CURRICULUM VITAE: DR. HESHAM FARAG, CONSULTANT ANAESTHETIST

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NAME

SURNAME: Farag

FIRST NAME: Hesham

PERSONAL INFORMATION

DATE OF BIRTH: June 6, 1947

PLACE OF BIRTH: Cairo, Egypt

CITIZENSHIP: Egyptian

RESIDENCY: United Kingdom

QUALIFICATIONS

M.B.B.Ch., Cairo University, Egypt—June, 1971

D.A., Royal College of Surgeons and Physicians, England—October 1979

F.F.A.R.C.S., Faculty of the Royal College of Surgeons, London, England—March, 1980

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CAREER SYNOPSIS

2009 to present: Pain Clinic & Orthopaedic Surgery, Private Practice, Cairo,

Egypt.

1991 to 2008: Consultant Anaesthetist,

Dhahran Health Center,

Saudi Aramco,

Dhahran, Saudi Arabia

1981 to 1991: Assistant Professor,

College of Medicine and Medical Sciences,

King Faisal University,

Dammam, Saudi Arabia

1980 to 1981: Consultant Anaesthetist (Locum),

St. Helier Hospital,

Merton, Sutton & Wandsworth Health Authority

Sutton, Surrey,

England

1979 to 1980: Registrar in Anaesthesia,

St. Helier Hospital,

Merton, Sutton & Wandsworth Health Authority

Sutton, Surrey,

England

1976 to 1978: Registrar in Anaesthesia

Charing Cross Hospital

Charing Cross Medical School,

University of London London, England

1974 to 1976: Senior House Officer on Anaesthesia.

Hemel Hempstead General Hospital,

Hertfordshire, England

1972 to 1973: Resident in Surgery,

Embaba Hospital,

Giza, Egypt

1971-1972: Pre-Registration House Officer.

Cairo University Hospitals,

Cairo, Egypt

PROFESSIONAL EXPERIENCE

<u>Private Practice</u>, Pain Clinic & Orthopaedic Surgery, Cairo, Egypt. 2009 to present.

<u>Consultant Anaesthetist</u>, Dhahran Health Center, Saudi ARAMCO, Dhahran, Saudi Arabia. 1991 to 2008.

Dhahran Health Center is a 400 bed tertiary referral hospital equipped with an MRI, a cardiac catheter laboratory, and a haemodialysis centre. This hospital provides care for Saudi Aramco employees and their dependents, a total of 350,000 people. The hospital is inspected triennially and is an approved facility by the Joint Commission for Accreditation of Health Organizations (USA), the only such accredited non-military hospital outside the United States. The anaesthesia department has 19 consultants from the U.S.A., Canada, and the U.K. With the exception of cardiac surgery, the hospital provides for all the surgical specialties including vascular, thoracic, neonatal surgery and neurosurgery. The hospital has surgical, medical, paediatric and neonatal intensive care units, for which the department has a significant role in patient management.

In 1992, I became the Quality Improvement Coordinator, responsible for the continuous quality improvement of the Anaesthesia Department. This post entailed peer review of anaesthetics complications, the periodic review of anaesthesia charts and conducting surveys of patient satisfaction.

<u>Assistant Professor</u>, College of Medicine and Medical Sciences, King Faisal University, Dammam, Saudi Arabia. 1981 to 1991.

I joined King Faisal University, a 450 bed teaching hospital in the Eastern Province of Saudi Arabia in 1981, when it was a newly commissioned establishment. I shared with my colleagues, under the chairmanship of Professor Richard Bodman, responsibility for developing a Department of Anaesthesia of high standing. In the operating room, I was involved in the organization of the anaesthesia service and in the setting up of protocols and policies. Anaesthesia for neurosurgical operations was of particular interest to me and I took upon myself the responsibility of developing the respective monitoring facilities, such as the use of the Swan-Ganz catheter and cardiac output computer.

I initiated a selective obstetric epidural service, in which all epidural blocks were performed by myself. I oversaw the teaching and training of both anaesthesia and obstetric residents and guided the project through to its gradual development into a 24 hour service. Together with my

colleagues, we developed an Epidural Form and Registry System for record keeping and research purposes.

As Chairman of the Cardio-Pulmonary Resuscitation Committee, I adopted the policies recommended by the American Heart Association. A hospital policy manual was drawn up, outlining in detail the duties and responsibilities of each member of the cardiac arrest team, in addition to the procedure, maintenance and regular inspection of Crash Carts. The Committee was responsible for teaching basic and advanced Cardiac Life Support to medical and paramedical personnel.

Over the course of four years, I organised the Department's continuing post-graduate education activity of a weekly Anaesthesia Seminar. I was also given the responsibility of drawing up the duty Rota for both Residents and Consultants.

While at K.F.U., I served on the following committees:

Chairman, Cardio-Pulmonary Resuscitation Committee, 1982 to 1987

Secretary, Pain Clinic Committee, 1983 to 1990

Secretary, Department of Anaesthesia, 1987 to 1991

Member, Pharmacy and Therapeutic Committee, 1989-1991

<u>Consultant Anaesthetist (Locum)</u>, St. Helier Hospital, Merton, Sutton & Wandsworth Health Authority, Sutton, Surrey, England. 1980 to 1981.

Registrar in Anaesthesia, St. Helier Hospital, Merton, Sutton & Wandsworth Health Authority, Sutton, Surrey, England. 1979 to 1980.

It was here that I expanded my experience in anaesthesia for both thoracic and renal surgery. Here also, I was actively involved in the running of an intensive therapy unit, in addition to an obstetric epidural service. During this same time I offered tutorial sessions to candidates preparing for Part 1 of the F.F.A.

