

ISSN 1305-5550  
e-ISSN 2548-0669

# Journal of Cardiovascular Thoracic Anaesthesia and Intensive Care Society

Volume 31 Issue 2 June 2025



[www.gkdaybd.com](http://www.gkdaybd.com)  
[www.gkda.org.tr](http://www.gkda.org.tr)



www.gkdaybd.com  
www.gkda.org.tr

ISSN 1305-5550  
e-ISSN 2548-0669

# Journal of Cardiovascular Thoracic Anaesthesia and Intensive Care Society

Volume 31 Issue 2 June 2025

## Founder

Cardiovascular Thoracic Anaesthesia and  
Intensive Care Society

## Owner

Zerrin Sungur

President of the Association on behalf of Society  
of Cardio-Vascular-Thoracic Anaesthesia and  
Intensive Care  
Istanbul University, Department of Anesthesiology,  
Istanbul, Türkiye  
zerrin\_sr@yahoo.com

## Editor-in-Chief

Türkan Kudsioğlu

Department of Anesthesiology and Reanimation,  
University of Health Sciences, Dr. Siyami Ersek  
Thoracic Cardiovascular Surgery, Istanbul, Türkiye  
turkancoruh@gmail.com

## Editorial Assistants

Tülün Öztürk

Department of Anesthesiology, Celal Bayar  
University, Manisa, Türkiye  
ozturktulun@yahoo.com

## Alper Kararmaz

Department of Anesthesiology, Marmara University,  
Pendik Training and Research Hospital, Istanbul,  
Türkiye  
akararmaz@hotmail.com

## Mert Şentürk

Department of Anesthesiology, Acıbadem  
University, Ataşehir Hospital, Istanbul, Türkiye  
mert.senturk@acibadem.com

## Technical Editor

Fisun Demir

Department of Anesthesiology, Balıkesir Faculty of  
Medicine, Balıkesir, Türkiye  
fusdemir@yahoo.com

## Graphics

Duygu Şimşek

## Publication Coordinator

Ali Cangül

## Publisher

Kare Medya İletişim Hizmetleri Tic. Ltd. Şti.  
Göztepe Mah. Fahrettin Kerim Gökay Cad. No: 200  
D: 2 Göztepe, Kadıköy, İstanbul-Türkiye

*It is published quarterly as 4 issues every year (March, June, September,  
December). GKDAYB Journal is an open Access, free and peer-reviewed  
journal. It is language English.*

*Indexed in Excerpta Medica, EMBASE, EBSCO, Sudoc, OpenAlex, Turkish  
Medline National Health Sciences Periodicals Database, Turkish Citation  
Index, and ULAKBİM, GALE, Scilit, Open Ukrainian Citation Index and ASCI.*

© All rights are reserved. Rights to the use and reproduction, including in the electronic  
media, of all communications, papers, photographs and illustrations appearing in this  
journal belong to GKDAYBD. Reproduction without prior written permission of part or all  
any materials is forbidden. The journal complies with the Professional Principles of the Press.



Tel: 0216 550 61 11 - Fax: 0216 550 61 12  
E-mail: kare@karepb.com  
Web page: www.kareyayincilik.com



# Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

## ADVISORY BOARDS

### EDITORIAL CONSULTANTS

#### Murat Aksun

Department of Anesthesiology, İzmir Katip Çelebi University, Ataturk Training and Research Hospital, İzmir, Türkiye

#### Nazan Atalan

Department of Anesthesiology, Marmara University, Pendik Training and Research Hospital, İstanbul, Türkiye

#### Tülin Aydoğdu Titiz

Department of Anesthesiology, Akdeniz University Faculty of Medicine, İstanbul, Türkiye

#### Emre Sertaç Bingöl

Department of Anesthesiology, İstanbul University, İstanbul, Türkiye

#### Aslı Demir

Department of Anesthesiology and Reanimation, Ankara City Hospital, Ankara, Türkiye

#### Suna Gören

Department of Anesthesiology and Reanimation, Uludağ University Faculty of Medicine, Bursa Türkiye

#### Çiğdem Yıldırım Güçlü

Department of Anesthesiology, Ankara University Faculty of Medicine, Ankara, Türkiye

#### Tülay Hoşten

Department of Anesthesiology and Reanimation, Kocaeli University Faculty of Medicine, Kocaeli, Türkiye

#### Ümit Karadeniz

Department of Anesthesiology and Reanimation, Ankara City Hospital, Ankara, Türkiye

#### Deniz Karakaya

Department of Anesthesiology and Reanimation, Ondokuz Mayıs University Faculty of Medicine, Samsun, Türkiye

#### Ali Sait Kavaklı

Department of Anesthesiology and Reanimation, University Health Sciences, Antalya Training and Research Hospital, Antalya, Türkiye

#### Fatma Nur Kaya

Department of Anesthesiology and Reanimation, Uludağ University Faculty of Medicine, Bursa, Türkiye

#### Hasan Koçoğlu

Department of Anesthesiology and Reanimation, İstanbul Medeniyet University Faculty of Medicine, İstanbul, Türkiye

#### Zerrin Sungur

Department of Anesthesiology and Reanimation, İstanbul University Faculty of Medicine, İstanbul, Türkiye

#### Hüseyin İlksen Toprak

Department of Anesthesiology and Reanimation, Inonu University Faculty of Medicine, Malatya, Türkiye

#### Fevzi Toraman

Department of Anesthesiology and Reanimation, Acıbadem University Faculty of Medicine, İstanbul, Türkiye

#### Sema Turan

Department of Intensive Care, University of Health Sciences, Ankara City Hospital, Ankara, Türkiye

#### Süheyla Ünver

Department of Anesthesiology and Reanimation, Dr. Abdurrahman Yurtaslan Oncology, Training and Research Hospital, Ankara, Türkiye

#### Davud Yapıcı

Department of Anesthesiology and Reanimation, Mersin University Faculty of Medicine, Mersin, Türkiye

#### Nihan Yapıcı

Department of Anesthesiology and Reanimation, Siyami Ersek Thoracic Cardiovascular Surgery Training and Research Hospital, İstanbul, Türkiye

#### Nurgül Yurtseven

Department of Anesthesiology and Reanimation, University of Health Sciences, Dr. Siyami Ersek Thoracic Cardiovascular Surgery Center, Educational Research Hospital, İstanbul, Türkiye

