



# Turkish Journal of Anaesthesiology & Reanimation

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## **Comparison of Efficacy of Premedication between Dexmedetomidine and Midazolam Intranasal for the Prevention of Emergence Delirium in Children Undergoing Ophthalmic Surgery**

*Andi Ade Wijaya Ramlan, Irwan Mahri, Riyadh Firdaus,  
Ardhie Sugiarto; Jakarta, Indonesia*  
Page 439

## **Thrombotic Events Related to Extracorporeal Membrane Oxygenation in COVID-19- Associated Severe Acute Respiratory Distress Syndrome**


*Verda Tuna, Perihan Ergin Özcan, Emre Çeliksoy,  
Özlem Polat, İlkay Anaklı, Günseli Orhun, Gülçin Alay,  
Figen Esen; İstanbul, Turkey*  
Page 480

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# Turkish Journal of Anaesthesiology & Reanimation


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# Turkish Journal of Anaesthesiology & Reanimation

## Aims and Scope

The Turkish Journal of Anaesthesiology and Reanimation (Turk J Anaesthesiol Reanim) is the open access, online-only, and scientific publication organ of the Turkish Society of Anaesthesiology and Reanimation. The journal is published in accordance with independent, unbiased, and double-blind peer review principles. The journal is published bimonthly, in February, April, June, August, October, and December.

The publication language of the Turkish Journal of Anaesthesiology and Reanimation is English, and the journal requires UK spelling. When preparing their manuscript, authors should use British spellings throughout. However, the journal welcomes manuscripts both in Turkish and English for evaluation; however authors of articles written in Turkish are required to provide the journal with the English version of their accepted article prior to publication.

The aim of the journal is to contribute to the literature and field of anaesthesiology by publishing clinical and experimental research articles, case reports, letters to the editor, study protocols, and scientific conference proceedings that are prepared in accordance with the ethical guidelines in the fields of anaesthesiology, intensive care, and pain therapy. As of 2022, Turkish Journal of Anaesthesiology and Reanimation will not give as much priority to case reports and letters to the editor in the evaluation and publication process. Before submitting your manuscript, please take this into account.

The target audience of the journal includes specialists and medical professionals working in the fields of anaesthesiology, intensive care, and pain therapy.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), Council of Science Editors (CSE), Committee on Publication Ethics (COPE), European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

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**Abstract:** An abstract should be submitted with all submissions except for Letters to the Editor. The abstract of Original Articles should be structured with subheadings (Objective, Methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

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Type of manuscript	Word limit (Main text only)	Abstract word limit	Reference limit	Table limit	Figure limit
Original Article	3500	250 (Structured)	30	6	7 or total of 15 images
Review Article	5000	250	50	6	10 or total of 20 images
Case Report	1000	200	15	No tables	10 or total of 20 images
Images in Clinical Practices	N/A	N/A	N/A	N/A	N/A
Letter to the Editor	500	N/A	5	No tables	No media



should guide future studies. The main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the limitations for Review Articles.

**Case Reports:** There is limited space for case reports in the journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include Introduction, Case Presentation, Discussion, and Conclusion sub-headings. Please check Table 1 for the limitations for Case Reports.

**Letters to the Editor:** This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. Articles on subjects within the scope of the journal that might attract the readers' attention, particularly educative cases, may also be submitted in the form of a "Letter to the Editor." Readers can also present their comments on the published manuscripts in the form of a "Letter to the Editor." Abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should be unstructured. The manuscript that is being commented on must be properly cited within this manuscript.

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**Study Protocols:** The Turkish Journal of Anaesthesiology and Reanimation welcomes study protocols to improve the transparency of research and inform the scholarly community about the trials that are underway. Publication decision of study protocols will be upon editorial decision. Study protocols for pilot or feasibility studies are not generally taken into consideration.

Study protocol articles should follow SPIRIT guidelines, providing a detailed account of the hypothesis, rationale, and methodology of the study. All study protocols must provide an Ethics Committee Approval. All protocols for clinical trials requires trial registration number and the date of registration.

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Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in

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All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

When a drug, product, hardware, or software program is mentioned within the main text, product information, including the name of the product, the producer of the product, and city and the country of the company (including the state if in USA), should be provided in parentheses in the following format: "Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)"

All references, tables, and figures should be referred to within the main text, and they should be numbered consecutively in the order they are referred to within the main text.

Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

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**Book Section:** Sherry S. Detection of thrombi. In: Strauss HE, Pitt B, James AE, editors. *Cardiovascular Medicine*. St Louis: Mosby; 1974. pp.273-85.

**Books with a Single Author:** Cohn PF. *Silent myocardial ischemia and infarction*. 3rd ed. New York: Marcel Dekker; 1993.

**Editor(s) as Author:** Norman IJ, Redfern SJ, editors. *Mental health care for elderly people*. New York: Churchill Livingstone; 1996.

**Conference Proceedings:** Bengisson S, Sothem BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics*; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. pp.1561-5.