While at St. Helier, I was seconded to St. George's Hospital for experience in outpatient dental anaesthesia; Atkinson Morley's Hospital for neurosurgical anaesthesia; Queen Mary's Hospital, Carshalton, for neonatal anaesthesia.

Registrar in Anaesthesia, Charing Cross Hospital, Charing Cross Medical School, University of London, London, England. 1976 to 1978/

During my stay at Charing Cross Hospital, I gained additional experience in cardiac, vascular, neurosurgical and renal transplant anaesthesia. It was also here that I was involved in the organization and

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running of an active epidural service, as well as in the teaching and training of medical students. In particular, I was able to add to my experience and practice the use of local anaesthesia in such areas as spinal, brachial and intercostal blocks.

<u>Senior House Officer in Anaesthesia</u>, Hemel Hempstead General Hospital, Hertfordshire, England. 1974-1976.

Here, at my first anaesthetic post, I acquired experience in anaesthetics for general surgery, orthopaedics, gynecology, obstetrics and E.N.T. It was within this two year stay at Hemel Hempstead that I obtained the first part of my F.F.A.R.C.S.

RECORD OF PUBLICATIONS AND PAPERS PRESENTED

Publications

- 1. Farag H and Ibrahim AW. Early Detection of Air Embolism. *Anaesthesia* 1983: 38; 808-809.
- 2. Adu-Gyamfi Y, Farag H and Naguib M. Anaesthesia with Continuous Thiopentone Infusion, Epidural Morphine and Relaxant. *The Journal of International Medical Research* 1983: 11; 222-227.
- 3. Farag H, Adu-Gyamfi Y, Naguib M. Early Non-Radiological Recognition of Misplacement of Central Venous Catheter. *British Medical Journal* 1983: 287;761.
- 4. Naguib M, Farag H and Joshi R. Bilateral Hydrothorax and Hydromediastinum After A Subclavian Line Insertion. *Canadian Anaesthetists Society Journal*, 1985: 32: 414.
- 5. Farag H, Naguib M. Caudal Morphine for Pain Relief Following Anal Surgery. *Annals of The Royal College of Surgeons of England*, 1985: 67; 257-258.
- 6. Farag H, Naguib M. Cardiopulmonary Resuscitation: Two Year Experience in A New Teaching Center. *Middle East Journal of Anesthesiology*. 1985: 8; 171-177.
- 7. Adu-Gyamfi Y, Farag H, Naguib M. High Dose Epidural Morphine for Surgical Analgesia. *Middle East Journal of Anesthesiology*. 1985: 8; 165-170.
- 8. Naguib M, Farag H, Ibrahim AW. Anaesthetic Consideration in Klippel-Feil Syndrome. *Canadian Anaesthetics Society Journal*. 1986: 33; 1; 66-70.
- 9. Naguib M, Adu-Gyamfi Y, Absood GH, Farag H, Gyasi H, Epidural Ketamine for Post-Operative Analgesia. *Canadian Anaesthetics Society Journal.* 1986: 33; 1; 16-21.
- 10. Farag H, Naguib M, Ibrahim AW. Anaesthesia for A Patient with Eosinophilic Myositis. *Anaesthesia and Analgesia*. 1986: 65; 903-904.
- 11. Ibrahim AW, Farag H, Naguib M, Ibrahim E. Neroepithelia (colloid) Cyst of The Third Ventricle Retinal Detachment And Lateral Rectus Palsy in Identical Twins. *J. Neurosurgery* 1986: 401-403.
- 12. Naguib M, Hassan M, Farag H, Bodman R, Absood G. Cannulation of The Radial And Dorsalis Arteries. *British Journal of Anaesthesia*. 1987: 59; 482-488.

- 13. Al-Mohaya S, Naguib M, Abdulatif M, Farag H. Abnormal Responses to Muscle Relaxants in A Patient with Primary Hyperparathyroidism. *Anesthesiology.* 1986: 65; 554-556.
- 14. Naguib M, Farag H, Magbagbeola J. The Effect of Lysine Acetyl Salicylate Pre-Treatment on Suxamethonium Induced Myalgias And Biochemical Changes. *British Journal of Anaesthesia*. 1987: 59; 606-610.
- 15. Ibrahim AW, Farag H, Naguib M. Epidural Morphine for Post-Operative Pain Relief Following Lumbar Laminectomy. *Spine.* 1986: 11;1024-1026.
- 16. Hegazy M, Farag H, Naguib M. Anesthetic Management of Aglosia Adactylia Syndrome: Case Report. *Annals of Saudi Medicine*. 1988: 8; 221-222.

Papers read at medical conferences

- 1. Adu-Gyamfi Y., Farag H. Epidural morphine for operation and intra-operative analgesia. The 8th World Congress of Anesthesiologist, Manila, Philippines, January 1985.
- 2. Farag H., Naguib M., Al Gamal F. Cardio-pulmonary resuscitation, a two years experience at a new teaching center. The 3rd Egyptian-American Anaesthesia Conference, Cairo, January 1985.
- 3. Naguib M., Adu-Gyamfi Y., Absood G.H., Farag H., Gyasi H. Epidural ketamine for post operative analgesia, 26th Annual Conference of West African College of Surgeons, Accra, Ghana January 1986.
- 4. Farag H., Ibrahim A.W., Naguib M. Epidural morphine for post-operative pain relief following laminectomy, 24th Egyptian American Anaesthesia Conference, Cairo, March 1986.
- 5. Farag H., Ibrahim A.W., Naguib M. Pain relief after lumbar laminectomy by Epidural Morphine, Fourth Saudi Symposium on Clinical Neurological Sciences, March 1987.
- 6. Farag H. Pattern and Management of Self-induced Poisoning in the ICU, Second Symposium on Poisoning in the Community, Ministry of Health, Dammam, August 1988.