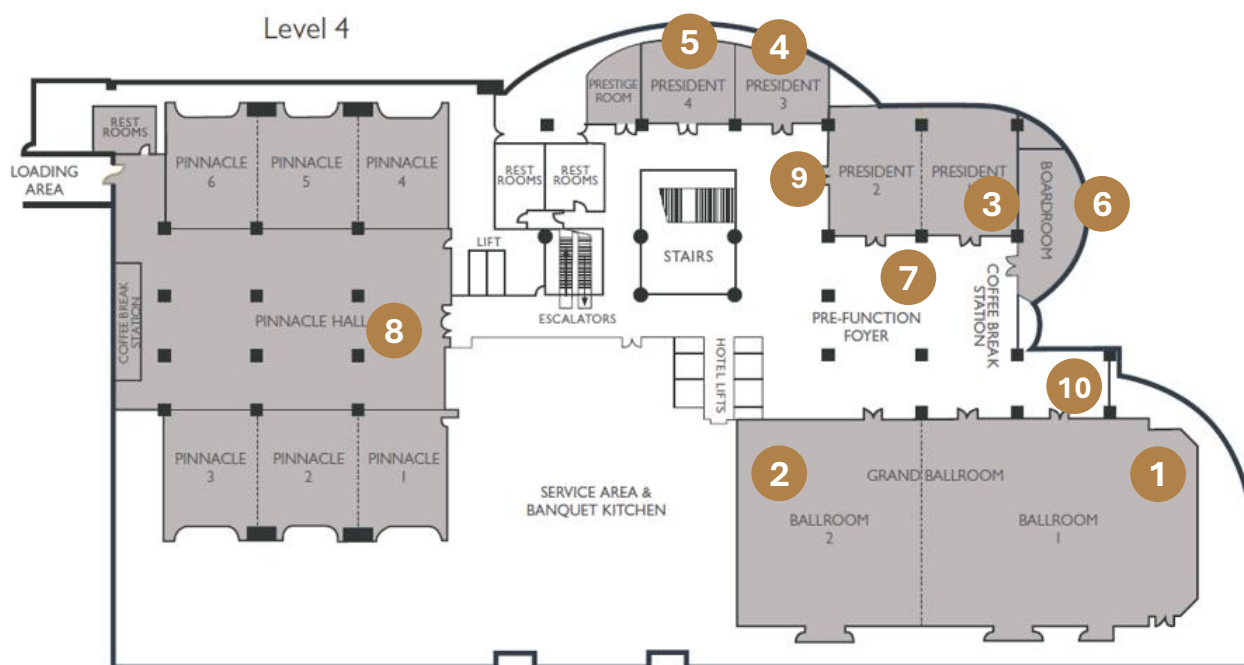
InterContinental Bangkok

Address : 973 Phloen Chit Road, Lumpini, Pathum Wan, Bangkok 10330, Thailand

Tel : 02 656 0444

Email : intercontinental.bkkhb@ihg.com

FLOOR PLAN



Directory

1. Ballroom 1
2. Ballroom 2
3. President 1+2
4. President 3
5. President 4
6. Speaker Ready Room
7. Exhibition Area (Ballroom)
8. Exhibition Area (Pinnacle Hall)
9. Registration Area
10. E-poster Area

Hosted by



The 8th Congress of Asian Society for
Neuroanesthesia and Critical Care (ASNACC 2025)

In conjunction with

The 101st Annual Scientific Meeting of the Royal College
of Anesthesiologists of Thailand (RCAT 2025)

**EXCELLENT PRACTICE TOWARDS
BETTER OUTCOME IN NEUROANESTHESIA**

28th February - 2nd March 2025

InterContinental Bangkok Hotel, Thailand

Pre-Congress Program



Hosted by



REGISTER NOW!
30 Seats Available*

Airway Challenges in Neurological Patients

PRE-CONGRESS WORKSHOP

FEBRUARY 28, 2025 | 11:30-16:00
Simulation and CPR Training Center (SCTC),
Sor Tor Building, 16th Floor, King Chulalongkorn
Memorial Hospital

PROGRAM




11:30 - 12:00 Registration
12:00 - 13:00 Lunch
13:00 - 16:00 Workshop

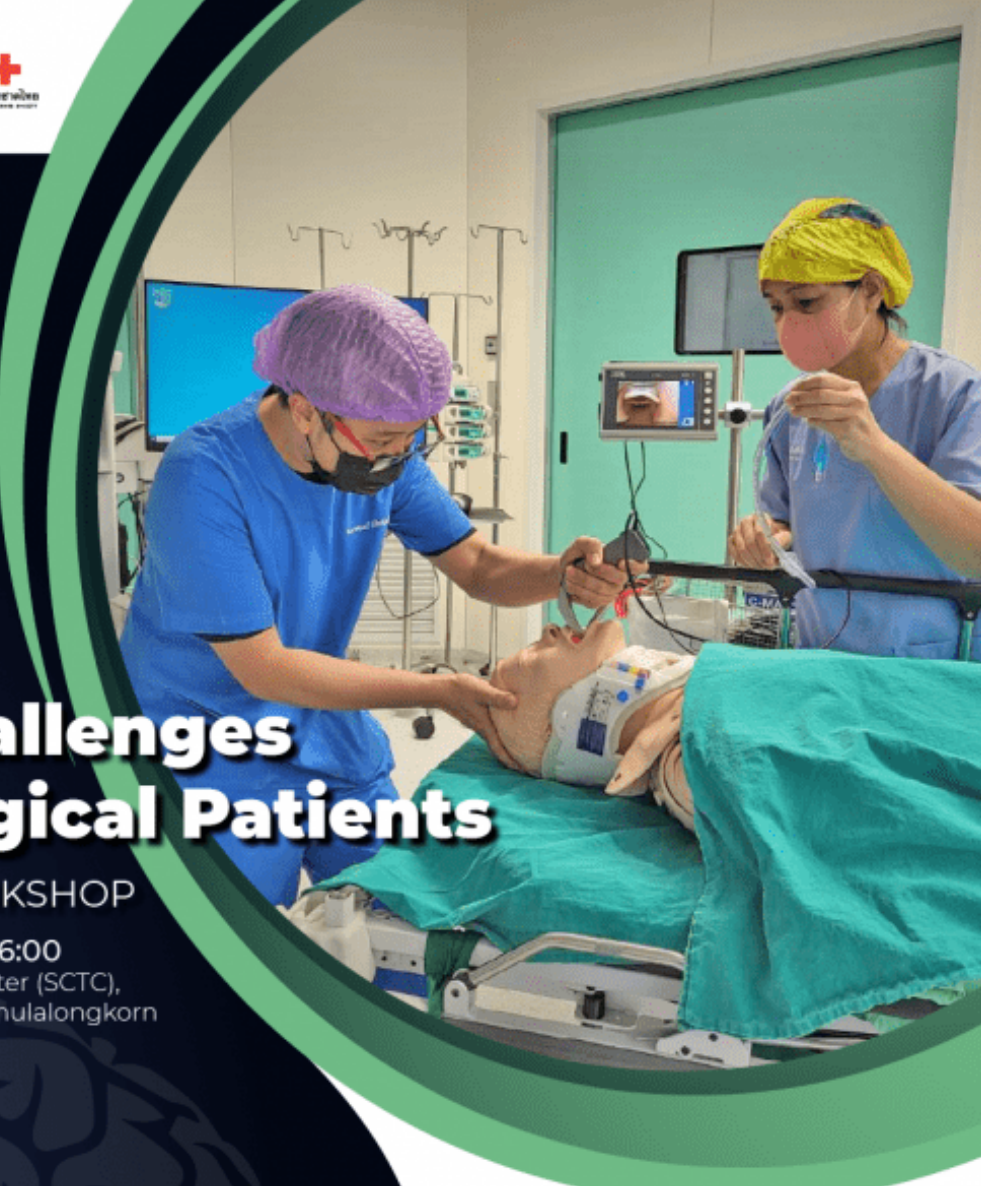
DETAILS:

- Simulation-based learning, focusing on airway challenge cases involving neurological patients.
- Participants will have the opportunity to develop both technical and non-technical skills.
- The workshop will be led by experts in neurosurgical anesthesia and difficult airway management.

฿2,500 THAI
REGISTER NOW COFFEE BREAK INCLUDED

\$100 OVERSEAS
REGISTER NOW COFFEE BREAK INCLUDED

 <https://asnacc2025.org/>
 ASNACC2025
 secretariat.asnacc2025@gmail.com



WORKSHOP FACILITATORS

- Lawan Tuchinda, M.D.
- Cattleya Kasemsiri, M.D.
- Nisarath Archawakom, M.D.
- Wipada Tingthanathikul, M.D.
- Ngamjit Pattaravit, M.D.
- Warita Chairoondeekul, M.D.
- Sirirat Rattana-arpa, M.D.

WORKSHOP STATIONS

1. Intubation Techniques for Unstable Cervical Spine Patients
2. Airway Management During Awake Craniotomy
3. Emergent Airway Management with a Stereotactic Headframe Under Deep Brain Stimulation

www.asnacc2025.org

Please visit congress website for more information.