**Scientific or Technical Report:** Smith P, Golladay K. Payment for durable medical equipment billed during skilled nursing facility stays. Final report. Dallas (TX) Dept. of Health and Human Services (US). Office of Evaluation and Inspections; 1994 Oct. Report No: HHSIGOE 169200860.

**Thesis:** Kaplan SI. Post-hospital home health care: the elderly access and utilization (dissertation). St. Louis (MO): Washington Univ. 1995.

**Manuscripts Accepted for Publication, Not Published Yet:** Leshner AI. Molecular mechanisms of cocaine addiction. *N Engl J Med* In press 1997.

**Epub Ahead of Print Articles:** Ali A, Cangir CC, Ersoy A, Turgut N. A Hospital Employee with *Acinetobacter* Tonsillitis Linked

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## Contents

### Original Articles

#### Regional Anaesthesia

- Evaluation of Postoperative Analgesia of Erector Spinae Plane Block in Elective Laparoscopic Cholecystectomy: A Randomized Control Trial 432  
*Divya Sethi, Garima Garg; New Delhi, India*

#### Paediatric Anaesthesia

- Comparison of Efficacy of Premedication between Dexmedetomidine and Midazolam Intranasal for the Prevention of Emergence Delirium in Children Undergoing Ophthalmic Surgery 439  
*Andi Ade Wijaya Ramlan, Irwan Mahri, Riyadh Firdaus, Ardhie Sugiarto; Jakarta, Indonesia*

#### Airway Management

- Comparison of Different Types of Stylets with No-Stylet Technique for Intubation with C-MAC D-Blade® Videolaryngoscope in Simulated Difficult Airway: A Prospective Randomised Study 445  
*Rishika Goel, Lakesh Kumar Anand, Manpreet Singh, Swati Jindal, Mala Rani, Arshdeep Kaur; Chandigarh, India*

- Comparison of the Glottic Views in a Head Elevated Laryngoscopy Position with the Patient in Supine or 25° Backup: An Observer-Blinded Randomised Clinical Trial 453  
*Janani Nandhakumar, Hemanth Kumar Vadlamudi Reddy, Indubala Maurya, Kusha Nag; Pondicherry, Uttar Pradesh, India; Manama, Kingdom of Bahrain*

#### Cardiovascular and Thoracic Anaesthesia

- N-Acetylcysteine Supplementation for the Prevention of Postoperative Liver Dysfunction after On-Pump Cardiac Surgery 460  
*Rajeev Kumar, Manjari Bansal, Soumya Sankar Nath, Virendra Kumar, Deepak Malviya, Dharmendra Srivastava; Lucknow, India*

#### Orthopaedic Anaesthesia

- Effects of Calcitonin Addition on Epidural Injection in Patients with Degenerative Spinal Canal Stenosis: A Randomised Double Blind Clinical Trial 470  
*Poupak Rahimzadeh, Seyed Mani Mahdavi, Kamran Mahmoudi, Hassan Ghandhari, Ali Babashahi, Parvaneh Zandi, Seyed Hamid Reza Faiz; Tehran, Awraz, Iran*

### Case Reports

#### Regional Anaesthesia

- Lumbar Erector Spinae Plane Block at L3 Level for Managing Post-operative Pain in Patients Undergoing Surgery for Proximal Femur Fractures 477  
*Sandeep Diwan, Abhijit Nair; Pune, Hyderabad, India*

#### Intensive Care

- Thrombotic Events Related to Extracorporeal Membrane Oxygenation in COVID-19-Associated Severe Acute Respiratory Distress Syndrome 480  
*Verda Tuna, Perihan Ergin Özcan, Emre Çeliksoy, Özlem Polat, İlkay Anaklı, Günseli Orhun, Gülçin Alay, Figen Esen; İstanbul, Turkey*



# Turkish Journal of Anaesthesiology & Reanimation

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## Algology

- Sonographic Guidance for Caudal Epidural Steroid Injection: A Diagnostic Tool 484  
*Emanuele Piraccini; Forlì, Italy*

## Paediatric Anaesthesia

- Anaesthetic Challenges in a Paediatric Patient with Escobar Syndrome-Difficult Airway and Postoperative Pneumothorax 486  
*Waleed Bin Ghaffar, Ifan Ul Haq, Arham Shahid, Samina Ismail; Karachi, Pakistan*

## Pain

- Pulsed Radiofrequency (PRF) of Pericapsular Nerves Group (PENG) in Chronic Hip Pain-A Case Report 490  
*Ashok Jadon; Jamshedpur, India*

## Guidelines

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### Cardiovascular and Thoracic Anaesthesia

- Perioperative Anaesthesiological Management of Malignant Pleural Mesothelioma Patients Undergoing Extrapleural Pneumonectomy (EPP) and Extended Pleurectomy/Decortication ((E)PD) 494  
*Olivia Lauk, Corinna Von Deschwanden, Ilhan Inci, Claudio Caviezel, Isabelle Opitz, Bastian Grande; Zurich, Switzerland*
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