



# 36° smart

Smart Meeting Anesthesia  
Resuscitation inTensive care

## First Announcement

Allianz MiCo - North Wing  
Milan | May 7-9, 2025



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#### **SMART**

**Smart Meeting Anesthesia Resuscitation inTensive care**

*Advancing Science and Education Since 1990*

#### **FOUNDING MEMBERS**

A. Braschi, L. Gattinoni, A. Pesenti, F. Raimondi

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## SMART EXHIBITION AREA

### WeSmart Space

The WeSmart space, successfully experienced in the latest editions, is available to companies for the organization of complementary activities such as Technical Forum and Meet the Expert.

### Forum

The new Forum is a large, versatile and multifunctional space designed to host simulation sessions and hands-on initiatives.

### Smart Social Lounge

All SMART participants will have free access to an open relax lounge in the Exhibition Area with internet point, wifi connection and free coffee point.

### Airway Training Lab

After the success of the 2024 Edition, the Airway Training Lab will be set up in the Exhibition Area, providing an open space with 4 workstations for hands-on training on airway management.

### High Fidelity Simulation Center

High-fidelity simulation sessions, which have been rewarded last year by a large audience participation, will be held in a dedicated space.

### Register now!

Online pre-registrations at [www.smartonweb.org](http://www.smartonweb.org)  
Deadline: **April 23, 2025**

Early registration with reduced fees  
Deadline: **March 10, 2025**

### Call for Abstract

Online abstract submission at [www.smartonweb.org](http://www.smartonweb.org)  
Deadline: **March 17, 2025**

### Best Abstract Award

The best three abstracts presented at the meeting will be awarded.

Details at [www.smartonweb.org](http://www.smartonweb.org)





Also for 2025, SMART in collaboration with Accurate will organize an exciting team competition of advanced simulation reserved for medical residents who will compete on topics of anesthesia, intensive care and emergency.

The first part of the competition will take place in Parma at the Simula Hub Simulation Center. The semi-finals, the final and the Award Ceremony will be held during the 36<sup>th</sup> SMART at the High Fidelity Simulation Center set up at Allianz MiCo North Wing.



## APP TO SMART

the SMART meeting at your fingertips

App available for iPhone and Android enabling real time interaction, access to the voting system and all SMART info at a glance.



## Critical Care Challenges

- Massive pulmonary embolism
- Refractory septic shock
- Pregnancy and ICU
- The oncologic patient
- Patients with refractory out-of-hospital cardiac arrest
- Necrotizing soft tissue infection
- Patient with a severe ARDS and Legionella infection

## Infections

- sCAP in 2025
- Hour bundle pitfalls
- Antibiotic therapy should be initiated within 3 hours in all the ICU patients with infection
- Antifungal therapy should be initiated as soon as possible in critically ill patients
- There is no place for antibiotics nebulization in VAP treatment and prevention
- MDR infections are more lethal than no-MDR infections
- The patient must always complete the prescribed antibiotic course of 7 or 14 days

## Anesthesia

- Non-operating room anesthesia and sedation practice
- Remimazolam for anesthesia, procedural sedation and ICU sedation
- TIVA vs. inhalation anesthesia: pro and cons
- ERAS programs and multimodal prehabilitation
- Safety in anesthesia and procedural sedation: drugs, technologies, logistics
- How to reduce complications after surgery and anesthesia
- Dealing with GLP-1 receptor agonists
- Perioperative hemodynamic management

## Airways management

- Video laryngoscopes: tips and tricks, training, how and when to use it
- High flow nasal oxygen: a good friend when I have to...
- Awake tracheal intubation using video laryngoscopy: pro and cons
- Safety profile of different induction agents
- Physiologically difficult airways in the anesthesia setting

- Tracheal intubation in the comatose patient with acute poisoning
- Fiberoptic vs. video laryngoscopy in ICU

## Ventilation

- Prone position: long, longer, the longest?
- Trunk inclination: the angle matters
- External Chest weight: diagnostic and/or therapeutic tool?
- Lateral position: any benefits?
- Respiratory support in different settings
- How protective are 'lung protective' targets for ventilation?
- Mechanical power vs. driving pressure in tailoring ventilation
- Awake prone position
- Recruitment maneuvers: yes or no?
- Recognizing P-SILI at the bedside
- Bedside monitoring of the severity of lung damage
- Driving pressure: meaning and limitations for VILI risk monitoring
- Ventilator assistance and patient's effort: a (not so) complex relationship

- Does increased 'sub-threshold' ventilatory stress promote healing of lung injury?
- Driving pressure: meaning and limitations for VILI risk monitoring
- Is 'permissive hypoxemia' an acceptable concept?
- The fundamental difference between 'hypoxia' and 'hypoxemia'