PROCESSED EEG FOR ANESTHESIOLOGISTS: MORE THAN JUST INDEXED VALUES

FEBRUARY 28, 2025 12:00 - 16:00hrs
Platinum 1-II, Holiday Inn Bangkok, an IHG Hotel

REGISTER NOW!
80 Seats Available

\$2,500

REGISTER NOW

THAI

LUNCH & COFFEE BREAK
INCLUDED

\$100

REGISTER NOW

OVERSEAS

LUNCH & COFFEE BREAK
INCLUDED



Hosted by



PROGRAM :

12:00- 13:00	Registration and Lunch
13:00- 13:40	Introduction Basic EEG, Interpretation of EEG Non-proprietary Parameters Choon Lool Bong Oversedation/Undersedation
13:40- 14:00	EEG Signatures of Different Anesthetic Agents Nophanan Chaikittisilpa
14:00-14:20	Age-Related Changes in EEG Choon Lool Bong
14:20-14:30	Q&A
14:30-14:45	Coffee Break
14:45-15:00	Neuromonitoring for Neurosurgical Patients (Different Approach for Probe Attachment) Taniga Klatchai
15:00-15:40	Case Studies in Adults and Children
15:40- 16:00	Q&A Showcase of Different Types of Available Processed EEG

OBJECTIVES :

1. Review the basics of EEG waveform and interpretation of processed EEG parameters and how this changes with anaesthesia.
2. Understand the various EEG signatures of different anesthetic agents.
3. Understand the age-related differences between the EEG in children, infants and neonates.
4. Understand the practical applications and limitations of EEG monitoring.
5. Understand how EEG monitoring can be used to guide anesthesia in adults and children by reviewing various case studies.

MODERATOR :

Choon Lool Bong, MBChB FRCA
KK Women and Children's Hospital,
Singapore

SPEAKERS :

Choon Lool Bong, MBChB FRCA
KK Women and Children's Hospital,
Singapore
Taniga Klatchai
Siriraj Hospital, Thailand
Nophanan Chaikittisilpa
Siriraj Hospital, Thailand

Please visit congress website

www.asnacc2025.org
for more information.



<https://asnacc2025.org/>

ASNACC2025

secretariat.asnacc2025@gmail.com

Supported by

Medtronic



**FRESENIUS
KABI**
caring for life

Hosted by



The 8th Congress of Asian Society for
Neuroanesthesia and Critical Care (ASNACC 2025)

In conjunction with

The 101st Annual Scientific Meeting of the Royal College
of Anesthesiologists of Thailand (RCAT 2025)

**EXCELLENT PRACTICE TOWARDS
BETTER OUTCOME IN NEUROANESTHESIA**

28th February - 2nd March 2025

InterContinental Bangkok Hotel, Thailand

Main Congress Program



Saturday, 1 March 2025 Program

Time/Room	Ballroom 1 (350 pax)	Ballroom 2 (160 pax)	President 1+2 (124 pax)	President 3 (40 pax)	President 4 (60 pax)		
08.00-08.30	Registration						
08.30-09.00	<p>Opening Ceremony and Welcome Speech Varinee Lekprasert (Thailand) Phuping Akavipat (Thailand) Masahiko Kawaguchi (Japan)</p> <p>Time: 08.30-09.00</p>						
09.00-09.30	<p style="color: #e67e22;">Plenary Lecture 1: ASNACC Now and Beyond</p> <p>- The Journey of ASNACC Masahiko Kawaguchi (Japan)</p> <p>- Neuroanesthesia Training in Affiliation with SNACC Tumul Chowdhury (Canada)</p> <p><i>Moderator:</i> Varinee Lekprasert (Thailand) Phuping Akavipat (Thailand)</p> <p>Time: 09.00-09.30</p>						
09.30-10.00	<p style="color: #e67e22;">Plenary Lecture 2: Clinical Practice and the Brain</p> <p>- Effect of Anesthesia on Vulnerable Brains Lawan Tuchinda (Thailand)</p> <p><i>Moderator:</i> Varinee Lekprasert (Thailand) Phuping Akavipat (Thailand)</p> <p>Time: 09.30-10.00</p>						
10.00-11.00	Break + Exhibition		<p>Poster Round 1 (Poster Area)</p> <p><i>Judge:</i> MM Rudi Prihatno (Indonesia) Pathomporn Pin-On (Thailand) Jeongmin Hong (Republic of Korea) Bhadrinarayan Varadarajan (India)</p> <p>Time: 10.00-11.00</p>				
11.00-12.00	<p style="color: #e67e22;">Plenary lecture 3: Brain Health Protocol</p> <p>- Perioperative Brain Health Daniel J. Cole (USA)</p> <p>- Role of Processed EEG in Perioperative Brain Health Protocol Tae-Yop Kim (Republic of Korea)</p> <p><i>Moderator:</i> Geraldine B. Jose (Philippines) Pichaya Waitayawinyu (Thailand)</p> <p>Time: 11.00-12.00</p>	<p style="color: #e67e22;">Symposium 1: NORA in Neuro-module</p> <p>- Acute Ischemic Stroke in Anesthesia Perspective Phuriphong Songarj (Thailand)</p> <p>- Safe Anesthesia for AVM, Aneurysm Coiling, and Carotid Angioplasty Jeffrey J. Pasternak (USA)</p> <p><i>Moderator:</i> Minyu Jian (China) Wichai Ittichaikulthol (Thailand)</p> <p>Time: 11.00-12.00</p>	<p style="color: #e67e22;">Symposium 2: Traumatic Brain Injury, Again and Again</p> <p>- Guideline, Update, and Trends in Adult TBI Jin Yong Jung (Republic of Korea)</p> <p>- What is New in Pediatric TBI Girija Prasad Rath (India)</p> <p>- Postoperative Care in the Hand of Neurointensivists Tanuwong Viarasilpa (Thailand)</p> <p><i>Moderator:</i> Poonyanuch Charoenkoop (Thailand) MN Chidananda Swamy (Brunei)</p> <p>Time: 11.00-12.00</p>			<p style="color: #e67e22;">RCAT Oral Presentation 1</p> <p><i>Judge:</i> Yodying Punjasawadwong (Thailand) Yong Chow Yen (Malaysia)</p> <p>Time: 10.30-12.30</p>	<p style="color: #e67e22;">RCAT Oral Presentation 2</p> <p><i>Judge:</i> Hasmizy Muhammad (Malaysia) Suwimon Tangwiwat (Thailand)</p> <p>Time: 10.30-12.30</p>
12.00-12.30	<p style="color: #0070c0;">Sponsor Lecture 1: Neurological Surgery: Perioperative Patient Optimization and Patient Recovery</p> <p>Sergio D. Bergese (USA)</p> <p><i>Moderator:</i> Manee Raksakietisak (Thailand)</p> <p>Sponsored by: Baxter</p> <p>Time: 12.00-12.30</p>	<p style="color: #0070c0;">Sponsor Lecture 2: Review of Dexmedetomidine for Airway Management</p> <p>Oraluxna Rodanant (Thailand)</p> <p><i>Moderator:</i> Varinee Lekprasert (Thailand)</p> <p>Sponsored by Fresenius Kabi</p> <p>Time: 12.00-12.30</p>	<p style="color: #0070c0;">Sponsor Lecture 3: Sustainable Anesthesia: Innovations in Gas Management and Emissions Reduction</p> <p>Annop Piriypatsom (Thailand)</p> <p><i>Moderator:</i> Surunchana Lerdsirisonpon (Thailand)</p> <p>Sponsored by Draeger + Meditop</p> <p>Time: 12.00-12.30</p>				
12.30-13.30	Lunch						

