CURRICULUM VITAE

DR.SAMI ABU-HALAWEH

Associate Prof. College of Medicine Anaesthesia & ICU Department The University of Jordan

Consultant Anaesthetist

January 2016

CURRICULUM VITAE

SURNAME: ABU HALAWEH

FORENAMES: Sami Abdel-Hamid Ismail

ADDRESS: P.O.Box 16057

Al-Jubeiha Amman-Jordan

Tel. NO. +96265233763 Home

+962795290645 Mobile

DATE OF BIRTH: 07/05/1959

NATIONALITY: Jordanian

MARITAL STATUS: Married with five children

MEDICAL QUALIFICATIONS:

Diploma of Medicine Cluj- Napoca, Romania

September 1984

HIGHER MEDICAL QUALIFICATIONS:

Masters in Anaesthesia

University of Jordan, June 1994

Jordan Board of Anaesthesia

Jordanian Medical Council, August 1994

FFARCSI

Royal College of Surgeons, Ireland, October 2000

GMC NUMBER: Full Registration No 4644664

Dated 20/7/1999

PRESENT POSITION: CONSULTANT ANAESTHETIST

Chairman of Anaesthesia& Intensive Care

Department Sept 2013 -Now

Associate Prof. College of Medicine University of Jordan

Jordan University Hospital 4th August 2008 - present

PREVIOUS POSITIONS:

SPR in Anaesthesia

Countess of Chester Hospital
October 2000 – December 2000

SPR in Anaesthesia

Royal Liverpool University Hospital March 2000 – September 2000

SpR in Anaesthesia

Macclesfield District General Hospital 15/11/99 - March 2000

Senior House Officer in Anaesthesia Aintree University Hospital

Long moor Lane Liverpool L9 7AL 1/9/1997 – 15/11/99

Intern (House Officer)

Al-Bashir Teaching Hospital Amman, Jordan 1/11/1984 –31/10/1985

Resident Doctor (Medicine and surgery)

Royal Medical Services King Hussein Medical Center Amman, Jordan 1/11/85 –31/9/1987

Resident Doctor (Surgery and Emergency)

Al-Hikma Hospital Zarka, Jordan 10/4/1988 - 30/6/1990

Resident in Anaesthesia and Intensive Care

Jordan University Hospital Amman, Jordan 1/7/1990 –14/6/1994

Assistant Specialist in Anaesthesia and ICU

Jordan University Hospital 15/8/1994 – 15/8/1997

Assistant Prof. in Anaesthesia and ICU

College of Medicine, University of Jordan University Jordan University Hospital 15/1/2001 – 3/8/2008

Associate Prof. in Anaesthesia and ICU

Faculty of Medicine, University of Jordan Jordan University Hospital 4/8/2008 – until now

E-mail: s.halaweh@ju.edu.jo

Anaesthetic Clinical Experience:

In Jordan

At the Jordan University Hospital, which is the major teaching and tertiary referral hospital in the country with a capacity of 500 beds. Anaesthesia was administered for 18000 patients a year. The hospital has 10 operating theatres. Anaesthetic staff consisted of a Professor of Anaesthesia, two Assistant Professors (Senior Consultants), one Specialist, two Assistant Specialist and 20 Residents in Anaesthesia.

The period of training leading to the Masters in Anaesthesia is four years. There is a daily Morning Report to discuss patients managed during the previous night, and potential problematic cases on the day's lists, a lecture in Basic Sciences or Clinical Anaesthesia.

The actual clinical work consists of accompanied lists in the first year in General Surgery, Urology, Gynaecology, Orthpaedics and Emergency Surgery, as I became more experienced, I had more active involvement in day-to-day Anaesthetic management. In the second year, we received training in Intensive Care Medicine, and Surgical sub specialities including Obstetrics, Ophthalmology, ENT, Neonatal and Paediatric, Neurosurgery, Vascular, Cardiothoracic and Transplant Surgery. The third and fourth years of training are more independent Anaesthetic management, still under consultant cover, and preparation for teaching sessions, and assisting in tutorial sessions for undergraduate medical students.

Resident On calls are every second to every third night as a member of a team consisting of a Senior Resident, ICU Resident, two second /third year residents, and four first year Residents. Consultants and Specialists are available from home when needed for high risk patients.

There was continuous day-to-day assessment, a yearly theoretical and clinical examination and a final year examination. Obtaining the Masters was awarded at the end of the fourth year, and then I was eligible to sit for my Jordanian Board Examination, which I passed from the first attempt.

After obtaining my Jordanian Board of Anaesthesia, I worked for three years as Assistant Specialist /Fellow in Anaesthesia. I had more clinical involvement in Paediatric and neonatal Surgery, Intensive Care Medicine. I had more administrative duties in arranging weekly rotas, cover for daily sessions. I had more involvement in teaching and supervision of training of undergraduate and postgraduate medical students.