### INTERNATIONAL EDITORIAL CONSULTANTS

#### Patrick F. Wouters

Full Professor of Clinical Physiology Chairman, Department of Basic and Applied Medical Sciences, Department of Anesthesiology, Perioperative Medicine and Pain Clinic. Faculty of Medicine and Health Sciences, Ghent University & University Hospital  
Patrick.Wouters@UGent.be

#### Mohamed El Tahan

Professor of Cardiothoracic Anaesthesia & Surgical Intensive Care, Mansoura University, Mansoura, Egypt Associate Professor of Cardiothoracic Anaesthesia & Surgical Intensive Care, Imam Abdulrahman Bin Faisal University, Dammam, Saudi Arabia  
mohamedrefaateltahan@yahoo.com

#### Fabio Guarrachino

Department of Anaesthesia and Critical Care Medicine Azienda Ospedaliero Universitaria Pisana, Pisa, Italy  
fabiodoc64@hotmail.com

#### Nandor Marczin

Professor, Imperial College London, UK  
n.marczin@imperial.ac.uk

Address: Göğüs-Kalp-Damar Anestezisi ve Yoğun Bakım Derneği  
İnönü Caddesi Işık Apt. 53. Kat 4, 34437  
Gümüşsuyu, Taksim / İstanbul  
Phone: Tel: 0212 292 92 71  
e-mail: info@gkda.org.tr

Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society  
Publication Type: Local Term  
Date of issue: June 2025



Publisher: KARE MEDIA  
Address: Göztepe Mah. Fahrettin Kerim Gökay Cad.  
No: 200 D: 2 Göztepe, Kadıköy,  
İstanbul-Türkiye  
Phone: +90 216 550 61 11  
Fax: +90 212 550 61 12  
e-mail: kareyayincilik@gmail.com  
web: www.kareyayincilik.com



## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

### EDITORIAL BOARD

The board ensure the determination and implementation of the publication policy of the journal. It supposed to be formed from editor in chief, assistant editors and academicians who will contribute to the journal policy and the academic accumulation of the journal, and how journal should be noted up-to-date. If its possible, people from different institutions should take part.

#### Founder

Cardiovascular Thoracic Anaesthesia and Intensive Care Society

#### Owner

##### Zerrin Sungur

President of the Association on behalf of Society of Cardio-Vascular-Thoracic Anaesthesia And Intensive Care

Istanbul University, Department of Anesthesiology, Istanbul, Türkiye

e-posta: zerrin\_sr@yahoo.com

#### Editor in Chief

##### Türkan Kudsioğlu

Department of Anesthesiology and Reanimation, University of Health Sciences, Dr. Siyami Ersek Thoracic Cardiovascular Surgery, Istanbul, Türkiye

e-posta: turkancoruh@gmail.com

#### Editorial Assistants

##### Tülün Öztürk

Department of Anesthesiology, Celal Bayar University, Manisa, Türkiye

e-posta: ozturktulun@yahoo.com

##### Alper Kararmaz

Department of Anesthesiology, Marmara University, Pendik Training and Research Hospital, İstanbul, Türkiye

e-posta: akararmaz@hotmail.com

##### Mert Şentürk

Department of Anesthesiology, Acıbadem University, Atasehir Hospital, İstanbul, Türkiye

mert.senturk@acibadem.com

#### Technical Editor

##### Fisun Demir

Department of Anesthesiology, Balıkesir Faculty of Medicine, Balıkesir, Türkiye

e-posta: fusdemir@yahoo.com

#### Language Editors

Gürkan Kazancı

Ümit Özkan

### ABOUT

The Journal of Cardio-Vascular-Thoracic Anaesthesia and Intensive Care Society (GKDAYB Journal) is an official scientific journal of Cardio-Vascular-Thoracic Anaesthesia and Intensive Care Society journal (GKDA-YBD).

The journal publishes clinical and experimental studies, case reports, editorial letters, review articles and reports of scientific meetings related to fields of Thoracic, Cardiovascular Anesthesia and Intensive Care the both in English, Review articles written upon request of the editor are not accepted.

The journal is published every three months namely in March, June, September and December. One volume is completed after publication of 4 issues (one year). GKDAYB is an open access, free and peer-reviewed journal and all published content is freely available at [www.gkdaybd.org](http://www.gkdaybd.org) Printed copies are distributed to members of the Cardio-Vascular-Thoracic Anaesthesia and Intensive Care Society free of charge.

GKDAYB Journal is included in Excerpta Medica / EMBASE, EBSCO Database, Sudoc, OpenAlex, Turkish Medline National Health Sciences Periodicals Database, Turkish Citation Index and ULAKBIM National Database (from 2016), GALE Cengage (from 2023), Scilit (from 2023), Open Ukrainian Citation Index (from 2023) and Asian Science Citation Index – ASCI (from 2024).

Scopus coverage (2003-2017). Discontinued.

### AIMS & SCOPE

The aim of the Journal of Thoracic-Cardiovascular Anesthesia and Intensive Care Society is to disseminate significant and cutting-edge professional information related to the fields of thoracic, cardiac, and vascular anesthesia and intensive care. The journal serves as a platform for sharing clinical and experimental studies reflecting new advancements and research in these specialized medical areas.

Our objective is not only to publish original research and findings but also to offer a comprehensive overview of contemporary topics and issues facing today's medical practitioners within these disciplines. The Journal eagerly welcomes the submission of original research, detailed and practical reviews, and clinical observations from experienced authors in the field.

Submissions can encompass a wide range of topics including, but not limited to, surgical techniques, pharmacological advancements, perioperative care, pain management, and patient safety and recovery protocols related to thoracic, cardiac, and vascular surgery anesthesia and intensive care. Case reports offering insights or novel perspectives on clinical practices and challenges are also encouraged.

By fostering collaboration and discussion among medical professionals, researchers, and practitioners, the Journal of Thoracic-Cardiovascular Anesthesia and Intensive Care Society aims to contribute to the ongoing development and enhancement of patient care and treatment outcomes in thoracic, cardiac, and vascular anesthesia and intensive care.



## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

### PUBLICATION POLICIES

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

Originality, high scientific quality, and citation potential are the most important criteria for a manuscript to be accepted for publication. Manuscripts submitted for evaluation should not have been previously presented or published in an electronic or printed medium. The journal should be informed of manuscripts that have been submitted to another journal for evaluation and rejected for publication. The submission of previous reviewer reports will expedite the evaluation process. Manuscripts that have been presented in a meeting should be submitted with detailed information of the event, including the name of the organization, the date, and the location.

Journal of Thoracic-Cardiovascular Anesthesia and Intensive Care Society does not accept multiple submissions or duplicate submissions of articles published in a different language. Nevertheless, the articles will not be processed that are sending again by different new ID numbers which has been already rejected or that are still under processing (revised etc.).

### REVIEW PROCESS

Manuscripts submitted to the Journal of Thoracic-Cardiovascular Anesthesia and Intensive Care Society will undergo a double-blind peer-review process. Each submission will be reviewed by at least two external, independent peer reviewers who are experts in their field in order to ensure an unbiased evaluation process.

The editorial board will invite an external and independent editor to manage the evaluation process of manuscripts submitted by editors or by the editorial board members of the journal. The editor-in-chief is the final authority in the decision-making process for all submissions.

Reviews are typically completed within one month of submission to the journal. Authors will be sent constructive reviewer comments intended to be useful. In general, the instructions, objections, and requests made by the reviewers should be followed. The revised manuscript should clearly and precisely indicate every step taken in accordance with the reviewers' notes. A list of responses and the corrections made to each comment should be provided.

### OPEN ACCESS POLICY

The Journal of Cardiovascular-Thoracic Anaesthesia and Intensive Care Society supports the Budapest Open Access Initiative statement of principles that promotes free access to research literature. The declaration defines open access to academic literature as free availability on the internet, permitting users to read, record, copy, print, search, or link to the full text, examine them for indexing, use them as data for software or other lawful purposes without financial, legal, or technical barriers. Information sharing represents a public good, and is essential to the advancement of science. Therefore, articles published in this journal are available for use by researchers and other readers without permission from the author or the publisher provided that the author and the original source are cited. The articles in Journal of Cardiovascular-Thoracic Anaesthesia and Intensive Care Society are accessible through search engines, websites, blogs, and other digital platforms. Additional details on the Budapest Open Access Initiative and their guidelines are available at <https://www.budapestopenaccessinitiative.org/>

### Open Access Statement

The journal is an open access journal and all content is freely available without charge to the user or his/her institution. Except for commercial

purposes, users are allowed to read, download, copy, print, search, or link to the full texts of the articles in this journal without asking prior permission from the publisher or the author. This is in accordance with the BOAI definition of open access. The open access articles in the journal are licensed under the terms of the Creative Commons Attribution-NonCommercial 4.0 International (CC BY-NC 4.0) license.



### Licenses and Copyright Policy

Authors publishing with the journal retain the copyright to their work licensed under the Creative Commons Attribution-NonCommercial 4.0 International license (CC BY-NC 4.0) and grant the Publisher non-exclusive commercial right to publish the work. CC BY-NC 4.0 license permits unrestricted, non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

### Publication Charges

The Journal of Thoracic-Cardiovascular Anesthesia and Intensive Care Society assesses no submission fees, publication fees, or page charges.

### ETHICAL POLICY

It is targeted that all parties participating in the creation of a scientific study (author, editor, reviewer, publisher and reader) contribute to the proper progress of science. Compliance with scientific ethical principles is important in the scientific studies prepared in accordance with this target. Kare Media adopted the ethical principles based on the directive prepared by the Committee on Publication Ethics (COPE) and recommended its adoption by all individuals contributing in the creation of a scientific work. Some items of this directive are mentioned below.

### Ethical Responsibilities of the Authors

In accordance with the journal's policy, an approval of research protocols by an ethics committee in accordance with international agreements "WMA Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects (last updated: October 2013, Fortaleza, Brazil)", "Guide for the care and use of laboratory animals (8<sup>th</sup> edition, 2011)" and/or "International Guiding Principles for Biomedical Research Involving Animals (2012)" is required for all research studies. If the submitted manuscript does not include ethics committee approval, it will be reviewed according to COPE's guideline (Guidance for Editors: Research, Audit and Service Evaluations). If the study should have ethical approval, authors will be asked to provide ethical approval in order to proceed the review process. If they cannot provide ethical approval, their manuscript will be rejected and also their institutions and when needed, the related bodies in their country will be informed that such studies must have ethics committee approval. If they provide approval, review of the manuscript will continue.

If the study does not need ethics committee approval after the editorial board's review, the authors will be asked to provide an ethics committee approval or a document given by a related independent committee that indicates the study does not need ethics committee approval according to the research integrity rules in their country. If the authors provide either an approval or a document showing that ethics approval is not needed, the review process can be continued. If the authors cannot provide either documents, the manuscript may be rejected.

For articles concerning experimental research on humans, a statement should be included that shows informed consent of patients and volunteers was obtained following a detailed explanation of the procedures that they may undergo. The journal may request a copy of the Ethics Committee Approval received from the relevant authority. Informed consent must also be obtained for case reports and clinical images.





## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

Studies using human or animal subjects should be approved by the appropriate institutional and local Ministry of Health ethics committees. Ethics approval of research protocols in accordance with international agreements is required for experimental, clinical, and drug studies, as well as for some case reports. Ethics committee reports or an equivalent official document may be requested from the authors. For manuscripts involving experimental research on humans, a statement should be included that shows that written, informed consent of patients and volunteers was obtained. For studies carried out on animals, the measures taken to prevent pain and suffering of the animals should be stated clearly. A statement regarding patient consent, and the name of the ethics committee, the ethics committee approval date, and number should be stated in the Materials and Methods section of the manuscript. It is the authors' responsibility to carefully protect patients' anonymity.

### Research Ethics for Vulnerable Populations

At the Journal of Thoracic-Cardiovascular Anesthesia and Intensive Care Society, we are committed to upholding the highest ethical standards in all research involving human participants, especially vulnerable populations such as children. In line with our dedication to responsible and respectful research practices, we have established the following guidelines to ensure the protection and ethical treatment of these groups:

#### Consent Requirements for Children

**Parental/Guardian Consent:** For all research involving children under the age of 18, written informed consent must be obtained from a parent or legal guardian. This consent must be informed, voluntary, and documented.

