Preface

We are pleased to welcome you to this timely issue of *Oral and Maxillofacial Surgery Clinics of North America* devoted exclusively to office-based anesthesia. This topic reinforces and complements the May 2017 issue on Patient Safety.

Office-based anesthesia is a core component of the oral and maxillofacial surgery (OMFS) practice, and this privilege readily differentiates the OMFS specialty from all other dental and medical specialties. The specialized training goes well beyond a 5-6 month operating room anesthesia rotation, as OMFS residents complete a variety of complementary rotations in surgery, medicine, intensive care, and office-based clinical anesthesia. This training, together with full pallet of continuing education programs, dedicated exclusively to anesthesia, enhances the ability of the OMFS to appropriately select patients and open airway anesthetic techniques, permitting the anxiety and pain-free completion of a wide range of surgical procedures. Also unique to the OMFS practice is the adoption of what we refer to as *team anesthesia*, where formally trained anesthesia assistants help to monitor the patient and provide basic airway maneuvers. Despite an enviable safety record, there are critics of our anesthesia model and every oral and maxillofacial surgeon (OMS) must ensure that their practice has in place a culture of safety and that their anesthesia team is well trained in the unique aspects of anesthesia delivery in the office environment.

This issue of *Oral and Maxillofacial Surgery Clinics of North America* is dedicated to updating the OMS on many aspects of office-based anesthesia practice. This issue includes reviews of assistant training, techniques and agents, patient safety concepts, and what to do when things go wrong. In addition, this issue includes for the first time a description of the American Association of Oral and Maxillofacial Surgeons simulation program.

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