Concerned to develop my career and aware that to develop as a more senior teaching member of staff at my Hospital, I had to obtain further training in a recognised hospital and the FRCA. I was pleased to accept a training post at Aintree Hospitals, with the support of the Royal College of Anaesthetists and the University of Jordan on the Double Sponsorship Scheme.

In The United Kingdom

*University Hospital Aintree:

I have been working at University Hospital Aintree since September 1997 as a Senior House Officer in Anaesthesia. This post is fully recognized for training purposes. The hospital provides a comprehensive training program in Anaesthesia, which includes a weekly tutorial session in the theoretical basis and clinical applications of Anaesthesia, accompanied clinical sessions in various surgical specialties and Intensive Care Medicine on a modular system. I have been gaining extensive experience in conduction of General and Regional Anaesthesia for General and Vascular Surgery, Obstetrics and Gynecology, Urology, Orthopedics and Trauma, Maxillo Facial Surgery, major Head and Neck Surgery and ENT, Neurosurgery, Day Case Surgery and Ophthalmology. I have gained more experience working on the General ITU and the Neuro ITU dealing with critically ill patients.

I have attended the Primary FRCA course at the Liverpool University and have passed the Primary FRCA in March 1999. Currently I am attending the Mersey School of Anaeshesia course for the Final FRCA.

**Macclesfield District General Hospital:

I started as a registrar in 15th.November.99. This hospital offers a broad range of general training for specialist registrars. I have gained considerable experience in anaesthesia for major vascular surgery and some experience in Oesophageal surgery, ophthalmic surgery under general and local anaesthesia, ENT surgery and Obstetric anaesthesia.

I have got the opportunity to attend chronic pain clinic which offers outpatient services and sessions for nerve block.

As a registrar during the on-call, I cover a 3-beded ITU which offers facilities for haemodynamic monitoring and continuous haemofiltration, and I was responsible for admission of patients and liaising with referring medical and surgical team in the management of these patient, as well as an on demand epidural services for pain relief in laboure, and covering the first on-call anaesthetist.

Royal Liverpool University Hospital

The RLUH is a referral tertiary hospital. The department of Anaesthesia is a large one with 29 Consultants, providing services across three sites, Royal Liverpool, Broadgreen and Dental Hospital. There are 22 operating theatres in the group.

I have had the opportunity to be involved in anaesthetizing patients for major vascular and renal transplant which is based the Royal Liverpool, major hepatic, colorectal oesophagogastrectomy, major orthopedics and spinal surgery.

Whist there, I rotated to the Intensive Care Unit which has 13 beds, the largest in Merseyside, and which undertakes haemofiltration, haemodialysis and plasma exchange in support of patients in multiple organ failure.

Countess Of Chester Hospital:

Countess of Chester Hospital is one of the busy hospitals in Merssy Region. It has a number of 14 consultants. I had the opportunity to be involved in anaesthetizing patients for major general surgical problems, vascular diseases, and I had the chance to get good experience in doing regional anaesthesia.

The hospital had a busy maternity unit and I have been involved in procedures of pain relief during labour and anaesthetizing high risk pregnant women.

Jordan University Hospital:

Jordan University is a major teaching and tertiary referral hospital. In my present job I am working as a consultant anaesthetist and one member of the teaching staff in the faculty of Medicine at the Jordan University, teaching 4th yarer medical students and teaching and training postgraduate anaesthetists to be able to get their master degree and Jordanian Board in Anaesthesia and Intensive Care. The actual clinical work consists of supervising the registrars' and anaesthetizing patients in different aspect of general surgery and for subspecialties as Urology, Orthopedics, and Pediatrics, Cardiovascular surgery, Ophthalmology. In Feb. 2006 I have started a consultant cover for the intensive cares unite with two other consultants of my colleagues. Being a consultant in the department I am working as a team leader during the on calls and I am involved in different administrative aspects.

Jordan Medical Council:

I have been chosen as an external examiner by Jordan Medical Council in the period 2002-2005, since Feb 2006 I became a permanent member of the scientific committee until Feb 2010.