Saturday, 1 March 2025 Program

Time/Room	Ballroom 1 (350 pax)	Ballroom 2 (160 pax)	President 1+2 (124 pax)	President 3 (40 pax)	President 4 (60 pax)
13.30-14.00	<p style="text-align: center;">Sponsor Lecture 4: The Challenges in the Management and Implementation of Normothermia Guidelines: How to put Guidelines into Practice</p> <p>Varinee Lekprasert (Thailand) Suwimon Tangwiwat (Thailand) Suraphong Lorsomradee (Thailand)</p> <p style="text-align: center;">Sponsored by Soventum</p> <p style="text-align: center;">Time: 13.30-14.00</p>	<p style="text-align: center;">Sponsor Lecture 5: Comprehensive Neuromonitoring</p> <p>Pathomporn Pin-on (Thailand)</p> <p style="text-align: center;"><i>Moderator: Cattleya Kasemsiri (Thailand)</i></p> <p style="text-align: center;">Sponsored by Mediplex + Mindray</p> <p style="text-align: center;">Time: 13.30-14.00</p>	<p style="text-align: center;">Sponsor Lecture 6: The "RIGHT" Balanced Crystalloid Solution for Neurological Surgery</p> <p>Suneerat Kongsayreepong (Thailand)</p> <p style="text-align: center;"><i>Moderator: Pichaya Waitayawinyu (Thailand)</i></p> <p style="text-align: center;">Sponsored by: Thai-Otsuka</p> <p style="text-align: center;">Time: 13.30-14.00</p>		
14.00-14.40	<p style="text-align: center;">Symposium 3: Enhanced Recovery After Neurosurgery</p> <p>- ERAS for Brain Surgery Young Tae Jeon (Republic of Korea)</p> <p>- ERAS for Spine Surgery Manee Raksakietisak (Thailand)</p> <p style="text-align: center;"><i>Moderator: Chanathee Kitsiripant (Thailand) Hari Hara Dash (India)</i></p> <p style="text-align: center;">Time: 14.00-14.40</p>	<p style="text-align: center;">Symposium 4: A Debate for Cerebral Oximetry in Neurosurgery</p> <p>- Opinion from the Almost Always Yu Lin Wong (Singapore)</p> <p>- Is It Necessary? I Don't Think So Anna Margarita Hilvano Corsiga (Philippines)</p> <p style="text-align: center;"><i>Moderator: Tanawadee Teeratchanan (Thailand) Tae-Yop Kim (Republic of Korea)</i></p> <p style="text-align: center;">Time: 14.00-14.40</p>	<p style="text-align: center;">ASNACC Oral Presentation 1</p> <p style="text-align: center;">Basic Research Paper</p> <p>A Low Preoperative Platelet-To-White Blood Cell Ratio Is Associated With Postoperative Acute Kidney Injury Following Cerebral Aneurysm Treatment Hee-Pyoung Park (Korea)</p> <p>Early Mobilization Recovers Synaptic Plasticity In Septic Mouse Hippocampi Induced By Brain-Derived Neurotrophic Factor Takashi Soejima (Japan)</p> <p>Sensitivity To Sevoflurane Is Increased In The Btbr T+Tf/J Mouse Model Of Autism Jiho Park (Korea)</p> <p>The Comparison Of Pain Threshold Sensitivity Of Traumatic Brain Injury Rat Models After Administration Of Analgesic Agents Raisa Arliza Azhar (Indonesia)</p> <p style="text-align: center;"><i>Judge: Vorrachai Sae-phua (Thailand) Masahiko Kawaguchi (Japan) Geraldine B. Jose (Philippines) Aung Shwe Saw (Myanmar)</i></p> <p style="text-align: center;">Time: 14.00-14.40</p>	RCAT Oral Presentation 3:	RCAT Oral Presentation 4:
14.40-15.20	Break + Exhibition		<p style="text-align: center;">Poster Round 2 (Poster Area)</p> <p style="text-align: center;"><i>Judge: Ananchanok Saringcarikul (Thailand) See Jee Jian (Singapore) Kenji Yoshitani (Japan) Jin Yong Jung (Republic of Korea)</i></p> <p style="text-align: center;">Time: 14.40-15.20</p>	<p>Somrat Charuluxananan (Thailand) Wan Rahiza Wan Mat (Malaysia)</p> <p style="text-align: center;">Time: 13.30-15.45</p>	<p>Jun Heum Yon (Republic of Korea) Njamjit Pattaravit (Thailand)</p> <p style="text-align: center;">Time: 13.30-15.30</p>
15.20-16.00	<p style="text-align: center;">Symposium 5: Harmony of Awake Craniotomy</p> <p>- Deep Brain Stimulation and Anesthesiologist Role See Jee Jian (Singapore)</p> <p>- Anesthesia for Surgery at the Eloquent Area and Epilepsy Surgery Wan Mohd Nazaruddin Wan Hassan (Malaysia)</p> <p style="text-align: center;"><i>Moderator: Tanawadee Teeratchanan (Thailand) Young Tae Jeon (Republic of Korea)</i></p> <p style="text-align: center;">Time: 15.20-16.00</p>	<p style="text-align: center;">Symposium 6: How to Deal with Intracranial Hypertension</p> <p>- Cerebral Protection and Clinical Practice Hari Hara Dash (India)</p> <p>- Recommended Application on Cerebral Aneurysm Tumul Chowdhury (Canada) <i>(Pre-Recorded)</i></p> <p style="text-align: center;"><i>Moderator: Surunchana Lerdstirisopon (Thailand) MM Rudi Prihatno (Indonesia)</i></p> <p style="text-align: center;">Time: 15.20-16.00</p>	<p style="text-align: center;">ASNACC Oral Presentation 2</p> <p style="text-align: center;">Clinical Research Paper</p> <p>Effect Of Magnesium Sulphate On The Total Anaesthetic Requirement And Postoperative Analgesia In Craniotomy Patients: A Prospective Interventional Study Manoj Kumar Giri (India)</p> <p>Correlation Between Non-Invasive And Invasive Icp Measurements In Adults With Traumatic Brain Injury- A Prospective Observational Study Mohamed Salih Mohamed Samsudeen (India)</p> <p>Comparison Of Pulmonary Fluid Burden Between Dependent And Non-Dependent Lung During Lateral Position Craniotomy: A Prospective Randomised Study Shiva Priya Kandukuri (India)</p> <p>Comparison Of Propofol Alone Vs. Propofol-Remimazolam Combination During Neurophysiologic Monitoring In Neurosurgery: A Randomized Controlled Trial Jiwon Han (Korea)</p> <p style="text-align: center;"><i>Judge: Manee Raksakietisak (Thailand) Sudadi (Indonesia) Peter Tan (Malaysia) Haekyu Kim (Republic of Korea)</i></p>		
16.00-21.00	<p>Speaker Night</p> <p>- The National Museum Bangkok - The Raweekanlaya Dining</p>				

Sunday, 2 March 2025 Program

Time	Ballroom 1 (350 pax)	Ballroom 2 (160 pax)	President 1+2 (124 pax)	President 3 (40 pax)	President 4 (60 pax)
08.00-09.00	<p style="text-align: center;">Special Discussion 1: How I Do It? (Episode 1)</p> <p>Anesthesia for Epilepsy Surgery; From Small to Big Cut</p> <ul style="list-style-type: none"> - Preoperative Scheme Krishnapundha Bunyaratavej (Thailand) - Intraoperative Concern Kornkamon Yuwapatthanawong (Thailand) <p style="text-align: center;"><i>Moderator:</i> Pathomporn Pin-on (Thailand) Bhadrinarayan Varadarajan (India)</p> <p style="text-align: center;">Time: 08.00-09.00</p>	<p style="text-align: center;">Symposium 7: Pitfalls in Neuroanesthesia</p> <ul style="list-style-type: none"> - Anesthesia Non-technical Skills, Manpower and Equipment Geraldine B. Jose (Philippines) - Improving Communication in the OR to Minimizing Complications Elizabeth Frost (USA) <p style="text-align: center;"><i>Moderator:</i> Daniel J Cole (USA) Yong Chow Yen (Malaysia)</p> <p style="text-align: center;">Time: 08.00-09.00</p>	<p style="text-align: center;">Special Discussion 2: How I Do It? (Episode 2)</p> <p>Perfect Positioning; Case Presentation</p> <ul style="list-style-type: none"> - Do Prone Poonyanuch Charoenkoop (Thailand) - Do Lateral I Putu Pramana Suarjaya (Indonesia) - Do Sit Apinya Kittiponghansa (Thailand) <p style="text-align: center;"><i>Moderator:</i> Sittiporn Deetayart (Thailand) See Jee Jian (Singapore)</p> <p style="text-align: center;">Time: 08.00-09.00</p>	<p style="text-align: center;">RCAT Oral Presentation 5:</p> <p style="text-align: center;"><i>Judge:</i> Somboon Tienthong (Thailand) Pongpol Sirilaksanamanoon (Thailand)</p> <p style="text-align: center;">Time: 8.00-10.15</p>	<p style="text-align: center;">RCAT Oral Presentation 6:</p> <p style="text-align: center;"><i>Judge:</i> Somchai Amorniyotin (Thailand) Viranut Tirasuntornwong (Thailand)</p> <p style="text-align: center;">Time: 8.00-10.15</p>
09.00-10.00	<p style="text-align: center;">Symposium 8: Everything About Pediatric Neuroanesthesia</p> <ul style="list-style-type: none"> - Minimally Invasive Neurosurgery in Children Girija Prasad Rath (India) - Meningocele and Tethered Cord Sunisa Sangtongjaraskul (Thailand) - Evidence and Update Andrew Davidson (Australia) <p style="text-align: center;"><i>Moderator:</i> Narut Ruananukun (Thailand) Anna Margarita Hilvano Corsiga (Philippines)</p> <p style="text-align: center;">Time: 09:00-10:00</p>	<p style="text-align: center;">Symposium 9: Analgesic Modality in Neurosurgery</p> <ul style="list-style-type: none"> - Pain Medication for the Brain Haekyu Kim (Republic of Korea) - Dark Side of Opioids in Spine Surgery Sergio D. Bergese (USA) - Role of Regional Anesthesia and Particular Block Sudadi (Indonesia) <p style="text-align: center;"><i>Moderator:</i> Peter Tan (Malaysia) Pannawit Benjhawaleemas (Thailand)</p> <p style="text-align: center;">Time: 9.00-10.00</p>	<p style="text-align: center;">Symposium 10: One Heart, One Brain</p> <ul style="list-style-type: none"> - Post Resuscitation Care Jeffrey J Pasternak (USA) - Cardiovascular Instability During Neuroanesthesia Surunchana Lerdsiririson (Thailand) <p style="text-align: center;"><i>Moderator:</i> I Putu Pramana Suarjaya (Indonesia) Jeongmin Hong (Republic of Korea)</p> <p style="text-align: center;">Time: 09:00-10:00</p>		
10.00-11.00	Break + Exhibition				
11.00-12.00	<p style="text-align: center;">Symposium 11: IONM and Spine</p> <ul style="list-style-type: none"> - Anesthetic Remedy for the Safety and Smoothness Cattleya Kasemsiri (Thailand) - Common Problems and Troubleshooting Kenji Yoshitani (Japan) <p style="text-align: center;"><i>Moderator:</i> Jeongmin Hong (Republic of Korea) Wan Mohd Nazaruddin Wan Hassan (Malaysia)</p> <p style="text-align: center;">Time: 11.00-12.00</p>	<p style="text-align: center;">Symposium 12: Path From Critical Care to Quality Discharge</p> <ul style="list-style-type: none"> - Post Pandemic Era in Neurocritical Care MN Chidananda Swamy (Brunei) - ICP Management and Monitorings Lim Jia Yan (Singapore) <p style="text-align: center;"><i>Moderator:</i> Soe Wunna Htay (Myanmar) Yu-Lin Wong (Singapore)</p> <p style="text-align: center;">Time: 11.00-12.00</p>	<p style="text-align: center;">Symposium 13: Out of the Box Concern in Neuroanesthesia</p> <ul style="list-style-type: none"> - Anticoagulant and Antiplatelet Therapy Chattree Chai-adisaksopha (Thailand) - Red Cell Transfusion Matthew Chan (China) <p style="text-align: center;"><i>Moderator:</i> Sunisa Sangtongjaraskul (Thailand) Jun Heum Yon (Republic of Korea)</p> <p style="text-align: center;">Time: 11.00-12.00</p>	<p style="text-align: center;">RCAT Oral Presentation 7:</p> <p style="text-align: center;"><i>Judge:</i> Ruenreong Leelanukrom (Thailand) Tithiganya Duangrat (Thailand)</p> <p style="text-align: center;">Time: 10.30-12.45</p>	<p style="text-align: center;">RCAT Oral Presentation 8:</p> <p style="text-align: center;"><i>Judge:</i> Nuchanart Bunchungmongkol (Thailand) Rattaphol Seangrung (Thailand)</p> <p style="text-align: center;">Time: 10.30-12.45</p>
12.00-12.30	HaeKyu Kim Awards Presentation and ASNACC Flag Handover Ceremony				
12.30-13.30	Lunch				
13.30-14.40	<p style="text-align: center;">Symposium 14: Better Understanding of the Intraoperative Neuromonitoring in Pediatrics</p> <ul style="list-style-type: none"> - Application of Processed EEG in Pediatric Neuroanesthesia Bong Choon Looi (Singapore) - Pediatrics Neuromonitoring; Limitations and Pitfalls Andrew Davidson (Australia) <p style="text-align: center;"><i>Moderator:</i> Vorrachai Sae-phua (Thailand) Chayada Wongwian (Thailand)</p> <p style="text-align: center;">Time: 13.30-14.40</p>	<p style="text-align: center;">Special Discussion 3: How I Do It? (Episode 3)</p> <p>Neuroanesthesia Recipes From the Experts</p> <ul style="list-style-type: none"> - A Difficult Airway Patient (3 Case Presentations) Pimwan Sookplung (Thailand) Tatang Bisri (Indonesia) Kenta Furutani (Japan) <p style="text-align: center;"><i>Moderator:</i> Chanathee Kitsiripant (Thailand) Sergio D. Bergese (USA)</p> <p style="text-align: center;">Time: 13.30-14.40</p>	<p style="text-align: center;">Symposium 15: Fluid Management in Neuroanesthesia</p> <ul style="list-style-type: none"> - Crystalloid and Colloid Ananchanok Saringcarinkul (Thailand) - Osmotic Therapy Sittiporn Deetayart (Thailand) <p style="text-align: center;"><i>Moderator:</i> Cherdkiat Kamjanarachata (Thailand) Chompunoot Pathonsamit (Thailand)</p> <p style="text-align: center;">Time: 13.30-14.40</p>	<p style="text-align: center;">ASNACC Board Meeting</p>	<p style="text-align: center;">Annual General Meeting of RCAT Member</p> <ul style="list-style-type: none"> - Annual Budget Report - RCAT Research Presentation Award
14.40-15.20	Break + Exhibition				