## Respiratory

- Ultrasound-guided mechanical ventilation
- Is chest X-ray still needed in modern ICUs?
- Physiology-based vs. guidelines-based decisions values
- Assessing respiratory effort at the bedside
- Physiological bedside measures of recruitability
- Lung and diaphragm protection
- Rescue treatments or standard of care?
- Simple markers or mechanisms of lung injury?
- Determinants of respiratory effort
- Heart-lung interactions

**Acid-base**

- Acid-base and fluid therapy: key concepts for every clinician
- Acid-base and intoxications: a practical approach
- Acid-base balance and CRRT: fundamental concepts
- Understanding acid-base disorders in diabetic patients
- Albumin: buffer, acid, both or nothing?
- Respiratory acidosis: key concepts
- Base Excess, Anion Gap, Strong Ion Gap: what is it all about?
- Sodium-bicarbonate administration in critically ill patients

**ICU**

- Noninvasive respiratory support as palliative care
- How to deal with a patient with dyspnea
- Goal-directed communication strategies
- Pathophysiology of blood pressure variability
- Round at the bedside: we could do better
- How to protect the kidneys
- Fluid therapy: when & how
- Hyponatremia for the ICU physician
- Diluted citrate during CRRT: a new cause of hyponatremia?

- Calcium, magnesium, and phosphate: the overlooked electrolytes?
- Crystalloids, crystalloids everywhere, nor any drop to drink
- Normal saline or buffered solutions: from physiology and clinical evidence?
- Early mobilization in critically ill patients?
- Managing arrhythmias in ICU
- Cholesterol, a sadly misunderstood good guy... and a useful treatment?
- Choice of IV fluids: it should be personalized
- Management of oliguria: a pragmatic approach
- Optimal arterial pressure in acutely ill patients
- Delirium is no longer an issue
- End-of life decisions in the ICU
- The ICU of the future

**ARDS**

- Unanswered question in ARDS
- Recruitment maneuvers: yes or no?
- Recognizing P-SILI at the bedside
- Bedside monitoring of the severity of lung damage

- Driving pressure: meaning and limitations for VILI risk monitoring
- How to set controlled/assisted ventilation in ARDS
- Amplified tissue stress in ARDS- beyond circuit pressure and tension
- Do we need the acronym 'ARDS'?
- Management of ARDS: not just a low tidal volume!
- What can we measure at the bedside to identify subphenotypes?

**Cardiothoracic anesthesia and ICU**

- Cardiopulmonary bypass guidelines 2024
- Patient blood management guidelines 2024
- Atrial fibrillation guidelines 2024
- Pathophysiology of blood pressure variability
- Hemodynamic monitoring in patients with blood pressure variability
- How to manage hypo and hypertension
- How to manage tachycardia and atrial fibrillation

**ECMO**

- Scholary after neonatal and pediatric ECMO
- Quality of life and long-term survival after ECMO support
- Frailty and ECMO
- Chronicity after ECMO: pulmonary perfusion abnormalities after ECMO
- Update on the ECMO pumps performance
- Wearable ECCO<sub>2</sub>R system
- A mobilization device for ECMO patient
- Antibiotics clearance during ECMO and hemo-adsorption
- Awake ECMO: pros and cons
- E-CLS and systemic inflammation
- Filters or cartridges for E-CPR?
- ECMO and ventilation in VV-ECMO for ARDS patients
- Weaning from VV-ECMO
- Hemo-adsorption and ECMO: pros and cons
- Extracorporeal immunomodulation during ECMO
- ECMO & ventilation: any news?
- New magnetically suspended centrifugal neonatal pump for ECMO

- Antibiotics clearance during ECMO and hemo-adsorption: do we need adjunctive doses?
- The latest trials on mechanical circulatory support in cardiac patients

## Thoracic anesthesia

- Preoperative evaluation before thoracic surgery
- Inhalational vs. TIVA in thoracic surgery: pros and cons
- Double lumen tubes vs. blockers
- Challenges in thoracic anesthesia
- Large thoracic mass management
- Tubeless thoracic anesthesia
- Analgesia for thoracic non cardiac surgery: TEA or PNBs?
- Lung transplantation: how we preserve the graft
- Minimally invasive esophagectomy: how we manage hypotension
- Prehabilitation prior to thoracic surgery: myth or reality?
- Phenotype and monitoring in cardiogenic shock: pros and cons

## Artificial intelligence

- Big data to lower complication and predict hypotension
- Actual and future role of wearable technologies
- Artificial vs. human intelligence in anesthesia and critical care
- Artificial intelligence: highest level of evidence?
- Will Artificial Intelligence overcome physiology?
- Artificial Intelligence and Big Data analysis: is it the future?
- How Artificial Intelligence will change critical care medicine