Conferences Attended:

The use of Ultiva in theatres and Intensive Care 16-18 March 2002 Belgium

Sepsis in Intensive Care 17-18 June 2002 London UK

National Acute Pain Symposium September 2003 Liverpool UK

Pan Arab Congress of Anaesthesia September 23-26 2004 Beirut-Lebanon Difficult Airway Management Education course September 29-October 1st 2004 Cardiff UK

The 2ed European-Syrian Congress of Anaesthesia & ITU May 12-14 2005 Damascus-Syria

Course On Current Topics In Anaesthesia The Royal College Of Anaesthesia June 6-8 2005 Leicester UK

ALS Course UK Resuscitation council University Hospital Aintree Sept 2006

ALS Course
UK Resuscitation council
University Hospital Aintree
Sept 20011

ESA Congress Paris La Palace De Congress June 2012

Publications:-

- Abu-Halaweh SA, Massad IS Abu-Ali HM, Badran IZ, Barazngi BA, Ramsay MA Rapid sequence induction and intubation with 1mg/kg rocuronium bromide in caesarean section, comparison with suxamethonium. Saudi Med J. 2007 Sep;28(9):1393-6
- 2. Abu-Halaweh SA, Massad IS Abu-Ali HM, Ammari B, Murshidi M, Al-Oweidi A. "Preemptive Ilioinguinal-Iliohypogastric Nerve Block versus Morphine for Unilateral Varicocoelectomy": accepted for publication: Jordanian Medical Journal, Feb 2008.
- 3. Massad IS, Khadra MM, Alkazaleh FA, Qatawneh AM, Saleh SS, Abu-Halaweh SA. Bupivacaine with meperidine versus bupivacaine with fentanyl for continuous epidural labor analgesia. Saudi Med J. 2007 Jun; 28(6):904-8

- 4. **Massad I, Halaweh SA, Badran I, Al-Barzagi B.** Negative pressure pulmonary edema—Five case reports, Middle East J Anesthesiol. 2006 Jun 18(5): 977-84
- 5. Massad IM, Abu-Ali HM, Abu-Halaweh SA, Badran IZ. Venous occlusion with lidocaine for preventing propofol induced pain. A prospective double-blind randomized study. Saudi Med J.2006 Jul;27(7): 997-1000
- 6. **Abu-Halaweh SA, Al Oweidi AK, Abu-Malooh H, Zabalawi M, Alkazaleh F, Abu-Ali H, Ramsay MA**. "Intravenous dexmedetomidine infusion for labour analgesia in patient with preeclampsia." Eur J Anaesthesiol. 2009 Jan;26(1):86-7.
- 7. Intravenous Dexmedetomidine or Propofol adjuvant to spinal anesthesia in total knee Replacement Surgery. Abdelkarim S AlOweidi1 MD, FACHARZT, Mahmoud M Al-Mustafa1 MD, FACHARZT, Jihad M. Al Ajlouni2 MD,FRCSI(Orth.& Trauma). Diana F. Mas'ad3 MD, Mohammad Q Hamdan2 MD,Subhi M Alghanem1 MD, FFARCSI, Ibraheem Y.Qudaisat1 MD, Sami A. Abu Halaweh1 MD, FFARCSI, and Islam M. Massad1 MD, AFSA accepted for publication Jordan medical Journal October 2010
- 8. Thromboprophylaxis in Neurosurgical Patients at Jordan University Hospital: A Prospective Comparative Study Abdelkarim Saleh Aloweidi 1, Walid S. Maani 2 Khalid R. Al Zaben3, Sami A. Abu-Halaweh4 Mahmoud M. Al-Mustafa5, Abdulrahman Al-Shudifat 6, Ilham B. Abu Khader7 Accepted for publication Jordan medical journal 17 July 2010
- 9. Intraoperative administration of dexmedetomidine reduces the analgesic requirements for children undergoing hypospadius surgery Al-Zaben KR, Qudaisat IY, Al-Ghanem SM, Massad IM, Al-Mustafa MM, Al-Oweidi AS, Abu-Halaweh SA, Abu-Ali HM, Saleem MM. Eur J Anaesthesiol.(27):247-252.2010
- 10. A preliminary study of the use of human adipose tissue-derived stem cells for the treatment of streptozotocin-induced diabetes mellitus in a rat model Mahmoud Abu-Abeeleh, Zuhair A. Bani Ismail, Khaled R. Alzaben, Sami A. Abu-Halaweh Abdelkarim S. Aloweidi, Iyad A. Al-Ammouri, Mohamed K. Al-Essa, Sameer K. Jabaiti, Jaafar Abu-Abeeleh, Moaath M. Alsmadyand Omar Alshobaki Comparative Clinical Pathology Volume 19, Number 1Accepted 15 September 2009
- 11. The impact of long-lasting preemptive epidural analgesia before total hip replacement on the hormonal stress response. A prospective, randomized, double-blind study. Abdelkarim S Al Oweidi, Joachim Klasen, Mahmoud M. Al-Mustafa, Sami A abu-Halaweh, Khale R. Al-Zaben, Islam M. Massad, and Ibrahim Y.Qudaisat. Middle East Journal of Anesthesia M.E.J.Anesth AcceptedM.E.J.ANESTH 20 (5) 679: 684 2010