**Assent from Children:** In addition to parental consent, researchers are required to obtain assent from children who are capable of forming an opinion and making a decision regarding their participation in the study. This process must be age-appropriate and must respect the child's level of understanding and autonomy.

**Privacy and Confidentiality:** Extra precautions will be taken to protect the privacy and confidentiality of child participants. This includes using pseudonyms, removing identifiable details from published data, and securely storing data.

**Ethical Review:** All studies involving children must undergo a rigorous ethical review process to ensure that the research is justified, and the potential benefits outweigh any risks. The ethical review will also ensure that the study adheres to the principles of beneficence, non-maleficence, and justice.

#### Oversight and Monitoring

To ensure adherence to these ethical guidelines, the Journal of Cardiovascular Thoracic Anesthesia and Intensive Care Society requires that all studies involving vulnerable populations be reviewed and monitored by an Institutional Review Board (IRB) or an equivalent ethical oversight committee. This committee will oversee the study from its inception to its completion, ensuring continuous protection of the participants' rights and well-being.

For more details on our research ethics policies and procedures, or to report any concerns regarding the ethical conduct of a study published in our journal, please contact our ethics committee at [kare@karepb.com](mailto:kare@karepb.com).

#### Ethical Duties and Responsibilities of the Editors

Acting in a balanced, objective and fair manner while performing their duties without any discrimination based on gender, religious or political beliefs, ethnic or geographical origin of the authors.

To evaluate the work submitted to the journal according to its content without showing any privilege to any author.

To take necessary measures to prevent potential conflicts of interest and to evaluate existing statements, if any.

To deal with sponsored works or special studies in the same way as other studies,

In case of complaints related to violation of ethics, to enforce necessary procedures by adhering to the policies and procedures of the journal. To give the authors an opportunity to respond to the complaint, and without refraining from imposing the necessary sanctions, regardless of the identity of the owner of the work To reject the study if it does not meet the purpose and scope of the journal.

#### Ethical Responsibilities of the Reviewers

In order to contribute to the editor's decision-making process, the manuscript should be scrutinized in a timely fashion and reviews should only accept the critical evaluation of the study of his/her expertise.

The assessment should be done in an objective manner only in relation to the content of the study. The study should be evaluated without considering religious, political and economic interests.

To make suggestions to help improve the quality of the article to be published and to critically review the study. To communicate his/her comments to the author in a constructive and gentle language.

To protect the confidentiality of the information provided by the editor and the author, to destroy the work after the evaluation process in accordance with the principle of confidentiality, to report to the editor if there is anything contrary to the blind review process and not to evaluate this study.

To be cognizant of potential conflicts of interest (financial, institutional, collaborative, or other relationships between the author and the author), and, if necessary, to alert the editor to withdraw his or her assistance for this article.

#### Ethical Responsibilities of the Publisher

Among the parties involved in a creation of a scientific study, the publisher should act within all these ethical principles.

In addition to these, the publisher is obliged to use its communication power without any individual interest and to direct the target audience correctly.

It protects the ownership and copyright of each work published in its journals/books and undertakes the task of archiving every published work.

People should not hesitate to get contact with the publisher when they encounter an unethical situation.

Some of the actions considered to be against scientific research and publication ethics

**Plagiarism:** To adopt the original ideas, methods, data or works of others partially or wholly without referencing them in compliance with scientific rules,

**Fraud:** to use data that is not actually present or falsified in scientific research

**Distortion:** Distorting the research records or data obtained, demonstrating unused devices or materials as if they were used in the research, and distorting or shaping the results of research in the interests of the people and organizations that sponsored the study;

**Republication:** To present duplicates as separate publications in academic appointments and elevations

**Slicing:** To present the results of a research as separate publications in academic appointments and upgrades by disseminating and publishing the results of a research in a way that disrupts the integrity of the research and submit them as separate publications more than once;

**Unfair authorship:** to include people who are not active contributors or not to include those who are contributing to the study, to change the



## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

ranking of the authors inappropriately without any justification and, to remove the names of those who offered their active contributions in the previous editions, to include their names among the writers by using their influence even though they did not actively contributed to the work.

Not specifying the people, institutions or organizations that support the publications realized as a result of the researches carried out with their support, and contributions,

To use the thesis or studies which have not been submitted yet or have not been accepted as a source without the permission of the owner,

Failure to comply with ethical rules in human and animal researches, not to respect patient rights in its publications, to harm animal health and ecological balance, to refrain from obtaining necessary permissions,

To misuse resources, places, facilities and devices provided for scientific research,

To make false or misleading statements regarding scientific research and publications in academic appointments and elevations.

### Artificial Intelligence (AI)-Assisted Technology

At submission, the journal should require authors to disclose whether they used artificial intelligence (AI)-assisted technologies (such as Large Language Models [LLMs], chatbots, or image creators) in the production of submitted work. Authors who use such technology should describe, in both the cover letter and the submitted work, how they used it.

Chatbots (such as ChatGPT) should not be listed as authors because they cannot be responsible for the accuracy, integrity, and originality of the work, and these responsibilities are required for authorship. Therefore, humans are responsible for any submitted material that included the use of AI-assisted technologies. Authors should carefully review and edit the result because AI can generate authoritative-sounding output that can be incorrect, incomplete, or biased. Authors should not list AI and AI-assisted technologies as an author or co-author, nor cite AI as an author. Authors should be able to assert that there is no plagiarism in their paper, including in text and images produced by the AI.

Humans must ensure there is appropriate attribution of all quoted material, including full citations.

### PLAGIARISM POLICY

Plagiarism (cheating) is a violation of ethics, regardless of whether it is intentional or not. It is a crime and an unacceptable code of conduct as it is unethical to submit, and publish manuscripts imitating other sources, without citing references. For this reason, due to publication policies Kare Publishing, for all studies to be published in all of its periodicals, necessitates use of a plagiarism checker.

All studies submitted to our periodicals and passed the evaluation of the reviewers blinded to the studies, are evaluated by us using Turnitin or iThenticate software programs.

