



Anastasia Abena Ohene

Family and background

34 yr old Anaesthesia Resident at Komfo Anokye Teaching Hospital(KATH), in Ghana.

Ghanaian, Married with 2kids(4yr old girl and 1yr old boy)

Education

Secondary school in Capecoast, Ghana.

BSc. Human Biology, followed by MBChB. at the Kwame Nkrumah University of Science and Technology in June 2010 Kumasi, Ghana.

After 2yrs of Housemanship followed by a year Mandatory service as a medical officer I enrolled in Anaesthesia Residency in September 2013.

Residency programmes

TWO independent programs

National: Ghana College of Physicians and Surgeons

International: West African College of Surgeons.

Both offer a 3 yr program leading to a Membership in Anaesthesia followed by an optional 2yr program leading to a Fellowship in Anaesthesia (Anaesthesia in General or Subspecialties)

WACS also offers a 1yr Diploma in Anes.

Currently post Part I(old system) of the WACS

Post Membership in GCPS

KATH

- Komfo Anokye Teaching Hospital (KATH) is located in Kumasi, the Regional Capital of Ashanti Region with a total projected population of 4,780,380 (2000).
- The 1200-bed Tertiary hospital offers services to all the areas that share boundaries with Ashanti Region and is the main referral point for the Northern half of Ghana.



NORTH ATLANTIC OCEAN

Anaesthesia at KATH

Relatively young and small department

- Physicians 19
(6 specialists/fellows 10 residents at various stages of training 3 not yet in training)
- CR(N)A 52
- Nurses 80
- Health Care Assistants 15
- Pharmacist 1
- Pharmacy Technicians 2

SECTIONS/UNITS

- **Main Theatre Anaesthesia & Recovery Ward**
- **NAKSA Theatre Anaesthesia & Recovery Ward**
- **Polyclinic Theatre Anaesthesia & Recovery Ward**
- **Accident and Emergency Anaesthesia & Recovery Ward**
- **Eye Center Anaesthesia & Recovery ward**
- **Obs Special**
- **Intensive Care Unit (Main/ a&e)**
- **2013 to 2016 Average of 45 to 56 cases/day**

Typical Day

Pre Anaesthetic Clinic

Perioperative

ICU

Machines and Equipments

Common medications

Induction IV: Propofol

Thiopentone

Ketamine

* Midazolam

Inhalational: Halothane

Sevoflurane

Maintenance: mostly inhalational with isoflurane

**Ketamine, Propofol

Analgesics OPIOID/like: Morphine(inj/oral)

Fentanyl Inj

Tramadol oral/inj

NSAIDS :diclofenac inj/oral/supp

Ibuprofen oral

Others: Acetaminophen/tylenol(inj/oral/supp)

Analgin/ metamizole (inj)

LA agents

Lidocaine/xylocaine

Plain and Heavy Bupivacaine

Additives: Adrenaline, opioids, Dexamethasone.

Common Regional anaes/Blocks

LL: Spinal, Epidural, *Sciatic and *femoral nerve blocks(Saphenous)

UL: *Brachial plexus blocks(interscalene, supra and infraclavicular and axillary)

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under us guidance GRACE

What's different/GAPS

Availability of Equipments, Medications, Medical
Gases

Patient cultural/literacy characteristics

Hospital record keeping

Cost, billing and Affordability

Objectives

Learn and observe what is different and standard here at KUMC

Which practical ideas may be applicable to KATH in order to improve patient care

Strength our Relationship

GRATITUDE

- Prof Kovac
- Beautiful OIP personel
- New friends Kansas City, Peru...