- 12. A Survey of Complex Regional Pain Syndrome in Jordanian Patients Abdelkarim S Al Oweidi, Mahmoud M Al-mustafa, Shaher T El-Hadidi, Khaled R Alzaben, Sami A Abu-Halaweh, Jihad M Al-Ajlouni, Mahmoud Ababneh, Yousef Sarhan, Ziad M Hawamdeh and Akram O ShannakEuropean Journal of Scientific ResearchISSN 1450-216X Vol.40 No.1 pp.125 -131
- 13. **Use Of Nasal Speculum for Rat Endotracheal Intubation**. Khaled R.Alzaben, Sami A.Abu-Halaweh, Abdelkarim S.Aloweidi. Zuhair A.Bani Ismail Iyad A.Al Ammouri, Mahamed K.Al-Esa. Samir K. Jabaiti, Moaath M>Alsmady and Mahmoud Abu- Abeeleh. American journal Of Applied Sciences 6(3):507-5112009
- 14. Intravenous dexmedetomidine infusion for labor analgesia in patient with preeclampsia. Abu-Halaweh SA, Al Oweidi AK, Abu-Malooh H, Zabalawi M, Alkazaleh F, Abu-Ali H, Ramsay MA .Eur J Anaesthesiol .26(1):86-87.2009
- **15.** Effect of dexmedetomidine added to spinal bupivacaine for urological procedures. Al-Mustafa MM, Abu-Halaweh SA, Aloweidi AS, Murshidi MM, Ammari BA, Awwad ZM, Al Edwan GM, Ramsay MASaudi Med J.30(3):365-370 .2009
- 16. **-Effects of experimental acute myocardial infarction on blood cell counts and plasma biochemical values in a nude rat model (Crl:NIH-Fox1RNU)**Comparative Clinical Pathology Volume 18:433-437, November, 2009Zuhair Bani Ismail Mahmoud AbuAbeeleh,Khaled R. Alzaben,Sami A. Abu-Halaweh, Abdel Karim S. Aloweidi,Iyad A. Al-Ammouri,Mohamed K. Al-Essa,Samir K. Jabaiti, Moaath M. Alsmady and Ahmad Al-Majali
- 17. Efficacy of Human Adipose Tissue-Derived Stem Cells in Cardiac Muscle Repair In An Experimental Acute Myocardial Infarction Model Using Nude Rats (Crl:NIH-Fox1RNU) Comparative Clinical Pathology Received:Aug 09, 2009 Accepted Oct 19, 2009Mahmoud Abu-Abeeleh · Ismail Matalka · Zuhair A. Bani Ismail · Khaled R. Alzaben · Sami A.Abu-Halaweh · Abdelkarim S. Aloweidi · Iyad A. Al-Ammouri · Mohamed K. Al-Essa · Sameer K. Jabaiti · Moaath M. Alsmady · Omar Alshobaki · Mohmmad Alqudah · Samir Albashir · Raed Ennab · Mohammad Jamous · Ahmad Al-Majali
- 18. Pretreatment with remifentanil, fentanyl, or lidocaine to prevent withdrawal after rocuronium using venous occlusion technique in children and adolescents: a prospective randomized placebo-controlled double-blind study.S. A. Abu-Halaweh A. K. Aloweidi •I. Y. Qudaisat M. O. Al-Hussami •K. R. Al Zaben A. S. Abu-Halaweh Received: 9 August 2013 / Accepted: 10 April 2014 / Published online: 11 May 2014 Japanese Society of Anesthesiologists 2014. J Anesth (2014) 28:886–890
- 19. pediatric Comparison of caudal bupivacaine alone with bupivacaine plus two doses of dexmedetomidine for postoperative analgesia in patients undergoing infra-umbilical surgery: a randomized controlled double-blinded study Khaled R. Al-Zaben1, Ibraheem Y. Qudaisat1, Sami A. Abu-Halaweh1, Subhi M. Al-Ghanem1, Mahmoud M. Al-Mustafa1, Aboud N. Alja'bari1 & Hashem M. Al-Momani Pediatric Anesthesia 25(2015):883-890

20. Dexmedetomidine versus morphine infusion following laparoscopic bariatric surgery: effect on supplemental narcotic requirement during the first 24 h Sami Abu-Halaweh1• Firas Obeidat2• Anthony R. Absalom3• Abdelkareem AlOweidi1 Mahmood Abu Abeeleh2• Ibrahim Qudaisat1• Fay Robinson4• Keira P. Mason5. Surgical Endoscopy and Interventional Procedures Received: 14 April 2015 / Accepted: 12 July 2015 _ Springer Science+Business Media New York 2015 DOI 10.1007/s00464-015-4614-y

REFEREES:

1. Dr Abdelkareem Aloweidi

Associte Prof Jordan University Hospital Tel: 00962 79 5712121 Fax: 0096265339520

2. Dr Mahmoud Al-Mustafa

Assistant Prof Jordan University Hospital Tel: 00962 79 9061201 Fax: 0096265339520