In our study, our criterion is not a percentage of matching. An audit is carried out by a specialized team excluding percentages of matching but considering the parameters, such as identification of matching paragraphs, whether or not citations and references are properly written in accordance with the writing rules of the journal, the places of the matching sentences/paragraphs in the article, and the sources with which they are matched. The prepared plagiarism report is sent to the relevant editor of the study. In consideration of the report, the editorial board may request from the author correction of the errors in the manuscript and sent it again or accept or reject it. The acceptance of the study is on the initiative of the editor.

The Editorial Board may act in accordance with the COPE rules against allegations, and suspicions related to plagiarism, citation manipulation and fraudulent misrepresentation of the works submitted to the journal.

### COPYRIGHT TRANSFER

Authors publishing with the journal retain the copyright to their work licensed under the Creative Commons Attribution-NonCommercial 4.0 International license (CC BY-NC 4.0) and grant the Publisher non-exclusive commercial right to publish the work. CC BY-NC 4.0 license permits unrestricted, non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

### CONFLICT ON INTEREST

Conditions which provide financial or personal benefit bring about a conflict of interest. The reliability of the scientific process and the published articles is directly related to the objective consideration of conflicts of interest during the planning, implementation, writing, evaluation, editing and publication of scientific studies.

Financial relations are the most easily identified conflicts of interest and it is inevitable that they will undermine the credibility of the journal, the authors and the science. These conflicts can be caused by individual relations, academic competition or intellectual approaches. The authors should refrain as much as possible from making agreements with sponsors in the opinion of gaining profit or any other advantage that restrict their ability to access to all data of the study or analyze, interpret, prepare, and publish their articles. In order to prevent conflicts of interest, editors should refrain from bringing together those who may have any relationship between them during the evaluation of the studies. The editors, who make the final decision about the articles, should not have any personal, professional or financial ties with any of the issues they are going to decide. Authors should inform the editorial board concerning potential conflicts of interest to ensure that their articles will be evaluated within the framework of ethical principles through an independent assessment process.

Our publication team works devotedly to ensure that the evaluation process is conducted in an impartial manner, taking all these situations into consideration.

You can review the conflict of interest form and the related link to get more detailed information and to declare a conflict of interest.

### WRITING GUIDE

#### Double-Blind Review And Evaluation Process

The decision to publish all articles submitted to the journal belongs to the editor in chief. However, editors shape these decisions in line with the reviewers' recommendations.

The double blind review process is the process of evaluating the work completely anonymously. In this system, only the editor knows each stage. In this system authors do not know who the reviewer is, and the reviewers do not know whose work they are evaluating. Thus, biased evaluation of the work by the reviewers is prevented. In addition, since the author does not know the reviewers, he/she can not possibly get contact with the reviewer, and influence him/her through 'special routes'. From this point of view, the double-blind review process is thought to provide objective evaluation and increase the equal opportunity.

For these reasons, all studies submitted to GKDAYB Journal are subject to double-blind review. At least two reviewers expert in their fields, will evaluate each submitted work. Every effort is spent by the editors for quick evaluation of the articles. The editor is the final decision-making authority in the evaluation processes of all articles.

#### First Evaluation

The relevant editor or journal secretary examines the work regarding the purpose and scope of the journal, its conformity to the rules of writing, and its English and Turkish language proficiency. As a result of this assessment, the manuscripts which do not comply with the publication rules and the publication policy of the journal are returned to the responsible author.



## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

### Preliminary Evaluation Process

In the pre-evaluation process; the study that left a positive impression on the editor is directed to the field editors. Field editors examine summary, introduction, material / method, discussion and conclusion sections of the manuscript as well as its scientific, and formal conformity to the writing rules of the journal. As a result of this review, manuscripts which are found suitable are taken into the process of reviewers' evaluation.

### Reviewers' Evaluation Process

According to the content of the manuscript, at least two expert reviewers who had current studies in the relevant field are determined. Suggestions of the field editor regarding the selection of reviewers are appraised by the chief editor, and reviewers are assigned for the assessments of the manuscripts. The reviewers evaluate the study and prepare a report.

### Reports of the Reviewers

The reviewers evaluate the objective, material / method, results and discussion sections of the study, and its conformity to scientific principles. The work may be accepted directly, its revision may be requested or rejected. If correction in the manuscript is required, the suggestions coming from the reviewers are communicated to the authors and the authors are asked to revise their work. The results of correction coming from the authors are reexamined by the reviewers and their decisions are reported to the editor. In case of disagreement between the assigned reviewers, the manuscript is sent to a designated third reviewer.

### Statistical Analysis

Manuscripts deemed appropriate for publication by the reviewers are sent to the statistical editor. Articles that are approved by the statistical editor are accepted for publication.

### Publication Printing Process

Clinical studies or experimental research articles accepted for publication are usually included in the first issue to be published. Case presentations can wait 6-9 months according to the intensity.

### CHECKLIST FOR AUTHORS

- Make sure that name of the author (s), information about the institution thank you letter about ethics committee etc. are not included in the study. This issue is important according to the 'double-blind review principle' concerning the evaluation process of your work so that it can be dealt with impartially.
- You should not forget that your study will be subject to plagiarism audit if it is deemed to be adequate and appropriate in terms of the subject and you should avoid making quotations that will be covered by plagiarism when preparing the work
- If your article is derived from a study, a thesis, abstract of a case report, poster, etc. be sure to cite it in a footnote and specify its date.
- Please fill out the form and upload it to the system, as you cannot proceed to the next step without uploading the copyright transfer form to your system. It is sufficient to communicate it in the online system, you do not need to communicate this information in printed form.
- If your work has been returned to you for revision, and you have made a change in the title and summary of your work, please update it during preparation of the article
- There cannot be any changes in your article once its published. Therefore we advise you strongly to examine your article carefully when last check e-mail sent to you and if there is any necessary revisions you have to make please send them to us before the journal is published.

### MANUSCRIPT PREPARATION

Manuscripts should preferably be written using the Microsoft Word program. The manuscripts should be typed in 12 point Times New Roman characters. Manuscripts should be written double-spaced on

one side of the A4 (21x29.7 cm) white paper and throughout the entire manuscript (including headings, abstracts in Turkish and English, main text, references, tables and subtitles) and justified leaving 3-cm margin from both sides. They should be written in accordance with word processor's page layout settings.