Saturday, 1 March 2025 : Ballroom 1 & 2

- 08:30 – 09:00** **Opening Ceremony and Welcome Speech**
- Varinee Lekprasert (Thailand)
 - Phuping Akavipat (Thailand)
 - Masahiko Kawaguchi (Japan)
- 09:00 – 09:30** **Plenary Lecture 1: ASNACC Now and Beyond**
The Journey of ASNACC
- Masahiko Kawaguchi (Japan)
- Neuroanesthesia Training in Affiliation with SNACC**
- Tumul Chowdhury (Canada)
- Moderator:** Varinee Lekprasert (Thailand)
Phuping Akavipat (Thailand)
- 09:30 – 10:00** **Plenary Lecture 2: Clinical Practice and the Brain**
Effect of Anesthesia on Vulnerable Brains
- Lawan Tuchinda (Thailand)
- Moderator:** Varinee Lekprasert (Thailand)
Phuping Akavipat (Thailand)
- 10:00 – 11:00** **Coffee Break and Exhibition**



Saturday, 1 March 2025 : Ballroom 1

- 11:00 – 12:00** **Plenary lecture 3: Brain Health Protocol**
Perioperative Brain Health
- Daniel J. Cole (USA)
Role of Processed EEG in Perioperative Brain Health Protocol
- Tae-Yop Kim (Republic of Korea)
Moderator: Geraldine B. Jose (Philippines)
Pichaya Waitayawinyu (Thailand)
- 12:00 – 12:30** **Sponsor Lecture 1: Neurological Surgery: Perioperative Patient Optimization and Patient Recovery**
- Sergio D. Bergese (USA)
Moderator: Manee Raksakietisak (Thailand)
Sponsored by: Baxter
- 12:30 – 13:30** **Lunch Break**
- 13:30 – 14:00** **Sponsor Lecture 4: The Challenges in the Management and Implementation of Normothermia Guidelines: How to put Guidelines into Practice**
- Varinee Lekprasert (Thailand)
- Suwimon Tangwiwat (Thailand)
- Suraphong Lorsomradee (Thailand)
Sponsored by: Solventum
- 14:00 – 14:40** **Symposium 3: Enhanced Recovery After Neurosurgery**
ERAS for Brain Surgery
- Young Tae Jeon (Republic of Korea)
ERAS for Spine Surgery
- Manee Raksakietisak (Thailand)
Moderator: Chanathee Kitsiripant (Thailand)
Hari Hara Dash (India)
- 14:40 – 15:20** **Coffee Break and Exhibition**
- 15:20 – 16:00** **Symposium 5: Harmony of Awake Craniotomy**
Deep Brain Stimulation and Anesthesiologist Role
- See Jee Jian (Singapore)
Anesthesia for Surgery at the Eloquent Area and Epilepsy Surgery
- Wan Mohd Nazaruddin Wan Hassan (Malaysia)
Moderator: Tanawadee Teeratchanan (Thailand)
Young Tae Jeon (Republic of Korea)

Saturday, 1 March 2025 : Ballroom 2

- 11:00 – 12:00** **Symposium 1: NORA in Neuro-module**
Acute Ischemic Stroke in Anesthesia Perspective
- Phuriphong Songarj (Thailand)
Safe Anesthesia for AVM, Aneurysm Coiling, and Carotid Angioplasty
- Jeffrey J. Pasternak (USA)
Moderator: Minyu Jian (China)
Wichai Ittichaikulthol (Thailand)
- 12:00 12:30** **Sponsor Lecture 2: Review of Dexmedetomidine**
for Airway Management
- Oraluxna Rodanant (Thailand)
Moderator: Varinee Lekprasert (Thailand)
Sponsored by: Fresenius Kabi
- 12:30 – 13:30** **Lunch Break**
- 13:30 – 14:00** **Sponsor Lecture 5: Comprehensive Neuromonitoring**
- Pathomporn Pin-On (Thailand)
Moderator: Varinee Lekprasert (Thailand)
Sponsored by: Mediplex and Mindray
- 14:00 – 14:40** **Symposium 4: A Debate for Cerebral Oximetry in Neurosurgery**
Opinion from the Almost Always
- Yu Lin Wong (Singapore)
Is It Necessary? I Don't Think So
- Anna Margarita Hilvano Corsiga (Philippines)
Moderator: Tanawadee Teeratchanan (Thailand)
Tae-Yop Kim (Republic of Korea)
- 14:40 – 15:20** **Coffee Break and Exhibition**
- 15:20 – 16:00** **Symposium 6: How to Deal with Intracranial Hypertension**
Cerebral Protection and Clinical Practice
- Hari Hara Dash (India)
Recommended Application on Cerebral Aneurysm
- Tumul Chowdhury (Canada)
Moderator: Surunchana Lerdsirisopon (Thailand)
MM Rudi Prihatno (Indonesia)

Saturday, 1 March 2025 : President 1 & 2

10:00 – 11:00

Poster Round 1 (Poster Area)

Judge:

- MM Rudi Prihatno (Indonesia)
- Pathomporn Pin-On (Thailand)
- Jeongmin Hong (Republic of Korea)
- Bhadrinarayan Varadarajan (India)

11:00 – 12:00

Symposium 2: Traumatic Brain Injury, Again and Again

Guildline, Update, and Trends in Adult TBI

- Jin Yong Jung (Republic of Korea)

What is New in Pediatric TBI

- Girija Prasad Rath (India)

Postoperative Care in the Hand of Neurointensivists

- Tanuwong Viarasilpa (Thailand)

Moderator: Poonyanuch Charoenkoop (Thailand)