## Sepsis

- Biomarkers in sepsis: less is more?
- DO<sub>2</sub> optimization: is still the polar star?
- Vasopressors: two is better than one
- When and how manipulate cardiac function
- Optimizing microcirculation
- Mitochondrial resuscitation
- Adjunctive therapies in specific populations
- Cerebral dysfunction in sepsis
- Kidney dysfunction in sepsis
- Endothelial and coagulation dysfunction in sepsis

- SOFA-2: the new, improved SOFA score
- New UK NICE guidelines for early management of sepsis
- Where are we with antibiotics for sepsis: when, how, in whom and for how long?
- Do we really need the word 'sepsis'?
- Sepsis: past, present and future
- Sepsis: antibiotic therapy is not always so urgent
- Quality control in the sepsis management
- Vasopressin in septic shock: the earlier the better?
- Assessing of bleeding and coagulopathy
- Small volume resuscitation
- Role of blood component: time and quantity
- Coagulation resuscitation: fibrinogen, prothrombin concentrate, desmopressin

## Pediatrics

- Improving outcomes: from training to clinical practice
- Lights and shadows of Pediatric ERAS
- Could neuromonitoring support the provider during Total Intravenous Anesthesia?

- Apneic oxygenation during pediatric tracheal intubation
- Evidence and perspective for Remimazolam
- Advanced airway management: what to do when everything fails
- Neonatal extracorporeal CRRT
- Vasopressin in septic shock: the earlier the better?
- Severe pertussis in PICU
- Medical evacuation challenges of children from war scenarios

## Neuro

- The future of consciousness diagnosis: neuroimaging and beyond
- From shadows to light: strategies to facilitate awakening
- ICP 2.0: toward a personalized approach
- Noninvasive ICP monitoring: fact or fiction?
- Brain oxygenation: useful or not?
- Update in stroke management
- Awake surgery: precision without compromise
- Preventing postoperative delirium: new insights



- Blood gas analysis: stay focused
- Understanding extracorporeal gas exchange
- Helmet CPAP
- How to set mechanical ventilation in a patient with VV-ECMO
- The hemodynamic of tracheal intubation
- How to detect an injurious ventilation during NIV
- How to set controlled/assisted ventilation in ARDS
- Determinants of respiratory effort
- Heart-lung interactions
- Mechanical ventilation during anesthesia
- Veno-venous ECMO
- Noninvasive respiratory support
- Respiratory mechanics
- Electrical impedance tomography
- Esophageal pressure
- Drive and effort
- Ventilation of severe ARDS
- NIV, intubation and ECCO<sub>2</sub>R in COPD
- Artificial Intelligence to guide ventilation
- Imaging in ARDS
- The pathophysiology of ARDS
- Understanding the pathophysiology of Ci-Ca regional anticoagulation
- Indications for CRRT in critically ill patients
- Monitoring microcirculation in critically ill patients
- How to deal with delirium and agitation
- Cell metabolism in critically ill patients
- Clinically relevant outcomes in ICU
- The importance of prehabilitation in surgical patients
- Prevention of acute kidney injury in cardiac surgery
- Role of biomarkers in acute kidney injury
- When and how to do a hybrid ECMO
- Proper use of SvO<sub>2</sub> in ECLS
- Esophageal pressure: how to use it?

## SEPSIS ACADEMY

The new Sepsis Academy is a scientific practical initiative focused on the management of sepsis. It will be hosted in the so called WeSmart space providing 4 workstations, each dedicated to a topic of interest.

WS1 Identification of patients and microorganisms

WS2 Antibiotic therapy

WS3 Cardiovascular management

WS4 Adjunctive therapies

## AIRWAY MANAGEMENT TRAINING

After the success of the 2024 Edition, this initiative will be hosted in the Airway Training Lab, an open space with 4 workstations for hands-on training on airway management.

WS1 From airway prediction to strategy...  
Keyword: oxygenation!

WS2 Please let me breathe! Awake intubation  
as a standard clinical practice

WS3 Videodevices for airway management. Future is... now!

WS4 Front of neck access:  
an airway emergency scenario... to be planned!

Meeting Venue  
Allianz MiCo - North Wing



ENTRANCE: GATE 6  
Viale Scarampo / Viale Teodorico corner, Milano Italy  
Website: [www.micomilano.it](http://www.micomilano.it)



Official Languages

**Smart Meeting**  
English, no simultaneous translation.

**Oral Presentations and Posters**  
English, no simultaneous translation.

**Complementary Activities**  
English or Italian, no simultaneous translation.

Organizing Secretariat

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