Journal Agent Online Article Collection and Evaluation System is being uploaded online, Article and Abstract Information, Information about Institute, Author Information, Responsible Author Information, Article Title, Article Turkish and English Summaries of the Article, Turkish and English Key Words, NoteEdit, File Upload (Full Text - References - Table(s) - Pictures - Graphics - Notes to the Editor) are recorded separately step by step in the system.

The authors are kindly requested to submit their ORCID numbers obtained the website from [www.orcid.org](http://www.orcid.org) and indicate them in the relevant area at this stage. Abstract and full text should not contain information about the individuals and institutions participating in the study.

The files must be loaded in the following order.

- The electronic article file (Full Text) should be named with the title of the article in capital letters. They should only include "Title (Turkish-English) - Short Title (Turkish-English)", "Introduction", "Materials and Methods", "Results", "Discussion", "Acknowledgement (if) - Conflict of Interest". Each of the sections should be presented on separate pages. The titles of the text sections should appear at the left of the page with capital letters. All pages should be numbered sequentially from the bottom right corner.
- The file "References" should be recorded separately
- **Tables** should be prepared and written double-spaced on a separate sheet, and the number and title of each table must be written on top of the table. If abbreviations are given in the table, these abbreviations should be written in alphabetical order as subheadings. When previously printed or electronically published tables are used, written permission must be obtained from both the author and the publisher, and it must be sent by fax or mail to the editor of the journal.
- **Figures, graphics, illustrations, photos and legends** should be written double-spaced on a separate sheet. If the abbreviations are given in figures, graphics and illustrations, the expansions of these abbreviations should be written under the subtitle and in alphabetical order. When previously printed or electronically published figures, graphics and images are used, written permission must be obtained from both the author and the publisher, and this must be sent by fax or mail to the editor of the journal.
- **Copyright transfer form**

Authors must declare that all or part of the material in the manuscript has not been published and is not currently being evaluated elsewhere for publication. Each author must declare that he/she participated in the investigation enough to share the responsibility of its content.

This participation may involve the following issues:

- Creation of concepts and designs of experiments,
- Collection, analysis or expression of the data;
- The preparation of the draft of the manuscript or the review of the scientific content
- Approval of the final format of the manuscript ready for publication
- Ethics committee approval letter
- Original articles and review articles should not exceed 10, case reports 4, letters to editors 1 page (excluding references, tables and graphics).

*In the manuscript, the sections and contents of the manuscript should be presented as follows.*





## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

**Title:** A short title should be used whenever possible. The title of the research, and review articles should not exceed 95 characters (each letter, space, and punctuation marks are considered as one character), in case of case reports, letters and presentations of surgical techniques it should not contain more than 80 characters. Abbreviations should not be used in the title. The title should be written in Turkish and English. A short title should be added as a subtitle which should not exceed 40 characters.

Funds and organizations supporting the research should be mentioned here, If the study is planned to be presented in any congress or if it has been presented before, the name, place, and date (day-month-year) of the congress should be written.

**The abstracts** should not exceed 250 words in the research papers. Headings should not be used in summaries (the English translation of the title should be written on the title page). Abstract in Turkish should consist of four subheadings as While abstract in English should include subheadings of Aim, Material and Method, Results, and Conclusion) In case reports and review articles donot contain these sections, and abstracts should not exceed 100 words. English title, and abstract should be. English title and abstract should be word by word translation of the Turkish abstract. Letters to editor, and Editorials do not require abstracts.

Use of abbreviations should be avoided as much as possible in summaries. If absolutely required, abbreviation should be used after its definition is provided in parenthesis at the first mention of the term. Reference should not be used in the abstract.

**Key words:** In accordance with "Index Medicus Medical Subject Headings (MeSH)" there should be no more than five key words under the summary written both in Turkish and English. Available terms can be used if there is no appropriate term for the "Index Medicus" medical subject headings for the newly entered terms.

**Introduction:** The general conditions of the study settings, the structure and significance of the problem, the specific objective of the study or research tested in the study or observation should be clearly indicated. The primary and secondary objectives of the work should be clearly stated and the predefined subgroup analyzes should be transferred. Only references related to the topic should be used and the data or results of the presented work should not be included in these references.

**Material and Method:** The informed consent of the patient and the approval of the ethics committee should be acknowledged. A statement must be added that the informed consent was obtained from each participant in clinical trials. It should be noted in experimental studies that all animals were subjected to a humane treatment in accordance with the Guide for the Care and Use of Laboratory Animals ([www.nap.edu/catalog/5140.html](http://www.nap.edu/catalog/5140.html)).

Definition of optimal working conditions, exclusion criteria and referenced population; the participants in the observational or experimental study must be clearly indicated. Since the relevance of the variables such as age and gender for the purpose of the research is not always obvious, the authors should explain the purpose of using these variables in a research article. The main principles that determine how and why the study is performed using such a method should be clear. References should be shown for established methods, brief descriptions should be given for new methods.

The methods, tools (manufacturer's name and address are written in parentheses) and the operations performed should be described in detail to the extent of interpretation of the results. The initials of the drug names should be in lower case, the pharmacological names of the drugs should be used and at their first mention in the text they should be written in brackets in the following order "Generic name, trade name, and Manufacturing firm ". Example: "midazolam (Dormicum, Roche)". The terms should be written in their explicit forms at their first mention in the text,

and then their abbreviations ( if any) should be enclosed in parentheses. Frequently used abbreviations should be used as accustomed (iv, im, po and sc). Units must be used in compliance with the International system of units (SIU (Le Système international d'unités), Examples: mg / kg, mL / kg, mL / kg / min, mL / kg.

**Statistical methods** should be provided in sufficient detail so that the readers can reach the original data and evaluate the reported results. Findings should be measured as much as possible and the appropriate margin of error and uncertainty (such as confidence intervals) should be indicated. It is important to avoid relying only on the p-values of statistical hypothesis measures that are insufficient to convey important information about the dimensions of the effects. P values must be given explicitly. Statistical terms, abbreviations and symbols should be defined. In the last paragraph of this section, statistical analyses used, and the values given by the ( $\pm$ ) sign after the arithmetic mean or proportion should be indicated.