MN Chidananda Swamy (Brunei)

12:00 – 12:30

Sponsor Lecture 3: Sustainable Anesthesia: Innovations in Gas Management and Emissions Reduction

- Annap Piriypatsom (Thailand)

Moderator: Surunchana Lerdsirisopon (Thailand)

Sponsored by: Draeger and Meditop

12:30 – 13:30

Lunch Break

13:30 – 14:00

Sponsor Lecture 6: The "RIGHT" Balanced Crystalloid Solution for Neurological Surgery

- Suneerat Kongsayreepong (Thailand)

Moderator: Pichaya Waitayawinyu (Thailand)

Sponsored by: Thai-Otsuka

Saturday, 1 March 2025 : President 1 & 2

14:00 – 14:40 ASNACC Oral Presentation 1 : Basic Research Paper

- **A Low Preoperative Platelet-To-White Blood Cell Ratio Is Associated With Postoperative Acute Kidney Injury Following Cerebral Aneurysm Treatment**
Hee-Pyoung Park (Korea)
- **Early Mobilization Recovers Synaptic Plasticity In Septic Mouse Hippocampi Induced By Brain-Derived Neurotrophic Factor**
Takashi Soejima (Japan)
- **Sensitivity To Sevoflurane Is Increased In The Btbr T+Tf/J Mouse Model Of Autism**
Jiho Park (Korea)
- **The Comparison Of Pain Threshold Sensitivity Of Traumatic Brain Injury Rat Models After Administration Of Analgesic Agents**
Raisa Arliza Azhar (Indonesia)

Judge:

- Vorrachai Sae-phua (Thailand)
- Masahiko Kawaguchi (Japan)
- Geraldine B. Jose (Philippines)
- Aung Shwe Saw (Myanmar)

14:40 – 15:20 Poster Round 2 (Poster Area)

Judge:

- Ananchanok Saringcarinkul (Thailand)
- See Jee Jian (Singapore)
- Kenji Yoshitani (Japan)
- Jin Yong Jung (Republic of Korea)

Saturday, 1 March 2025 : President 1 & 2

15:20– 16:00 ASNACC Oral Presentation 2 : Clinical Research Paper

- **Effect Of Magnesium Sulphate On The Total Anaesthetic Requirement And Postoperative Analgesia In Craniotomy Patients: A Prospective Interventional Study**
- Manoj Kumar Giri (India)

- **Correlation Between Non-Invasive And Invasive Icp Measurements In Adults With Traumatic Brain Injury- A Prospective Observational Study**
Mohamed Salih Mohamed Samsudeen (India)

- **Comparison Of Pulmonary Fluid Burden Between Dependent And Non-Dependent Lung During Lateral Position Craniotomy: A Prospective Randomised Study**
- Shiva Priya Kandukuri (India)

- **Comparison Of Propofol Alone Vs. Propofol-Remimazolam Combination During Neurophysiologic Monitoring In Neurosurgery: A Randomized Controlled Trial**
Jiwon Han (Korea)

Judge:

- Manee Raksakietisak (Thailand)
- Sudadi (Indonesia)
- Peter Tan (Malaysia)
- Haekyu Kim (Republic of Korea)



Sunday, 2 March 2025 : Ballroom 1

- 08:00 – 09:00** **Special Discussion 1: How I Do It? (Episode 1)**
Anesthesia for Epilepsy Surgery; From Small to Big Cut
Preoperative Scheme
- Krishnapundha Bunyaratavej (Thailand)
Intraoperative Concern
- Kornkamon Yuwapattanawong (Thailand)
Moderator: Pathomporn Pin-On (Thailand)
Bhadrinarayan Varadarajan (India)
- 09:00 – 10:00** **Symposium 8: Everything About Pediatric Neuroanesthesia**
Minimally Invasive Neurosurgery in Children
- Girija Prasad Rath (India)
Meningocele and Tethered Cord
- Sunisa Sangtongjaraskul (Thailand)
Evidence and Update
- Andrew Davidson (Australia)
Moderator: Narut Ruananukun (Thailand)
Anna Magarita Hilvano Corsiga (Philippines)
- 10:00 – 11:00** **Coffee Break and Exhibition**
- 11:00 – 12:00** **Symposium 11: IONM and Spine**
Anesthetic Remedy for the Safety and Smoothness
- Cattleya Kasemsiri (Thailand)
Common Problems and Troubleshooting
- Kenji Yoshitani (Japan)
Moderator: Jeongmin Hong (Republic of Korea)
Wan Mohd Nazaruddin Wan Hassan (Malaysia)
- 12:00 – 12:30** **HaeKyu Kim Awards Presentation and ASNACC Flag Handover Ceremony**
- 12:30 – 13:30** **Lunch Break**
- 13:30 – 14:40** **Symposium 14: Better Understanding of the Intraoperative Neuromonitoring in Pediatrics**
Application of Processed EEG in Pediatric Neuroanesthesia
- Bong Choon Looi (Singapore)
Pediatrics Neuromonitoring; Limitations and Pitfalls
- Andrew Davidson (Australia)
Moderator: Vorrachai Sae-phua (Thailand)
Chayada Wongwian (Thailand)
- 14:40 – 15:20** **Coffee Break and Exhibition**

Sunday, 2 March 2025 : Ballroom 2

- 08:00 – 09:00** **Symposium 7: Pitfalls in Neuroanesthesia**
Anesthesia Non-technical Skills, Manpower and Equipment
- Geraldine B. Jose (Philippines)
Improving Communication in the OR to Minimizing Complications
- Elizabeth Frost (USA)
Moderator: Daniel J. Cole (USA)
Yong Chow Yen (Malaysia)
- 09:00 – 10:00** **Symposium 9: Analgesic Modality in Neurosurgery**
Pain Medication for the Brain
- Haekyu Kim (Republic of Korea)
Dark side of Opioids in Spine Surgery
- Sergio D. Bergese (USA)
Evidence and Update
- Sudadi (Indonesia)
Moderator: Peter Tan (Malaysia)
Pannawit Benjhawaleemas (Thailand)
- 10:00 - 11:00** **Coffee Break and Exhibition**
- 11:00 – 12:00** **Symposium 12: Path From Critical Care to Quality Discharge**
Post Pandemic Era in Neurocritical Care
- MN Chidananda Swamy (Brunei)
ICP Management and Monitorings
- Lim Jia Yan (Singapore)
Moderator: Soe Wunna Htay (Myanmar)
Yu-Lin Wong (Singapore)
- 12:00 – 13:30** **Lunch Break**
- 13:30 – 14:40** **Special Discussion 3: How I Do It? (Episode 3)**
Neuroanesthesia Recipes From the Experts
A Difficult Airway Patient (3 Case Presentations)
- Pimwan Sookplung (Thailand)
- Tatang Bisri (Indonesia)
- Kenta Furutani (Japan)
Moderator: Chanathee Kitsiripant (Thailand)
Sergio D. Bergese (USA)
- 14:40 – 15:00** **Coffee Break and Exhibition**

Sunday, 2 March 2025 : President 1 & 2

- 08:00 – 09:00** **Special Discussion 2: How I Do It? (Episode 2)**
Perfect Positioning; Case Presentation
Do Prone
- Poonyanuch Charoenkoop (Thailand)
Do Lateral
- I Putu Pramana Suarjaya (Indonesia)
Do Sit
- Apinya Kittiponghansa (Thailand)
Moderator: Sittiporn Deetayart (Thailand)
See Jee Jian (Singapore)
- 09:00 – 10:00** **Symposium 10: One Heart, One Brain**
Post Resuscitation Care
- Jeffrey J. Pasternak (USA)
Cardiovascular Instability During Neuroanesthesia
- Surunchana Lerdsirisopon (Thailand)
Moderator: I Putu Pramana Suarjaya (Indonesia)
Jeongmin Hong (Republic of Korea)
- 10:00 – 11:00** **Coffee Break and Exhibition**
- 11:00 – 12:00** **Symposium 13: Out of the Box Concern in Neuroanesthesia**
Anticoagulant and Antiplatelet Therapy
- Chatree Chai-adisaksopha (Thailand)
Red Cell Transfusion
- Matthew Chan (China)
Moderator: Sunisa Sangtongjaraskul (Thailand)
Jun Heum Yon (Republic of Korea)
- 12:00 – 13:30** **Lunch Break**
- 13:30 – 14:40** **Symposium 15: Fluid Management in Neuroanesthesia**
Crystalloid and Colloid
- Ananchanok Saringcarinkul (Thailand)
Osmotic Therapy
- Sittiporn Deetayart (Thailand)
Moderator: Cherdkiat Karnjanarachata (Thailand)
Chompunoot Pathonsamit (Thailand)
- 14:40 – 15:20** **Coffee Break and Exhibition**

Hosted by



The 8th Congress of Asian Society for
Neuroanesthesia and Critical Care (ASNACC 2025)

In conjunction with

The 101st Annual Scientific Meeting of the Royal College
of Anesthesiologists of Thailand (RCAT 2025)

