

Overview of the 11th POQI Conference on Best Practices in Perioperative Medicine

The 11th POQI conference is focused on updating our prior recommendations in three key areas – Goal Directed Hemodynamic Management, Perioperative Blood Pressure, and Fluid Therapy in Perioperative Medicine. We are assembling an international panel of experts (n=15) in perioperative medicine who will review our previously published recommendations and provide updates based on new literature published in each field. On day one of the meeting these three groups will convene to address these content areas (GDT, BP and Fluids) in a closed-door session. They will utilize a similar format and methodology that we have employed previously: an iterative process of debate and consensus building using modified Delphi principles (www.poqi.org). Specifically, recommendations will be evidence-based and consensus-driven. Each group will be responsible for defining the specific recommendations that will be addressed for each topic and for presenting key evidence to the larger (plenary) group on day two.

Day 2 – Plenary Review of Updated Best Practice Recommendations

On day 2 (Wednesday 5th July) a large plenary group (n=150) of practising perioperative clinicians will assemble at the Institute of Education in order to "pressure test" the recommendations of the small group of the previous day. The format will be open debate, and each set of recommendations will be discussed in a separate session (see agenda below). We will also stream this day live online via TopMedTalk and will use Slido technology in order to obtain input and comment from around the world. The goal is for each of these recommendations to be vetted for both credibility and acceptability to the real-world perioperative community. The final session of the day includes a voting round (via Slido) whereby we will seek consensus on the validity and acceptability of each recommendation in the eyes of the perioperative community. Every **inroom** participant who comments will be included as part of a group authorship team on the publications as they are submitted for conventional publication. This authorship privilege is only available to in person attendees. CME/CPD credits (6 hours) will be provided for this activity, and there is a charge to attend in order to cover the costs of providing food, technology, the venue and the CPD.

Objectives of 11th POQI Conference – Best Practices In Perioperative Medicine

The specific objectives for this conference are:

To update the previously published consensus statements on Best Practices in Perioperative Medicine
 Goal Directed Hemodynamic Management, Perioperative Blood Pressure and Fluid Therapy in Perioperative Medicine.

The features of this methodology include:

- Pre-conference evidence abstraction
- Identification of previous recommendations and their ongoing accuracy or need for update
- Assessment of the available evidence
- Iterative refining of these recommendations
- Draft summary statements and updated recommendations for each content area
- External (local + global) peer review of statements in an innovative "pressure test" environment

The primary focus of this meeting will be on providing updated recommendations for clinical practice and future research priorities.

Agenda for 11th POQI Conference Day 2

11th POQI Conference – Day 2: Validation Pressure Test
Wednesday 5 July 2023 - Elvin Hall, Institute of Education
08:30 - 09.00 Registration
09:10 - 10:30 Session 1.1 Perioperative GDT
10:30 - 11:00 Mid-morning break
11:00 - 12:30 Session 1.2 Blood Pressure
12:30 – 13:30 Lunch break
13:30 – 15:00 Session 1.3 Fluids
15:00 – 15:15 Afternoon break
15:15-17:00 Session 1.4 Voting – Groups 1, 2, 3
17:00 - 17:10 Close of Day

POQI XI FAQs

1. Why would I attend?

Traditional "expert" consensus documents are only reviewed by a small number of reviewers prior to publication. These recommendations will be "pressure tested" by a large group of practising "real world" clinicians with a self-selected interest in perioperative best practices. By attending this meeting, you will be actively taking part in the process of synthesising the evidence and debating the recommendations of the group from day one. You will be recognized by name in a list of "POQI XI Investigators" in the journal submission for the article that will be prepared from the conference. You will have a vote in the final consensus recommendations for each topic (GDT, BP and fluids).

2. What is the cost?

There is a charge of £300 to attend the meeting. This covers the cost of food, the venue, the streaming technology and the CPD application. It is the same as a one-day ticket to EBPOM.

3. How do I register?

By clicking on this

4. How can I learn about the previous POQI Conferences?

By visiting www.thepoqi.org where all our previous work is available, full text, free of charge.

About PeriOperative Quality Initiative (POQI)

POQI began in 2014 in an effort to improve the quality of care delivered to patients undergoing surgery of all types and complexity. We follow a modified Delphi process to evaluate the best published evidence as we consider important questions in Perioperative Medicine and develop practice advisory and guideline documents.

In order to address these issues, POQI has adopted an evidence-based methodology to develop consensus-based recommendations for managing patients undergoing surgery. The key goal of the POQI process is to provide evidence-based guidelines for the management of surgical patients. As a result, we have initiated a series of conferences under the auspices of the PeriOperative Quality Initiative.

POQI goals are to establish an evidence-based appraisal and set of consensus recommendations to standardize care and direct further research. The results of our previous consensus conferences are available on-line at www.thepoqi.org From time to time these recommendations require updating – and this is the rationale behind POQI XI – Best Practices in Perioperative Medicine.

To learn more about POQI, please visit the POQI website www.thepoqi.org