**Results:** The findings, tables and visual material obtained in the study should be written in the order of a certain logic so that the most important ones will take precedence in the text. Graphics, tables, illustrations, and figures should be numbered according to the order of their mention in the text, and should be indicated in parentheses in the text. Data contained in the tables and visual materials should not be repeated in the text. Only important observations should be emphasized or summarized. Tables and figures are placed collectively after the last reference at the end of the text. Only the top title of the table, and graphic or the subheading of figures, illustrations, photos are written in their appropriate places in the text.

The numerical results summarized in the Results section should be given not only as derivatives (eg percentages), but with exact numerical values, and the statistical methods used to analyze them should be specified. When scientifically appropriate, data should be analyzed in terms of variables such as age and gender. Tables and pictures should be limited to those necessary to explain and support the discussion expressed in the article. As an alternative to the tables, you should use some kind of graphics on which many entries can be made, and data should not be repeated on graphics and tables. Using non-technical terms such as "random", "explicit", "links" and "example" in the statistics section should be avoided.

**Discussion:** The results of the study are evaluated by comparing them with the international, and domestic literature. New and important aspects of the study and its outcomes should be emphasized. Data and other information presented in the Introduction and Results sections should not be repeated. In experimental studies, we should briefly summarize the main findings and then analyze explanations with possible mechanisms and compare them with other similar studies. It would be appropriate to comment on the implications of these findings for future researches and clinical practices. The objectives of the work should be correlated with the results. However, unmeasured situations and outcomes that are not adequately reinforced by the data should be avoided. The resulting decision arrived must be stated in the last paragraph of the discussion. If the article does not include appropriate economic data and analysis, no particular comment should be made on economic interests and costs. Claims on an incomplete study should be avoided, new hypotheses must be specified when they are confirmed, and their novelty should be clearly emphasized.

**Acknowledgment (if any):** If you also want to thank the people who can not fulfill the criteria for authorship involved in fundraising, technical assistance, data collection, supervisor of the research group, writing, or department chiefs who just provided general support, and those providing finance and material support, a brief paragraph can be written under the heading of "Acknowledgement.". Written consent must be obtained from the individuals to be mentioned in the acknowledgment section since they may make a sense of data and conclusions they contributed.



## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

**Conflict of Interest:** The authors are requested to declare any existing commercial association that might potentially have a conflict of interest regarding their articles. (eg employment, direct payments, holding shares, holding, consultancy, patent licensing arrangements, or granting honorarium). All financial resources supporting the study should also be declared as footnotes.

**Tables and Charts:** Charts can be saved in a single chart file, tables can be placed in one spreadsheet file on each page. Titles, descriptions and footnotes should be placed on each sheet of paper.

The tables reflect the information in a concise and effective way. They also provide information of the desired quality and precision. The fact that the data are given in the tables rather than in the text usually makes it possible to shorten the text. The tables should not be a repetition of the information in the article.

The tables should be demonstrated in brackets in the text. It should carry a short self-heading. According to their appearance in the text, each one should be given a short title, starting from the top left, and numbered sequentially by Roman numerals. There should be no lines on the background, they should be drawn on a white background.. Horizontal and vertical lines should not be used in the table. Each column is given a short or a concise title. Explanatory information should be placed in footnotes, not in headings. Abbreviations should be explained in footnotes. The explanations of the abbreviations should be in the form of subtitles under the table and in alphabetical order. The following symbols should be used in the footnotes, in the following order: \*, †, ‡, §, ||, ¶, \*\*, ††, ‡‡. Measures of statistical variables such as standard deviation and standard mean error should be defined. Make sure that each table and graph are mentioned in the text.

There should be no frame around the graphics, no lines on its background, and the background should be white.

When using previously published or electronically published tables and graphics, written permission should be obtained from both the author and the publisher and they should be acknowledged. Permission should be faxed or mailed to the journal editor.

**Pictures, Photos and Figures:** Figures should be professionally drawn and photographed. Photographs and scans taken with a digital camera should be recorded at a resolution of at least 300 dpi, 1280x960 pixels, in jpg or tiff format. There should be no writing on the picture unless it is compulsory.

Each pictures and figure should be placed on separate pages in a file containing only pictures, figures, and photos. Naming and numbering should be done as subtitles on each page. They should be placed in the text, numbered in Arabic numerals according to the order of their appearance in the text, and shown in brackets in the text When symbols, arrows, or letters that point to specific sections of the figures, and photos are used, these should be explained in the subtitle. If so, the expansions of the abbreviations should be placed under the subtitle in alphabetical order.

Microscope magnification ratio and staining technique used should be explained.

When previously printed or electronically published figures, images, and photos are used, written permission must be obtained from both the author and the printing house and this must be sent by fax or mail to the editor of the journal.

When using the images of people whose face is not hidden and recognizable, written permission must be obtained from them.

**References:** One should be selective in the use of references, and should include references directly related to the study. Turkish sources should be also used and authors should be sensitive to this issue. Although referencing review articles direct readers to the proper essence of the medical literature, they do not always accurately reflect the original study. Therefore, readers should be provided with as much original research articles as possible. Avoid using summaries as a source.

Authors should compare references with original articles to minimize erroneous references that sometimes occur in published articles. Authors are responsible for the accuracy of references and their spelling.

If the authors can not specify whether they referenced a retracted publication or not, they are obliged to check that the references they cited do not belong to the retracted articles. For articles in the journals indexed on MEDLINE, ICMJE considers PubMed (<http://www.pubmed.gov>) as a reliable source of information on retracted articles. Authors may recognize the retracted articles in MEDLINE with the following search term in PubMed; retracted publication [pt] (pt in square brackets stands for publication type).

Apart from collective and up-to-date review articles, encompassing reference lists unnecessarily occupy valuable space of the text. As a general rule, the number of references should be maximum 40 in research articles 15 in case reports, 80 in review articles, 80 in review articles and 5 in editorials.

Exchanges of information during personal contacts, unfinished articles, and other unpublished data should not be referenced.

References should be written double-spaced on a separate sheet of paper. References in the text, tables and figure legends are indicated by Arabic numbers. Only the references used in the table or picture subtitles must be numbered according to the order of their first appearance of the table, and figure in the text.

Journal titles should be abbreviated according to Index Medicus. Year, volume, the first and last pages are indicated for referenced journals, while for referenced books only year, first and the last pages are stated.