**EXCELLENT PRACTICE TOWARDS
BETTER OUTCOME IN NEUROANESTHESIA**

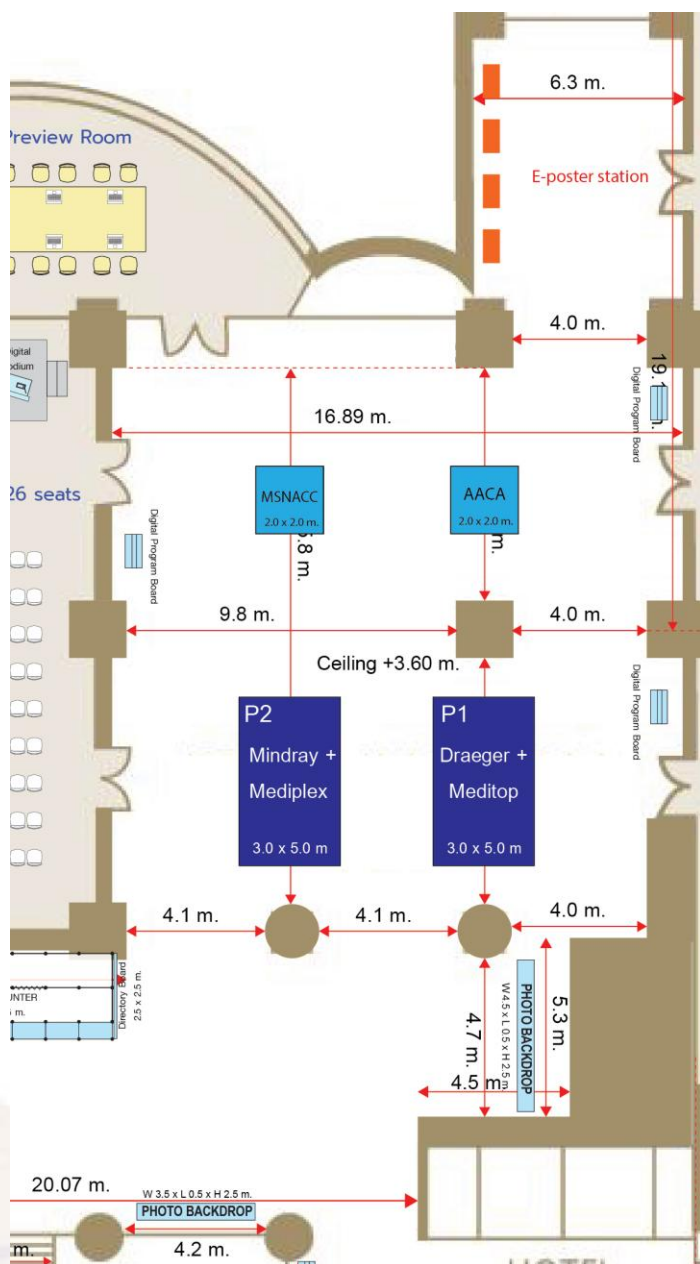
28th February - 2nd March 2025

InterContinental Bangkok Hotel, Thailand

Sponsorship and Exhibition



Exhibition Directory [Ballroom]



Platinum Sponsor

P1

Draeger Medical (Thailand) Ltd.
Meditop Co., Ltd.

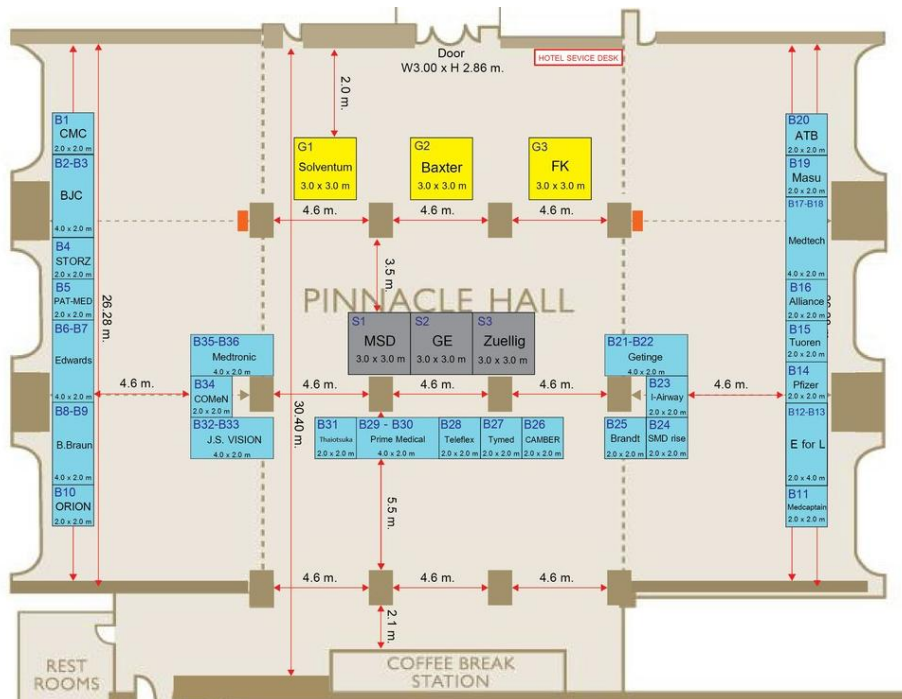
P2

Mediplex (Thailand)
Mindray Medical (Thailand) Ltd.

Next Conference Booth

- ASNACC 2027, Malaysia
- The 17th Asian Australasian Congress of Anaesthesiologists Thailand 2026 (AACA 2026)

Exhibition Directory [Pinnacle]



Gold Sponsor

- G1 Solventum (Thailand)
- G2 Baxter International (Thailand) Co., Ltd.
- G3 Fresenius Kabi

Silver Sponsor

- S1 MSD (Thailand) Ltd.
- S2 GE Medical Systems (Thailand) Ltd.
- S3 Zuellig Pharma

Exhibition Booth

- B1 CMC Biotech Co., Ltd.
- B2 - B3 BJH Medical Co., Ltd.
- B4 KARL STORZ SE & Co. KG
- B5 PRUDENTIAL AMPRI (THAILAND) CO., LTD.
- B6 - B7 Edwards Lifesciences (Thailand) Co., Ltd.
- B8 - B9 B. Braun (Thailand) Ltd.
- B10 Orion Pharma Thai Co., Ltd.
- B11 Medcaptain Medical Technology Co., Ltd.
- B12 - B13 E for L Aim Public Company Limited
- B14 Pfizer (Thailand) Limited
- B15 Touren Medical (Thailand) Co., Ltd.
- B16 Alliance Pharma Co., Ltd.
- B17 - B18 Medtech Medical (Thailand) Co., Ltd.
- B19 MASU CO., LTD.
- B20 American Taiwan Biopharm Co., Ltd.
- B21 - B22 Getinge (Thailand) Co., Ltd.
- B23 I-AIRWAY
- B24 SMD rise Public Co., Ltd.
- B25 BRANDT BIOTECH CO., LTD.
- B26 CAMBER Pharmaceutical CO., LTD.
- B27 Tymed Asia co., ltd.
- B28 Teleflex Medical (Thailand) Ltd.
- B29 - B30 Prime Medical Co., Ltd.
- B31 Thai Otsuka Pharmaceutical Co., Ltd.
- B32 - B33 J.S. VISION LTD.
- B34 Shenzhen Comen Medical Instruments Co., Ltd.
- B35 - B26 Medtronic (Thailand) Limited

Sponsorship Acknowledgement

PLATINUM

healthcare within reach

GOLD

SILVER

INVENTING FOR LIFE

making healthcare more accessible

INDUSTRY SYMPOSIUM

EXHIBITION BOOTH

SHARING EXPERTISE

A Subsidiary of HETERO

Distributed by
CNC BIOTECH CO., LTD.

LARYNGOSCOPE VIDEO

KARL STORZ - ENDOSCOPE

MEDTECH MEDICAL (THAILAND) CO., LTD.

Building well-being

Empowering the future of healthcare

SUPPORTED BY

THAILAND CONVENTION
& EXHIBITION BUREAU

Baxter

Suprane (DESFLURANE)

Suprane in an Aluminium bottle An Evolution in Packaging



Abbreviated Prescribing Information SUPRANE (Desflurane, USP)

Preparation: Suprane (desflurane, USP) is a colourless, volatile liquid for inhalation containing 100% desflurane. **Indications:** Inhalation agent for induction and/or maintenance of anaesthesia in adults, maintenance of anaesthesia in paediatrics. **Dosage and administration:** See PI for full details. Administration by inhalation using vapouriser specifically designed for use with desflurane and dose individualised based on patient's response. MAC decreases with increasing age. **Induction:** 4-11% usually produces surgical anaesthesia in 2-4 minutes (not paediatrics). **Maintenance:** 2-6% with concomitant nitrous oxide or 2.5-8.5% in oxygen or enriched air. Concentrations of 1-4% have been used successfully in chronic renal/hepatic impairment and renal transplant. **Side effects:** Common (<1, 1.00-~1/10) Pharyngitis, breath holding, Headache, conjunctivitis, nodal arrhythmia, bradycardia, tachycardia, hypertension, apnea, cough, laryngospasm, salivary hypersecretion, increased creatinine phosphokinase, ECG abnormal. **Warning and Precautions:** Only to be administered by people trained in administration of general anaesthesia with appropriate emergency measures available. Monitor Blood pressure and heart rate as part of evaluation of the depth of anaesthesia. Caution in use with LMA or facemask in children under 6 years. May trigger malignant hyperthermia. Inhaled anaesthetics have been associated with increases in serum potassium. May increase CSF pressure. Carbon dioxide absorbers should not dry out. Appropriate analgesia should be administered at the end of surgery or early in PACU. **Contra-Indications:** Not to be used if general anaesthesia is contra-indicated, known hypersensitivity to halogenated agents or known susceptibility to malignant hyperthermia. Contraindicated for use as an inhalation induction agent in paediatric. **Interactions:** MAC reduced by concomitant N₂O administration. Neuromuscular blocks are potentiated by desflurane. Concomitant administration of opioids or benzodiazepines show a marked reduction in MAC. **Overdose:** Discontinue desflurane, establish clear airway and initiate assisted/controlled ventilation with pure oxygen. Support and maintain adequate haemodynamics. **Legal category:** POM **Date of Preparation:** September 2021

Baxter Healthcare (Thailand) Co., Ltd.
11th Floor, Thanapoom Tower, 1550 New Petchburi Road, Makasan,
Rajthev, Bangkok 10400 Thailand. Tel 02-667-0505, Fax 02-662-7770

Baxter

โปรดอ่านรายละเอียดเพิ่มเติมในเอกสารกำกับยา
ใบอนุญาตโฆษณาเลขที่ บ.ร. 1188/2564

ENVIRONMENTALLY CONSCIOUS CHOICE

In Healthcare, anaesthesia constitutes one part of the environmental impact through greenhouse gas emissions and further waste. TIVA, could help to reduce this impact through

1

Lower carbon footprint than inhalational anaesthesia.

2

Low environmental risk, rated with a score of 4 on a scale of 10.

3

During routine clinical practice appropriate waste management avoids wastewater contamination.

FRESENIUS KABI COMMITMENT

Fresenius Kabi manufactures anesthesia according to our high-quality standards and environmental sustainability has been our priority for many years.

Sustainability certifications

- Issue of certificates according to sustainability and social responsibility standards.
- Emulsion components from natural origin are sourced from certified suppliers.

Wastewater management

- Water residues from the emulsion manufacturing are separately collected and appropriately treated.

Green manufacturing technology

- The modern production plants established green manufacturing processes and are operating on carbon neutral energy.
- Manufacturing sites in Europe: Graz (Austria) and Uppsala (Sweden).



The 8th Congress of Asian Society for Neuroanesthesia and Critical Care (ASNACC 2025)
In collaboration with:
The 101st Annual Scientific Meeting of the Royal College of Anaesthetists of Thailand (RCAT 2025)

**EXCELLENT PRACTICE TOWARDS
BETTER OUTCOME IN NEUROANESTHESIA**

28th February - 2nd March 2025
InterContinental Bangkok Hotel, Thailand

Hosted by



**Focusing on sustainable
anesthesia care for
a resilient tomorrow**



Carestation™ 600 Series
Anesthesia Delivery System



GE HealthCare



bridion[®] SUGAMMADEX

ถูกบรรจุเข้าในบัญชียาหลักแห่งชาติ บัญชี ง.
(วินิจฉัยและสั่งใช้ยา โดยผู้ชำนาญเฉพาะโรค และ ใช้ยาตามข้อบ่งใช้ และเงื่อนไขที่กำหนด และ มีระบบกำกับประเมินและตรวจสอบการใช้ยา)

ครอบคลุมทุกวิธีการเบิกจ่าย*

เพื่อใช้แก้ฤทธิ์ยาหย้อนกลับมาเมื่อในผู้ป่วยที่มีความเสี่ยงสูงที่ได้รับยา
Rocuronium เป็นยาหย้อนกลับมาเมื่อ

ผู้มีโรคประจำตัว



**โรคหัวใจ
และหลอดเลือด**



**โรกระบบ
ทางเดินหายใจ**



**โรกระบบประสาท
และกล้ามเนื้อ**



**ผู้ป่วยที่มีภาวะ
ไตวาย**



**ผู้ป่วยที่มีภาวะ
ตับวาย**



**การผ่าตัดที่มีระยะเวลา
>3 ชั่วโมง หรือ ที่คาดการณ์
เวลาผ่าตัดเสร็จได้ยาก**

CICV

**ผู้ป่วยกึ่งภาวะ cannot
intubate and cannot
ventilate (CICV)**



**ใช้แก้ฤทธิ์ยาหย้อนกลับมาเมื่อ
สำหรับผู้ป่วย COVID-19
ที่ใส่ท่อช่วยหายใจในการนำ
สลับแบบรวดเร็ว**

ชื่อยา: บริดิออน 10 มิลลิกรัม
Product summary including safety information of Sugammadex

Therapeutic Indications: Reversal of neuromuscular blockade induced by rocuronium or vecuronium in patients 2 years of age and older. Prevalence and severity of adverse effects: Sugammadex should only be administered by, or under the supervision of, an anaesthetist. The use of an appropriate neuromuscular monitoring technique is recommended to monitor the recovery of neuromuscular blockade. The recommended dose of sugammadex depends on the level of neuromuscular blockade to be reversed. (Based on rocuronium: For mild and moderate muscle involvement (creatinine clearance > 30 and < 30 ml/min), the dose recommendations are the same as for patients with renal impairment. The use of sugammadex in patients with severe renal impairment (including patients requiring dialysis) (CrCl < 30 ml/min) is not recommended. Safety profile: Contraindications: Sugammadex should not be administered to patients with known hypersensitivity to sugammadex or to any of the excipients. Special warnings and precautions for use: Monitor respiratory function during recovery. Ventilatory support is mandatory for patients until adequate spontaneous respiration is restored following reversal of neuromuscular blockade. Should neuromuscular blockade occur following extubation, adequate ventilation should be provided. Effect on haemostasis: In a study in volunteers, doses of 4 mg/kg and 16 mg/kg of sugammadex resulted in maximum mean prolongations of aPTT by 17 and 22% respectively and of PT(INR) by 11 and 27% respectively. These limited mean aPTT and PT(INR) prolongations were of short duration (< 30 minutes). Based on the clinical data-base (N=2019) there was no clinically relevant effect of sugammadex alone or in combination with anticoagulants on the incidence of peri- or post-operative bleeding complications. In a specific study in 1154 surgical patients who were concomitantly treated with an anticoagulant, small and transient increases were observed in aPTT and PT(INR) associated with sugammadex 4 mg/kg, which did not translate into an increased bleeding risk with sugammadex compared with usual treatment. In *in vitro* experiments additional aPTT and PT prolongation was noted for sugammadex in combination with Vitamin K antagonists, unfractionated heparin, low molecular weight heparins, mucronaban and dabigatran. Considering the transient nature of the limited prolongation of aPTT and PT caused by sugammadex alone or in combination with anticoagulants, it is unlikely that this will be clinically significant. In patients with haemorrhagic disorders and in patients using anticoagulants who receive a dose of 16 mg/kg sugammadex, an increased risk of bleeding. Since bleeding risk has not been studied systematically at higher doses than the recommended dose of 4 mg/kg, coagulation parameters should be carefully monitored according to routine clinical practice in patients with haemorrhagic disorders and in patients using anticoagulants who receive a dose of 16 mg/kg sugammadex. Recurrence of neuromuscular blockade: The use of lower than recommended doses may lead to an increased risk of recurrence of neuromuscular blockade after initial reversal and is not recommended. Waiting times for re-administration with neuromuscular blocking agents after reversal with sugammadex: When rocuronium 12 mg/kg is administered within 30 minutes after reversal with sugammadex, the onset of neuromuscular blockade may be delayed up to approximately 4 minutes and the duration of neuromuscular blockade may be shortened up to approximately 15 minutes. Repeat reversal: Sugammadex is not recommended for use in patients with severe renal impairment, including those requiring dialysis. Interactions due to the binding effect of rocuronium or vecuronium: When medicinal products which potentiate neuromuscular blockade are used in the post-operative period special attention should be paid to the possibility of recurrence of neuromuscular blockade. Light anaesthesia: If neuromuscular blockade is reversed, while anaesthesia is continued, additional doses of anaesthetic and/or opioid should be given as clinically indicated. Marked bradycardia: Patients should be closely monitored for haemodynamic changes during and after reversal of neuromuscular blockade. Treatment with anti-cholinergic agents such as atropine should be administered if clinically significant bradycardia is observed. Apnoea: Apnoea is not metabolized nor excreted by the liver; therefore dedicated studies in patients with hepatic impairment have not been conducted. Use for reversal of neuromuscular blocking agents other than rocuronium or vecuronium: Sugammadex should be used to reverse block induced by nonsteroidal neuromuscular blocking agents such as succinylcholine or benzoylcholinium compounds. Sugammadex should not be used for reversal of neuromuscular blockade induced by steroidal neuromuscular blocking agents other than rocuronium or vecuronium, since there are no efficacy and safety data for this indication. Limited data are available for reversal of pancuronium induced blockade, but in advised not to use sugammadex in this situation. Use in Intensive Care Unit (ICU): Sugammadex has not been investigated in patients requiring rocuronium or vecuronium in the ICU setting. Delayed recovery: Conditions associated with prolonged circulation time such as cardiovascular disease, old age (see section 4.2 for the time to recovery in elderly), or admission status (e.g., severe hepatic impairment) may be associated with longer recovery times. Drug hypersensitivity: Clinicians should be prepared for the possibility of drug hypersensitivity reactions (including anaphylactic reactions) and take the necessary precautions. Patients on a controlled sodium diet: Patients on a controlled sodium diet: If more than 2.4 ml solution needs to be administered, this should be taken into consideration by patients on a controlled sodium diet. Based on data, no clinically significant pharmacodynamic interaction with other medicinal products is expected, with exception of the following: For formoterol and fentanyl displacement interactions could not be excluded (no clinically relevant capturing interactions are expected). For hormonal contraceptives a clinically relevant capturing interaction could not be excluded (no displacement interactions are expected). Physical incooperability has been reported with vesicants, oxidant and irritants. Preparation and handling: For sugammadex no clinical data on exposed pregnancies are available. Caution should be exercised when administering sugammadex to pregnant women. It is unknown whether sugammadex is excreted in human breast milk. Caution should be exercised when administering sugammadex to a breast-feeding woman. Undesirable effects: Subject Exposures Receiving Anaesthesia and/or Neuromuscular Blocking Agent in Pooled Phase III Placebo-Controlled Studies with Adverse Reactions to Placebo: Adverse combinations of anaesthesia including but not limited to: hypotension, tachycardia, coughing, mild bronchospasm, nasal reaction during surgery, coughing during the anaesthetic procedure or control breath (spontaneous breath of patient), anaesthetic complications, indicative of the restoration of neuromuscular function, include movement of a limb or the body or coughing during the anaesthetic procedure or during surgery, pruritus, or swelling on the endotracheal tube. Preclinical complications include coughing, tachycardia, bradycardia, movement, and increase in heart rate. Preclinical hypersensitivity information to healthy volunteers: A randomised, double-blind study compared the incidence of drug hypersensitivity reactions in healthy volunteers (0.04 µg up to 3.0 mg/kg dose of placebo (N=7), sugammadex 4 mg/kg (N=15) or sugammadex 16 mg/kg (N=14)). Reports of suspected hypersensitivity were infrequent but were attributed to a limited number. The incidence of allergic hypersensitivity was 1.3%, 0.6% and 0.5% in the placebo, sugammadex 4 mg/kg and sugammadex 16 mg/kg groups, respectively. There was no report of anaphylaxis after placebo or sugammadex 4 mg/kg. There was a single case of anaphylaxis after the first dose of sugammadex 16 mg/kg (incidence 0.7%). There was no evidence of increased frequency of hypersensitivity with repeat dosing of sugammadex. In a previous study of similar design, there were three anaphylactic cases of placebo (0.04 µg), after sugammadex 16 mg/kg (incidence 2.0%). The most common adverse reaction in pooled healthy volunteers was dyspnoea (10%). Overall, in a human tolerance study sugammadex was administered in doses up to 36 mg/kg. No dose-related adverse events nor serious adverse events were reported. Storage: Store at 2 to 8 °C. Do not freeze. Protect from light. The vial should be used within 5 days. After first opening and dilution chemical and physical in-use stability has been demonstrated for 48 hours at 2 to 8 °C.