The following rules should be followed when references are given in the text:

- If the surname of the first author of the article to be cited is to be given, the abbreviation "et al." should be added followed by the reference number in superscript "[<sup>1</sup>]", before completion of the sentence.
- If no name is to be given in a sentence, then the reference number must be given at the end of the sentence, after the period in a superscript bracket "[<sup>1</sup>]."
- If different references will be stated for different expressions within a sentence, each reference must be given within a bracket "[<sup>1</sup>]" before the punctuation mark at the end of the statement.
- If there are more than two consecutive sources exist, then the first and last ones should be indicated with a "-" sign between them, i.e: 1-3]; [14-18]; [8-14]
- Full surnames of the authors and the initials of their names should be written in references. If the number of authors in the reference is equal to or less than 6, then all authors should be indicated. If the number of authors is more than 6, then the first 6 authors should be written before the abbreviation "et al." (for international publications) or "ve ark." (for national publications).
- The DOI number must be added at the end of the each reference.

The format of writing the references should conform to the "Vancouver reference style". Except for the examples below, the web address should be checked in spelling.

([http://www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html))

### Journal Articles

#### References from International Journals

Tosun Z, Akin A, Guler G, Esmagolu A, Boyaci A. Dexmedetomidine-ketamine and propofol-ketamine combinations for anesthesia in spontaneously breathing pediatric patients undergoing cardiac catheterization. J Cardiothorac Vasc Anesth 2006;20:515-19. doi:10.1053/j.jvca.2005.07.018

#### For national References

Toraman F, Ustalar Özgen S, Sayın Kart J, Arıtürk C, Erkek E, Güçlü P ve ark. Koroner arter baypas cerrahisinde fentanil ve midazolamın hedef kont-



## Journal of The Cardiovascular Thoracic Anaesthesia and Intensive Care Society

rollü infüzyon (hki) şeklinde kullanımının anestezi düzeyi ve ilaç tüketimi üzerine etkileri. GKDA Derg 2013;19:113-17. doi:10.5222/GKDAD.2013.113

### Additional Issue

Solca M. Acute pain management: unmet needs and new advances in pain management. Eur J Anaesthesiol 2002; 19 Suppl 25:3-10.

Kahveci FŞ, Kaya FN, Kelebek N ve ark. Perkutan trakeostomi sırasında farklı havayolu tekniklerinin kullanımı. Türk Anest Rean Cem Mecmuası 2002; Kongre ek sayısı: 80.

### Book

Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. Medical microbiology. 4<sup>th</sup> ed. St. Louis: Mosby; 2002.

### Chapter in a Book

Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. The genetic basis of human cancer. New York: McGraw-Hill; 2002. p. 93-113.

### Dissertation

Gurbet A. Comparison of morphin, fentanyl, and remifentanyl with patient-controlled analgesia (PCA) following off-pump coronary artery surgery. (Dissertation). Bursa, Uludağ University, 2002.

### Reference from Electronic Media

United Kingdom Department of Health. (2001) Comprehensive Critical Care Review of adult critical care services. The web site: <http://www.doh.gov.uk/compcritcare/index.html>

### Internet Address

1996 NRC Guide for the Care and Use of Laboratory Animals. Available at: <http://www.nap.edu/readingroom/books/labrats/contents.html>. Accessed October 20, 2003.

The text should be controlled from the "Check List" before submission. This control will speed up the evaluation process of the manuscript ([see Checklist](#)).

### SUBMISSION AND RETRACTION OF THE MANUSCRIPTS

**Submission of a manuscript:** Authors who want to submit their articles for evaluation in our journal can upload their works by following the steps in the system after logging it into our journal management system at [www.journalagent.com/gkdaybd/](http://www.journalagent.com/gkdaybd/) Paying attention to the items in the checklist for authors prior to uploading will speed up the publication process of your work.

**Article Withdrawal:** As per our publication policies, the author of the article has to cooperate with editor of the journal in withdrawal procedures.

The author, who wants to withdraw his / her work during the evaluation process, should submit the petition containing his / her rationale to the editorial board electronically or in a printed wet signed form indicating that all authors have approved the withdrawal.

The Editorial Board scrutinizes the incoming request and returns to the author within ten days. If the copyright of the article was transferred to the INSTITUTION during submission process, the author can not send the work to another journal for evaluation unless the request for withdrawal of this work is approved.



## CONTENTS

VOLUME 31 ISSUE 2 JUNE YEAR 2025

### REVIEW ARTICLES

<b>Mastering Anesthesia: Best Practices for Tracheal Resection Surgery Anesthesia for Tracheal Resection</b> Yıldırım Güçlü Ç, Akyüz B.....	51
<b>Venous System: Evaluation with Central Venous Pressure – Circulatory and Systemic Filling Pressures</b> Aydın ME, Karapınar YE, Yılmaz MA, Dost B, Beldağlı M, Yayık AM, Çelik EC, Oral Ahiskalıoğlu E.....	57
<b>Anesthesia Management in Minimally Invasive Cardiac Surgery: A Comprehensive Protocol</b> Demir ZA, Mavioğlu HL.....	63

### RESEARCH ARTICLES

<b>Impact of Platelet-lymphocyte and Neutrophil-lymphocyte Ratios on Postoperative Mortality After Coronary Artery Bypass Surgery</b> Ertaş E, Toprak B, Bilgiç A.....	71
<b>To Investigate The Accuracy of Tube Selection According to Ultrasonographic Airway Measurements in Patients Undergoing OLV</b> Ağırbaşı Uğraş M, Kılıç Y, Güleç MS, İçen D.....	80
<b>Cesarean Section and Emergency Operations in Pregnant Women With Cardiac Disease, 10-Year Results</b> Oğuş H, Örkü T, Demirel E, Deniz M, Koçak T.....	88
<b>Thyroid Hormones, Cortisol, and Prolactin: Are They Associated with Respiratory Distress Syndrome in Premature Infants in the Neonatal Intensive Care Unit?</b> Hekim Yılmaz E, Akın Y, Yılmaz B.....	95

### CASE REPORT

<b>Anesthetic Management in a Neonate Undergoing Percutaneous Balloon Pulmonary Valvuloplasty: A Case Report</b> Korkmaz Tokar M, Sezgin Ç.....	102
--	-----