หมายเลข: C205-88038-10-3013032-82CA000024175-11, Approval date: 19 Dec-22

มีข้อมูลรายละเอียดเพิ่มเติมเกี่ยวกับยาและข้อมูลอื่น ๆ โปรดดูที่เว็บไซต์ของเราระหว่างการให้บริการ

*ข้อมูลนี้เป็นการสรุปย่อของข้อมูลที่ได้รับจากเอกสารข้อมูลยา (Smc) ของยา Bridion ในประเทศไทย ซึ่งอาจแตกต่างกันไปจากข้อมูลฉบับเต็มของเอกสารข้อมูลยา (Smc) ของยา Bridion ในประเทศอื่น ๆ



Before prescribing, please read full product information. To request product information, report adverse events, or report product defect, please contact MSD at address on the following details or dpc_thailand@msd.com
MSD (Thailand) Limited, Bangkok, Thailand
999/9 The Offices at Centralworld, Floor 37th, Unit OFM 37/37-3712, Rama I Road, Pathumwan Sub-district, Pathumwan District, Bangkok 10330

เลขที่ใบอนุญาตผลิตยา: ส.ร. 38012567
11-3281-00303-12/02/24



A SAFETY COMMITMENT TO ANESTHESIA^{3,4,5}

AbbVie's Sevoflurane provides you with the advantages of:

- ✓ Water Stabilized Formula¹
- ✓ Polyethyleneaphalate (PEN) Bottle^{1,6}
- ✓ Quik Fil Closed-Filling System²

SEVORANE[®] Abbreviated Prescribing Information

Active Ingredient: Sevoflurane Liquid 250ml.

Indications: Sevoflurane may be used for induction and maintenance of general anesthesia in adult and pediatric patients for inpatient and outpatient surgery.

Dosage and method of use

Induction: Dosage should be individualized and titrated to the desired effect according to the patient's age and clinical status. Inspired concentrations of up to 8% sevoflurane usually produces surgical anesthesia in less than two minutes in both adults and children.

Maintenance: Surgical levels of anesthesia may be sustained with concentrations of 0.5-3% sevoflurane with or without the concomitant use of nitrous oxide.

Contraindications: Patients with known sensitivity to sevoflurane or to other halogenated inhalational anesthetics; with known or suspected genetic susceptibility to malignant hyperthermia.

Warnings and Precautions: Sevoflurane may cause respiratory depression, which may be augmented by narcotic premedication or other agents causing respiratory depression. Hypotension and respiratory depression increase as anesthesia is deepened. Caution should be exercised when administering sevoflurane to susceptible patients as OI prolongation, patients with mitochondrial disorders, patients with underlying hepatic conditions or under treatment with drugs known to cause hepatic dysfunction, patients at risk for elevations of ICP when administer with ICP-reducing maneuver such as hyperventilation, patients who may be at risk for seizures, sevoflurane may trigger a skeletal muscle hypermetabolic state leading to high oxygen demand and the clinical syndrome known as malignant hyperthermia. Use in pregnancy only if clearly needed and avoid breastfeeding for 48 hours after administration. Patient should be observed when using sevoflurane during obstetric anesthesia due to sevoflurane has relaxant effects on the uterus with the potential risk for uterine bleeding. Patients should be advised that performance of activities requiring mental alertness, such as operating a motor vehicle or hazardous machinery, may be impaired for some time after general anesthesia.

Adverse events: The most commonly including in adult patients: hypotension, nausea and vomiting; In elderly patients: bradycardia, hypotension and nausea; In pediatric patients: agitation, cough, vomiting and nausea.

Drug Interactions: Use of sevoflurane with isoprenaline, adrenaline and noradrenaline, there has potential risk of ventricular arrhythmia. Sevoflurane may lead to marked hypotension in patients treated with calcium antagonists, in particular dihydropyridine derivatives. Benzodiazepines and opioids are expected to decrease the MAC of sevoflurane.

MAC values for Sevoflurane decrease when administer with nitrous oxide. Isoniazid and alcohol may increase the metabolism of sevoflurane and lead to significant increases in plasma fluoride concentration. Sevoflurane affects both the intensity and duration of neuromuscular blockade by non-depolarizing muscle relaxants.

Overdosage: In the event of apparent overdosage the following action should be taken: discontinue administration of sevoflurane, maintain a patent airway, initiate assisted or controlled ventilation with oxygen and maintain adequate cardiovascular function.

Storage: Store below 30°C. Keep cap tightly closed.

References

1. SEVORANE Thai Package Insert
2. Coakley RW. Anesthetic vaporizer filling system. U.S. Patent 5,505,236 (patent expired); USA: Abbott Laboratories, 1996.
3. Kharsach ED, Subbarao GN, Cronack KR, Stephens DA, Saltarelli MD. Sevoflurane formulation water content influences degradation by Lewis acids in vaporizers. *Anesth Analg*. 2009 Jun;108(6):1796-802.
4. Michel F, Constantin JM. Sevoflurane inside and outside the operating room. *Expert Opin Pharmacother*. 2009 Apr;10(5):661-73.
5. Veraghese S, Bacher HP. Validation of Waste Anesthetic Gas Exposure Limits When Using a Closed Vaporizer Filling System: A Laboratory-Based Study. *Adv Ther*. 2020 Jan;37(1):450-6.
6. Data on File [Compatibility of Sevoflurane], AbbVie.

For Healthcare Professionals only

ทุกข้อมูลบนบรรจุภัณฑ์นี้จัดทำขึ้นโดยอิงตามข้อมูลของผลิตภัณฑ์และข้อมูลทางวิทยาศาสตร์ที่เกี่ยวข้องกับผลิตภัณฑ์ที่ระบุไว้เท่านั้น ข้อมูลทั้งหมดนี้เป็นเอกสารที่เผยแพร่เพื่อวัตถุประสงค์ทางการแพทย์เท่านั้น และอาจมีการเปลี่ยนแปลงโดยไม่แจ้งให้ทราบล่วงหน้า

เลขทะเบียนยา 1C 3616 (N)

สารควบคุมพิเศษ ใช้เฉพาะสถานพยาบาล

ใบอนุญาตโฆษณาเลขที่ สศ. 2-3979/2568

โปรดอ่านรายละเอียดเพิ่มเติมในเอกสารอ้างอิงที่มีอยู่พร้อมและเอกสารกำกับยา

ความถูกต้องของข้อมูลนี้เป็นความรับผิดชอบของผู้โฆษณา มีให้ขงบริการแก่สมาชิกงานคณะกรรมการอาหารและยา



**EXCELLENT PRACTICE TOWARDS
BETTER OUTCOME IN NEUROANESTHESIA**

